

NATIONAL LEAGUE FOR NURSING COMMISSION FOR NURSING EDUCATION ACCREDITATION (NLN CNEA)

Accreditation Handbook: Policies and Procedures

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National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA)
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SECTION ONE – GENERAL INFORMATION

1-I. The Value of Accreditation

A. PURPOSE OF ACCREDITATION

The quality of nursing education delivered by nursing programs has an impact on the quality of health care delivered by the nursing workforce. Accreditation of nursing programs provides a public measure of quality assurance for the communities of interest vested in the educational process that prepares nurses. The protection of public interest is of paramount importance in the accreditation process.

According to the US Department of Education (2021), accreditation is “the status of public recognition that an accrediting agency grants to an educational institution or program that meets the agency’s standards and requirements” (Subpart A 602.3). The Council of Higher Education Accreditation (CHEA) expands upon this definition by describing accreditation as an external quality review for quality assurance and quality improvement (Eaton, 2015). Self-assessment by the institution and program is an important component of the process. Engaging in systematic self-assessment provides the institution and program with a collective opportunity to reflect upon and identify strengths and areas for improvement for the purpose of pursuing continuous quality improvement in their educational mission.

B. HISTORY OF THE NATIONAL LEAGUE FOR NURSING’S ACCREDITING BODIES (1952 – present)

The National League for Nursing (NLN) has a long and distinguished history of 125 years of championing quality nursing education to prepare a competent and skilled nursing workforce. The American Society of Superintendents of Training Schools for Nurses was created in 1893 as the first organization for nursing in the United States of America. The society was formed for the establishment and maintenance of a universal standard of training for nursing. In 1912 the society was renamed the National League for Nursing Education (NLNE).

For decades, the NLN has provided leadership in establishing quality assurance and improvement processes in nursing education through the development of professional accreditation standards, that when applied through the accreditation process, provide nursing programs with a public mark

of educational quality. It was in 1938 that the NLNE first initiated accreditation for nursing programs educating registered nurses. In 1949, the NLNE formed the National Nursing Accrediting Service (NNAS) to unify accreditation activities in nursing.

In 1952, the NLNE, the National Organization for Public Health Nursing, and Association for Collegiate Schools of Nursing combined to establish the National League for Nursing (NLN). The organization effectively assumed responsibility for accrediting nursing education programs with the U.S. Department of Education recognizing a predecessor accrediting agency of the National League for Nursing (NLN) to assume responsibility for the accreditation of U.S. nursing schools, dissolving the NNAS. The NLN continued its long history of leadership in nursing accreditation with the formation of the National League for Nursing Accreditation Commission (NLNAC) in 1996, currently known as the Accreditation Commission for Education in Nursing.

With the establishment of the NLN Commission for Nursing Education Accreditation (CNEA) as a programmatic accrediting body in September 2013, the NLN's commitment to setting standards that foster quality and excellence in nursing education continues through an accreditation process that is infused with the NLN core values of caring, diversity and inclusion, integrity, and excellence. The NLN CNEA accreditation process encourages the development of a culture of continuous quality improvement as evidenced by the NLN CNEA mission statement. Through the establishment of NLN CNEA, an autonomous accreditation division of the NLN that carries out its work by setting forth accreditation standards infused with the NLN core values, the NLN continues its presence of over a century of effecting and advocating for quality patient care through ensuring quality nursing education.

1-II. Introduction to the NLN CNEA

A. MISSION OF THE NLN CNEA

The National League for Nursing Commission for Nursing Education Accreditation promotes excellence and integrity in nursing education globally through an accreditation process that respects the diversity of program mission, curricula, students, and faculty; emphasizes a culture of continuous quality improvement; and influences the preparation of a caring and competent nursing workforce.

B. CORE VALUES OF THE NLN CNEA

The NLN Commission for Nursing Education Accreditation implements its vision and carries out its accreditation activities guided by the National League for Nursing's core values – caring, diversity and inclusion, integrity, and excellence – as applied to the accreditation process.

Caring

A culture of caring is demonstrated through an accreditation process that reflects a culture of advocacy for quality assurance in nursing education, and is implemented in a collegial, collaborative context with stakeholders. NLN CNEA staff, governance board, committee members, and onsite program evaluation teams demonstrate through their interactions with stakeholders that accreditation standards can be upheld in a rigorous, yet caring and respectful manner.

Diversity and Inclusion

A culture of diversity and inclusion is evidenced by a commitment to accredit all types of nursing programs from practical/vocational education through clinical doctoral education. NLN CNEA's accreditation standards reflect a respect for the diversity of nursing programs' mission, curricula, faculty, and students that can be found to exist in nursing education nationally and internationally.

Integrity

A culture of integrity exists throughout NLN CNEA with a commitment to exercising personal, professional, and organizational integrity throughout the accreditation process. This is evidenced, in part, by ensuring transparency and ethical decision-making in all accreditation activities and demonstrating open communication and timely responsiveness to stakeholders.

Excellence

A culture of excellence is promoted through establishing clarity of purpose in the accreditation process with an emphasis on fostering continuous quality improvement in nursing programs. The outcome of a culture of excellence collaboratively instilled in nursing programs through participation in the accreditation process is the creation of a student-centered learning environment that prepares a caring and competent nursing workforce.

C. HISTORY OF THE NLN CNEA ACCREDITATION

In September 2013, the NLN membership approved the formation of a new accrediting agency, the NLN Commission for Nursing Education Accreditation at the NLN Education Summit with the appropriate changes in NLN Bylaws. The NLN Board of Governors immediately appointed a steering committee to initiate the development of NLN CNEA; the NLN CNEA Steering Committee, with membership representing the diverse interests of all types nursing education programs, met for the first time in February 2014. In February 2015, the NLN CNEA's inaugural Board of Commissioners was appointed by the NLN Board of Governors, representing the final action taken by the NLN Board of Governors in the establishment of NLN CNEA. The newly formed NLN CNEA Board of Commissioners came together for their inaugural face-to-face meeting at NLN headquarters in Washington, D.C. in April 2015.

Accreditation activities began in June 2016 with the first programs achieving pre-accreditation, soon to be followed by the first on-site program evaluation visits in the fall of 2016. In February 2017, the NLN CNEA Board of Commissioners acted to accredit its first three nursing programs.

D. UNITED STATES DEPARTMENT OF EDUCATION RECOGNITION STATUS

The NLN CNEA's scope of accreditation practice includes practical (vocational), diploma, associate, baccalaureate, masters, and clinical nursing doctorate programs, including certificate and distance education programs in the U.S and its territories, and globally.

In May 2021, the United States Department of Education granted the NLN CNEA initial recognition for a full 5-year period as a category two agency, accrediting higher education programs.

1-III. NLN CNEA Governance Structure

A. BOARD OF COMMISSIONERS

The NLN CNEA is governed by a fifteen-member Board of Commissioners (BOC). Ten Commissioners are nurse educators who represent the scope of program types that are accredited by the NLN CNEA. Three Commissioners represent nursing practice and two Commissioners represent the public, as defined by the U.S. Department of Education in accordance with "34 CFR Part 602 The Secretary's Recognition of Accrediting Agencies." In

addition to the NLN CNEA BOC, the work of NLN CNEA is carried out through an established standing committee structure, appointed task forces, and appointed on-site program evaluators.

The Board of Commissioners' appointment terms are for three years, with all commissioners eventually elected to three year terms. Terms are staggered to facilitate stability and consistency within the Board. Commissioners may serve for no more than two consecutive terms.

B. STANDING COMMITTEES

The NLN CNEA conducts its business through the work of designated standing committees: 1) Board of Commissioners' Executive Committee; 2) Nominations Committee; 3) Accreditation Standards Committee; 4) Program Review Committee; 5) Appeal Panel; 6) Audit Committee; 7) Finance Committee; 8) Policies and Procedures Committee; and 9) Evaluation Committee. The responsibilities of the standing committees are outlined in the NLN CNEA Bylaws. The Board of Commissioners may appoint ad hoc committees as it deems appropriate.

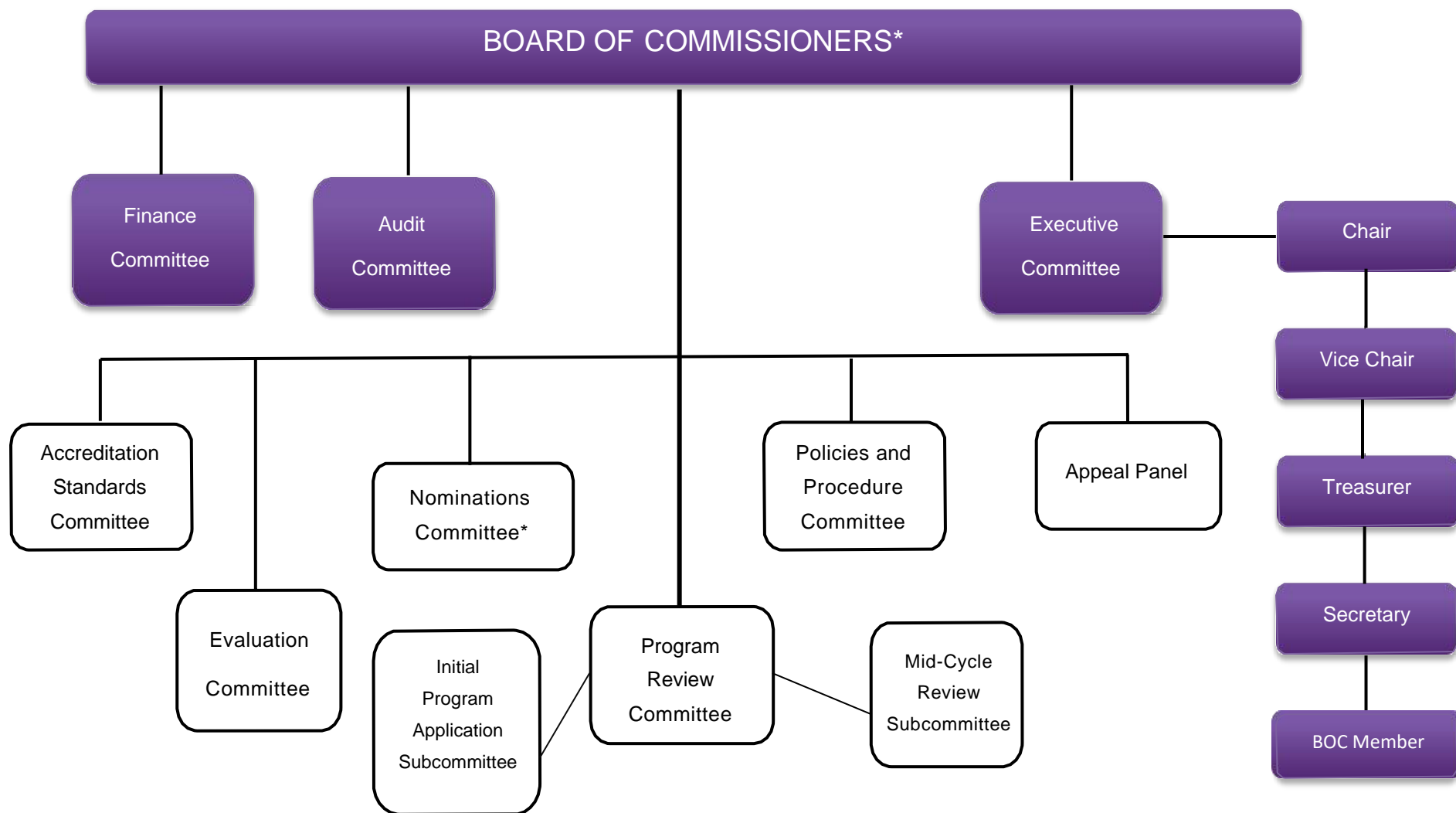
C. NLN CNEA STAFF

The NLN CNEA staff support the work of the Board of Commissioners and governing structures. Current NLN CNEA staff are listed on the NLN CNEA website at <https://www.nln.org/cnea>.

D. ORGANIZATIONAL STRUCTURE

The organizational structure of the NLN CNEA is provided on the next page.

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Purple indicates committee members are drawn from the NLN CNEA Board of Commissioners; white indicates committee members appointed by the NLN CNEA Board of Commissioners.

*Denotes elected positions as required by NLN CNEA Bylaws (February 2016).

SECTION TWO – STANDARDS OF ACCREDITATION

2-I. Accreditation Standards for Nursing Education Programs

A. OVERVIEW OF NLN CNEA ACCREDITATION STANDARDS

The NLN CNEA five Standards of Accreditation provide a national and global quality assurance framework through which nursing programs of all types, including distance education programs, can act to implement and achieve excellence in nursing education. The complete set of NLN CNEA Standards of Accreditation can be found at <https://cnea.nln.org/standards-of-accreditation>.

The five standards, when considered together, comprehensively address the foundational institution and program elements that are essential to ensuring quality academic programs. These five standards are: 1) Culture of Excellence – Program Outcomes; 2) Culture of Integrity and Accountability – Mission, Governance, and Resources; 3) Culture of Excellence and Caring – Faculty; 4) Culture of Excellence and Caring – Students; and 5) Culture of Learning and Diversity – Curriculum and Evaluation Processes. The standards are explicated through 32 quality indicators and accompanying interpretive guidelines for each quality indicator. The foundation of the NLN CNEA accreditation standards is built upon the extensive contributions that the National League for Nursing has made to quality nursing education over the years.

Drawing upon a national survey, the NLN released an updated version of the seminal *Hallmarks of Excellence in Nursing Education* (NLN, 2020). Survey findings confirmed that the hallmarks continue to provide a tool for nursing education excellence for all programs and institutions and they serve as a framework that schools and faculty could use to continuously improve in their pursuit of excellence in nursing education (NLN, 2020). The *Hallmarks of Excellence in Nursing Education Model* (2020) addresses quality indicators in the following components of nursing education:

- 1) engaged students,
- 2) diverse, well-prepared faculty,
- 3) culture of continuous quality improvement,
- 4) innovative, evidence-based curriculum,
- 5) innovative, evidence-based approaches to facilitate and evaluate learning,

- 6) resources to support program goal attainment,
- 7) commitment to pedagogical scholarship, and
- 8) effective institutional and professional leadership.

The *Hallmarks of Excellence in Nursing Education* (2020) continue to define outstanding performance of high-quality programs and are relevant for all type of institutions and programs. They provide a comprehensive framework for the CNEA Standards of Accreditation, thus ensuring quality in nursing education programs across the academic spectrum.

The following paragraphs briefly address – from an organizational, professional, and philosophical perspective – the significance of the standards’ elements in fostering quality in higher education, and nursing education, in particular. The NLN CNEA Standards of Accreditation are unique in that, taken in their totality, they create a culture and symphony of excellence committed to the formation of nursing professionals rather than a listing of impersonal rules and data. These perspectives are integrated throughout the NLN CNEA standards and quality indicators. **The NLN CNEA Standards of Accreditation are applied to all types of nursing programs, including distance education programs.**

Standard I: Culture of Excellence – Program Outcomes

Establishing clear program outcomes is an essential first step in benchmarking and evaluating a nursing program’s success in achieving and sustaining a quality educational environment for faculty and students. Program outcomes can be defined as the results achieved in response to goals set by the program. For example, program goals and related outcomes may be developed associated with faculty achievement; curriculum (end-of-program, level, or course outcomes); student learning and achievement; and any other indicator of program quality that faculty determine to be important to the overall success of the program. Collectively engaging in the identification and development of expected program outcomes and determining the benchmarks to measure success, ensures that the program administrators, faculty, staff, and students are working collaboratively to achieve and maintain program excellence.

Standard II: Culture of Integrity and Accountability – Mission, Governance, and Resources

The mission of the institution describes its purpose and provides a statement of how the institution views its reason for existence and the students it seeks to serve. An institution’s mission will guide the goal setting, decision-making, and actions that occur within the institution, articulating the values that the institution holds as primary to educating students and supporting faculty and staff. The academic nursing unit’s mission is aligned with the parent institution’s mission, and all nursing

program goals, outcomes, and values espouse the institution's mission, goals, and values, creating an organizational climate that is congruent for students, faculty, and staff.

The governance structures within the institution and nursing units are designed to work collaboratively to support implementation of the institution and program mission. Nursing faculty participate in and provide leadership at varying levels of governance within the educational environment, considering the goals of the institution and nursing program (NLN, 2012). Student input and participation in institution and program governance is actively encouraged and sought out by faculty and administration. This is accomplished in an environment that promotes collegial dialogue, ethical behavior, and values development. Decisions regarding institution and program resource allocation are made from a mission-focused perspective and with the intent to ensure adequate resources for the pursuit of quality within the nursing program (Adams et al., 2022).

Standard III: Culture of Excellence and Caring – Faculty

Well-prepared faculty are essential to ensuring excellence and achieving distinction in nursing education as the faculty's expertise determine the program's potential for creating excellence in the learning environment (McMillian-Bohler, 2022). Defining the appropriate faculty complement (i.e., teachers, clinicians, and researchers) for a nursing program is dependent upon the institution's mission and thus will vary amongst institutions and programs. To maintain competence as a nurse educator, faculty pursue systematic self-evaluation and improvement in the role and commit to lifelong learning (Christensen & Simmons, 2019). Faculty are provided with opportunities and resources by the institution and program to engage in professional development and life-long learning to maintain role effectiveness.

Standard IV: Culture of Excellence and Caring – Students

A student-centered learning environment is cultivated within the program and student diversity is recognized and embraced within a supportive environment. Qualified students are admitted to the program and retained, and a record of students successfully achieving the learning outcomes of the nursing program is apparent. A system of student support exists within the institution and nursing unit with a goal of meeting individualized learning needs and fostering student success. The learning environment is created to facilitate the professional development of students and socialize them to the nursing role for which they are being prepared (Christensen & Simmons, 2019).

Standard V: Culture of Learning and Diversity – Curriculum and Evaluation Processes

Faculty hold the responsibility for ensuring that the program curricula is logically organized, internally consistent, yet flexible. The curriculum should also help students strengthen their knowledge, support skill development, and challenge their thinking (Valiga, 2022). Built upon a foundation of professional standards, the curricula must be kept up to date to reflect societal and health care trends (Christensen & Simmons, 2019). The input of communities of interest is solicited regularly to inform curricular decision-making and revisions, and maintain the relevance of the curricula.

The NLN's evidence-based Education Competencies Model (2010) provides a broad-based framework that can guide the development of curricula of all types of programs, ranging from pre-licensure nursing education to practice doctorate education. Focused on four general program outcomes related to enhancing human flourishing, demonstrating sound nursing judgment, developing a professional identity, and exhibiting a spirit of inquiry, the model further defines and elaborates upon six integrating concepts: context and environment; knowledge and science; personal and professional development; quality and safety; relationship-centered care; and teamwork (NLN, 2010). Each of these integrating concepts have been explicated into three forms of apprenticeships that are necessary to the formation of a professional and assist learners to develop their nursing practice – knowledge, practice, and ethical comportments – drawn from the work of Benner et al. (2009). The NLN Education Competencies Model is an academic model and useful guide to faculty who are designing and revising curricula for all types of nursing programs.

The teaching/learning/evaluation processes that are implemented within the curricula are innovative, varied, and evidence-based. These approaches facilitate interaction between faculty, students, and others involved in the teaching-learning process (NLN, 2020).

B. REVIEW OF THE STANDARDS OF ACCREDITATION

As per policy 6 – III Public Review of Proposed Policy Changes, the NLN CNEA maintains a schedule of systematic review for the standards of accreditation and all policies impacting the accreditation services provided by the NLN CNEA. This systematic review is conducted by the NLN CNEA Policies and Procedures Committee in accordance with the NLN CNEA Bylaws. All new policies and policies undergoing revision are subjected to a 30-day public review, typically occurring during February-March of the calendar year. All communities of interest have the opportunity to review the proposed policy changes and provide feedback to the NLN CNEA.

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SECTION THREE – PRE-ACCREDITATION AND ACCREDITATION POLICIES

3-I. Accreditation Policies and Procedures

A. PRE-ACCREDITATION CANDIDACY

Overview of the Process

Nursing programs desiring to seek initial accreditation from the NLN CNEA will be limited to programs considered likely to succeed in obtaining accreditation with eligibility pursuant to pre-accreditation candidacy documentation. Assessing program readiness through the pre-accreditation candidacy process provides program faculty the opportunity to discern the ability of the program(s) to meet the NLN CNEA Standards of Accreditation.

Nursing academic units desiring to seek pre-accreditation candidacy status for one or more of their nursing programs must first complete an online eligibility application. Upon submission, the pre-accreditation candidacy application will be reviewed by the NLN CNEA staff for completeness. All completed applications will be forwarded to the NLN CNEA Program Review Committee (PRC) for review by the PRC's Initial Program Application Subcommittee (IPASC) which will render a recommendation to grant pre-accreditation status or to deny pre-accreditation status with rationale for the recommendation. The IPASC recommendation will be forwarded to the NLN CNEA Board of Commissioners for action and final decision on the application.

If pre-accreditation candidacy is approved for the program(s) put forth, the nursing academic unit will have a ***maximum of three years within which to complete the accreditation process and achieve initial accreditation with the NLN CNEA.*** Programs may move forward with an application for initial accreditation at any time after the granting of pre-accreditation candidacy status. Granting pre-accreditation candidacy indicates that the program(s) is likely to succeed in meeting the NLN CNEA Standards of Accreditation but does not guarantee that a program will ultimately be successful in achieving NLN CNEA initial accreditation status when sought within the three-year time frame. All credits and degrees earned and issued by a program holding pre-accreditation are considered to be from an accredited program.

Nursing programs who desire to seek pre-accreditation candidacy status and who have never been accredited, are newly developing, or in transition, are encouraged to attend NLN CNEA

educational programming related to accreditation standards, policies, procedures, and expectations in preparation for filing for pre-accreditation status. Programs achieving pre-accreditation status may request the assignment of an NLN CNEA accreditation process navigator as they prepare for their initial accreditation visit.

Nursing programs seeking initial accreditation from NLN CNEA must first be considered eligible and ready to pursue NLN CNEA accreditation. Nursing programs begin the journey toward NLN CNEA accreditation by first making application to pursue initial accreditation through the pre-accreditation candidacy process. Nursing program personnel requesting pre-accreditation candidacy consideration are required to complete and submit an online pre-accreditation candidacy application. All applications are reviewed by the NLN CNEA staff for completeness prior to being forwarded to the Program Review Committee's Initial Program Application Subcommittee (IPASC) for review. Incomplete applications will be returned with comments designed to facilitate a completed application process. Recommendations from the IPASC are forwarded to the NLN CNEA Board of Commissioners for decision-making regarding awarding of pre-accreditation status. Programs perceived to be capable of meeting the NLN CNEA Standards of Accreditation within a three-year window are awarded pre-accreditation status which affords the opportunity to pursue and complete the initial accreditation process at a time of their choosing within the designated three-year time frame.

Eligibility Criteria

The pre-accreditation candidacy application must contain materials that demonstrate the following eligibility criteria:

1. Evidence that the governing (parent) institution of the nursing unit or program pursuing NLN CNEA accreditation is legally authorized to grant nursing degrees, diplomas, or credited certificates in the state or territory in which it resides.
2. The governing (parent) institution is also accredited by an agency recognized by the U.S. Department of Education. If a program is operated by a hospital, vocational school, or other type of education institution, it must demonstrate that it holds a type of USDE recognized accreditation that is consistent with the mission of the governing institution and stated programmatic goals.
3. Evidence that the nursing program is legally approved or accredited by the state board of nursing in which it operates, as required by applicable state or territorial statutes.
4. Evidence that the nursing program is likely to succeed in demonstrating achievement of

the NLN CNEA Standards of Accreditation.

5. A formal request from the chief academic nurse administrator and co-signed by the chief executive officer of the legally designated governing institution of their desire to initiate the NLN CNEA accreditation process.
6. Evidence of publicly posted notices at the time of submission of the application requesting third-party comments from communities of interest.
7. Payment of non-refundable initial application filing fees as published at the time of application.

PLEASE NOTE: Any nursing unit (or program) or parent institution seeking NLN CNEA pre-accreditation candidacy that has previously been denied accreditation or pre-accreditation status by another accrediting agency must provide documentation related to the conditions of the denial and steps taken to rectify the issues which prompted the denial action.

*Pre-accreditation candidacy applications **will not be accepted from any institution or program** that has pending action, including warning, probationary, or other similar status designations, against their operational authority within their state or territory or with an institutional or other nursing accreditation body.*

Nursing Consortia

Nursing programs that have formed officially recognized consortia may be eligible to seek NLN CNEA pre-accreditation candidacy through the process outlined in the preceding section. For consortia across state lines, each site must have approval or operational authority within their respective state or territory. All governing institutions within which the consortia nursing programs exist must sign the request for pre-accreditation candidacy as a means of verifying their support to pursue initial accreditation from the NLN CNEA as a unified entity. All nursing programs within the consortia that offer the same program type, sequential or accelerated programming, or innovative curriculum designs that lead to authorized degrees can be considered for candidacy as a single program entity. Each individual member must meet all accreditation guidelines. The parent institution(s) must be accredited by an institutional accrediting body recognized by the U.S. Department of Education. The NLN CNEA staff is available to answer questions regarding nursing consortia and their eligibility to apply for pre-accreditation candidacy status.

Third-party Comments

NLN CNEA expects the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumni, and communities as an indication of stakeholder commitment to program quality and integrity. As part of the pre-accreditation candidacy process, the academic nursing unit is required to communicate information regarding the NLN CNEA accreditation process and established timetable to their defined community of interest.

During the pre-accreditation candidacy review process and in accordance with the NLN CNEA policies, the program is required to publicly post a notice informing students, communities of interest, and other members of the public of their rights and responsibilities to submit comments directly to the NLN CNEA staff regarding the program(s) under review. Programs are referred to the policy on third-party comments for additional instructions. ***The program must submit evidence of such posting when submitting the pre-accreditation application.***

Third-party comments will be shared with the NLN CNEA Program Review Committee's Initial Program Application Subcommittee and the Board of Commissioners during the review process. The comments will be shared with the chief academic nursing officer who will be given an opportunity to respond to the comments if desired. Third-party comments and a program's responses are not part of the pre-accreditation application but are considered additions to the application materials submitted for review by the IPASC. Third-party comments must be received by the NLN CNEA no later than 14 days prior to the scheduled IPASC review.

Pre-accreditation Candidacy Review Decisions

- 1. Pre-Accreditation Status Granted for a Maximum Period of Three Years:** Upon formal notification in writing that pre-accreditation status is granted by the NLN CNEA, the nursing program has three years from the date of the NLN CNEA Board of Commissioners' initial action in which to complete the accreditation process and achieve initial accreditation.
- 2. Denial of Pre-Accreditation Status:** Upon review and recommendation by the NLN CNEA Program Review Committee's Initial Program Application Subcommittee, the NLN CNEA Board of Commissioners can determine that, at the time of application, the program has not demonstrated evidence that the program is likely to succeed in complying with the accreditation standards and quality indicators within the designated three-year time frame. The chief academic nurse administrator will be formally notified in writing of this decision.

The notification will identify areas of concern related to the NLN CNEA accreditation standards that were identified as an outcome of the Board of Commissioners' deliberations. A program may resubmit for pre-accreditation candidacy after a minimal waiting period of 12 months following a denial. The new pre-accreditation candidacy application must also contain an explanation and supporting documentation that delineates the steps the program has taken to correct the previously identified areas of concern that lead to the prior denial of pre-accreditation candidacy status. As an adverse decision, the Board of Commissioners' action is appealable.

- 3. Termination of Pre-Accreditation Status:** The pre-accreditation status of the program may be terminated by NLN CNEA if the three-year maximum time frame to complete the accreditation process is exceeded, and thus not met. The pre-accreditation status may also be terminated by NLN CNEA if the accreditation status of the governing institution changes; the accreditation status or state regulatory status of the nursing program changes; or other substantive institutional or program changes occur affecting the stability of the nursing program. In the case of impending termination, the NLN CNEA will issue a show cause directive, not to exceed 6 months, to the program asking the program to demonstrate why its pre-accreditation status should not be terminated. As an adverse action, the Board of Commissioners' action is appealable.
- 4. Extension of Pre-Accreditation Status:** The NLN CNEA Board of Commissioners may act to extend a program's pre-accreditation status, beyond the initial three-year term, for good cause. The extension is not to exceed 12 months from the date it is issued.
- 5. Voluntary Withdrawal from Pre-Accreditation Status:** The chief academic nurse administrator may formally request a withdrawal of pre-accreditation status prior to pursuing accreditation status at any time during the three-year pre-accreditation term. A program may resubmit an application for candidacy status after a wait period of 12 months without historical bias if the pre-accreditation status was voluntarily withdrawn. An exception to this wait period may be granted by the NLN CNEA Board of Commissioners' Executive Committee for valid reasons.

Public Notice of Accreditation Status

The NLN CNEA publicly discloses all Board of Commissioner actions regarding program pre-accreditation status and accreditation status. Nursing academic units may choose to publicly disclose the NLN CNEA accreditation status of its programs. For programs receiving pre-

accreditation status from NLN CNEA the nursing academic unit must use the following public statement:

“The [insert name of the institution and program(s)] holds pre-accreditation status from the National League for Nursing Commission for Nursing Education Accreditation, located at 2600 Virginia Avenue, NW, Washington, DC, 20037. Holding pre-accreditation status does not guarantee that initial accreditation by NLN CNEA will be received.”

Completing the Pre-accreditation Candidacy Application Process

The pre-accreditation application consists of two distinct sections. The **first** section requests information regarding the program(s) being put forth for pre-accreditation candidacy consideration and the parent /governing institution in which the programs reside. The **second** section of the application asks for documentation of the alignment of program and institutional resources with program and institutional mission and goals, and how the programs, at the time of application, align with the NLN CNEA Standards of Accreditation. Application materials are located on the NLN CNEA website at <https://cnea.nln.org>.

NOTE: Misrepresentation of information on the pre-accreditation candidacy application is grounds for denial of pre-accreditation status. The signatures of the institutional chief executive officer and chief academic nurse administrator on the application form signify the information to be accurate to the best of their knowledge and the academic nursing unit's acknowledgement of this provision. Pre-accreditation candidacy will not be granted to programs if the program or the program's institution is the subject of:

- A pending or final action by a state agency to suspend, revoke, withdraw, or terminate the legal operational authority to provide postsecondary education in the State;
- A decision by a recognized accrediting agency to deny accreditation or pre-accreditation;
- A pending or final action by a recognized accrediting agency or other nursing accreditation agency to suspend, withdraw, revoke, or terminate accreditation or pre-accreditation; or
- A probation or equivalent status imposed by a recognized agency or any nursing accreditation agency.

Pre-accreditation candidacy **will not be granted** to nursing programs that have either been denied accreditation or had their accreditation status withdrawn within the last 12 months by another national nursing accreditation body.

Programs that have previously had their accreditation status withdrawn or denied by another national nursing accreditation body may request a preliminary review by the NLN CNEA Board of Commissioners' Executive Committee for individual consideration of the potential to pursue pre-accreditation candidacy with the NLN CNEA. The program is required to fully disclose the circumstances that precipitated the action to deny or withdraw accreditation along with supporting evidence that the program has taken the steps necessary to rectify the situation that led to accreditation being denied or withdrawn. The NLN CNEA Board of Commissioners' Executive Committee's decision to grant permission for the program to pursue pre-accreditation candidacy does not guarantee the program will be approved for pre-accreditation status.

In accordance with USDE 34 CFR §602.28, if the NLN CNEA acts to grant pre-accreditation to a nursing program subject to any of the above noted conditions in this section, the NLN CNEA must provide notice to the USDE within 30 days of its actions. The notice is to include a comprehensive reporting of its rationale for doing so that is consistent with NLN CNEA's published standards of accreditation and explains why the action of the other regulatory or accrediting body does not preclude the NLN CNEA from granting pre-accreditation.

Approved: February 2016

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A. INITIAL ACCREDITATION

Policy on Granting Initial Accreditation

Nursing programs holding NLN CNEA pre-accreditation candidacy status are eligible to apply for initial program accreditation with NLN CNEA. Initial accreditation may be pursued at any time within the three-year pre-accreditation candidacy window of opportunity but must be timed so that all steps of the accreditation process, including NLN CNEA Board of Commissioners' action, are completed within the three-year timeline. It is the responsibility of chief academic nurse administrator to determine the appropriate time for the program(s) to pursue initial accreditation based upon a program self-assessment which indicates the capacity to demonstrate compliance with the NLN CNEA Standards of Accreditation.

If the NLN CNEA Board of Commissioners determines that the standards of accreditation have been met, initial accreditation may be granted for a period of six years with a mid-cycle report due in year three of the period for which initial accreditation has been granted. After NLN CNEA Board

of Commissioners' action, the accreditation period begins on the last day of the month of the initial accreditation site visit and extends for the period granted by the Board of Commissioners.

Steps for Seeking Initial Accreditation

Upon receiving pre-accreditation candidacy status from NLN CNEA, programs may opt to pursue initial accreditation at any time within the three-year time frame, known as the window of opportunity. ***The program must allow time to complete the accreditation process in its entirety within the allotted pre-accreditation status three-year time period, inclusive of the Board of Commissioners' action on the program's application.***

There are four steps to the process of seeking initial accreditation from NLN CNEA:

- 1) formal notification of intent to proceed with the accreditation process;
- 2) submission of the self-study report;
- 3) participation in an on-site program evaluation visit; and
- 4) the committee review and board decision-making process.

It is imperative that all program personnel understand the time frames for pursuing initial accreditation and the final accreditation decision of the Board of Commissioners so that programs do not face gaps between the expiration of the pre-accreditation candidacy and finalization of the initial accreditation process. NLN CNEA staff is available to provide guidance to facilitate program personnel through this process.

Step One: Formal Written Request

A formal written request is initiated jointly by the chief academic nurse administrator and the institution's chief executive officer and submitted to NLN CNEA indicating intent and commitment to pursue the initial accreditation review process for the programs that have been granted pre-accreditation status, and the desire to schedule an on-site program evaluation visit. Once NLN CNEA staff has received the formal request and the required accreditation fees, NLN CNEA staff will work with the chief academic nurse administrator in completing the remaining three steps within the three-year period of pre-accreditation candidacy status previously awarded. The formal written request must be received by NLN CNEA, typically between six and 12 months prior to the time of scheduling the on-site program evaluation visit.

The following information must accompany the request to initiate the initial review process and establish institution and program eligibility for initial accreditation:

- a. State Board of Nursing (SBN) program current approval/accreditation status and date of last review.

- b. Governing institution current accreditation status by a U.S. Department of Education recognized institutional accrediting body and dates of last and next review. In cases where a state board of nursing approved/accredited program resides in a vocational facility, hospital, other healthcare facility, or virtual platforms, the governing institution must provide documentation of accreditation from a recognized institutional accrediting agency that is consistent with the mission of the governing institution and stated programmatic goals.

Once these requirements have been reviewed by NLN CNEA staff and found complete, the staff will contact the chief academic nurse administrator to establish the time frame for the completion of actions to be taken for a program to be considered for initial accreditation.

PLEASE NOTE: Any nursing program seeking NLN CNEA accreditation that has previously been denied accreditation or pre-accreditation status by another accrediting agency must provide documentation related to the conditions of the denial and steps taken to rectify the issues which prompted the denial action.

NLN CNEA may not grant initial accreditation to programs if the program or the program's institution is the subject of:

- A pending or final action by a state agency to suspend, revoke, withdraw, or terminate the legal operational authority to provide postsecondary education in the State;
- A decision by a recognized accrediting agency to deny accreditation or pre-accreditation;
- A pending or final action by a recognized accrediting agency or other nursing accreditation agency to suspend, withdraw, revoke, or terminate accreditation or pre-accreditation; or
- A probation or equivalent status imposed by a recognized agency or any nursing accreditation agency.

In accordance with USDE 34 CFR §602.28, if the NLN CNEA acts to grant initial accreditation to a nursing program subject to any of the above noted conditions in this section, the NLN CNEA must provide notice to the USDE within 30 days of its actions. The notice is to include a comprehensive reporting of its rationale for doing so that is consistent with NLN CNEA's published standards of accreditation and explains why the action of the other regulatory or accrediting body does not preclude the NLN CNEA from granting initial accreditation.

Step Two: Self-study Submission

The submission of a self-study document that addresses the program(s)' ability to meet NLN CNEA Standards of Accreditation is required prior to the on-site program evaluation visit. The NLN CNEA Program Review Committee and Board of Commissioners rely on informational accuracy and completeness in the presentation of self-study materials. Information must be relevant and substantive in its ability to support the program's demonstration of meeting the quality indicators designated for each accreditation standard. Reflected in the self-study report should be examples of a commitment to the process of continuous quality improvement. The self-study report, including supplemental appendices, is electronically submitted to the NLN CNEA office no less than six weeks prior to the previously scheduled on-site program evaluation team visit.

Step Three: On-site Program Evaluation Visit

An on-site program evaluation visit by an appointed on-site program evaluation team is the third step in the accreditation process. The purpose of the on-site program evaluation visit is to validate and clarify information contained in the self-study, and to provide a concise systematic observational validation of the ability of the program(s) under review to meet the published accreditation standards in place at the time of the visit. On-site program evaluation visits are conducted within a defined biannual time frame (fall and spring).

The chief academic nurse administrator, in consultation with faculty, vets on-site program evaluators prior to the scheduled on-site visit and can request the replacement of a visitor if there is a perceived conflict of interest noted by the chief academic nurse administrator. The number and composition of on-site program evaluators is determined by the NLN CNEA based upon the size of the program, number of educational sites, type, and number of programs under review, and the integration of distant/distributive education or other innovative educational options.

The length of the on-site program evaluation visit is also determined by the characteristics listed in the previous paragraph. However, visits are normally completed within a three-day time span. Exceptions to this common practice are negotiated with the NLN CNEA executive director and the chief academic nurse administrator prior to scheduling the visit.

Step Four: Review and Decision-making Process

The NLN CNEA Program Review Committee meets three times a year to deliberate and recommend accreditation status for programs that have submitted a self-study report and hosted an on-site program evaluation visit. Following the on-site program evaluation visit and prior to the

scheduled Program Review Committee meeting, a program may submit additional documentation that is factual and believed to be relevant to the published accreditation standards or clarifying factual comments made in response to the on-site program evaluators' team report. As part of their review process, the Program Review Committee will review the self-study report, the team report from the on-site program evaluators' visit, and any other relevant materials pertinent to the program(s)'s request for initial accreditation. The Program Review Committee provides the NLN CNEA Board of Commissioners with a written analysis of the program's compliance with the quality indicators for each NLN CNEA accreditation standard. This analysis is accompanied by a recommendation regarding initial accreditation and forwarded to the NLN CNEA Board of Commissioners for a final action and accreditation decision. As cited in CFR § 602.18 (b) (3), the decisions will not use as a negative factor the institution's religious mission-based policies, decisions, and practices in the areas covered by § 602.16(a)(1)(ii), (iii), (iv), (vi), and (vii) provided, however, that the program's curricula include all the core components required.

The NLN CNEA Board of Commissioners, after review of documents generated through the review process, are accountable for the final initial accreditation outcome. Each program submitted by the academic nursing unit is judged separately on its merit and final program accreditation decisions may differ based upon each program's ability to meet the NLN CNEA published standards.

After NLN CNEA Board of Commissioners' action, the accreditation period begins on the last day of the month of the site visit and extends for the period granted by the Board of Commissioners.

Third-party Comments

The NLN CNEA expects the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumni, and communities as an indication of stakeholder commitment to program quality and integrity. As part of the self-study process, the academic nursing unit is required to communicate information regarding the NLN CNEA accreditation process and established timetable to their defined community of interest.

In accordance with the NLN CNEA policies, following the formal written request to pursue initial accreditation and prior to submitting the self-study report, the program is required to publicly post a notice informing students, communities of interest, and other members of the public of their rights and responsibilities to submit comments directly to the NLN CNEA staff regarding the program(s) under review. The program must submit evidence of such posting when submitting the self-study. Third-party comments will be shared with the on-site program evaluation team and considered by the NLN CNEA Program Review Committee and the Board of Commissioners

during the review process. The comments will be shared with the chief academic nursing officer who will be given an opportunity to respond to the comments if desired. Third-party comments and a program's response are not part of the self-study but are considered additions to the self-study materials submitted for review. Third-party comments must be received by the NLN CNEA no later than 14 days prior to the on-site program evaluation visit.

Initial Accreditation Decisions

There are four possible initial accreditation decisions that the Board of Commissioners may act to grant to programs.

- 1. Grant Initial Accreditation:** The Board of Commissioners may act to grant initial accreditation to a program for a maximum term of six years without a quality improvement conditions report requirement. The program will be expected to submit a mid-cycle report in the third year of the initial accreditation term (if initial accreditation granted for six years).
- 2. Grant Initial Accreditation with Quality Improvement Conditions:** The Board of Commissioners may act to grant initial accreditation with quality improvement conditions noted, accompanied by Board stipulated reporting requirements. This status is granted when the program substantially meets established accreditation standards, but the Board identifies one or more quality improvement conditions that may impact its ability to continue to demonstrate compliance with the NLN CNEA Standards of Accreditation over the full initial six-year accreditation term. At the time of the accreditation decision, the Commission will specify the nature, scope, purpose, and timeline (not to exceed 18 months) for the required follow-up quality improvement conditions report that the program must submit. The report must address the quality improvement conditions noted by the Board of Commissioners at the time initial accreditation is granted. The program will submit the quality improvement conditions report to the NLN CNEA Program Review Committee for review and recommendation to the Board of Commissioners' Executive Committee and then the NLN CNEA Board of Commissioners. If the NLN CNEA Board of Commissioners determines that a focused on-site program evaluation visit is warranted after review of the report, the NLN CNEA will formally notify the chief academic nurse administrator of the need to schedule a focused on-site program evaluation visit. Upon review of the quality improvement conditions report and review of the focused on-site program evaluation visit report, the Board of Commissioners reserves the right to take any additional action to modify the terms of the initial accreditation status. The Board of Commissioners' decision to grant initial accreditation with quality improvement conditions

is **not** appealable.

3. **Defer Initial Accreditation:** The Board of Commissioners may act to defer initial accreditation if the self-study report and/or the on-site program evaluation visit provided evidence demonstrating that the program has significant and extenuating challenges in meeting one or more accreditation standards but has an action plan and mechanisms in place to address program deficiencies. The Board of Commissioners may also act to defer initial accreditation to grant the program additional time to demonstrate compliance with the standards if a reasonable conclusion is reached that the program can correct any deficiencies within a time frame to be set by the Board of Commissioners. The act to defer accreditation may not exceed a 12-month time frame from the date of the Board of Commissioners' action. During this 12-month time frame the pre-accreditation candidacy status of the program will be extended, if necessary, to cover length of the extension. The Board of Commissioners may also act to defer an initial accreditation decision if there is question of institutional or nursing unit leadership instability and/or fiscal instability at the time of the on-site program evaluation visit, or if such conditions emerge following the on-site program evaluation visit, but prior to the Board of Commissioner's action on the program's accreditation status. The institution's chief executive officer and the chief academic nurse administrator will be formally notified of the action to defer initial accreditation given the unique circumstances of the program(s) under review.

The formal notification to defer accreditation will include rationale for the deferment along with any noted program concerns that relate directly to the NLN CNEA Standards of Accreditation. The program in question must submit documented evidence of addressing the issues that prompted the deferral and meeting the NLN CNEA Standards of Accreditation within the stated 12-month time frame. The Board of Commissioners' decision at the end of the deferral time will be to grant or deny accreditation status to the program. The decision by the Board of Commissioners to defer accreditation is not appealable.

4. **Deny Initial Accreditation:** Initial accreditation may be denied by the NLN CNEA Board of Commissioners when a program is determined not to have met the NLN CNEA Standards for Accreditation. Denial of accreditation is a reflection of the presence of one or more substantive deficits that negatively affect the programs' ability to meet NLN CNEA accreditation standards and there is no or minimal evidence of plans or mechanisms in place to effectively address the substantive deficits within a specified time period, as noted

in the self-study and confirmed by the on-site program evaluation team. If initial accreditation is denied, a program would be considered eligible to reapply for initial accreditation after a one-year wait period. If the wait period extends beyond the one year, then the program will need to pursue pre-accreditation candidacy prior to being considered a candidate for initial accreditation. As an adverse decision, the Board of Commissioner's action to deny accreditation is appealable.

If the program appeals the Board's decision, and the Appeal Panel upholds the determination of denial of initial accreditation, the official date of accreditation denial is consistent with the date the Board of Commissioners' action taken in response to the Appeal Panel decision. Following final action on denial of the program's initial accreditation, the academic nursing unit is responsible for removing all information regarding NLN CNEA pre-accreditation status from its published print and electronic program materials. The NLN CNEA staff removes the program from its digital and printed directories and any other related materials and notifies all appropriate parties of the decision to deny accreditation. In such cases where an official representative of the program and/or its governing organization uses a public forum to take issue with this or any other adverse action, the NLN CNEA Board of Commissioners' chair may publicly address the action taken and the supporting rationale as it relates to the NLN CNEA Standards of Accreditation.

Voluntary Withdrawal from Seeking Initial Accreditation

Programs have a right to withdraw from a scheduled on-site visit up until the site visit begins. Programs that voluntarily withdraw from participation in the initial accreditation process may reapply for initial accreditation if the action is taken within the originally granted three-year time frame of pre-accreditation candidacy status. If a program desires to pursue initial accreditation beyond this three-year time frame, the program must reapply for pre-accreditation candidacy status.

Public Notice of Accreditation Status

For programs receiving initial accreditation status from NLN CNEA, the nursing academic unit may use the following public statement:

"The (insert name of the institution and program) holds initial accreditation from the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC 20037."

B. CONTINUING ACCREDITATION (REAFFIRMATION)

Policy on Granting Continuing Accreditation

Nursing programs holding NLN CNEA initial accreditation status are eligible to apply for reaffirmation and continuation of their accreditation status prior to the expiration of their initial accreditation term. Continuing accreditation may be pursued at any time prior to the last year of the initial accreditation term and should be timed for the process, including the Board of Commissioners' action, to be completed prior to the expiration of the term. The request to pursue continuing NLN CNEA accreditation is to be initiated in writing no later than six to 12 months of an anticipated on-site program evaluation visit to the NLN CNEA staff by the chief academic nurse administrator of the program being put forth for consideration and the chief executive officer of the institution.

The academic nursing unit personnel are required to submit a self-study report and host an on-site program evaluators' visit in preparation for continuing accreditation consideration by the NLN CNEA Board of Commissioners. If the Board of Commissioners determines that the NLN CNEA Standards of Accreditation have been met, continuing accreditation may be granted for up to a maximum period of ten years with a mid-cycle report due approximately halfway through the period for which continuing accreditation has been granted.

Reaffirmation of the program's continuing accreditation becomes effective on the last day of the month of the Board of Commissioners' final action and extends for the period of time granted by the Board of Commissioners.

Procedures for Seeking Reaffirmation of Continuing Accreditation

Programs previously receiving NLN CNEA accreditation must seek reaffirmation and continuation of their accreditation status within one year of the expiration of the designated accreditation term. The chief academic nurse administrator initiates the reaffirmation of continuing accreditation process by formally declaring the academic nursing unit's intent to seek NLN CNEA continuing accreditation for one or more programs. The filing of this request formally notifies the NLN CNEA staff of intent to reaffirm continuing accreditation and the timeline within which the on-site program evaluation visit is being requested. It is the responsibility of the program to submit its intent to seek continuing accreditation on a timeline that will assure continuation in the program's accreditation status with no lapses in term coverage. The NLN CNEA staff is available to provide guidance to facilitate program personnel through this process.

Requesting Delay in Seeking Reaffirmation of Continuing Accreditation

The chief academic nurse administrator may make a formal written request for a delay in entering into the continuing accreditation process for up to 6 months if there have been critical operational changes or events beyond the control of the institution or program that may have an impact on the timeframe identified by the NLN CNEA staff for completing the accreditation process. This request will be reviewed by the NLN CNEA Board of Commissioners' Executive Committee to determine if the rationale for the requested extension warrants the granting of an extension. Other factors that will be considered when making the decision to grant an extension will be the program's current accreditation status with the NLN CNEA and the approval status with the applicable state regulatory body. The NLN CNEA Board of Commissioners' Executive Committee will notify the chief academic nurse administrator of its decision regarding the request and the NLN CNEA staff will coordinate adjustments in times for the self-study report and the on-site program evaluation visit accordingly. A delay will be granted no more than once during the current term of the program's NLN CNEA accreditation status.

Steps to Seeking Reaffirmation of Continuing Accreditation

There are four steps to the process of seeking reaffirmation of continuing accreditation from NLN CNEA:

- 1) formal notification of intent to proceed with the reaffirmation accreditation process;
- 2) submission of the self-study report;
- 3) participation in an on-site program evaluation visit; and
- 4) the committee review and board decision-making process.

Step One: Formal Written Request

A formal written request is initiated jointly by the chief academic nurse administrator and the chief executive institutional officer and submitted to NLN CNEA indicating intent and commitment to pursue reaffirmation of continuing accreditation and the desire to schedule an on-site program evaluation visit. Once NLN CNEA staff has received the formal request and the required accreditation fees, the NLN CNEA staff will work with the chief academic nurse administrator in completing the remaining two steps of the process within the required timeline. The formal written request must be received by the NLN CNEA anywhere from six to 12 months prior to the time of scheduling the on-site program evaluation visit. The following information must accompany the request to initiate the review process for continuing accreditation:

- a. State Board of Nursing (SBN) program approval/accreditation status and date of last review;

- b. Governing institution accreditation status by a U.S. Department of Education recognized institutional accrediting body and dates of last and next review. In cases where a SBN approved program resides in a vocational facility, hospital, other healthcare facility, or virtual platforms, the parent institution needs to provide documentation of accreditation from a recognized institutional accrediting agency. See <https://www.ed.gov/accreditation>.

Once these requirements have been reviewed by the NLN CNEA staff and found complete, the staff will contact the chief academic nurse administrator to establish the time frame for the completion of actions needing to be taken for a program to be considered for continuing accreditation.

Step Two: Submission of Self-study Report

The submission of a self-study document that addresses the program(s)' ability to meet NLN CNEA Standards of Accreditation is required prior to the on-site program evaluation visit. The NLN CNEA Program Review Committee relies on informational accuracy and completeness in the presentation of self-study materials. Information must be relevant and substantive in its ability to support the program's demonstration of meeting the quality indicators designated within each accreditation standard and success in meeting its mission and objectives, highlights opportunities for improvement, and includes a plan for making those improvements. Reflected in the self-study should be examples of a commitment to the process of continuous quality improvement. The self-study report including supplemental appendices is electronically submitted to the NLN CNEA office no less than six weeks prior to the previously scheduled on-site program evaluator team visit.

Step Three: On-site Program Evaluation Visit

An on-site program evaluation visit by an appointed on-site program evaluation team is the third step in the accreditation process. The on-site program evaluation team holds current knowledge of higher education, professional nursing standards and expectations, relevant practice issues and practice expectations. The chief academic nurse administrator, in consultation with faculty, vets on-site program evaluators prior to the scheduled on-site visit and can request the replacement of a visitor if there is a perceived conflict of interest noted by the chief academic nurse administrator. The number and composition of on-site program evaluators is determined by the size of the program, number of educational sites, type, and number of programs under review, and the integration of distant/distributive and/or innovative educational options.

The length of the on-site program evaluation visit is also determined by the characteristics listed in the previous paragraph. However, visits are normally completed within a three-day time span. Exceptions to this common practice are negotiated with the NLN CNEA executive director and the chief academic nurse administrator. The purpose of the on-site visit is to validate and clarify information contained in the self-study, and to provide a concise systematic observational validation of the ability of the program(s) under review to meet the published accreditation standards in place at the time of the visit. On-site program evaluation visits are conducted within a defined biannual timeframe (fall and spring).

Step Four: Review and Decision-making Process

The NLN CNEA Program Review Committee meets three times a year to deliberate and recommend accreditation status for programs that have submitted a self-study and hosted an on-site program evaluation visit. Prior to the scheduled Program Review Committee meeting, a program may submit additional documentation that is factual and believed to be relevant to the published standard or clarifying factual comments made in response to the on-site program evaluators' team report. The Program Review Committee will review the self-study, the report from the on-site program evaluator's visit, and any other relevant materials pertinent to the program's request for continuing accreditation. The Program Review Committee will provide the NLN CNEA Board of Commissioners with a written analysis of the program's ability to meet the intent of the quality indicators for each NLN CNEA standard. This analysis is accompanied by a recommendation regarding continuing accreditation and forwarded to the Board of Commissioners for a final action and accreditation decision.

The NLN CNEA Commissioners, after review of documents generated through the review process, are accountable for the final accreditation outcome. Each program submitted by the academic nursing unit is judged on its merit and final accreditation decisions may differ given each program's ability to meet the NLN CNEA published standards. Reaffirmation of the program's continuing accreditation becomes effective on the last day of the month of the Board of Commissioners' final action and extends for the period of time granted by the Board of Commissioners.

Third-party Comments

The NLN CNEA expects the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumni, and communities as an indication of stakeholder commitment to program quality and integrity. As part of the self-study process, the

academic nursing unit is required to communicate information regarding the NLN CNEA accreditation process and established timetable to their defined community of interest.

In accordance with the NLN CNEA policies, following the formal written request to pursue continuing accreditation and prior to submitting the self-study report, the program is required to publicly post a notice informing students, communities of interest, and other members of the public of their rights and responsibilities to submit comments directly to the NLN CNEA staff regarding the program(s) under review. The program must submit evidence of such posting when submitting the self-study. Third-party comments will be shared with the on-site program evaluation team and considered by the NLN CNEA Program Review Committee during the review process. The comments will be shared with the chief academic nursing officer who will be given an opportunity to respond to the comments if desired. Third-party comments and a program's response are not part of the self-study report but are considered additions to the self-study materials submitted for review. Third-party comments must be received by the NLN CNEA no later than 14 days prior to the on-site visit.

Continuing Accreditation Decisions

- 1. Reaffirm continuing accreditation.** Continuing accreditation may be reaffirmed by the NLN CNEA Board of Commissioners when the evidence presented indicates that the program is in compliance with the NLN CNEA Standards of Accreditation. Continuing accreditation is granted for up to a maximum of ten years and becomes effective on the last day of the month of the Board of Commissioners' final action. As part of the responsibilities related to continuing accreditation status, the program submits a mid-cycle report documenting continued compliance with the NLN CNEA Standards of Accreditation. This mid-cycle report falls in the middle of the accreditation term (e.g., year five of a ten-year accreditation term). This report is designed to document the program's ability to continue to meet the NLN CNEA Standards of Accreditation. All mid-cycle reports are reviewed by the Program Review Committee Subcommittee on Mid-Cycle Review for recommendation to the Program Review Committee and then the Board of Commissioners regarding the reaffirmation of the program's continuing accreditation status. The NLN CNEA Board of Commissioners has the final authority to sustain or alter the continuing accreditation status of a program at any time during the continuing accreditation cycle depending on the program's ability to document compliance with the NLN CNEA Standards of Accreditation to document compliance.

- 2. Grant continuing accreditation with quality improvement conditions.** The NLN CNEA Board of Commissioners may grant continuing accreditation for up to the maximum term of ten years with quality improvement conditions when the program has demonstrated it substantially meets established accreditation standards but has one or more identified quality improvement conditions that may impact the program's ability to continue to demonstrate compliance with the NLN CNEA Standards of Accreditation over the course of the accreditation term. In this instance, the Board of Commissioners will require a focused follow-up quality improvement conditions report within a specified time frame (not to exceed 18 months) of granting continuing accreditation. The purpose of this follow-up report is to document the program's progress in addressing the quality improvement conditions identified in the Board of Commissioners' decision. The required follow-up report is reviewed by the Program Review Committee and a recommendation is sent forth to the NLN CNEA Board of Commissioners' Executive Committee and then the Board of Commissioners. Upon review and consideration of the recommendation the Board of Commissioners may act to: (a) grant continued accreditation for up to the remainder of the maximum ten year accreditation term; (b) recommend a focused on-site program evaluation visit be conducted prior to determining the continuation of accreditation status; or (c) denial of continuing accreditation as the program cannot demonstrate compliance with the NLN CNEA Standards of Accreditation under which the most recent period of continuing accreditation was granted. The decision to withdraw continuing accreditation is subject to appeal under the applicable policies and procedures of the NLN CNEA.
- 3. Defer continuing accreditation.** The option to defer continuing accreditation may be invoked if there is a question of instability in nursing academic administrative leadership, fiscal instability, changes in ownership, or issues with appropriate program and institutional sanction, approval, or accreditation status that have emerged between the end of the on-site visit and the Board of Commissioners' scheduled deliberation of the program's continuing accreditation decision. The NLN CNEA Board of Commissioners may also defer the continuing accreditation decision if it is determined that additional specific information is needed from the program prior to rendering a decision regarding program compliance with accreditation standards. The Commission will inform the program of the nature, scope, specification, and purpose of the information that must be forwarded to the NLN CNEA within 60 days of notification of the need for additional information. The chief academic nurse administrator must provide evidence that the changes in circumstances have not negatively impacted the stability of the program or its

ability to meet the NLN CNEA Standards of Accreditation. During this extension, the current accreditation status of the program will continue. The final decision regarding reaffirmation of the program's continuing accreditation status will be made by the NLN CNEA Board of Commissioners within 30 days of the receipt of the requested documentation. If the program is unable to provide the requested documentation or if the NLN CNEA Board of Commissioners determines that the change has interfered with the program's ability to substantially meet the standards of accreditation, the program's current NLN CNEA accreditation status may be terminated by the NLN CNEA Board of Commissioners. As an adverse action, this decision is appealable under the applicable policies and procedures of the NLN CNEA. If the program wishes to re-enter the accreditation process at a later date, they must re-apply for initial accreditation.

- 4. Deny continuing accreditation/Withdrawal of accreditation.** Continuing accreditation may be denied by the NLN CNEA Board of Commissioners when a program fails to comply with the NLN CNEA Standards for Accreditation based on the assessment of the self-study report, the on-site program evaluation report, and recommendation of the NLN CNEA Program Review Committee. Accreditation may be withdrawn following placement on Probationary accreditation status, or the issuance of a Show Cause directive, when after being provided with an opportunity to respond, a program fails to satisfactorily address the deficiencies or findings identified that resulted in its placement on such status. As an adverse action, a denial or withdrawal decision is subject to appeal under the applicable policies and procedures of the NLN CNEA.

If the Appeal Panel affirms the determination of denial of continuing accreditation, the official date of accreditation denial is consistent with the date of the NLN CNEA Board of Commissioners' action taken in response to the appeals panel decision. Following final action on denial of the program's continuing accreditation, the academic nursing unit is responsible for removing all information regarding NLN CNEA accreditation information from its published print and electronic program materials. The NLN CNEA staff removes the program from its digital and printed directories and any other related materials and notifies all appropriate parties of the decision to deny accreditation. In such cases where an official representative of the program and or its governing organization uses a public forum to take issue with this or any other adverse action, the NLN CNEA Board of Commissioners' chair may publicly address the action taken and the supporting rationale as it relates to the NLN CNEA Standards of Accreditation. If continuing

accreditation is denied, a program may initiate the initial accreditation process after a one-year wait period.

Public Notice of Accreditation Status

For programs receiving continuing accreditation from the NLN CNEA the nursing academic unit may use the following public statement:

“The (insert name of the institution and program(s) holds continuing accreditation from the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC 20037.”

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Notification of Accrediting Decisions

NLN CNEA will provide written notice of the following decisions to the following stakeholders:

- to the USDE, the appropriate state licensing or authorizing agency, appropriate accrediting agencies, and the public no later than 30 days after the decision to award pre-accreditation; or award or reaffirm accreditation;
- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program of an initial (non-final) action to deny, withdraw, suspend, revoke, terminate or take any other adverse action upon program pre-accreditation or accreditation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the action within seven business days of receipt to all current and prospective students.
- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program (but no later than 30 days after it reaches the decision), a final decision to deny, withdraw, suspend, revoke, or terminate program pre-accreditation or accreditation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the decision to current and prospective students within seven business days of receipt. NLN CNEA must also make available to the USDE, the appropriate state licensing or authorizing agency, and the public, no later than 60

days after the decision, a brief statement summarizing the reasons for the NLN CNEA's decision and the official comments the program may wish to make about that decision (or evidence that the program has been offered the opportunity to comment).

- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program of a decision of program probation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the action within seven business days of receipt to all current and prospective students.

NLN CNEA will notify the USDE, the appropriate State licensing or authorizing agency, appropriate accrediting agencies, and, upon request, the public if a pre-accredited or an accredited program decides to withdraw voluntarily from pre-accreditation or accreditation, within ten business days of receiving notification from the program, or if a program decides to let its pre-accreditation or accreditation lapse, within ten business days of the day on which pre-accreditation or accreditation lapses.

3-II. Appeal Process

A. APPEALING AN ADVERSE ACTION

A nursing program receiving an adverse action from the NLN CNEA Board of Commissioners has the right to appeal the decision through the NLN CNEA appeal process. An “adverse action” is a denial, withdrawal, suspension, revocation, or termination of accreditation or pre-accreditation. The appeal process provides program personnel with a formal mechanism to challenge the denial or withdrawal of pre-accreditation or accreditation from the program in question. The accreditation status of the program seeking an appeal will remain in effect until completion of the appeal process and a final decision is rendered.

B. GROUNDS FOR APPEAL AND STANDARD OF REVIEW

The NLN CNEA appeal process provides for the presentation of information that supports the request for appeal, along with supporting documentation. The program's right to appeal an adverse action is based solely on the following reasons:

1. the NLN CNEA's policies and procedures were not followed in rendering the accreditation

decision; or

2. the Board of Commissioners' decision was arbitrary and capricious because it was not based upon the NLN CNEA published standards of accreditation; and
3. the Board of Commissioners decision was not supported by substantial evidence in the record of evidence used to reach the decision.

Evidence not previously considered by the Board of Commissioners may not be submitted by the program as part of its appeal of the Board of Commissioner's decision. The program bears the burden of proof in establishing its basis for appeal of the adverse action.

C. PROCEDURES FOR REVIEWING ADVERSE ACTIONS BASED SOLELY ON FAILURE TO COMPLY WITH THE FINANCIAL REQUIREMENTS OF THE STANDARDS

In instances where the only deficiency cited by the NLN CNEA Board of Commissioners in an adverse action is the program's failure to meet standards regarding financial soundness, a program may, prior to appealing a decision, present new financial information to the Commission under the following conditions:

1. The financial information was unavailable to the program until after the decision subject to appeal was made; and
2. The NLN CNEA Board of Commissioners determines that the financial information is significant and bears materially on the financial deficiencies identified by the NLN CNEA.

Based on this information, the Board of Commissioners may determine, without requiring an appeal hearing, to accept the program's new financial information and to reverse its adverse decision. Any determination by the Commission made with respect to the review of new financial information shall not provide a basis for an appeal.

D. PROCEDURE FOR APPEALING OTHER ADVERSE ACTIONS

Step 1. The program's chief nursing academic administrator initiates the appeal process by filing a formal written request with the NLN CNEA executive director for an appeal hearing within ten business days of formal notification of the Board of Commissioners' adverse accreditation action and submitting the non-refundable fees associated with the appeal process. If an appeal is withdrawn, the Board of Commissioners' action is considered final.

Step 2. Within 30 business days after formal notification of the Commissioners' adverse accreditation decision, the program must submit a written statement clearly stating the grounds for appeal of the Board of Commissioners' adverse action and supporting rationale. All objections are to be stated within the context of the NLN CNEA Standards of Accreditation and related quality indicators that originally substantiated the adverse action made by the Board of Commissioners. If a formal written request, associated fees, and written statement are not received by the NLN CNEA within the applicable timelines, the adverse action of the NLN CNEA Board of Commissioners shall be considered final. Information in the appeal must be limited to information that was made available to the Commission at the time it made its adverse decision, except that in instances where the only deficiency cited by the Commission in an adverse action is the program's failure to meet standards regarding financial soundness, as discussed in 3-II.C

Step 3. The executive director of the NLN CNEA confirms that no conflicts of interest exist with any of the members of the Appeals Panel as to their ability to fairly hear and deliberate the program's appeal. The Appeals Panel shall be composed of three nurse educator representatives of the type of program appealing a decision; one practice representative; and one public representative. The Appeal Panel members shall not include current or previous NLN CNEA Board of Commissioners members who rendered the initial adverse reaction, or any member of the on-site evaluation team associated with the program's accreditation review. The Appeal Panel shall adhere to and apply the NLN CNEA appeal policy.

The executive director also contacts the program's chief nursing academic administrator to confirm that no actual or perceived conflict of interest exists with Appeals Panel members from the perspective of the program's personnel. Following contact by the executive director, the program must notify the NLN CNEA executive director within five business days of any perceived conflict of interest with appointed members of the Appeals Panel. If conflicts exist, the process is repeated until acceptable members are found for the Appeals Panel.

Step 4. The appeal hearing will take place within 90 business days after the NLN CNEA receives a program's notice of its intent to appeal. A date and time of the appeal are determined by the NLN CNEA staff in consultation with the program's chief nurse administrator and chair of the Appeal Panel. The aim of an appeals hearing is to present information and data/documents that support the arguments presented in opposition to the Board of Commissioners' adverse accreditation decision. Present at this meeting will be the program's chief nursing academic administrator with legal counsel if desired. Counsel for the Appeals Panel may also be present. At least 30 business days before the date of the hearing, the program and the NLN CNEA must

submit to each other the names and titles of individuals who will appear at the hearing. After receiving the program's written appeal statement, NLN CNEA staff will distribute to the Appeal Panel and program's chief nursing academic administrator copies of the statement and any attached documents, along with copies of the applicable self-study, the on-site evaluators' report, additional program materials considered as part of the Board of Commissioners' decision, and official documentation of Commissioners' decision, at least 20 business days before the appeals hearing.

Step 5. The chief academic nurse administrator and/or the program's legal counsel will be invited to make a statement (no more than 30 minutes in length) that includes the issues and information and data/documents to support issues that directly support the stated arguments. The chief nursing academic administrator and/or the program's legal counsel may address any specific legal issues pertinent to the arguments presented as they directly reflect on the program or parent institution of record. The Appeal Panel members may then ask the program to clarify specific information or data/documents presented (limited to no more than 60 minutes). The chief nursing academic administrator and/or the program's legal counsel have the opportunity for closing remarks. A transcript will be made of appeal hearings with a copy given to the chief nursing academic administrator, if a program pays associated costs of reproduction, with a copy kept in the NLN CNEA confidential files. Recording of the proceedings by the program is not permitted. Appeals hearings are closed to the public and the proceedings of the hearing are confidential.

Step 6. In closed session, the Appeals Panel will deliberate on the arguments made and vote as to affirm, recommend amendment of, or remand, the Board of Commissioners' original decision. The decision made by the Appeals Panel must represent at least two-thirds of the panel members. The chair of the Appeals Panel forwards the decision and supporting rationale in writing to the chair of the NLN CNEA Board of Commissioners within 20 business days of the hearing.

- A. If the Appeals Panel acts to affirm the Board of Commissioners' original decision, the Board of Commissioners' decision becomes final and is not further appealable. The chair of the Board of Commissioners notifies the program's chief nursing academic administrator of the decision to affirm within five business days of the official notification from the Appeals Panel chair.
- B. The Appeals Panel may recommend to the Board of Commissioners amendment of the grounds for the decision, but recommend that the Board of Commissioners sustain the original decision. If the Board of Commissioners then sustains their original decision based on the amendment, the action is final and is not further appealable provided that, if the

amendment is based on grounds that have not been reviewed by an Appeal Panel, a program may appeal that action based only on those grounds not previously reviewed by an Appeals Panel. The chair of the Board of Commissioners notifies the program's chief academic nursing administrator of the decision to amend but to sustain their original decision within five business days.

- C. If the Appeals Panel votes to remand the Board of Commissioners' decision, the Appeal Panel provides the chair of the Board of Commissioners with a letter explaining its decision to remand, specifying issues that the Board of Commissioners needs to address on remand. The chair of the Board of Commissioners notifies the program's chief nursing academic administrator of the decision to remand within five business days of the official notification from the Appeal Panel chair. The Board of Commissioners, after receiving the remand letter and taking into account the Appeal Panel's explanation of its reason to remand the action, must consider the matter at its next regularly scheduled meeting, and inform the program's chief nursing academic administrator accordingly of its decision. If the Board of Commissioners take a subsequent adverse action on remand based on grounds that have not been reviewed by an Appeal Panel, a program may appeal that action based only on those grounds not previously reviewed by an Appeals Panel. If the Board of Commissioners take a subsequent adverse action on remand based on grounds previously reviewed by an Appeal Panel, the adverse action will be final, and the Commission will afford no additional appeal rights.

The Board of Commissioners has the discretion to define the terms and conditions (e.g., date of next evaluation, monitoring, sanction, etc.) of the program's accreditation or candidate status in conjunction with its implementation of the appeal decision. In such cases when accreditation is withdrawn or denied, the program may reapply for candidacy status and pursue initial accreditation after a period of one year.

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3-III. Accrediting Actions and Monitoring Processes

A. TYPES OF ACCREDITING ACTIONS

The NLN CNEA Board of Commissioners makes accreditation decisions based upon the extent to which a program demonstrates compliance with the NLN CNEA Standards of Accreditation. NLN CNEA may not grant pre-accreditation, initial accreditation, or reaffirmation of accreditation to a program if the institution's legal authority to provide postsecondary education has been suspended, revoked, withdrawn, or terminated in the state, or if there is pending or final action to do so; another recognized agency has denied pre-accreditation or accreditation; or if another agency has imposed probation or an equivalent status. NLN CNEA pre-accreditation or accreditation may be granted under certain circumstances if a thorough and reasonable explanation, consistent with its standards, is provided to the USDE Secretary within 30 days of its action, regarding why the action of the other body does not preclude NLN CNEA's grant of accreditation or pre-accreditation. If NLN CNEA learns of an adverse action by another recognized accrediting agency or if a program has been placed on probation or equivalent status by another recognized agency, NLN CNEA will promptly review its accreditation or pre-accreditation of the program to determine if it should also take adverse action or place the program on probation or show cause.

The NLN CNEA Board of Commissioners may grant, continue, deny, or terminate program accreditation using the following accreditation decision categories.

Pre-Accreditation

Nursing programs desiring to seek initial accreditation from NLN CNEA must first be considered eligible and ready to pursue NLN CNEA accreditation. Assessing program readiness through the pre-accreditation candidacy process provides program faculty the opportunity to discern the ability of the program(s) to meet the NLN CNEA Standards of Accreditation. If pre-accreditation candidacy is approved for the program(s) put forth, the nursing academic unit will have a maximum of three years within which to complete the accreditation process and achieve initial accreditation with the NLN CNEA. The NLN CNEA Board of Commissioners may make the following pre-accreditation decisions:

1. Grant pre-accreditation for a maximum period of three years
2. Deny pre-accreditation
3. Terminate pre-accreditation status

4. Grant program request for voluntary withdrawal from pre-accreditation
5. Extend term of pre-accreditation for good cause

Initial Accreditation

Nursing programs holding the NLN CNEA pre-accreditation candidacy status are eligible to apply for initial program accreditation with the NLN CNEA. Initial accreditation may be pursued at any time within the three-year pre-accreditation candidacy window of opportunity but must be timed so that all steps of the accreditation process, including the NLN CNEA Board of Commissioners' action, are completed within the three-year timeline. The NLN CNEA Board of Commissioners may make the following initial accreditation decisions:

1. Grant initial accreditation for a maximum term of six years
2. Grant initial accreditation with quality improvement conditions (not to exceed 18 months)
3. Defer initial accreditation
4. Deny initial accreditation
5. Grant program request for voluntary withdrawal from initial accreditation

Continuing Accreditation (Reaffirmation of accreditation)

Programs holding the NLN CNEA initial accreditation status are eligible to apply for reaffirmation and continuation of their accreditation status prior to the expiration of their initial accreditation terms. Continuing accreditation may be pursued at any time prior to the last year of the initial accreditation term and should be timed for the process, including the Board of Commissioners' action, to be completed prior to the expiration of the term. The NLN CNEA Board of Commissioners may make the following continuing accreditation decisions:

1. Grant continuing accreditation for a maximum of ten years
2. Grant continuing accreditation with quality improvement conditions (not to exceed 18 months)
3. Defer continuing accreditation
4. Deny continuing accreditation
5. Grant program request for voluntary withdrawal from continuing accreditation.

Probationary Accreditation

In the event that the NLN CNEA Board of Commissioners determines there are substantial noncompliance concerns with the NLN CNEA Standards of Accreditation, the Board may

immediately change a program's accreditation status to probationary accreditation. While on probation, the program will be required to submit substantive monitoring reports at designated intervals, and an on-site focused visit may be required.

The Board will provide a written, reasonable time frame within which the program must resolve the identified deficiencies. The time period available for fully meeting the criteria starts on the day that the Board of Commissioners formally takes action to place the program on probation for not fully meeting one or more accreditation standards criteria. If the length of the full-time program is less than one year, the program may have no more than 12 months to fully meet the criteria. If the full-time program is more than one year but less than two years in length, the program may have no more than 18 months to fully meet the criteria. If the full-time program is at least two years in length, the program may have no more than 36 months to fully meet the criteria.

The Board may act to grant a good cause extension to the probationary period if the circumstances requiring the period of noncompliance are beyond the program's control, and if the program has provided documented evidence of substantial progress toward resolution of the identified deficiencies; definitive plans to achieve resolution within a specified timeline subject to approval by the Board; and that the period of noncompliance will not: contribute to the cost of the program without the student's consent; create any undue hardship on, or harm to, students; or compromise the program's academic quality.

If the program is not able to resolve the identified deficiencies and demonstrate compliance with the accreditation standards within the allotted time frame, the Board will act to withdraw accreditation from the program at the next regularly scheduled Board meeting. The accreditation status of the program continues during the probationary period.

The placement of a program on Probationary accreditation status is not appealable and is a matter of public record. Any withdrawal decision that results from a program's failure to address the identified deficiencies or otherwise demonstrate compliance with accreditation standards identified in the Probationary accreditation status is appealable under the applicable policies and procedures of the NLN CNEA.

Show Cause

The NLN CNEA Board of Commissioners may issue a show cause directive when a program has demonstrated continued and unresolved noncompliance concerns with the NLN CNEA Standards of Accreditation; failure to maintain institutional and program eligibility criteria; or failure to comply with the NLN CNEA policies and procedures related to maintaining accreditation. A show cause

directive indicates that the program's accreditation status is in jeopardy of being revoked and requires the program to demonstrate why its accreditation should not be removed. A ***show cause directive may be issued with or without a period of probationary accreditation.***

A show cause notification will specify the reasons for the directive, the information the program is required to provide, and the response deadline, not to exceed 12 months. The show cause time frame will begin immediately upon action by the Board. The Board of Commissioners may shorten the time frame for the show cause period to less than twelve months if findings of noncompliance pose a serious and immediate risk of harm or danger to students or the program has been on probation for a period of time immediately prior to the show cause directive. If after consideration of the program's response to the show cause order the program has not resolved the identified compliance concerns, the Board may take immediate action to withdraw the accreditation of the program. Any withdrawal decision that results from a show cause directive is appealable under the applicable policies and procedures of the NLN CNEA. The required information may be obtained by means of a substantive written report or a focused on-site program evaluation visit. The Board of Commissioners will not consider or approve any substantive changes during a show cause directive unless the program can demonstrate that the changes are necessary to demonstrate compliance with the NLN CNEA Standards of Accreditation or maintain program financial viability.

Failure to address the identified concerns within the specified show cause timeframe will result in adverse action being taken. The Board of Commissioners may vacate the show-cause directive if the program complies and demonstrates with good cause substantial progress in resolving the identified concerns. A show cause directive is not appealable and is a matter of public record.

Timeframe for Compliance with a Standard

When cited for non-compliance with a standard, a program must achieve compliance within the following timeframe:

1. If the length of the full-time program is less than one year, the program may have no more than 12 months to fully meet the criteria.
2. If the full-time program is more than one year but less than two years in length, the program may have no more than 18 months to fully meet the criteria.
3. If the full-time program is at least two years in length, the program may have no more than 36 months to fully meet the criteria.

In its discretion, the NLN CNEA may extend the time frames if the program demonstrates good cause to do so.

In addition, under certain limited circumstances as specified below, a program may request permission to remain out of compliance for period not to exceed three years with a specific standard due to circumstances beyond the program's control. Such circumstances, include:

- 1) a natural disaster or other catastrophic event significantly impacting a program's operations;
- 2) accepting students from another institution that is implementing a teach-out or closing;
- 3) significant and documented local or national economic changes, such as an economic recession or closure of a large local employer;
- 4) changes to state licensure requirements; and
- 5) instructors who do not meet the agency's typical faculty standards, but who are otherwise qualified by education or work experience, to teach courses within a dual or concurrent enrollment program, or career and technical education courses.

The program must present evidence demonstrating that the circumstances requiring the period of noncompliance are beyond the program's control. The program must have resources necessary to achieve compliance with the standard, policy, or procedure within the time frame allotted and must demonstrate to NLN CNEA that the period of noncompliance will not contribute to the cost of the program to students without the students' consent, create any undue hardship on, or harm to, students, or compromise the program's academic quality. Any request for additional time to demonstrate compliance due to circumstances beyond its control as listed in this policy must be made on an annual basis. The decision to grant the request is solely at the discretion of the NLN CNEA and is not automatically given.

B. MONITORING PROCESSES

The NLN CNEA uses a variety of monitoring processes to remain informed of the status of programs that have been granted pre-accreditation and accreditation status. These monitoring processes are designed to collect data from programs on an on-going basis at regularly scheduled intervals, and when indicated in the case of filed complaints, probation and show cause, to trigger additional monitoring conditions as needed. These monitoring processes are briefly outlined below. Programs can find additional information regarding each process contained within this NLN CNEA Policy and Procedure Handbook.

Pre-accredited Programs

- Annual Reports
- Substantive Change Submissions
- Complaints Filed
- Show Cause

Accredited Programs

- Annual Reports
- Substantive Change Submissions
- Mid-cycle Reports
- Complaints Filed
- Probation
- Show Cause

C. FOCUSED SITE VISITS

The NLN CNEA may conduct a focused site visit of accredited programs to determine continued compliance with the NLN CNEA accreditation standards at any time during the program's term of accreditation. A focused site visit may be scheduled as a follow-up to information received through one of the following:

1. Annual report;
2. Substantive change report;
3. Mid-cycle report;
4. Change in program approval status with state regulatory agency;
5. Change in institution's accreditation status; or
6. Complaint investigation.

The program will be notified as to the nature of the visit, the accreditation standard(s) under review, and the length of the visit. The program's accreditation status remains unchanged during

the course of a focused site review and until a decision, based upon the review of the final report, is made by the NLN CNEA Board of Commissioners.

At the discretion of the NLN CNEA executive director and in consultation with the NLN CNEA Board of Commissioners' Executive Committee, the focused site visit may be conducted by a NLN CNEA staff member or an appointed team of program evaluation site visitors. The length of the visit will be dependent upon the scope of the focused site visit but is usually 1 – 2 days. The program is responsible for the fees associated with conducting the focused site visit.

An agenda for the focused site visit will be developed with input from the program's chief academic nurse administrator. The NLN CNEA staff will provide the program with information on how to prepare the program's report which is to be received by the NLN CNEA staff six weeks prior to the scheduled visit.

Following the focused site visit, a report of the observations made during the visit will be prepared and shared with the program. The report may include findings related to additional NLN CNEA accreditation standards that came to light during the focused on-site visit. The program has the option to file a response to the report that is confined to factual corrections; the program's response will be forwarded to the Board of Commissioners along with the focused site report prepared by the site evaluators. At their next scheduled meeting, the Board of Commissioners will consider all submitted documentation and render a decision regarding the program's accreditation status. Actions may include reaffirmation of the program's accreditation status, change in accreditation status, or denial of continuing accreditation.

Denial of continuing accreditation is an appealable action.

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3-IV. Third-party Comments

The NLN CNEA expects and encourages the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumni, and communities as an indication of stakeholder commitment to program quality and integrity. As part of the pre-accreditation and accreditation process, the nursing program is required to communicate information regarding the NLN CNEA accreditation process and established timetable to their defined community of interest. The NLN CNEA staff provides programs with a statement for them

to use during the period of request for third-party comments. The statement may be publicly disseminated by the program using a variety of means including websites, social media, printed newsletters, newspapers, etc.

A. PRE-ACCREDITATION

During the pre-accreditation candidacy review process, the program is required to publicly post a notice 30 days prior to the pre-accreditation application deadline informing students, communities of interest, and other members of the public of their rights and responsibilities to submit comments directly to the NLN CNEA staff regarding the program(s) under review for pre-accreditation. The program must submit evidence of such posting when submitting the pre-accreditation application. The notice is to stay posted until the Board of Commissioners complete their action on the program's pre-accreditation status. Third-party comments will be shared with the NLN CNEA Program Review Committee's Initial Program Application Subcommittee (IPASC) and the Board of Commissioners during the review process. The comments will be shared with the chief academic nurse administrator who will be given an opportunity to respond to the comments if desired. Third-party comments and a program's response are not part of the pre-accreditation application but are considered additions to the application materials submitted for review by the IPASC. Third-party comments must be received by the NLN CNEA no later than 14 days prior to the scheduled IPASC review.

B. INITIAL AND CONTINUING ACCREDITATION

Following the formal written request to pursue initial or continuing accreditation and prior to submitting the self-study report, the program is required to publicly post a notice 30 days prior to submission of the self-study report informing students, communities of interest, and other members of the public of their rights and responsibilities to submit comments directly to the NLN CNEA staff regarding the program(s) under review and the dates of the upcoming on-site program evaluation visit. This notice is to stay posted until the Board of Commissioners completes action on the program's accreditation status. The program must submit evidence of such posting when submitting the self-study report. Third-party comments will be shared with the on-site program evaluation team and considered by the NLN CNEA Program Review Committee and the Board of Commissioners during the review process. The comments will be shared with the chief academic nurse administrator who will be given an opportunity to respond to the comments if

desired. Third-party comments and a program's response are not part of the self-study report but are considered additions to the self-study materials submitted for review. Third-party comments must be received by the NLN CNEA no later than 14 days prior to the on-site program evaluation visit.

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3-V. Distance Education Programs

As defined by the U.S. Department of Education (2020), distance education refers to the use of other media in conjunction with the internet or one-way or two-way video and audio communications methods. Distance education involves regular and substantive interaction which, prior to completion of a course or competency: (1) provides the opportunity for substantive interactions between instructors and students on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course or competency and (2) monitors the student's academic engagement and success and ensuring that an instructor is responsible for proactively engaging in substantive interaction with the student when needed on the basis of such monitoring, or upon request by the student. Substantive interaction engages students in teaching, learning, and assessment, consistent with the content under discussion, and includes at least two of the following: providing direct instruction; assessing or providing feedback on a student's coursework; providing information or responding to questions about the content of a course or competency; facilitating a group discussion regarding the content of a course or competency; or other institutional activities approved by the institution's or program's accrediting agency.

The educational instruction may occur synchronously (in "real-time") or asynchronously (at different times). The NLN CNEA does not accredit correspondence programs.

The NLN CNEA considers any program that delivers 50% or more of the required academic credit hours via one of the forms of technology listed above to be a distance education program. The distance education program must demonstrate compliance with all the NLN CNEA Standards of Accreditation, ensuring the rigor and integrity of the academic program in all practices and policies and have institutional accreditor approval for distance delivery of the program.

Student Identity Verification: It is an expectation that all programs engaging in the use of distance education technology to deliver instruction will have processes in place that allow for the identity verification of any student registering in a distance education program or course. The program will be expected to document the processes and means by which they verify student identity and notify students of any projected additional student charges associated with the verification at the time of registration or enrollment.

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3-VI. Voluntary Withdrawal of Program from Pre-Accreditation and Accreditation

Programs wishing to voluntarily withdraw from pre-accreditation or accreditation with the NLN CNEA must provide the NLN CNEA with written notice. The written notice, signed by the institutional chief executive officer and the program chief academic nurse administrator, should be sent to the attention of the executive director of the NLN CNEA, specifying the intended date of withdrawal, as long as the date is within the program's granted accreditation term.

Upon receipt of the notification, the NLN CNEA staff will acknowledge the program's voluntary withdrawal from the NLN CNEA pre-accreditation or accreditation and remove the program from the NLN CNEA's public listing of pre-accredited and accredited programs as of the date specified. Additionally, the NLN CNEA will post on the NLN CNEA website a notice of the effective date of the program's voluntary withdrawal and send written correspondence to all relevant regulatory and other accrediting agencies.

Programs voluntarily withdrawing from the NLN CNEA pre-accreditation and accreditation are required to remove all statements and identifying emblems related to the NLN CNEA pre-accreditation or accreditation status of the program.

The NLN CNEA will also consider the program's pre-accreditation or accreditation status to be voluntarily withdrawn in any of the following situations, as appropriate for the respective status:

- failure to notify the NLN CNEA of the intent to complete the initial accreditation review process within the allotted three-year pre-accreditation term;
- failure to schedule an on-site program evaluation visit for the purposes of reaffirmation of the program's accreditation status with the NLN CNEA;

- failure to participate in any requested follow-up site visit(s);
- failure to submit any required or requested written reports: annual reports, self-study reports, mid-cycle reports, follow-up reports; and/or
- failure to pay annual accreditation fees or fees associated with the accreditation review process by the stipulated due date.

The NLN CNEA will provide written notice to the program within 30 business days of failure to address any of the above situations stating that the program is considered to be voluntarily withdrawn from the NLN CNEA pre-accreditation or accreditation status.

Programs that have voluntarily withdrawn from the NLN CNEA pre-accreditation or accreditation status may initiate a pre-accreditation application at any time following the program's removal from the NLN CNEA's list of pre-accredited or accredited programs.

Approved: June 2017

Revised: December 2022

3-VII - Teach-Out Plans and Agreements

A Teach-Out Plan is a written plan developed by a program that provides for the equitable treatment of students if the program ceases to operate or plans to cease to operate before all enrolled students have completed their program of study.

A Teach-Out Agreement is a written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if the institution ceases to operate or plans to cease operations before all enrolled students have completed their program of study. A Teach-Out Agreement must include:

- A complete list of students currently enrolled in the program and the program requirements each student has completed;
- A plan to provide all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on State refund policies;
- A record retention plan to be provided to all enrolled students that delineates the final disposition of teach-out records (e.g., student transcripts, billing, financial aid records);

- Information on the number and types of credits the teach-out institution is willing to accept prior to the student's enrollment; and
- A clear statement to students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out institution

The NLN CNEA requires a program to submit a Teach-Out Plan, and if practicable, a Teach-Out Agreement within [90 days] of the occurrence of any of the following events:

- When a program is in the pre-accreditation phase of accreditation;
- When a program is placed on probation or show cause, or voluntarily withdraws accreditation;
- When NLN CNEA acts to withdraw, terminate or suspend the accreditation or pre-accreditation of the program; or
- When NLN CNEA otherwise determines that the submission of a Teach-Out Plan is warranted.

SECTION THREE Revised: December 2022

SECTION FOUR – PUBLIC NOTIFICATIONS

4-I. Public Disclosure of Program Information and Accreditation

The NLN CNEA makes available the public disclosure of the following program information and accreditation policies and procedures:

1. Name, address, and nursing program administrator of each program pre-accredited or accredited by the NLN CNEA;
2. Pre-accreditation and accreditation status of all programs as granted by the NLN CNEA Board of Commissioners, including the date of the next site visit cycle (Fall or Spring);
3. Policies and procedures that govern the pre-accreditation and accreditation process;
4. Standards of Accreditation, including glossary of terms; and
5. Policies that govern the decisions to grant, reaffirm, defer, deny, modify, or terminate the pre-accreditation or accreditation status of programs.

This public information is maintained on the NLN CNEA website through listed directories, the NLN CNEA Accreditation Handbook, and the NLN CNEA Standards of Accreditation document.

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Revised: December 2022

4-II. Public Disclosure of the NLN CNEA Decision-Making Bodies and Senior Administrative Staff

The NLN CNEA maintains the public disclosure of the following information on all of the members of its decision-making bodies and its senior administrative staff:

1. Names and professional credentials;
2. Relevant employment and/or organizational affiliations; and
3. Dates of appointed or elected terms of members of decision-making bodies.

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Revised: December 2022

4-III. Use of the NLN CNEA Accreditation Logo

Programs accredited by the NLN CNEA may opt to use the NLN CNEA accreditation logo that is made available to all NLN CNEA accredited programs. Programs choosing to display the NLN CNEA accreditation logo must adhere to the following guidelines:

1. The program may only display the NLN CNEA following formal notification of the NLN CNEA Board of Commissioners' action conferring the accreditation status of the program;
2. Pre-accredited programs may not display the NLN CNEA accreditation logo;
3. The NLN CNEA accreditation logo may not be altered in any fashion;
4. Nursing academic units with multiple nursing programs must clearly identify the programs that have been granted NLN CNEA accreditation and avoid any use of the logo by programs not accredited by NLN CNEA; and
5. The program must immediately remove the NLN CNEA logo from the program's website or any published documents upon the voluntary withdrawal from the NLN CNEA accreditation, the NLN CNEA revocation of the program's accreditation, or at the request of the NLN CNEA.

Approved: August 2017

Revised: December 2022

4-IV. Public Notification Regarding Program Accreditation and Other Program Information

A. ACCURACY OF DISCLOSURE OF ACCREDITATION STATUS AND OTHER PROGRAM INFORMATION

To uphold the core value of integrity in the accreditation process, the NLN CNEA requires programs that choose to disclose their NLN CNEA pre-accreditation or accreditation status to do so accurately and completely wherever published (website, directories, catalogs, handbooks, marketing materials, etc.).

Programs choosing to publicly display a notice of the program's pre-accreditation or accreditation status must include the specific type of program accredited, the specific accreditation status, and the full name, address, and phone number of the NLN CNEA as follows:

National League for Nursing Commission for Nursing Education Accreditation, 2600 Virginia Avenue, NW, Washington, DC 20037, 202-909-2487.

Programs that choose to make public any statements regarding the NLN CNEA reports (e.g., written team reports or final accreditation actions) must accurately state all findings associated with the report, including strengths and areas cited for quality improvement or noncompliance.

B. PUBLIC CORRECTION OF INACCURATE OR MISLEADING PROGRAM INFORMATION

Programs that publicly provide inaccurate or misleading information about their pre-accreditation or accreditation status, their on-site program evaluation, or Board actions taken regarding their program's accreditation status risk losing their accreditation status. If the program fails to correct misleading or inaccurate statements regarding the program's accreditation status, on-site program evaluation or board actions taken regarding the program's accreditation status, the NLN CNEA will issue a public correction on the NLN CNEA website.

Approved: June 2019

Revised: December 2022

SECTION FOUR Revised: December 2022

SECTION FIVE – PROGRAM REPORTING RESPONSIBILITIES

5-I. Substantive Changes

Substantive Changes

Programs that have been pre-accredited or accredited by the NLN CNEA are responsible for notifying the NLN CNEA when substantive changes are implemented within the parent institution, nursing academic unit, or nursing program that have the potential to impact the program's ability to comply with the standards of accreditation or that have an organizational, fiscal, curricular, or human resource impact on the nursing program outcomes and quality. Upon notification of a substantive change, the NLN CNEA reserves the right to request additional information regarding the reported change and/or conduct additional data gathering such as a focused on-site program evaluation visit to determine the impact of the substantive change on program outcomes and ongoing compliance with accreditation standards.

Drawing in part upon the U.S. Department of Education definition of a substantive change (34 CFR 602.22), the NLN CNEA defines the following as substantive changes and provides a reporting timeline the program is expected to follow.

Program representatives must submit the following substantive change notifications using the change form found on the NLN CNEA website (<https://cnea.nln.org/resources>) **at least 30 days before the implementation of the change:**

1. Change in delivery method or delivery location of the program;
2. The addition of program(s) that represents a significant departure from the existing offerings or educational programs such as a program track that differs from those that were offered or used when the program was last evaluated by NLN CNEA;
3. The addition, revision, or deletion of academic courses resulting in significant curricular revision as depicted by a change in program curricular outcomes;
4. The addition of graduate programs by an institution that previously offered only undergraduate programs or certificates;
5. A substantial increase or decrease in credit or clock hours within a program which increases or decreases the length of time to program completion;
6. A change in the way the institution measures student progress (e.g., clock or credit hours, semesters, trimesters, or quarters).

Program representatives must submit the following substantive change notifications using the change form found on the NLN CNEA website (<https://cnea.nln.org/resources>) **at the time of occurrence and no later than 30 days after the change has occurred:**

1. Any change regarding the institution or program's established mission or objectives;
2. Any change in the legal status, form of control, or ownership of the institution or program;
3. Any change in regulatory approval/recognition status of the institution or program or any actions taken by a regulatory agency such as the state board of nursing;
4. Any change in the accreditation status of the institution, or the accreditation awarded by any specialized nursing accreditor;
5. The establishment of any branch campuses or off-campus instructional sites by which 50% or more of the program is delivered;
6. The addition of one or more distance education programs resulting in a degree or certificate, or the conversion of an existing degree or certificate granting program to distance education;
7. The addition, suspension, or closure of a program;
8. Any change in the organizational structure of the institution or program that affects the authority of the chief academic nurse administrator;
9. The acquisition of any other institution, program, or location or branch campus of another institution;
10. Any change in institutional contact information (email addresses, website address, phone numbers);
11. A change in the chief academic nurse administrator (permanent or temporary).

Responses to Substantive Changes

Upon receipt of the substantive change notice, the staff will review the materials submitted by the program to determine if the submission is complete and ready for review. The program will be contacted if additional information is needed. The program may need to provide clarification or additional supportive documentation about the change. The substantive change notice will be reviewed by the NLN CNEA Board of Commissioners' Executive Committee for review and action. The NLN CNEA Board of Commissioners' Executive Committee will make one of the following decisions:

1. Accepting the substantive change;
2. Referral to the NLN CNEA Board of Commissioners for review and action.

Any substantive change advanced to the NLN CNEA Board of Commissioners will undergo review

and one of the following decisions will be made.

1. Accepting the substantive change;
2. Requesting additional data and/or a focused on-site program evaluation visit;
3. Stipulating additional program reporting requirements to address continued compliance with the NLN CNEA Standards of Accreditation;
4. Issuing a show cause directive which could result in an adverse action. An adverse action is appealable.

If a substantive change is accepted, the effective date by which the change is included in the program's current accreditation status will be specified in the approval letter and will not be retroactive. The NLN CNEA Board of Commissioners has the final decision-making authority regarding the outcomes of all substantive change reviews. The denial of a substantive change is not appealable.

The NLN CNEA will retain electronic records of decisions related to substantive changes, including all correspondence significantly related to those decisions, as long as the program is pre-accredited or accredited with the NLN CNEA.

Reporting Requirements

It is the responsibility of the program to report changes to the NLN CNEA within the specified timelines. Failure to notify the NLN CNEA of substantive changes within the specified timelines may jeopardize the program's accreditation status.

5-II. NLN CNEA Annual Report

The NLN CNEA requires all pre-accredited and accredited nursing programs to submit an annual report, typically due in January of each calendar year. The data that are collected and reviewed through the annual reporting process is an element of the NLN CNEA's emphasis on continuous quality improvement and a means by which the NLN CNEA fulfills its responsibility to monitor programs on an on-going basis.

Data gathered through the annual report will be reviewed by the NLN CNEA staff for completeness and forwarded to the Evaluation Committee. After the review by the Evaluation Committee, the report will be sent to the Program Review Committee for review and recommendation and then to the NLN CNEA Board of Commissioners' Executive Committee. Any additional follow-up action

will be as determined by the NLN CNEA Board of Commissioners' Executive Committee. Actions that the NLN CNEA Board of Commissioners' Executive Committee can take in response to a program's submitted annual report include an acceptance of the annual report as written; a request for additional clarification of data related to areas of concern to be submitted within a stipulated time frame; or notification to the program that the annual report is being forwarded to the Board of Commissioners for further review and deliberation. Additional actions to be taken by the Board of Commissioners could include but is not limited to a request for additional compliance reports from the program or, in the case of NLN CNEA accredited programs, a scheduled focus on-site program evaluation visit to further assess the program's continued compliance with the NLN CNEA Standards for Accreditation.

Data collected through the NLN CNEA annual report may be reported in aggregate to interested stakeholders, including the U.S. Department of Education and other appropriate regulatory bodies. Program data that are collected through the NLN CNEA annual report include, but are not limited to, the following:

- Program outcome data: NCLEX or certification pass rates; completion rates; number of graduates; and employment rates;
- Program resources data;
- Faculty demographics and credentials;
- Faculty vacancies, resignations, and retirements;
- Student applicant and enrollment numbers;
- Student demographics;
- Distance education modalities;
- Number of student formal complaints;
- Substantive changes.

Failing to submit the NLN CNEA annual report may lead to action by the NLN CNEA Board of Commissioners to change the accreditation status of the program.

Approved: March 2017

Revised: December 2022

5-III. Change in Accreditation Status of Governing Institution

The NLN CNEA requires that the governing institution of any nursing program pre-accredited or accredited by the NLN CNEA be institutionally accredited by a U.S. Department of Education recognized institutional accrediting body with the gate-keeping functions associated with Title IV of the Higher Education Act. If a governing institution of a program pre-accredited or accredited by the NLN CNEA experiences a change in its approval status with its regulatory agency, the program is required to submit a substantive change notification (see Substantive Change policy 5 - I for further details). The notification is to include a copy of the notification from the institution's accrediting agency and any relevant plans of correction to regain full approval status, as well as a detailed explanation as to how the action will impact the nursing program. The notification will be shared with the NLN CNEA Board of Commissioners' Executive Committee for determination of further follow-up action on behalf of the NLN CNEA. Such follow-up actions may include the request for additional information and a focused site visit. Following further review by the NLN CNEA Board of Commissioners, the pre-accreditation or accreditation status of the program may be modified.

Approved: August 2017

Revised: December 2022

5-IV. Change in Program Status with State Regulatory Agencies or Other Nursing Accrediting Agencies

If a program pre-accredited or accredited by the NLN CNEA experiences a change in its approval status with its state regulatory agency or other nursing accrediting agency, the program is required to submit a substantive change notification (see Substantive Change policy 5 – I for further details). The notification is to include a copy of the notification from the state regulatory agency or other nursing accrediting agency and any relevant plans of correction. The notification will be shared with the NLN CNEA Board of Commissioners' Executive Committee for determination of further follow-up action on behalf of the NLN CNEA. Such follow-up actions may include the request for additional information and a focused site visit. Following further review by the NLN CNEA Board of Commissioners, the pre-accreditation or accreditation status of the program may be modified.

Approved: August 2017

Revised: December 2022

5-V. NLN CNEA Mid-Cycle Report

As one aspect of its monitoring processes, the NLN CNEA requires all accredited nursing programs to submit a mid-cycle report, typically due in January of the designated calendar year.

The mid-cycle report is scheduled to fall mid-way through the program's accreditation term (e.g., year three of an initial six-year accreditation term; year five of a ten-year term). In years in which programs have a mid-cycle report due, the mid-cycle report will be submitted in lieu of the program's annual report. The data that are collected and reviewed through the mid-cycle reporting process is an element of the NLN CNEA's emphasis on continuous quality improvement and a means by which the NLN CNEA fulfills its responsibility to monitor programs on an on-going basis. Data gathered through the mid-cycle report will be reviewed by the NLN CNEA staff for completeness and forwarded to the Mid-Cycle Review Subcommittee for review. After their review, an analysis of the data will be forwarded to the Program Review Committee and their recommendation will be sent to the NLN CNEA Board of Commissioners' Executive Committee. Any additional follow-up action will be as determined by the NLN CNEA Board of Commissioners' Executive Committee. Actions that the NLN CNEA Board of Commissioners' Executive Committee can take in response to a program's submitted mid-cycle report include but are not limited to an acceptance of the report as written; a request for additional clarification of data related to areas of concern to be submitted within a stipulated time frame; or notification to the program that the mid-cycle report is being forwarded to the Board of Commissioners for further review and deliberation. Additional actions to be taken by the Board of Commissioners could include but are not limited to a request for additional compliance reports from the program or a scheduled focused on-site program evaluation visit to further assess the program's continued compliance with NLN CNEA Standards for Accreditation.

The mid-cycle report is designed to document the program's ability to continue to meet the NLN CNEA Standards of Accreditation. The NLN CNEA will provide programs with report templates to guide the preparation of the mid-cycle report. Program data that are collected through the NLN CNEA mid-cycle report include, but are not limited to, the following:

- Program outcome data: NCLEX and/or certification pass rates; completion rates; number of graduates; and employment rates (last 3 years);

- Students, faculty, and employer satisfaction;
- Systematic program evaluation plan;
- Program resources data;
- Faculty demographics and credentials;
- Faculty demographics;
- Student enrollment number trends;
- Student demographics;
- Distance education modalities;
- Number of student formal complaints;
- Substantive changes;
- Written executive summary addressing each standard and related quality indicators;
- Evidence demonstrating that continuous quality improvement processes are in use to meet and/or maintain compliance with the NLN CNEA Standards for Accreditation and each standard's quality indicators.

Data collected through the NLN CNEA mid-cycle report may be reported in aggregate to interested stakeholders, including the U.S. Department of Education and other appropriate regulatory bodies.

Failing to submit the NLN CNEA mid-cycle report may lead to action by the NLN CNEA Board of Commissioners to change the accreditation status of the program.

Approved: June 2019

Revised: December 2022

SECTION FIVE Revised: December 2022

SECTION SIX – NLN CNEA REPORTING RESPONSIBILITIES

6-I. Public Notification of Board of Commissioners' Pre-Accreditation and Accreditation Decisions

In accordance with U.S. Department of Education § 602.26 (a-e) the NLN CNEA has a responsibility to notify relevant institutions and agencies and make public all final pre-accreditation and accreditation decisions on programs that have come before its Board of Commissioners for action. In addition to the program's chief academic nurse administrator and the institution's chief executive officer, the following stakeholders in the accreditation process will be notified in writing of all final Board pre-accreditation and accreditation actions:

- General public;
- State regulatory agencies (e.g., State Board(s) of Nursing, etc.) of the reviewed program;
- Accrediting Agencies of governing institution and program;
- U.S. Department of Education, Secretary of Education;
- On-site program evaluators of programs reviewed for initial or continuing accreditation.

A. NOTIFICATION TIMELINES FOR PRE-ACCREDITATION AND ACCREDITATION DECISIONS

NLN CNEA will provide written notice of the following decisions to the following stakeholders:

- to the USDE, the appropriate state licensing or authorizing agency, appropriate accrediting agencies, and the public no later than 30 days after the decision to award pre-accreditation; or award or reaffirm accreditation;
- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program of an initial (non-final) action to deny, withdraw, suspend, revoke, terminate or take any other adverse action upon program pre-accreditation or accreditation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the action within seven business days of receipt to all current and prospective students.

- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program (but no later than 30 days after it reaches the decision), a final decision to deny, withdraw, suspend, revoke, or terminate program pre-accreditation or accreditation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the decision to current and prospective students within seven business days of receipt and make available to the USDE, the appropriate state licensing or authorizing agency, and the public, no later than 60 days after the decision, a brief statement summarizing the reasons for the NLN CNEA's decision and the official comments the program may wish to make about that decision (or evidence that the program has been offered the opportunity to comment);
- to the USDE, the appropriate state licensing or authorizing agency, and appropriate accrediting agencies, at the same time it notifies the program of a decision of program probation. NLN CNEA will provide written notice to the public of these decisions within one business day of its notice to the program. The program is required to disclose the action within seven business days of receipt to all current and prospective students.

Voluntary Withdrawal or Lapse from Pre-accreditation or Accreditation. Upon notification of a program's voluntary withdrawal from pre-accreditation or accreditation or the lapsing of the program's pre-accreditation or accreditation status, the NLN CNEA will disseminate written notice of the action to all listed entities (as outlined above) within 10 business days of receiving notification of the withdrawal or within 10 business days of the lapse of status. Written correspondence with institutions and agencies and public notification via the NLN CNEA website are the means used to disseminate this information.

B. NOTIFICATION TIMELINE FOR DECISIONS IN RESPONSE TO SUBSTANTIVE CHANGES

The NLN CNEA will notify the relevant state regulatory bodies and accrediting agencies in writing of any Board of Commissioner actions taken in response to submitted substantive change notifications that impact or have the potential to impact the pre-accreditation or accreditation status of the program. Such notification will be sent no later than 30 days after the Board of Commissioners' action.

C. REPORTING DISCLOSURE

The NLN CNEA may make program records available to the U.S. Department of Education, Secretary of Education, or the relevant state regulatory agencies as appropriate. The NLN CNEA reserves the right to redact confidential information from the records.

Approved: May 2017

Revised: December 2022

6-II. Program Records

The NLN CNEA maintains an official record of all programs coming before the NLN CNEA for pre-accreditation and accreditation. The program records are maintained electronically in a secure accreditation management system (AMS) and are accessible only by NLN CNEA staff. Records may be shared, as appropriate for conducting agency business, with NLN CNEA Board of Commissioners and committees responsible for conducting program review.

The NLN CNEA maintains the following records for all pre-accredited programs:

- Pre-accreditation application;
- Initial Program Application Subcommittee recommendation letters;
- Board of Commissioners action on pre-accreditation status letters;
- Third-party comments;
- Received formal complaints against the program and NLN CNEA's response;
- Annual reports;
- Substantive change reports and NLN CNEA Board of Commissioners/Executive Committee responses;
- Official correspondence regarding substantive matters;
- Regulatory agency or other accrediting body correspondence pertaining to the program;
- Appeal records;

For accredited programs, the NLN CNEA maintains the following records *in addition* to all of the documents listed above:

- Self-study reports;

- Written on-site program evaluation team reports;
- Program responses to on-site program evaluation team reports;
- Program Review Committee report;
- Board of Commissioner action on accreditation status letters;
- Focused site visit reports;
- Reports of special reviews conducted between regular reviews;
- Mid-cycle reviews.

All records are maintained confidentially in a secured electronic accreditation management system (AMS). All pre-accreditation and accreditation materials (pre-accreditation applications, self-study reports, written team reports and program response, review recommendations, substantive changes, and mid-cycle reviews) are maintained through the last full pre-accreditation or accreditation cycle.

All correspondence regarding decisions made including decision letters, substantive changes, compliance concerns and formal complaints are maintained in the program's records are kept throughout the program's affiliation with NLN CNEA.

Approved: July 2017

Revised: April 2019

Revised: December 2022

6-III. Public Review of Proposed Policy Changes

The NLN CNEA maintains a schedule of systematic review for the standards of accreditation and all policies impacting the accreditation services provided by the NLN CNEA. This systematic review is conducted by the NLN CNEA Policies and Procedures Committee in accordance with the NLN CNEA Bylaws. All new policies and policies undergoing revision are subjected to a 30-day public review, typically occurring during February-March of the calendar year. All communities of interest have the opportunity to review the proposed policy changes and provide feedback to the NLN CNEA. Non-substantive changes such as editorial or layout changes may be made by the NLN CNEA without gathering public input.

SECTION SIX Revised: December 2022

SECTION SEVEN – COMPLAINT POLICY

7-I. Complaint Policy

In compliance with USDE regulation 602.23 (c), the NLN CNEA evaluates complaints against a pre-accredited or accredited program, the NLN CNEA Board of Commissioners and other NLN CNEA volunteer members, and the agency staff if the complaints received are related to the NLN CNEA's established accreditation standards and/or policies and procedures. It is not within the authority of the NLN CNEA Board of Commissioners to review and adjudicate complaints that constitute individual grievances against a program. Individuals are encouraged to utilize the grievance policy and due process that is accorded them by institutional and program policies for such individualized circumstances. Formal or informal complaints involving potential harm to an individual or group, e.g., faculty, students, patients, NLN CNEA staff, or Board of Commissioners, will be forwarded to an appropriate authority upon receipt of the complaint.

It is the policy of the NLN CNEA to respond to complaints in a manner that is timely, fair, and equitable using the following procedures. In order to ensure that potential noncompliance issues are addressed in a timely manner, complaints must be filed within a one-year time frame of the occurrence of the potential noncompliant issue. In the case of a complaint regarding an on-site program evaluator, the complaint must be filed within 30 days of the on-site program evaluation visit.

A. COMPLAINTS REGARDING A PRE-ACCREDITED OR ACCREDITED PROGRAM

1. NLN CNEA will only address written and signed complaints. Those intending to file a complaint should contact the executive director of the NLN CNEA and request a copy of the official form used to file complaints.
2. All complaints are to be submitted to the NLN CNEA executive director for initial review. The executive director will notify the complainant of receipt of the completed and signed complaint form within ten business days.
3. The executive director or designee will review the written complaint and make an initial determination within ten business days of acknowledging receipt of the complaint of whether or not the complaint is related to the NLN CNEA's accreditation standards and/or

policies. If the complaint is of the nature of an individualized grievance or concerning a matter that does not have relevance to the NLN CNEA's established accreditation standards and/or policies and procedures, the complainant will be notified that it is not within the NLN CNEA's purview to address the complaint, and the complaint file will be considered to be closed. If it is determined the complaint has relevance to the NLN CNEA accreditation standards and/or policies and procedures, the complainant will be notified that the complaint is being taken under further consideration by the Executive Committee of the NLN CNEA Board of Commissioners.

4. The Executive Committee of the NLN CNEA Board of Commissioners will be notified by the NLN CNEA executive director within ten business days of the receipt of a formally filed complaint that has relevance to the NLN CNEA accreditation standards and/or policies and procedures. The NLN CNEA Board of Commissioners' Executive Committee will take the complaint under consideration and simultaneously forward the complaint in its entirety to the program.
5. As part of its review process, the NLN CNEA Board of Commissioners' Executive Committee will forward the complaint in its entirety to the program's chief academic nurse administrator and request a written response to the issues raised in the complaint. The program will have 30 days from receipt of the request within which to provide a reply. The NLN CNEA Board of Commissioners' Executive Committee will review the program's response within 30 days of receiving it.
6. If upon review of the program's response to the complaint, the NLN CNEA Board of Commissioners' Executive Committee considers the matter to be satisfactorily resolved by the program, the complainant will be notified within 15 business days that the complaint is resolved and considered to be closed. The program will receive a copy of the complainant notification. If the program's response does not satisfactorily address the complaint, the NLN CNEA Board of Commissioners' Executive Committee will recommend further steps be taken by the NLN CNEA Board of Commissioners, which can include the following: 1) request for additional information from the program's chief academic nurse administrator and/or 2) initiation of a focused site visit to further evaluate the matter addressed in the complaint. Any further actions on the part of the NLN CNEA will be initiated within the earliest reasonable timeline, not to exceed 90 days from the time the NLN CNEA Board of Commissioners' Executive Committee recommends further action.

7. The executive director of the NLN CNEA will notify the complainant and program in writing of the NLN CNEA Board of Commissioners' final action on the complaint.
8. All complaints and accompanying documentation filed against pre-accredited or accredited programs will be retained in the NLN CNEA records for a minimum of one accreditation cycle.

B. COMPLAINTS REGARDING THE NLN CNEA BOARD OF COMMISSIONERS, VOLUNTEERS, AND STAFF

1. NLN CNEA will only address written and signed complaints. Those intending to file a complaint should contact the executive director of the NLN CNEA and request a copy of the official form used to file complaints. In the event of a complaint regarding the NLN CNEA executive director, those intending to file a complaint should contact the NLN President and CEO who will communicate the intent to the NLN CNEA chair of the Board of Commissioners.
2. All complaints regarding NLN CNEA Commissioners, volunteers and staff are to be submitted to the NLN CNEA executive director for initial review. The NLN CNEA executive director will notify the complainant of receipt of the completed and signed complaint form within 10 business days. Complaints regarding the NLN CNEA executive director are to be submitted to the NLN President and CEO who will communicate the intent to the NLN CNEA chair of the Board of Commissioners. The NLN President and CEO will notify the complainant of receipt of the completed and signed complaint form within ten business days.
3. The executive director will review the written complaint and make an initial determination within ten business days of acknowledging receipt of the complaint of whether or not the complaint is related to the NLN CNEA's accreditation standards and/or policies. If the complaint is of the nature of an individualized grievance or concerning a matter that does not have relevance to the NLN CNEA's established accreditation standards and/or policies and procedures, the complainant will be notified that it is not within the NLN CNEA's purview to address the complaint, and the complaint file will be considered to be closed. If it is determined the complaint has relevance to the NLN CNEA accreditation standards and/or policies and procedures, the complainant will be notified that the complaint is being taken under further consideration by the Executive Committee of the NLN CNEA Board of

Commissioners in the case of complaints against NLN CNEA Commissioners and volunteers, and the executive director if the complaint concerns NLN CNEA staff. In the event the complaint involves the NLN CNEA executive director, the NLN President and CEO will follow this same process in coordination with the NLN CNEA chair of the Board of Commissioners.

4. The Executive Committee of the NLN CNEA Board of Commissioners will be notified by the NLN CNEA executive director within ten business days of the receipt of a formally filed complaint that has relevance to the NLN CNEA accreditation standards and/or policies and procedures. The NLN CNEA Board of Commissioners' Executive Committee or executive director (in the case of staff) will take the complaint under consideration and simultaneously forward the complaint in its entirety to the referenced CNEA Commissioner, volunteer, or staff. In the event of a filed complaint against the NLN CNEA executive director, the NLN President and CEO will take the same steps in coordination with the NLN CNEA chair of the Board of Commissioners.
5. As part of its review process, the NLN CNEA Board of Commissioners' Executive Committee or executive director (in the case of staff) will forward the complaint in its entirety to the referenced NLN CNEA Commissioner, volunteer, or staff, and request a written response to the issues raised in the complaint. The individual(s) will have 30 days from receipt of the request within which to provide a reply. The NLN CNEA Board of Commissioners' Executive Committee or executive director, as appropriate, will review the individual's response within 30 days of receiving it. In the event of a filed complaint against the NLN CNEA executive director, the NLN President and CEO will take the same steps in coordination with the NLN CNEA chair of the Board of Commissioners' Executive Committee will review the program's response within 30 days of receiving it.
6. If upon review of the named individual's response to the complaint, the NLN CNEA Board of Commissioners' Executive Committee or executive director, as appropriate, considers the matter to be satisfactory resolved, the complainant will be notified within 15 business days that the complaint is resolved and considered to be closed. The individual(s) involved will receive a copy of the complainant notification. If the named individual's response does not satisfactorily address the complaint, the NLN CNEA Board of Commissioners' Executive Committee or executive director, as appropriate, will recommend further steps be taken which can include the following in the case of the NLN CNEA commissioners or volunteers: 1) request for additional information from the complainant and/or 2) removal

of the Commissioner or volunteer from their volunteer position. Any further actions on the part of the NLN CNEA Executive Committee will be initiated within the earliest reasonable timeline, not to exceed 90 days from the time the Executive Committee recommends further action. In the case of the NLN CNEA staff, the executive director will follow applicable NLN personnel policies. In the case of the NLN CNEA executive director, the NLN President and CEO will follow the applicable NLN personnel policies in coordination with the NLN CNEA chair of the Board of Commissioners.

7. The executive director of the NLN CNEA will notify the complainant and individual(s) in writing of the final action on the complaint. The NLN President and CEO, in coordination with the chair of the NLN CNEA Board of Commissioners, will follow this same process in complaints involving the NLN CNEA executive director.
8. All complaints and accompanying documentation filed against the NLN CNEA commissioners or volunteers will be retained in the NLN CNEA records for a minimum of one USDE recognition cycle. All complaints involving the NLN CNEA staff will be retained in the appropriate personnel records in accordance with the NLN's personnel policies.

Approved: December 2016

Revised: December 2022

SECTION SEVEN Revised: December 2022

SECTION 8 – OTHER POLICIES

8-I. Written Team Report and Program Response

Upon completion of the on-site program evaluation visit, the team produces a written team report documenting the findings of the team based upon evidence gathered through review of the self-study report, on-site interviews and observations, and review of on-site documents and resources. The written report addresses the evidence found to document the program's compliance with the NLN CNEA accreditation standards and quality indicators. A report template, outlining the NLN CNEA accreditation standards and quality indicators, is provided to the team. Supporting evidence for the team's findings on each program reviewed must be cited in the report. The team has three options for indicating their findings for each standard and quality indicator: 1) evidence exists to indicate compliance; 2) evidence exists to indicate compliance with quality improvement conditions noted; and 3) evidence does not exist to indicate compliance. The team documents their findings for each individual program reviewed. It is not the team's responsibility to form a recommendation about the accreditation of the program.

The team leader is responsible for compiling the final written team report and submitting it to the NLN CNEA staff within two weeks of finalizing the site visit. The NLN CNEA staff reviews the report for style, clarity, and consistency in format. Upon completion of this process, the written team report is forwarded to the chief academic nurse administrator for review and response.

The chief academic nurse administrator (CANA) can make responses to the report regarding factual corrections and clarifications. The CANA has a maximum of ten business days to complete the review and provide a response. The program's response is returned to the NLN CNEA staff for inclusion with the written team report which is then forwarded to the Program Review Committee in the next step of the review process. Following the review by the Program Review Committee, the written report and program response is also forwarded to the Board of Commissioners.

Approved: June 2019

Revised: December 2022

8-II. Policy on Qualifications for Serving on the PRC, IPASC, Mid-cycle Review Subcommittee, and Appeal Panel

The chair of the NLN CNEA Board of Commissioners is responsible for appointing members to the Program Review Committee (PRC) and its two subcommittees, Initial Application Subcommittee (IPASC) and Mid-cycle Review Subcommittee; and the pool of potential members of the Appeal Panel. The Board of Commissioners must approve the chair's recommendations.

The following set of criteria are used to guide the appointment of PRC, IPASC, Mid-cycle Review Subcommittee, and Appeals Panel pool members representing nurse educators or practice. Potential appointees must:

1. Hold a graduate degree in nursing and an active, unencumbered nursing license;
2. Have a minimum of five years of experience in nursing education or nursing practice;
3. Possess current knowledge of higher education, nursing education and/or practice issues;
4. Have experience with program evaluation and the application of continuous quality improvement to the accreditation process;
5. Provide evidence of contributions to the nursing profession through scholarship, practice and professional service;
6. Have experience serving on institutional accreditation agency advisory boards, commissions, or review panels.

Potential appointees will be asked to submit their curriculum vitae or resume, and a brief statement of accomplishments which demonstrates their achievement of the above criteria for review by the NLN CNEA Board of Commissioners. Appointees may not serve any other nursing accrediting body while affiliated with the NLN CNEA.

Approved: June 2019

Revised: December 2022

8-III. Virtual Site Evaluation Visit Policy

In response to the COVID-19 pandemic and in accordance with the U.S. Department of Education's (USDE) authorized guidelines, the NLN CNEA may temporarily implement the use of virtual site visits to conduct program evaluation visits as necessary.

Program Eligibility Criteria for Virtual Site Evaluation Visit

The NLN CNEA reserves the right to use its discretion in determining program eligibility to participate in the use of the virtual site evaluation visit. Programs located outside the United States will be eligible to participate in a virtual site visit evaluation. The NLN CNEA also reserves the right to discontinue the use of virtual site evaluation visits at any time the Board of Commissioners determines it is in the best interest of the NLN CNEA and the programs and students it represents. This policy will remain in effect in accordance with U.S. Department of Education guidelines until the NLN CNEA Board of Commissioners rescinds it.

Programs seeking initial and continuing accreditation may participate in a virtual site evaluation visit. The NLN CNEA executive director will make the determination of program eligibility for virtual site visits and notify the NLN CNEA Board of Commissioners' Executive Committee of any program not meeting the established criteria. The following criteria will guide the NLN CNEA determination that the program is considered to be eligible to participate in a virtual site visit:

1. The governing institution must be in good standing with its institutional accrediting body and state authorizing agency with no conditions or pending actions;
2. The program must be in good standing with its state regulatory authority and any other nursing accrediting body with no conditions or pending actions;
3. The institution and program must be able to make all relevant participants in the accreditation process available for interactive interviews through the use of synchronous video technology during the scheduled dates of the visit;
4. The institution and program must be able to provide technical support during the scheduled duration of the virtual site visit; and
5. The program must be free of any outstanding compliance concerns that would require an on-site program evaluation visit.

Conducting the Virtual Site Visit

The policies and procedures outlined in this document **do not** release the program from the responsibility of adequately demonstrating compliance with the NLN CNEA Standards for Accreditation during the virtual site visit. Furthermore, programs must follow the established policies and procedures published in the NLN CNEA Accreditation Handbook: Policies and Procedures. The policy for conducting domestic virtual site program evaluation visits is temporary and does not replace any previously existing NLN CNEA policies, unless specifically stated otherwise in this policy.

The program is expected to adhere to the following:

1. The chief academic nurse administrator and team leader will collaboratively develop the agenda for the virtual visit. All individuals participating in interviews will be expected to use the video capabilities of the technology and identify themselves to the team. Special attention is to be paid to establishing clarity of time zones used to conduct interviews throughout the length of the virtual site visit.
2. The interviews will be conducted through the use of Zoom technology. The program will be responsible for establishing the interview call schedule and sharing the appropriate links and call-in numbers/passwords with the team and NLN CNEA staff. Any executive committee sessions held by the team will be scheduled and administered by NLN CNEA staff.
3. Under no circumstances may any part of the interviews or the team's exit report be recorded. The recording function of the videoconferencing technology must be disabled during any interview.
4. The program's self-study report remains due 6 weeks prior to the date of the virtual visit. Additional documentation that would normally be available during an on-campus evaluation visit must be made electronically available to the team during the length of the scheduled visit. It is the program's responsibility to ensure the team has ready access to all program materials during the scheduled visit.
5. Confidential materials such as student and faculty records must be made available to the team in a secure fashion. The means by which this will be achieved will be agreed upon by the chief academic program administrator and the team leader.
6. Technology disruptions, absence of scheduled interviewees, and lack of supporting documentation sufficient enough to not allow the team to render a decision regarding evidence of standard compliance may lead to the virtual site visit being terminated and rescheduled at a later date. The decision to terminate a virtual visit will be made by the NLN CNEA executive director after discussion with the program's chief academic nurse administrator and the team leader.

Follow-up Focused Site Visit

In accordance with the U.S. Department of Education temporary guidelines for virtual site visits, all domestic (U.S.) programs participating in a virtual site visit will receive a follow-up focused site visit that will be scheduled to occur on-campus within a reasonable time of the dates of the virtual site visit. The purpose of this visit will be to verify team findings and to collect any additional data

that may be used to supplement the team report. The follow-up focused site visit will be shorter in length and may be conducted by NLN CNEA staff or a CNEA trained on-site program evaluator. The date of the follow-up focused site visit will be mutually agreed upon by the chief academic nurse administrator and NLN CNEA staff. Due to the pandemic, scheduling of these visits will occur when it has been deemed safe to engage in travel and interactions with others. This follow-up focused visit does not apply to international programs seeking accreditation.

Board of Commissioners Accreditation Decisions

The accreditation review process and the Board of Commissioners' accreditation decision will follow the established NLN CNEA policies governing these processes. The Board of Commissioners will render a decision to grant or deny accreditation based upon the evidence before them from the self-study report, the written team report, program response to the team report, and the Program Review Committee report and recommendation.

The Board's decision to accredit a program will be effective at the close of the board meeting in which the decision is made, with the period of accreditation being retroactive back to the last day of the month the virtual site visit was held. Reaffirmation of the program's continuing accreditation becomes effective on the last day of the month of the Board of Commissioners' final action and extends for the period of time granted by the Board of Commissioners.

For programs that have experienced a postponement of an originally scheduled site visit in spring 2020 or fall 2020 due to circumstances related to the pandemic, the accreditation action will be dated back to the last day of the month of the originally scheduled site visit. The decision to accredit a program will be made with the caveat that the accreditation decision may be changed if evidence exists at the time of the on-site visit that indicates the program is not in compliance with the accreditation standards.

If the Board's decision is to deny accreditation based upon evidence that the program is noncompliant with the accreditation standards, the board will communicate these preliminary findings to the program and defer the final accreditation decision until a follow-up on-campus site visit can be scheduled. The program will also be given the opportunity to provide additional documentation related to the noncompliant findings.

Approved: July 2020

Revised: July 2021

Revised: December 2022

8-IV. Conduct of Business

NLN CNEA conducts all accreditation activities in English. For programs that do not use English as their primary language, the program must provide professional translation services at their own expense, to ensure that all verbal and written communication including all reports and correspondence with NLN CNEA are conducted in English.

Approved: December 2022

Additionally, all NLN CNEA staff, Board of Commissioners, and volunteers (such as committee members and site visitors), must review and sign conflicts of interest, intellectual property, and confidentiality agreements every year before they can participate in NLN CNEA activities.

Approved: December 2022

8-V. Site Visitor Policy

Accreditation site visits are conducted by a team of trained evaluators who represent nursing educators and nurse practice partners and are approved to serve as site visitors by the NLN CNEA Board of Commissioners. To be eligible to participate as an NLN CNEA site evaluator, individuals must meet the following eligibility requirements. Nurse educators must be full-time faculty, part-time faculty, or an administrator in a nursing program that is an NLN institutional member or a NLN CNEA pre-accredited or accredited program. Educators holding individual NLN membership are also eligible to be NLN CNEA evaluators. Educators must demonstrate evidence of current professional engagement in nursing education and practice. Retired nurse educators holding individual NLN membership and continuing to demonstrate evidence of current professional engagement are also eligible to be an NLN CNEA evaluator. Nurse practice partners must hold a clinical appointment, providing indirect or direct care in nursing practice. All program evaluators must hold graduate nursing degrees and an active, unencumbered nursing license. They should also possess current knowledge of higher education and practice issues, understand the application of continuous quality improvement to the accreditation process, demonstrate excellent communication skills, and provide evidence of contributions to the nursing profession.

Each evaluation team has an appointed team leader who has requisite training as a team leader and has conducted prior NLN CNEA site visits. The NLN CNEA selects a team leader and the team members from a list of trained evaluators. Team members are chosen based on their experience, qualifications, and knowledge of the program type. The chief academic nurse administrator is provided with the team members' names and can, for cause, identify any potential conflicts of interest with the team members selected. The executive director will then provide a substitute team member before the visit begins.

The site visit team is composed of a minimum of two members representing nursing education and at least one member representing practice. Additional site visitors may be added to the team depending upon the nature, delivery, number, and complexity of the program(s) under review. All site visitors are oriented to their role and receive initial and ongoing training to ensure they are adequately prepared to conduct the site visit and complete the written team report. Additionally, site visitors are evaluated by the team members and the nursing program after the visit is complete.

During the site visit, the team reviews documents and conducts interviews with a variety of relevant stakeholders to verify, clarify, and amplify the materials found in the self-study report. Team members are expected to uphold the core values of caring, integrity, diversity and inclusion, and excellence throughout the site visit activities.

Approved: December 2022

SECTION EIGHT Revised: December 2022