

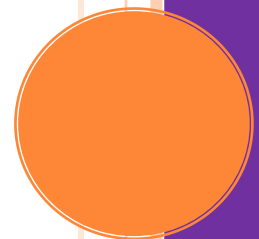
# NATIONAL LEAGUE FOR NURSING COMMISSION FOR NURSING EDUCATION ACCREDITATION

*Accreditation Handbook: Policies and  
Procedures*

*August 2017*

National League for Nursing Commission for Nursing  
Education Accreditation (NLN CNEA)

2600 Virginia Avenue, NW  
Washington, DC 20037



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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 must first be considered eligible and ready to pursue 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.

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) have the potential to meet 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.

Nursing programs who desire to seek pre-accreditation candidacy status and who have never been accredited, are newly developing, or in transition ~~may request the assistance of a NLN CNEA accreditation process navigator and~~ 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 a 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 to support a reasonable conclusion that the program can demonstrate the 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, ~~or~~ probationary, ~~or other similar~~ status designations, against their operational authority within their state or territory or with a regional, national, 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. 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. The parent institution(s) must be accredited by a regional or national 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, alumnae, and community 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 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.

## 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 determine that, at the time of application, the program has not demonstrated evidence that supports a reasonable conclusion that the program will comply 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.
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.
54. **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 Executive Committee for valid reasons.

## PUBLIC NOTICE OF PRE-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~~ 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 [www.nln.org/cnea](http://www.nln.org/cnea).

**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 that have had the legal operational authority of their institution or program denied or revoked or if there is pending action, including warning or probationary status, against their operational authority or with a regional, national or other nursing accreditation body.

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 Commissioner's 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's 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.

Approved: February 2016

Revised draft: August 2017

## B. INITIAL ACCREDITATION

**Nursing Pp** programs holding 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. It is the responsibility of the 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. ***Accreditation of the program becomes effective the date the NLN CNEA Board of Commissioners takes final action.***

### STEPS FOR SEEKING INITIAL ACCREDITATION

Upon receiving pre-accreditation candidacy status from the 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 the 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. The 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, the 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; and
- b. Governing institution current accreditation status by a U.S. Department of Education recognized regional or national 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 regionally or nationally recognized accrediting agency that is consistent with the mission of the governing institution and stated programmatic goals.

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 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 any program that has pending action, including ~~warning, or probationary, status, or other similar status designations~~ against their operational authority within their state or territory or with another nursing accreditation body. The nursing program will be asked to submit documentation to NLN CNEA explaining the current status of the program.*

*The NLN CNEA will not grant initial accreditation to any nursing program situated within a governing institution that has had adverse action taken, or has pending action, including warning or probationary status, against their operational authority within their state or territory or by a regional or national institutional accreditation body.*

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: 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 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.

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.

***When initial accreditation is granted by the NLN CNEA Board of Commissioners, this accreditation status is effective on the date of the Board of Commissioner's decision.***

#### **THIRD-PARTY COMMENTS**

[The](#) NLN CNEA expects the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumnae, and community 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. [Programs are referred to the policy on third party comments for additional information](#). 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 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 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.
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. 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 plans and mechanisms in place to address program deficits not to exceed a 12 month time frame. During this 12 month time frame the pre-accreditation candidacy status of the program will be extended. The 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 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 Boards' decision, and the Appeal Panel upholds the determination of denial of initial accreditation, the official date of accreditation denial is consistent with the date of the Board of Commissioners' action 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 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) is accredited by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC, 20037."

Approved February 2016

## **C. CONTINUING ACCREDITATION (REAFFIRMATION)**

**Nursing P**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 **nine 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 determine 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 half way through the period for which continuing accreditation has been granted.

***Reaffirmation ~~and of the program's~~ continuing accreditation ~~of the program~~ takes effect at the time of the Board of Commissioner's final action on the program.***

## **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 time line 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 time line 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 ~~has have~~ been ~~substantive change in leadership of the nursing program or governing institution or other substantive 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 Executive Committee will notify the chief academic nurse administrator of its decision ~~to grant this regarding the~~ request and the NLN CNEA staff will coordinate adjustments in times for the self-study ~~report~~ and the on-site program evaluation ~~ers~~ 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 ~~three~~ 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~~; ~~and~~
- 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 nine six to twelve months prior to the time of scheduling the on-site 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 regional or national 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 regionally or nationally recognized accrediting agency.

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. 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 eight 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 standards 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)'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 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. When continuing accreditation is granted by the Board of Commissioners this accreditation status is effective on the date of the Board of Commissioner's decision.

### THIRD-PARTY COMMENTS

The NLN CNEA expects the engagement of communities of interest in the accreditation process including faculty, students, administrators, alumnae, and community 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 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 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 takes effect on the date of the Board of Commissioner's final action on the program's accreditation status. As part of the responsibilities related to continuing accreditation status, the program submits a mid-term report documenting continued compliance with the NLN CNEA Standards of Accreditation. This mid-cycle report falls in the middle of the accreditation term (i.e., 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 Report Review Committee Subcommittee on Mid-Cycle Review for recommendation to 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.

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 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 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) withdraw 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 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 Commission 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 Board. As an adverse action, this decision is appealable. 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.** 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. As an adverse action, a denial decision is subject to appeal under the applicable policies and procedures of the NLN CNEA.

If the Appeal Panel upholds the determination of denial of continuing accreditation, the official date of accreditation withdrawal is consistent with the date of the Board of Commissioners' action 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) is accredited by the National League for Nursing Commission for Nursing Education Accreditation (NLN CNEA), located at 2600 Virginia Avenue, NW, Washington, DC, 20037."*

Approved February 2016

## 3 - II. Appeals Process

### A. APPEALING AN ADVERSE ACTION

A nursing program receiving an adverse action from the NLN CNEA Board of Commissioners that either denies pre-accreditation or accreditation, or withdraws accreditation due to compliance concerns related to the NLN CNEA Standards of Accreditation has the right to appeal the decision through the NLN CNEA appeals process. The appeals 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 appeals process and a final decision is rendered.

### B. GROUNDS FOR APPEAL AND STANDARD OF REVIEW

The NLN CNEA appeals 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 consistent with the NLN CNEA [published](#) standards of accreditation and not substantially supported by the record of evidence used to reach the 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 Commission 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 Commission determines that the financial information is significant and bears materially on the financial deficiencies identified by [the](#) NLN CNEA.

Based on this information, the 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 appeals process by filing a formal written request with the NLN CNEA executive director for an appeals hearing within ten business days of formal notification of the Commissioners' adverse accreditation action and submitting the fees associated with the appeals process.

**Step 2.** Within 30 days after formal notification of the Commissioner's adverse accreditation decision, the program must submit a written statement clearly stating the grounds for appeal of the 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 time lines, the adverse action of the Board of Commissioners shall be considered to be 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 herein.

**Step 3.** The executive director of the NLN CNEA confirms that no conflicts of interest exist with any of the members of the Appeal Panel as to their ability to fairly hear and deliberate the program's appeal. The executive director also contacts the program's chief nursing academic administrator to confirm that no actual or perceived conflict of interest exists with Appeal 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 Appeal 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. If legal counsel is present then the Appeal Panel will also have legal counsel 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 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 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. 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. Appeals hearings are closed to the public and the proceedings of the hearing are confidential.

**Step 6.** In closed session the Appeal Panel will deliberate on the arguments made and vote as to affirm, amend, remand or reverse the Commissioners' original decision. The decision made by the Appeal Panel must represent two-thirds of the panel members and is binding. The chair of the Appeal 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.

1. If the Appeal Panel acts to affirm the Commissioners' original decision, the 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 Appeal Panel chair.
2. If the Appeal Panel amends the grounds for the decision but sustains the decision, the action of the Appeal Panel 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 amend within five business days of the official notification from the Appeal Panel chair.
3. If the Appeal Panel reverses the Commissioners' decision, the Appeal Panel must convey the decision to the chair of the Board of Commissioners for implementation in a manner consistent with the outcome of the appeal. The chair of the Board of Commissioners notifies the program's chief nursing academic administrator of the



decision to reverse within five business days of the official notification from the Appeal Panel chair.

4. If the Appeals Panel remands the 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 reasons for remanding 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 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 Appeal Panel. If the 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.

If the Appeal Panel has recommended that the action be reversed or if the Panel remands the action, 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 accredited or candidate status in conjunction with its implementation of the reversal. 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.

Approved December 2016

## 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. 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. Reaffirm continuing accreditation for a maximum of ten years
2. Reaffirm continuing accreditation with quality improvement conditions (not to exceed 18 months)
3. Defer continuing accreditation
4. Deny continuing accreditation

## **Probationary Accreditation**

The NLN CNEA Board of Commissioners may change a program's accreditation status to probationary accreditation when there are: 1) substantial noncompliance concerns with the NLN CNEA Standards of Accreditation; and 2) failure by the program to make substantive progress to correct deficiencies by the time frame that has been established by the Board. 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 specify the time frame within which the program must resolve the identified deficiencies not to exceed 18 months. The probationary accreditation designation may be extended up to an additional 18 months for good cause. If the program is not able to resolve the identified deficiencies, the Board may issue a show cause directive to the program. The accreditation status of the program continues during the probationary period. Probationary accreditation is not appealable and is a matter of public record.

## **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. Show cause 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 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 critical or notable 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 may 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.

## **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 here and programs can find additional information regarding each process contained within the NLN CNEA Policy and Procedure Handbook.

### **Pre-accredited Programs**

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

### **Accredited Programs**

- Annual Reports
- Substantive Change Reports
- 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, 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 6 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.

August 2017

## 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, alumnae, and community 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 submission of the pre-accreditation application 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 taking 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.

May 2017

### 3-V. Distance Education Programs

As defined by the U.S. Department of Education (2012), the term distance education refers to education that uses one or more of the following forms of technology to deliver educational instruction to learners who are physically separated from the faculty: 1) the internet; 2) one-way or two-way audiovisual transmissions (e.g., broadcasts, broadband, wireless, etc.); 3) audioconferencing; or 4) CD-ROMS, DVDs, video cassettes, if the software is used in conjunction with any of the other forms of technology previously listed here.

The educational instruction may occur synchronously (in "real-time") or asynchronously (at different times). It is an expectation of the NLN CNEA that all forms of distance education employ the use of technology in a manner that supports regular and substantive interaction between faculty and students, and student peers. 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.

**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.

August 2017

### 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 statuses:

- 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 visits;
- failure to submit any required or requested written reports: annual reports, self-study reports, mid-cycle reports, follow-up reports; and
- 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

## SECTION FOUR – PUBLIC NOTIFICATIONS

### 4-I. Public Disclosure of Program Information and Accreditation Policies and Procedures

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 by which the Board of Commissioners will next review the program for pre-accreditation or accreditation. For programs that have been found to be partially compliant or non-compliant with the NLN CNEA Standards of Accreditation, the relevant standard(s) and quality indicators are cited;
3. Policies and procedures that govern the pre-accreditation and accreditation application 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 Policy Handbook, and the NLN CNEA Standards of Accreditation document.

August 2017

### 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.

August 2017

## 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.

August 2017

## 4 – IV. Public Notification Regarding Program Accreditation

### A. ACCURACY OF DISCLOSURE

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 20032  
202-909-2526

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

### B. PUBLIC CORRECTION

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

August 2017

## Section Five – Program Reporting Responsibilities

### 5 – I. Substantive Changes – Critical and Notable

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 have an organizational, fiscal, curricular, or human resource impact on 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 a focused on-site program evaluation visit to gather additional data regarding the impact of the substantive change on program outcomes. The NLN CNEA has defined two levels of substantive change affecting nursing programs: 1) critical and 2) notable.

#### A. CRITICAL SUBSTANTIVE CHANGES

Drawing in part upon the U.S. Department of Education definition of a substantive change (34 CFR 602.22) the NLN CNEA defines a critical substantive change as follows:

1. Any operational change regarding the institution or program's established mission or objectives;
2. Any change in the legal status or regulatory approval/recognition status of the institution or program;
3. Any change in the accreditation status of the institution, or the accreditation status awarded by any specialized nursing accreditor;
4. Any change in the form of control or ownership of the institution or program;
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 distance education program(s) (as defined by the USDE 34 CFR 602.3) granting a degree or certificate; or 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 or any change in the chief academic nurse administrator of the program; OR
9. Any establishment or change in contractual arrangements to develop and/or deliver curricula.

The chief academic nurse administrator and the institution's chief executive officer are responsible for notifying NLN CNEA of any critical substantive changes using the **Critical Substantive Change Form** [\[link\]](#) which includes a description of the change and the development of an outcome evaluation plan by which impact of the change on the program will be measured. The form must be filed with NLN CNEA staff ***no later than 60 days after the change is scheduled to take effect.*** Filing of a critical substantive change report may generate a request for additional data and/or a focused on-site program evaluation visit.

### **NLN CNEA Board of Commissioner Responses to a Critical Substantive Change**

Following NLN CNEA receipt of the critical substantive change report, the NLN CNEA Board of Commissioner's Executive Committee reviews and recommends one of the following actions to the Board of Commissioners to be considered at the next Board of Commissioners meeting:

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

If a critical 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. NLN CNEA will retain records of decisions related to substantive changes, including all correspondence significantly related to those decisions, in its files for as long as the program is pre-accredited or accredited with NLN CNEA.

### **B. NOTABLE SUBSTANTIVE CHANGES**

Drawing in part upon the U.S. Department of Education definition of a substantive change (34 CFR 602.22) the NLN CNEA defines a notable substantive change as follows:

1. The addition of a new program track (option) to an already NLN CNEA accredited program;
2. The addition, revision, or deletion of academic courses resulting in significant curricular revision as depicted by a change in program curricular outcomes; OR
3. Substantial increase or decrease in credit or clock hours within a program which increases or decreases the length of time to program completion.

The chief academic nurse administrator is responsible for notifying NLN CNEA of any notable substantive changes using the **Notable Substantive Change Form** [\[link\]](#) which includes a

description of the change and the development of an outcome evaluation plan by which impact of the change on the program will be measured. The form must be filed with the ***Annual Program Report*** that is due to NLN CNEA no later than January 15th of each calendar year. Filing of a notable substantive change report may generate a request for additional data and/or a focused on-site evaluation visit.

### **NLN CNEA Board of Commissioner Responses to a Notable Substantive Change**

Following the NLN CNEA receipt of the notable substantive change report, the NLN CNEA Board of Commissioner's Executive Committee reviews and recommends one of the following actions to the Board of Commissioners to be considered at the next Board of Commissioners meeting:

1. Accepting the notable substantive change report;
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; OR
4. Issuing a show cause directive which could result in an adverse action. An adverse action is appealable.

If a notable 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 NLN CNEA will retain records of decisions related to substantive changes, including all correspondence significantly related to those decisions, in its files for as long as the program is pre-accredited or accredited with the NLN CNEA.

December 2016

## 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 is 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 Program Review Committee for review and recommendation to the Executive Committee of the Board of Commissioners. Any additional follow-up action will be as determined by the executive committee. Actions that the 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 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: NLCEX 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
- Notable 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.

March 2017



## **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 regional or national 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 tory agency, the program is required to submit a critical 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.

August 2017

## **5 – IV. Change in Program Status with State Regulatory Agencies**

If a program pre-accredited or accredited by the NLN CNEA experiences a change in its approval status with its state regulatory agency, the program is required to submit a critical 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 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.

August 2017

## 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

**Pre-accreditation and Accreditation Decisions.** Initial pre-accreditation and accreditation decisions, as well as decisions related to reaffirmation of a program's accreditation status, will be disseminated to all listed entities (as outlined above) in writing and no later than 30 days following the Board of Commissioners' action. Written correspondence with institutions and agencies and public notification via the NLN CNEA website are the means used to disseminate this information.

**Probationary Status and Adverse Actions.** Final pre-accreditation and accreditation decisions resulting in an adverse action (denial or termination of pre-accreditation or accreditation) or probationary status for an accredited program will be communicated to listed entities as outlined above in writing at the same time of the program's notification of the adverse decision and no later than 30 days following the Board of Commissioners' action. The public will be notified of all adverse decisions via NLN CNEA's website no later than 24 hours following program notification.

Within 60 days of the Board of Commissioners' issuing of an adverse action, the NLN CNEA shall disseminate a brief summary describing the reasons for the decision to the public, relevant state regulatory bodies, other accrediting bodies, and the U. S. Department of Education, and the official comments, if any, that the affected institution/program may wish to make with regard to that decision, or evidence that the institution/program has been offered the opportunity to provide official comments.

**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) no later than 30 days receiving notification of the withdrawal or 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 of 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.

May 2017

## 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 on file electronically and are accessible only by the NLN CNEA staff. Records may be shared, as appropriate for conducting agency business, with the 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 complaints against the program
- Annual reports
- Substantive Change reports and the NLN CNEA Executive Committee responses
- Program – NLN CNEA official correspondence regarding substantive matters, both electronic and mailed
- Regulatory agency or other accrediting body correspondence pertaining to the program
- Appeals records

For accredited programs, the NLN CNEA maintains the following records in addition to those listed above:

- Self-study reports
- Written on-site program evaluation team reports
- Program Review Committee report
- Board of Commissioner action on accreditation status letters
- Focused site visit reports

July 2017

## 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.

May 2017

## Section Seven – Complaints Policy

### 7 – I. Complaints 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 (BOC) 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 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 non-compliance issues are addressed in a timely manner, complaints must be filed within a one-year time frame of the occurrence of the potential non-compliant 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 BOC.

4. The Executive Committee of the NLN CNEA BOC 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 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 BOC 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 BOC 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 BOC 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 BOC Executive Committee will recommend further steps be taken by the NLN CNEA BOC which can include the following: 1) request for additional information from the program's chief academic nurse administrator and 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 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 BOC's 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 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 ten business days. Complaints regarding the NLN CNEA executive director are to be submitted to the NLN CEO who will communicate the intent to the NLN CNEA chair of the board of commissioners. The NLN 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 BOC 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 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 BOC 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 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 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 BOC 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 BOC 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 CEO will take the same steps in coordination with the NLN CNEA chair of the board of commissioners.



6. If upon review of the named individual's response to the complaint, the BOC Executive Committee or executive director, as appropriate, considers the matter to be satisfactorily 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 BOC 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 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 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 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.

December 2016