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## Accreditation Update

## Fundamentals of terminology related to Accreditation Commission for Education in Nursing

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## ABSTRACT

The purpose of this article is to offer readers a fundamental overview of Accreditation Commission for Education in Nursing (ACEN) Standards and Criteria through a review of essential terminology. This informative description of terminology supplemented with examples germane to mission and governance, faculty and staff, students, curriculum, resources, and outcomes serves as a foundation for comprehending ACEN Standards and Criteria. Importantly, an understanding of ACEN terminology will assist the faculty in being able to verify a program's compliance with ACEN Standards and Criteria.

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## Introduction

The professional staff at the Accreditation Commission for Education in Nursing (ACEN) receive many questions from nurse educators seeking clarification of the terminology used by the ACEN in its standards and criteria. Each of the definitions provided are in the 2017 ACEN Glossary (ACEN, 2017c), which is located in the ACEN Accreditation Manual available online (<http://www.acenursing.net/manuals/Glossary.pdf>). This article includes some of the common terminology-based questions received by the ACEN staff and is organized based upon the ACEN Accreditation Standards.

## Standard 1 Mission and Administrative Capacity

*Does our Program Need to Develop Partnerships with our Communities of Interest? How are Communities of Interest Different from Partnerships?*

While the program may have partnerships with their communities of interest, this is not required. To clarify, communities of interest are the groups of people that are interested in the nursing program and that influence how decisions about the program are made. Generally drawn from the local area, communities of interest may include health care providers, current students and alumni, state regulatory agency representatives, and members of

the public (Glossary, p. 2). Partnerships are formal relationships between the nursing education unit and/or the governing organization and an outside agency. Partnerships are designed to accomplish specific objectives and goals over a period of time. Partnerships do not include clinical agreements for student learning experiences (Glossary, p. 12).

The program needs to ensure that communities of interest are identified and that they are formally and consistently informed and consulted about the results of program evaluation efforts, specifically the end-of-program student learning outcomes and program outcomes. Feedback or recommendations received from communities of interest should be considered when programmatic decisions (e.g., enrollment, admissions, and curriculum) are made. Programs need to document the communication between the program and its communities of interest and how the program used the information it received to inform and improve its decision-making processes for program improvement.

Partnerships are based on formal (typically written) agreements in which the nursing program and the outside agency develop an agreement that is mutually beneficial or designed to meet a specific community or programmatic need. An example of a partnership is an academic progression or articulation agreement between a community college and a university. The partnerships that the program develops should be congruent with the program's mission or philosophy and should be designed to promote excellence in nursing education, enhance the profession, and/or benefit the community. A second example of a partnership could be a clinical facility that is providing a staff member as a "loaned faculty member" to assist with the clinical rotations.

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## Standard 2 Faculty and Staff

*Our Program has Faculty Who Teach in the Classroom and Laboratory; in Addition, we Have Employees Who Work Exclusively in the Laboratory. Where do I Discuss These Individuals in the Self-Study Report?*

The ACEN Glossary provides definitions for staff, faculty, and laboratory personnel to assist you when writing the Self-Study Report. The distinction is in the responsibilities of each role. *Nursing faculty* are defined by the ACEN as nurses who teach and evaluate nursing students, are academically qualified, and have experience in the content areas in which they teach (Glossary, p. 5). Standard 2 further clarifies that full-time and part-time faculty include those individuals teaching and/or evaluating students in didactic, clinical, and/or laboratory settings (ACEN 2017 Standards and Criteria; ACEN, 2016). Therefore, these responsibilities for full-time, part-time, and non-nurse faculty should be discussed, respectively, in the narrative for Criteria 2.1, 2.2, and 2.3 and included in the faculty profile table, which supports the details for these criteria. For example, a faculty member may teach in the didactic setting only and be the designated laboratory supervisor. Alternatively, some part-time faculty may teach in the laboratory and clinical settings only.

The ACEN defines *staff* as non-faculty personnel who facilitate the attainment of the goals and outcomes of a nursing education unit, including clerical and other support persons (Glossary, p. 16). This would include dedicated full-time and part-time nursing department positions, including, but not limited to, administrative assistants, secretaries, information technology support, advisors, and tutors.

Laboratory personnel are non-faculty persons who work in a skills/simulation laboratory with specified expertise that supports and/or facilitates student learning experiences (Glossary, pp. 7–8). Laboratory personnel may be full-time or part-time, and depending on the job responsibilities of the role, they may or may not be a nurse. For example, some laboratory personnel may be non-nurse technicians who have expertise with simulation equipment, or those who perform duties, such as stocking, supply ordering, and scheduling. Other laboratory personnel may be nurses who support the students during skills reinforcement and practice. Regardless of the role, laboratory personnel must hold educational and experiential qualifications as required by the governing organization (i.e., institution), the state, and the governing organization's accrediting agency and must be qualified for assigned responsibilities. In the absence of requirements set by the state and/or the governing organization's accrediting agency, the governing organization must set appropriate educational and experiential qualifications for assigned responsibilities in the skills/simulation laboratory (Glossary, pp. 7–8).

*Criterion 2.10 is About Development and Support for Instructional and Distance Technologies. What is the Difference?*

*Instructional technology* is defined as the method(s) and delivery system(s) used by the faculty to convey course content to students (Glossary, p. 7). Faculty are increasingly using various technologies as part of the student learning experience. These technologies may be organizational resources (e.g., learning management systems, student response systems, classroom technology) or items through a third-party vendor (e.g., learning modules, testing). Instructional technology would also include simulation equipment. Essentially, instructional technologies are those technologies that faculty use to help students learn course content and achieve learning outcomes.

*Distance technology* is defined as instructional methods that may include one-way or two-way transmissions, audio, video, the Internet, and/or computer technologies. Distance technology is used during *distance education*, which is defined as an education process in which instruction occurs when a student and instructor are not

in the same place (Glossary, pp. 3–4). Therefore, distance education is accomplished through various modes of technology, such as video-conferencing and learning management systems. Distance technology would apply to a program that has any online or hybrid course and for programs that broadcast instruction between locations.

Criterion 2.10 necessitates a narrative describing how faculty are educated in the use of these technologies to ensure their success and what support is in place for further education related to the technology or assistance with troubleshooting when problems arise. The governing organization, vendors, or both may provide the support and education. For example, the governing organization may provide faculty development offerings for learning how to use classroom clickers or having specific requirements for teaching online courses. In addition, a third-party vendor may provide orientation and information technology support for high-fidelity human simulators or a specific learning management system.

## Standard 3 Students

*During our Last Site Visit, the Peer Evaluators Wanted us to Show Them Where we Published our Program Outcomes. Which program outcomes is the program required to publish?*

One of the benefits of accreditation is that it helps provide useful information for students' career and education decision-making (2017 ACEN Accreditation Manual, Section I; ACEN, 2017a, p. 3); therefore, the program is required to share information about itself with the public. Public information includes all publicly available and published communication about the program, which is designed to inform the public about the program, including services offered to facilitate student success; public information must include information about the program's accreditation status and how a member of the public can contact the ACEN. In addition, information about the program must be easily accessible and must include student achievement data regarding graduates' success; for undergraduate programs, this includes data on the licensure examination, students' completion of the nursing program, and graduates' attainment of a job for which the program prepared them. Licensure examination pass rates, program completion rates, and job placement rates are program outcomes, which the program is required to publish. Programs must also publish additional program information, such as transfer of credit policies, tuition and fees, and program curriculum. For a full list of information that should be freely accessible to the public, the program should access the ACEN website and review Policy #29 Advertising and Recruitment of Students (ACEN Accreditation Manual, Section II, Policies; ACEN, 2017b).

*I Have Been Assigned to Write Standard 3 Outcomes, But I am Not Sure How to Respond to Criterion 3.7. What is Considered a Complaint or Grievance? Is a Grade Appeal Considered a Complaint?*

The ACEN defines *complaints and grievances* as a formal allegation against a nursing program, typically expressed in a written, signed statement. A grievance is a wrong or hardship suffered that is the grounds for a complaint; the formal expression of a grievance is a complaint (Glossary, p. 2). Each nursing education unit should utilize the definition of a complaint/grievance established by the governing organization. If a grade appeal is considered a formal complaint at your institution, then these types of complaints should be included in the narrative for Criterion 3.7.

The narrative for Criterion 3.7 should provide information regarding the complaint/grievance policy/policies of the governing organization and nursing education unit, if these differ from institutional policies. The narrative should include information about where the policy/policies are located and how students are

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