



ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS  
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## MEMORANDUM

To: ABHES-Accredited Institutions and Programs  
Recognized Accrediting Agencies  
State Departments of Education  
U.S. Department of Education  
Interested Parties

From: Florence Tate, Executive Director

Date: February 8, 2017

Subject: Statistical Summary of January 2017 Commission Actions

Following is a statistical summary of all actions taken by the Accrediting Bureau of Health Education Schools (ABHES) at its January 2017 meeting. Final actions taken by ABHES, which included the name of the institution, were included in a memorandum distributed and posted at [www.abhes.org](http://www.abhes.org).

<b>RENEWED ACCREDITATION</b>	
Granted Accreditation:	24 (27 campuses)
Deferred Accreditation:	14 (26 campuses)
Denied Accreditation:	0

<b>INITIAL ACCREDITATION</b>	
Granted Accreditation:	13 (14 campuses)
Deferred Accreditation:	5 (9 campuses)
Denied Accreditation:	0

<b>SHOW-CAUSE ACTIONS / WITHDRAWAL</b>	
Show-Cause Issued:	8 (14 campuses)
Vacated Show-Cause:	16 (24 campuses)
Continued Show-Cause:	6 (9 campuses)
Withdrawal of Accreditation	4

<b>PROGRAM SPECIFIC WARNING</b>	
Program Specific Warning Issued:	1
Vacated Program Specific Warning:	7
Continued Program Specific Warning:	5

<b>APPEALS</b>	
Affirmed Denial/Withdrawal:	0
Remanded Denial / Withdrawal:	0
Amended Denial / Withdrawal:	0

Reverse Denial / Withdrawal:	0
<b>ADDITION OF NEW PROGRAM</b>	
Affirmed:	4
Additional Information Required:	2

<b>ADDITION OF NON-ALLED HEALTH PROGRAM</b>	
Affirmed:	0
Additional Information Required:	0

<b>ADDITION OF NON-MAIN CAMPUS</b>	
Affirmed:	3
Additional Information Required:	1

<b>ADDITION OF PROGRAMS OF STUDY AT A DEGREE OR CREDENTIAL DIFFERENT FROM THAT WHICH IS INCLUDED IN THE INSTITUTIONS CURRENT GRANT OF ACCREDITATION</b>	
Affirmed:	9
Additional Information Required:	1

<b>ADDITION OF SATELLITE CAMPUS</b>	
Affirmed:	0
Additional Information Required:	0

<b>ADDITION OF SEPARATE CLASSROOM</b>	
Affirmed:	1
Additional Information Required:	1

<b>CHANGE IN LEGAL STATUS, OWNERSHIP OR FORM OF CONTROL</b>	
Affirmed:	0
Additional Information Required:	0

<b>CHANGE OF LOCATION</b>	
Affirmed:	5
Additional Information Required:	0

<b>CHANGE IN METHOD OF DELIVERY</b>	
Affirmed:	5
Additional Information Required:	5

<b>CHANGE FROM NON-MAIN TO MAIN CAMPUS</b>	
Affirmed:	0
Additional Information Required:	0

<b>COMPREHENSIVE REVIEW</b>	
Affirmed:	0
Additional Information Required:	0

<b>EXTERNSHIP VISITS</b>	
Affirmed:	0
Additional Information Required:	0

<b>PROGRAM SUBSTANTIVE CHANGES</b>	
Affirmed:	0
Additional Information Required:	0

<b>TEACH-OUT VERIFICATIONS</b>	
Accept:	1
Additional Information Required:	0

<b>UNANNOUNCED VISITS</b>	
Affirmed:	6
Additional Information Required:	3