



ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS
7777 Leesburg Pike Suite 314 N · Falls Church, Virginia 22043
Tel. 703/917.9503 · Fax 703/917.4109 · E-Mail: info@abhес.org

MEMORANDUM

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

From: Carol Money maker, Executive Director

Date: June 20, 2013

Subject: Call for Comment on Proposed Revisions to the Accreditation Manual

The Accrediting Bureau of Health Education Schools (ABHES) regularly reviews its accreditation policies, procedures and standards and seeks your input on proposed revisions to the *Accreditation Manual*.

Please review the proposals below and provide any comments by no later than **July 8, 2013**. New language is underlined and deleted language is ~~struck~~.

To access the call for comment survey, click on the link below:

https://www.surveymonkey.com/s/June_2013_Call_For_Comment

Contact me directly at cmoney maker@abhес.org or 866.463.0717 with any questions.

Thank you.

CHAPTER I – GENERAL INFORMATION

SECTION B – Policies Affecting Institutions and Programs

Subsection 6 – Third-party contracts, transfer credits and articulation agreements

Transfer Credits

Every institution must have transfer of credit policies that are publicly disclosed in accordance with 34 CFR§668.43(a) (11) of the Higher Education Act (HEA) and include a statement of the criteria established by the institution regarding transfer of credit earned at another institution of higher education. An institution or program may accept credits earned at another institution accredited by an agency recognized by the Secretary or the Council for Higher Education Accreditation (CHEA) to satisfy specific requirements for completion of a program. **An institution or program may accept credits earned at another institution that is not located in the United States or its territories if the specific foreign education is evaluated by World Education Services who then attests to the qualitative and quantitative equivalency of the foreign education and the specific course or courses for which transfer credit is to be awarded.**

The institution or program must demonstrate that it has evaluated the coursework accepted for transfer in accordance with its published policies, and the basis for a conclusion that it is equivalent to the coursework for which it substitutes and meets all ABHES requirements, including competency achievement.

As is provided elsewhere in this manual, programs and institutions must clearly state their transfer of credit policies, and they are encouraged to accept transfer credits as a means to promote academic mobility and to avoid requiring students to unnecessarily repeat equivalent, prior coursework.

CHAPTER II ELIGIBILITY AND CLASSIFICATIONS

SECTION A - Eligibility for Application

Prior to consideration for accreditation, the Commission will determine preliminarily whether an institution or program meets the requirements for accreditation.

Subsection 1 – Basic requirements

a) Institutional Eligibility

In order for an institution to apply for accreditation by the Commission and to remain accredited, it must meet the following minimum criteria:

- (1) It is (a) an institution in the private sector at the postsecondary level whose principal activity is education, (b) a hospital or laboratory-based training school, (c) a vocational institution, or (d) a Veteran Administration hospital, rehabilitation institution, or a federally-sponsored training program.
- (2) It is an educational institution that offers programs predominantly in the health education field. An institution meets this requirement if (a) 70 percent or greater of its full-time equivalent students are enrolled in health programs, or (b) 70 percent of its active programs are in the health education field, provided that a

majority of an institution's full-time equivalent students are enrolled in those programs. A program is active if it has a current student enrollment and is seeking to enroll students.

- (3) All of its programs are vocational in nature and are designed to lead to employment.
- (4) It is located in the United States or its territories.
- (5) It is properly licensed, chartered or approved to provide education beyond the secondary level under the laws and regulations of the state or territories in which it is located.
- (6) It must have been legally operating and continuously providing instruction as an institution for at least the prior two years.
- (7) ~~It has a minimum enrollment of five (5) students in each program to be included in the grant of accreditation to allow evaluation of student outcomes. (Not applicable to ABHES accredited institutional schools)~~ At the time of the visit, the programs will have student participation in clinical experience activities, as applicable, to permit evaluation of program operations and of student progress, satisfaction, and retention. In addition, the program will have enrolled students who have completed at least 50% of the program, or at least 25% percent of the core coursework. No new programs can be added to the institutional offerings after an application for accreditation has been submitted.

CHAPTER III - GENERAL PROCEDURES (APPLIES TO INSTITUTIONS AND PROGRAMS)

SECTION A - Application, Evaluation, Approval Process and Recordkeeping

Subsection 1 – Requests for information and preliminary visits

Written materials concerning accreditation criteria, policies, general procedures, appeal procedures, standards and the accreditation status of ABHES-accredited institutions and programs are maintained by the Commission and are available on its Web site and upon request.

Institutions desiring accreditation should request information and necessary application instructions from ABHES. An interested institution communicates as necessary with ABHES staff to become sufficiently informed.

Officials of the institution review accrediting documents and file a formal Application for Accreditation with the required application fee (Appendix I, Fees). The application fee is non-refundable and the application is valid for a period of two years from date of application. The chief executive officer of the institution must sign the application.

Upon acceptance of the application, an ABHES representative visits the applicant institution to discuss the accrediting philosophy, procedures, information/data requirements, and to evaluate the degree to which an institution currently complies with ABHES standards. While no fee is associated with a preliminary visit, the institution bears all expenses of the visit. A preliminary visit is mandatory for all new applicants for institutional accreditation.

Based upon the findings and conclusions of a Preliminary Visitation Report, one or more of the following actions will be taken:

- a. an institution is permitted to submit its Self-Evaluation Report in preparation for a full team visitation;
- b. an institution is directed to supply additional information prior to the submission of its Self-Evaluation Report; and/or
- c. another preliminary visitation will be required prior to submission of the Self-Evaluation Report.

If an institution is deemed unprepared to continue in the application process following a second preliminary visitation, the institution may not reapply for a period of at least twelve months, at which time a new application must be submitted with the appropriate fees.

Institutions seeking programmatic accreditation must follow the same application procedures as institutional applicants, with the following exception: programs offered at institutions holding institutional accreditation by an accrediting agency recognized by the U.S. Department of Education or the Council for Higher Education Accreditation will not be required to undergo a preliminary visit.

Subsection 3 – Accreditation workshop attendance

A representative from each campus seeking an institutional or programmatic initial, ~~or~~ renewal grant of accreditation, or inclusion of a non-main and satellite is required to attend an accreditation workshop prior to submission of a Self-Evaluation Report and an on-site team visit. The individual(s) designated to attend the workshop is/are directly involved in the accreditation and self-evaluation process, (e.g., school director, director of education, or program coordinator). In cases where the designated workshop attendee is no longer employed by the institution, a second individual with direct involvement must be appointed to fulfill those responsibilities and attend the accreditation workshop within 12-months of the position change and preferably prior to an institution undergoing an on-site team visit. Failure to evidence attendance at an ABHES accreditation workshop will result in an incomplete Self-Evaluation Report and delay consideration of an institution's application for initial or renewed accreditation by the Commission.

Subsection 8 – Interim reviews and visits

The Commission may request reexamination, documentation, or a written response to a Commission request or inquiry from an institution or program at any time it deems necessary.

ABHES requires an annual report from each main, non-main, and satellite campus. Institutional changes that must be reported to ABHES are outlined in Chapter III. Each annual report is reviewed, summarized, and considered by the Annual Report Committee, and, as necessary, considered by the Commission for subsequent action. Issues that require additional reporting, completion of an action plan, or Commission consideration include, but are not limited to, (i) retention, placement, or required credentialing rates falling below the minimum requirements of ABHES (see III.C), (ii) financial concerns (see IV.B.), (iii) student loan cohort default rates greater than exceeding 15% below the federal threshold, and (iv) enrollment growth of 50% or more from that reported the previous year.

Announced, interim and unannounced visits are conducted regularly as a means of assisting institutions and programs in continued compliance with ABHES requirements.

SECTION B – Institutional Changes

Subsection 1 - Changes requiring approval

The following changes must be submitted to ABHES for approval prior to implementation on the appropriate applications (www.abhes.org) for consideration by staff. The Commission may become involved in the consideration if necessary.

(* denotes a site visit required)

- i. *Change of location;
- ii. Change of name of controlling institution;
- iii. Addition of new program that does not represent a significant departure from the existing offering of educational programs or method of delivery. The Commission may, however, require an on-site evaluation for programs which appear to have a significant impact on institutional operations, including mission; equipment; faculty; learning resources; facilities; and budget;
- iv. Addition of courses or short-term programs not leading to an occupational objective. These courses or short-term program may be excluded from the scope of an institution's grant of accreditation, with the following limitations:
 - a. All advertising and publications (e.g. catalog) referencing ABHES accreditation clearly state that such excluded programs or courses are not included within an institution's grant of accreditation.
 - b. Courses are not being combined with other excluded courses to circumvent accreditation requirements and/or those of other governmental bodies.
 - c. Vocational English-as-a-Second Language program (VESL), must also meet the requirements of Appendix H (Vocational English as a Second Language).
- v. *Change from non-main to main campus-;
- vi. ABHES may require an onsite evaluation for a program which appears to have a significant impact on institutional operations, including mission; equipment; faculty; learning resources; facilities; and budget.**

Subsection 2 - Approval of substantive change

Substantive changes that must be approved prior to inclusion in a grant of accreditation are the following:

(* denotes a site visit required)

- a. Change in the established mission or objectives of an institution or objectives of a program;
- b. *Change in legal status, ownership, or form of control;
- c. *The addition of courses or programs that represent a significant departure from the existing offerings of educational programs, or method of delivery, from those that were offered when ABHES last evaluated the institution;
- d. *The addition of programs of study at a degree or credential level different from that which is included in the institution's current accreditation;
- e. A change from clock to credit hours;
- f. A substantial **increase change** in the number of clock or credit hours awarded for successful completion of a program.

- g. Execution of a contract under which another organization or institution not certified to participate in Title IV, HEA programs offers more than 25 percent of one or more educational programs;
- h. *The establishment of an additional location geographically apart from the main campus or approved non-main campus. This provision applies regardless of the classification of the additional location as a non-main, separate classroom or satellite campus.
- i. The acquisition of any other institution or any program or location of another institution.
- j. The addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.

Subsection 4 - Additional requirement regarding specific changes

C. Notification

- a. A negative action, including probation, placed upon an institution or program by a recognized accrediting agency, state licensure body, or federal regulatory agency.
- b. **The discontinuation of a program(s) (defined as any program that has not been in operation for a continuous twelve-month period). **Institutions and programs must submit notification when a program is discontinued. Such notification must be submitted on the ABHES Discontinued Program Form found at www.abhes.org. The Annual Report is not sufficient to address discontinued programs. Institutions or programs must also notify the Commission regarding the discontinuation of a previously approved delivery method (e.g., residential, blended, or full distance education).**
- c. **Hiring of a new On-site Administrator (e.g., Campus President, Director).

Subsection 9– Change in legal status, ownership or form of control

Based on a completed application, the Substantive Change Committee of the Commission has the ability to approve the change of control. The date of a change in ownership is effective on the date of its approval by ABHES if the accreditation decision is made within 30 days after the change in ownership. If ABHES is unable to approve a change of ownership within 30 days of the effective date of the change, then the approval date will be the actual date of approval by ABHES. In any case, ABHES will not approve a change of ownership effective the date of the actual change if a complete application for approval of the change of ownership is not submitted to ABHES within 10 days after the date of the legal change of ownership. If a complete change of ownership is submitted within this time frame and if ABHES grants approval within 30 days of the legal change, then the date of approval is **the change date** and no hiatus in accreditation status occurs. Only the full Commission can defer or deny an application. An on-site visitation to an institution will be made within six (6) months after Commission approval of a change in control.

SECTION C - Commission Actions

The Commission takes final action to grant accreditation, deny accreditation, or withdraw accreditation based upon a review of evidence relevant to compliance with the Commission's policies and standards, including but not limited to:

- a. Self-Evaluation Report;
- b. Team Visitation Report(s);

- c. Institution's Response to Team Visitation Report(s); and
- d. Program Outcomes.

Accreditation is granted based on a finding that the institution or program is in compliance. Continuous compliance thereafter is a requirement to maintain accreditation. The Commission ~~can~~ **may** withdraw accreditation at any time if it determines that an institution or program is not complying with its policies or standards or determines that the retention, licensing, or employment rates fall below 70 percent, or below the reported **average rate** on an institution's annual report. Alternatively, the Commission may in its discretion provide an opportunity for the institution or program to bring itself into compliance within a time period specified by the Commission. That time period will not exceed:

- a. Twelve months, if the longest program is less than one year in length.
- b. Eighteen months, if the longest program is at least one year, but less than two years in length.
- c. Two years, if the longest program is at least two years in length.

The Commission may, for good cause, extend the period for achieving compliance, defined as significant improvement by the institution in the deficient area(s) (e.g., finances, student outcomes rates) and/or the need for sufficient time to demonstrate full compliance (e.g., graduate licensure due to delay beyond the control of the institution, program, or student).

Subsection 3– Show causes

The Commission may require an institution or program to show cause why accreditation should not be withdrawn for failure to meet eligibility criteria, comply with procedures or comply with accreditation standards. A show-cause directive constitutes notification to an institution or program that absent corrective action and information by and from the institution or program, its accreditation status will be in jeopardy. Such show-cause orders may be issued by the Executive Committee between Commission meetings and must specify the reasons for the action, the responsive information that is required from an institution or program and the deadlines for response. An institution or program directed to show cause is provided an opportunity to be present at the next meeting of the Commission.

~~**Prior approval from the ABHES Executive Committee for the acceptance of any substantive change application (see III.B.A., Reporting Substantive Change) from an institution under a show-cause directive is required. An institution's or program's request for acceptance of the application must include justification for the change and its effect on the institution's or program's operation.**~~

ABHES will not review, consider, or process substantive changes (as defined in III.B.2. of the Accreditation Manual) while the institution is under a show cause directive, unless the institution demonstrates that the substantive change is likely to resolve the show cause directive. An institution's or program's request for acceptance of the application must include justification for the change and its effect on the institution's or programs operation.

CHAPTER V

EVALUATION STANDARDS APPLICABLE TO ALL EDUCATIONAL PROGRAMS

SECTION A – Goals and Oversight

V.A.4.a. Instructional continuity is maintained through faculty ~~retention~~ stability and employment.

Faculty employed must be sufficient to ensure sound direction and continuity of development for the educational programs. The institution demonstrates through outcomes and other measures that the faculty's average length of service to the institution allows the institution to meet its stated mission. The institution must promote stability in the faculty through compensation, fringe benefits, professional growth opportunities, and other incentives.

~~Programs document, assess and remediate, as necessary, efforts made to retain faculty for the purposes of maintaining a strong teaching and learning environment in the educational setting including classroom, laboratory and clinical components~~

V.A.4.b. The proportion of full-time faculty is sufficient.

The proportion of faculty employed on a full-time basis must ensure sound direction and continuity of development for the educational programs. The institution demonstrates through outcomes and other measures that the proportion of full-time faculty allows the institution to meet its stated mission.

SECTION E – Program Management

Subsection 1 – Program Administration

V.E.1.a. A program is managed.

Each main, non-main and satellite location provides for full-time, on-site oversight for each program which may be met through one or a combination of individuals satisfying the requirements set forth below.

- i. (a) Graduation from a program accredited by an agency recognized by the U.S. Secretary of Education or the Council for Higher Education Accreditation (CHEA) in the specialty field or subject area in which they teach (b) Graduation from ~~or~~ an otherwise recognized training entity (e.g., hospital-based program) in the specialty field or subject area in which they teach; or (c) Graduation from an institution located outside of the United States and its territories in the specialty field or subject area in which they teach. The institution or program must have on file from World Education Services the qualitative and quantitative analysis of the faculty member's education to attest to the equivalency of the foreign credential. Exceptions to this requirement must be justified through documentation of an individual's alternative experience or education in the field (e.g. completed course work, related professional certifications, documentation of expertise).
- ii. At least three years' teaching or occupational experience in the subject field.

- iii. A baccalaureate degree from an institution accredited by an agency recognized by the U.S. Secretary of Education.

Subsection 2 – General faculty requirements

V.E.2.a. Faculty consists of qualified individuals who are knowledgeable and current in the specialty field.

Faculty evidence the following:

- ii. **(a) Graduation from a program accredited by an agency recognized by the U.S. Secretary of Education or the Council for Higher Education Accreditation (CHEA) in the specialty field or subject area in which they teach (b) Graduation from an otherwise recognized training entity (e.g., hospital-based program) in the specialty field or subject area in which they teach; or (c) Graduation from an institution located outside of the United States and its territories in the specialty field or subject area in which they teach. The institution or program must have on file from World Education Services the qualitative and quantitative analysis of the faculty member's education to attest to the equivalency of the foreign credential.**

Additionally, the faculty member possesses two (2) years of occupational (i.e., practical) experience in the subject field in which they teach; OR

- ii. A minimum of three (3) years of job-related training and experience, as described above, for those instructors who are not graduates from an accredited program in the field in which they teach.

In addition, all faculty must:

- iii. Receive training in educational methods, testing and evaluation and evidence strength in instructional methodology, delivery and techniques as indicated by evaluation by supervisory personnel within 30 days of beginning instruction.
- iv. Hold a current license, certification or other credential as required by local, state and/or federal laws to work in the field, with the exception of those teaching in non core (e.g., general education) courses.

SECTION I – Program Effectiveness

Subsection 3 1 - Student achievement indicators

V.I.31.a. ***A program demonstrates that students complete their program—and that graduates are successful on credentialing exams required for employment, and are successfully employed in the field, or related field, for which they were trained.***

At a minimum, an institution maintains the names of all enrollees by program, start date, and graduation date. The retention rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows

Retention Rate = (EE + G) / (BE + NS + RE) = R%

EE= Ending Enrollment (as of June 30)

G= Graduates

BE= Beginning Enrollment (as of July 1)

NS= New Starts

RE= Re-Entries (number of students that re-enter into school who dropped from a previous annual report time period)

R% = Retention Percentage

At a minimum, an institution maintains the names of all enrollees by program, start date, and graduation date.

V.I.I.b. A program demonstrates that graduates participate on credentialing exams required for employment.

If a license or credential is required (i) for employment within the geographic area served by the institution **(ii) by regulatory bodies** (e.g., state or other governmental agencies), **or (iii)** by the programmatic accrediting body, then the participation of program graduates in credentialing or licensure examinations is monitored and evaluated.

The credentialing participation rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows:

Examination participation rate = G/T GT/GE

GT = Total graduates taking examination

TGE = Total graduates eligible to sit for examination

V.I.I.c. A program demonstrates that graduates are successful on credentialing examinations required for employment.

If an institution or program is required to monitor participation rates, then it must review graduate success on credentialing and/or licensing examinations. This review includes curricular areas in need of improvement. A program maintains documentation of such review and any pertinent curricular changes made as a result.

The credentialing pass rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows:

F/G = L%

Examination Pass Rate = GP/GT

F GP = Graduates passing examination (any attempt)

G GT = Total graduates taking examination

L% = Percentage of students passing examination

At a minimum, the names of all graduates by program, actual graduation date, and the credentialing or licensure exam for which they are required to sit for employment are maintained.

V.I.I.d. A program demonstrates that graduates are successfully employed in the field, or related field, for which they were trained.

An institution has a system in place to assist with the successful initial employment of its graduates. **A graduate must be employed for 15 days and the verification must and is required to employment post-initial-employment-date take place no earlier than 15 days after employment.**

The placement rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows:

$$\text{Placement Rate} = (F + R)/(G-U) = P\%$$

F = Graduates placed in their field of training

R* = Graduates placed in a *related* field of training

G = Total graduates

U** = Graduates unavailable for placement

P% = Placement percentage

*Related field refers to a position wherein the graduate's job functions are related to the skills and knowledge acquired through successful completion of the training program.

**Unavailable is defined only as documented: health-related issues, military obligations, incarceration, continuing education status, or death.

Important Note: graduates pending required credentialing/licensure in a regulated profession required to work in the field and, thus, not employed or not working in a related field as defined above, should be reported through back-up information required in the Annual Report. This fact will then be taken into consideration if the program placement rate falls below expectations and an Action Plan is required by ABHES.

At a minimum, an institution maintains the names of graduates, place of employment, job title, employer telephone numbers, and employment and verification dates. For any graduates identified as self-employed, an institution maintains evidence of employment. **For any graduates identified as unavailable, the reason must be stated.** Documentation in the form of employer or graduate verification forms or other evidence of employment is retained.

V.I.I.e. A program demonstrates that its required constituencies participate in completing program surveys.

A program must survey current students(classroom and clinical experience), clinical extern affiliates, graduates, and employers. The purpose of the surveys is to collect data regarding a perception of a program's strengths and weaknesses.

The survey participation rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows:

$$\text{Survey Participation Rate} = SP / NS = TP$$

SP = Survey Participation (those who actually filled out the survey)

NS = Number Surveyed (total number of surveys sent out)

~~TP = Total Participation by program, by group; meaning the number of students/clinical extern affiliates/graduates/employers by program who were sent and completed the survey during the ABHES reporting period (July 1-June 30).~~

V.I.I.f. A program demonstrates that it has developed survey satisfaction benchmarks based on required constituency surveys.

A program must establish satisfaction benchmarks for current students (classroom and clinical experiences), clinical extern affiliates, graduates, and employers. The purpose of the benchmarks is to collect data regarding satisfaction with the program's stated objectives and goals.

The benchmark satisfaction rate is determined by using the ABHES required method of calculation, for the reporting period July 1 through June 30, as follows:

Benchmark Satisfaction Rate = SL/SP

SL = Satisfaction level

SP = Survey Participation

At a minimum, an annual review of the results is conducted and shared with administration, faculty and advisory boards. Decisions and action plans are based upon the review of the surveys, and any changes made are documented (e.g., meeting minutes, memoranda).

Accordingly, a program must document that at a minimum the survey data included in its effectiveness assessment include the following:

Student (classroom and clinical experience):

~~Student evaluations are used as a composite of student views relating to course importance and satisfaction and overall class attitudes about the classroom and clinical environment.~~

Student surveys provide insight regarding student satisfaction relative to all aspects of the program such as instruction, educational resources, and student services, as well as their clinical experience. The surveys identify strengths and weaknesses from a student's perspective.

Clinical extern affiliate:

Externship site **surveys evaluations** include a critique of students' knowledge and skills upon completion of their in-school training and reflect how well the students are trained to perform their required tasks. They include an assessment of the strengths and weaknesses, and proposed changes, in the instructional activities for currently enrolled students. The sites also evaluate the responsiveness and support provided by the designated school representative, who visited the site and remained in contact with the site throughout the duration of the students' externship.

Graduate:

A program has a systematic plan for regularly surveying graduates, which determines if: (i) graduates have been informed of applicable credentialing requirements (ii) the classroom, laboratory, and clinical experiences prepared students for employment (iii) and (iii) graduates are satisfied with their educational training. At a minimum, an annual review of the results is conducted and shared with administration, faculty and advisory boards. Decisions and action plans are based upon the review of the surveys, and any changes made are documented (e.g., meeting minutes, memoranda).

Employer:

A program has a systematic plan for regularly surveying employers, which determines if: (i) information on whether the skill level of the employee is adequate, and (ii) if the employer would hire another graduate from the program. At a minimum, an annual review of the results is conducted and shared with administration, faculty and advisory boards. Decisions and action plans are based upon the review of the surveys and any changes made are documented (e.g., meeting minutes, memoranda).

Subsection 1.2 – Program effectiveness plan content

V.I.1.2. *A program has an established documented plan for assessing its effectiveness as defined by specific outcomes.*

While each program must represent each element required below, the plan may be a comprehensive one which collectively represents all programs within the institution or may be individual plans for each distinct program.

The Program Effectiveness Plan ~~includes clearly stated~~ clearly describes the following elements:

a. student population

A description of the characteristics of the student population is included in the Plan.

b. program objectives

Programs objectives are consistent with the field of study and the credential offered and include as an objective the comprehensive preparation of program graduates for work in the career field.

c. program retention rate

The retention rate for the previous two years and the current year is identified which is determined by using the ABHES required method of calculation for the reporting period July 1 through June 30. Based upon these rates, the institution must then identify its retention rate goal for the next reporting year and the factors considered in determining such a goal and the activities undertaken to meet the goal.

d. job placement rate ~~in the field~~

The job placement rate for the previous two years and the current year is identified which is determined by using the ABHES required method of calculation for the reporting period July 1 through June 30. Based upon these rates, the institution must then identify its placement rate goal for the next reporting year and the factors considered in determining such a goal and the activities undertaken to meet the goal.

e. credentialing examination participation rate

The credentialing examination participation rate for the previous two years and the current year is identified which is determined by using the ABHES required method of calculation for the reporting period July 1 through June 30. Based upon these rates, the institution must then identify its credentialing participation rate goal for the next reporting year and the factors considered in determining such a goal and the activities undertaken to meet the goal.

f. credentialing examination pass rate

The credentialing examination pass rate for the previous two years and the current year is identified which is determined by using the ABHES required method of calculation for the reporting period July 1 through June 30. Based upon these rates, the institution must then identify its credentialing pass rate goal for the next reporting year and the factors considered in determining such a goal and the activities undertaken to meet the goal.

h g. surveys of students (classroom and clinical experience), clinical extern affiliate, graduate and employer satisfaction with the program surveys

~~A program must survey each of the constituents identified above. The purpose of the surveys is to collect data regarding student, clinical extern affiliate, graduate and employer perceptions of a program's strengths and weaknesses.~~

At a minimum, an annual review of results of the surveys is conducted, and results are shared with administration, faculty and advisory boards. Decisions and action plans are based upon review of the surveys, and any changes made are documented (e.g., meeting minutes, memoranda).

The institution establishes: 1) a goal for the percent of surveys returned and 2) benchmarks for the level of satisfaction desired.

1. Faculty Professional Growth and In-Service Activities

~~A program maintains data that evidences faculty participation in professional growth activities and in-service sessions that promote continuous evaluations of the programs of study, instructional procedures and training.~~

Subsection 3 - Outcomes assessment

V.I.32. A program has a process for assessing effectiveness annually.

The Program Effectiveness Plan specifies a process and a timetable for the annual assessment of program effectiveness ~~in achieving the outcomes it has identified with its objectives and criteria.~~

The plan must:

~~ii i. Identify and describe types of data that are used for assessment, the process for how data were collected, rationale for use of each type of data, timetable for data collection, and parties responsible for data collection.~~

~~ii. Include Document historical outcomes and show evidence of how this information is used to establish goals and improve the program. these historical data are used to identify expected outcomes and to achieve expected goals (e.g. evaluations, advisory boards, credentialing).~~

~~iii. Review initial baseline rates and measurements of results after planned activities have occurred~~

~~iv. Provide a summary and analysis of data collected and state how continuous improvement is made to enhance expected outcomes.~~

ii. Include an assessment of the curriculum that uses tools which might include examinations, advisory board input, competency and skill outcomes, faculty review of resource materials, and graduate and employer surveys. Results of the assessment are not required to be reported to ABHES, but are considered in annual curriculum revision by such parties as the program supervisor, faculty, and the advisory board. Changes adopted are included in the program effectiveness plan.

iii. Summarize and analyze the most recent data and explain how it will be used to improve the program.

~~v. Identify how data were used to improve the educational process.~~

~~vi. Adjust goals as a result of the evaluation of a PEP, based on an assessment of community and employer demand for graduates, which justifies the continued need for a program.~~

~~v. Identify the activities that will be undertaken to meet the goals set for the next year.~~

CHAPTER VI DEGREE PROGRAM STANDARDS

Subsection 2 – Program supervision and faculty

~~VI.C.2.d. — Instructional continuity is maintained through faculty stability.~~

~~The proportion of faculty employed on a full-time basis must be sufficient to ensure sound direction and continuity of development for the educational programs. The institution demonstrates through outcomes and other measures that the proportion of full-time faculty and the faculty's average length of service to the institution allow the institution to meet its stated mission. The institution must promote stability in the faculty through compensation, fringe benefits, professional growth opportunities, and other incentives.~~

APPENDIX C CATALOGS

23. A policy for transfer of credit that requires consideration of credit from other institutions accredited by an agency recognized by the United States Department of Education (USDE) or the Council for Higher Education Accreditation (CHEA.) If the institution accepts credits earned at another institution that is not located in the United States or its territories the policy must include that the specific education is evaluated by World Education Services who then attests to the qualitative and quantitative equivalency of the foreign evaluation.

APPENDIX E RECORDS MAINTENANCE

- B. Faculty
8. Fully completed, **and** signed and current ABHES Faculty Data Sheets.

APPENDIX F

COURSE SYLLABI REQUIREMENTS

5. A description of the outside work, excluding clock hour only programs, and estimated hours to complete (if none are required, this fact must be stated)

APPENDIX G

DISTANCE EDUCATION

The institution or program shall:

I. Publications

~~1. Publish objectives that identify or incorporate the use of distance education delivery methods.~~

1. Disclose delivery methods in the catalog and other institutional publications.
2. Disclose specialized or different fees associated with distance education to prospective and current students.
3. Publish the technology resources required for successful program or course completion.
4. Clearly outline expectations, admissions requirements or prerequisites for participating in distance education courses or programs in the catalog.
5. Disclose in writing, prior to enrollment, any material circumstance that may adversely impact an applicant's ability to complete a program or gain employment in the field for which they are trained.

X. Objectives & Outcomes

~~3. Assess the educational effectiveness of its distance education delivery systems through the use of its Program Effectiveness Plan. This assessment includes retention, placement and credentialing data, and a comparison between the distance education and on-campus delivery outcomes, if applicable.~~

APPENDIX I

FEES

ACCREDITATION USER FEES

Annual Report Delinquency Fee

\$12,500

(Received after published due date)

(Note: a show-cause directive issued after 10 days following deadline)