



ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS | ABHES

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ABHES BULLETIN

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

From: India Y. Tips, Executive Director

Date: June 1, 2023

Subject: Proposed Revisions to ABHES *Accreditation Manual* – Call for Comment

ABHES reviews its accreditation policies, procedures, and standards annually. We invite you to participate in the process of standards review and inform the Commission of your thoughts for their consideration at the July 2023 meeting, where the revisions will be finalized. Complete the survey to submit your comments and recommendations **no later than Friday, June 30, 2023**. During the comment period, ABHES will host a webinar to further discuss rationale and to address questions related to the proposals. Be on the lookout for an email related to this webinar and how to register.

In the attached proposed revisions, note that new language is underlined and deleted language is ~~struck~~. Each revision has a comment to relay the Commission's intent behind the proposal. Upon careful review of the proposals, click the link to complete the Call for Comment Survey: [Call for Comment – June 2023](#).

The revisions proposed by the Commission at this time stem from the work of:

- The Standards Review Committee, which focused on Chapters I (General Information) and IX (Distance Education) this year as part of its five-year review of the *Accreditation Manual* in addition to constituency ideas, adequacy and relevance survey data, and compliance data from the previous year.
- The Programmatic Accreditation Committee – Medical Laboratory Technology, which focused on updating standards for industry terminology.
- The Commission on policy items related to:
 - Notifications
 - Fees
 - Change of ownership excluded transfers
 - Teach-out documentation
 - Eligible career pathways
 - Non-main campus inclusions

Upon review of all results of the Call for Comment, the Commission may adopt a revision as proposed, adopt a revision with further changes, defer action for additional consideration, or reject a proposed revision. For adopted revisions, ABHES will announce the final revisions in August 2023 for an effective date of January 1, 2024.

Thank you for your participation!

CHAPTER I – GENERAL INFORMATION

Overview

This chapter provides an overview of the Accrediting Bureau of Health Education Schools (ABHES) and outlines general policies and procedures, including those related to complaints, dual enrollment, education provider agreements, and non-instruction service provider contracts.

SECTION A The Bureau

Subsection 1 Mission and objectives

I.A.1.a. The mission of the Accrediting Bureau of Health Education Schools (ABHES) is to serve as a nationally recognized accrediting agency of institutions predominantly providing health education and programmatic accreditation in specific health education disciplines.

I.A.1.b. The objectives of ABHES are as follows:

- i. ~~To enhance the quality of education and training and promote institutional and programmatic accountability in the institutions and programs it accredits.~~ To establish and promulgate standards for accreditation that enhance the quality of institutions and programs offering predominantly health education.
- ii. ~~To establish eligibility criteria and evaluation standards for the administration and operation of institutions providing predominantly health education and programs in specific health education disciplines.~~ To hold institutions and programs accountable for the quality of their graduates in order to enhance employment outcomes and promote the health, safety, and welfare of the public.
- iii. ~~To conduct a systematic review of ensure that the~~ eligibility criteria and ~~evaluation~~ standards ~~to ensure they~~ are relevant, valid, ~~and~~ reliable, and predictive of successful ~~qualitative~~ outcomes ~~through a comprehensive program of systematic review, enhancement, and follow up.~~
- iv. To cooperate with organizations in the health fields for the purpose of maintaining and further improving education quality and the outcomes of health institutions and programs.
- v. ~~To enhance employment outcomes through quality improvement of institutions and programs.~~ To encourage and recognize health education institutions and programs for integrity and the pursuit of educational excellence.
- vi. ~~To establish and promote follow~~ sound business and ethical standards in the accreditation of institutions/programs.
- vii. ~~To engage in activities that are necessary and proper for the accomplishment of these objectives, consistent with the interest of health education institutions, programs, students, and the public.~~

Commented [KC1]: The changes in I.A.1.b. align the organizational objectives with ABHES' Articles of Incorporation.

Subsection 2 Recognition

I.A.2. Accrediting Bureau of Health Education Schools (ABHES) is an independent non-profit agency unrelated to any trade or membership organization. ABHES is recognized by the U.S. Secretary of Education (Secretary) for the accreditation of private, postsecondary institutions in the United States offering predominantly allied health education programs leading to a certificate, diploma, and degrees at the level of Associate of Applied Science, Associate of Occupational Science, Academic Associate, Baccalaureate, and Master's; and the programmatic accreditation of medical

assisting, medical laboratory technology, and surgical technology programs, through the Associate degree, including those offered via distance education. The scope extends to the Substantive Change Committee, jointly with the Commission, for decisions on substantive change.

ABHES accredits programmatically for certificate, diploma, and degree programs being taught in both public and private institutions. It also accredits institutionally outside of the health education area, provided the institutions retain predominance in health education (see [II.A.1.a.](#) for ABHES' definition of *predominance*). Any proposed change to the mission, policies, procedures, or accreditation standards that alters ABHES' scope of recognition or compliance with requirements for recognition will be submitted to the [U.S. Secretary of Education](#).

Commented [KC2]: Consistent reference throughout Manual.

Subsection 3 The Commission

I.A.3. The Commission is composed of a minimum of nine and a maximum of 15 commissioners, including a blend of educators (academic and administrative), practitioners, and public members. The majority of the Commissioners are elected by institutional personnel representing institutions and programs accredited by ABHES. The remaining Commissioners are appointed by the Commission itself. At least two Commissioners are owner representatives, and at least one-seventh of the Commissioners represent the public. The composition of the Commission, the qualifications of the Commissioners, the process for selecting Commissioners, the term of office for Commissioners, the Commission's powers and responsibilities, the general meeting guidelines, and other important information relative to the operation of ABHES are described in detail in its Bylaws (see [Appendix H: Bylaws](#)).

Commented [KC3]: Technical correction.

Subsection 4 Conflicts of interest and recusal

I.A.4. The Commission conducts its evaluation of institutions and programs in an objective and confidential manner. To ensure objectivity, impartiality, and integrity in the accreditation process, individuals involved in the ABHES accreditation process, including Commissioners, evaluators, staff members, committee members, appeal panelists, and consultants will not ~~participate be involved~~ in considerations or evaluations of institutions or programs that ~~present or constitute a~~ appear to present a conflict of interest. ~~All such interests must be disclosed to the ABHES Executive Director, who together with the Commission, will determine whether the individual should be recused from the review of an institution or program. Individuals will not accept any gratuity from a reviewed institution or program, and will not disclose any information received as the result of their involvement in the accreditation process and must identify actual or potential conflicts of interest to the ABHES Executive Director. The Executive Director, legal counsel, or the Commission will determine whether the individual should be recused from review of an institution or program.~~

Commented [KC4]: Involved was used twice in the sentence previously, so this is a grammatical change to use participate instead in this instance.

Examples of possible conflicts of interest:

- i. Ownership of stock in the company or parent organization owning the institution.
- ii. Current or prior service as an employee, officer or director of, consultant to, or ~~in~~ a business or financial relationship with the institution.
- iii. Competition in the same service area as the institution.
- iv. Personal friendship other than casual business relationship with owners, operators, or senior employees of the institution.

Commented [KC5]: These changes include conforming amendments and moving out the conflicts, which have been added to the detailed list in this section.

- iv-v. Acceptance of payment such as consulting fees; honoraria (including honoraria from a third party); gifts or in-kind compensation for consulting, lecturing, travel, advisory board service, legal testimony, or consultation; or other gratuities.
- vi. Any other interest which affects or may affect the objective judgment of the individual (e.g., Commissioner, evaluator, staff person), in the performance of his or her responsibilities.

Commented [KC6]: Relocated from above.

Subsection 5 Confidentiality

- I.A.5. All non-public The information provided by or about institutions and programs subject to ABHES' accreditation will be maintained in strict confidence and used solely for the purpose of evaluating the institution or program's compliance with ABHES requirements. The individuals Such information involved in the review, will only not be discussed the accreditation matters related to an institution or program outside normal Commission meetings or in the ordinary course of conducting Commission business, unless such discussion is necessary to conduct Commission business effectively.

Commented [KC7]: The changes in this section broadened confidentiality to not just be written about for the Commission itself, but all business by staff, evals, committees, etc. in a manner that provides better clarity and reflects current processes.

Subsection 6 Public participation

- I.A.6. ABHES provides the public with the opportunity to comment on, at a minimum, institutions or programs seeking new or renewal grants of accreditation.

Commented [KC8]: New section formerly from I.B.2. felt appropriate under Section A The Bureau because it signals how important public participation is in the accreditation process

Commented [KC9]: Added as ABHES typically provides notice about more than grant actions

On its website, ABHES publishes a list of institutions and programs to be considered at its Commission meeting and requests comments pertaining to any institution or program on the Commission's list. Comments must include information that assists the Commission in making a decision regarding pending applications. All comments received will be forwarded to the institution for an opportunity to submit a response to the comments. Anonymous comments will not be accepted.

Commented [KC10]: Taken from the ABHES website to provide additional clarity on what we do.

SECTION B Policies Affecting Institutions and Programs

Subsection 1 Disclosure to governmental and recognition agencies

I.B.1.a. *Notifications on compliance*

The Commission submits to the U.S. Secretary of Education (Secretary) information regarding an institution's compliance with federal student aid program requirements if (i) the Secretary requests such information, or (ii) the Commission finds: (a) that the institution is failing to meet its Title IV program responsibilities; (b) there is systemic or significant non-compliance with the Commission's standards for allocation of credit hours; or (c) that it appears that the institution is involved in fraud and abuse with respect to Title IV programs.

Such notification from ABHES based on (ii) (a), (b), or (c) above will be referred to the appropriate U.S. Department of Education (Department) staff through the Executive Director. Prior to submitting information to the Secretary based on these three items, if appropriate and at the discretion of the Executive Director, the institution will be given an opportunity, if appropriate and at the discretion of the Executive Director, to comment on the Commission's findings and to evidence compliance. The Executive Director of ABHES will determine on a case-by-case basis

Commented [KC11]: This is simply a grammatical change.

whether the disclosure of information to the Secretary, pursuant to (ii) (a), (b) or (c) should be confidential and will maintain confidentiality if requested by the Department.

~~At the same time notice is given to the institution or program but not later than 30 days after it reaches a decision, the Commission provides written notice of the following decisions to the Secretary, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public:~~

- ~~i. A decision to grant initial and renewal accreditation.~~
- ~~ii. A final decision to issue a show cause directive or program specific warning.~~
- ~~iii. A decision to initiate a denial of or withdrawal of accreditation.~~
- ~~iv. A final decision to deny or withdraw the accreditation of an institution or program.~~

Commented [KC12]: This language was struck as it was duplicative of language in IILD.2. of the *Accreditation Manual*.

~~**I.B.1.b. Notification of accreditation decisions**~~

~~Within 60 days of any decision listed above, the Commission makes available to the Secretary, the state approving agency, and the public a brief statement summarizing the reasons for the decision and the official comments, if any, that the affected institution or program may wish to make with regard to the decision or evidence that the institution or program has been offered the opportunity to comment.~~

~~An applicant for accreditation explicitly agrees that, if accreditation is granted, all records pertaining to that institution may be made available to the Secretary, the state licensing agency, and other state regulatory agencies.~~

Commented [KC13]: This language does not fit in this section of the manual, so it was struck.

~~**I.B.1.c. Notification of a final negative action**~~

~~Within 60 days of a final negative action, the Commission makes available to the Secretary, appropriate state agencies, recognized accrediting agencies, and the public a brief statement summarizing the reasons for the negative action determination and the official comments, if any, that the institution or program made with regard to the Commission's decision or in the absence of official comment from the affected institution or program evidence that the institution or program was offered the opportunity to provide official comment.~~

Commented [KC14]: This language was struck as it was duplicative of language in IILD.2. of the *Accreditation Manual*.

~~**I.B.1.d. Notification of Title IV program non-compliance**~~

~~If the Secretary provides the Commission with information regarding an institution's non-compliance with Title IV program requirements, the Commission will undertake an investigation in accordance with its standards and procedures. ~~considers that information and an investigation ensues.~~~~

Commented [KC15]: Grammatical correction.

Subsection 2 – Public participation

~~**I.B.2.** The Commission provides accredited institutions and programs, the U.S. Secretary of Education, state licensing agencies, other state regulatory agencies, accrediting agencies, and other interested parties, an opportunity to comment on proposed new accreditation standards or changes to existing standards to which ABHES accredited institutions and programs are subject. If ABHES determines that it needs to make changes to its standards, it initiates action within 12 months to make the changes and completes that action within a reasonable period of time.~~

Commented [KC16]: Relocated to I.B.3.a. as part of standard review process

~~ABHES also provides opportunity to comment on institutions or programs seeking new or renewal grants of accreditation.~~

Commented [KC17]: Relocated to I.A.6. as part of bureau procedures on public participation in accreditation decisions.

Subsection ~~32 Adequacy and relevance~~ Annual review of standards

I.B.32.a. Annual ~~committee standards~~ review process

The Commission is responsible for the process of establishing the adequacy and relevance of its ~~evaluation~~ standards to achieve the ABHES mission. The Standards Review Committee (SRC) is charged with ~~a conducting an annual standard review process and ensuring that all standards receive a substantive review at least once in a five-year cycle. The SRC is supported by subject matter experts on subcommittees which may include programmatic accreditation committees, program advisory committees, the distance education committee, and any needed taskforces.~~ ~~an annual review of the evaluation standards using a five-year cycle by which time a substantive review of each standard is complete.~~

The SRC ~~meets at least once annually to review the standards and includes~~ ~~has, at minimum, one annual meeting. Its review includes~~ participation and input from appropriate constituents, ~~including accredited institutions and programs, students, graduates, employers of graduates, and industry leaders.~~ The results of its review, including recommendations for revisions to standards, ~~are~~ reported to and used by the Commission ~~in determining the extent to which to determine that the standards are in fact~~ valid and reliable indicators of quality and are commonly accepted by the educational community. ~~Standards are subsequently revised by the Commission.~~

~~The Commission provides accredited institutions and programs, the U.S. Secretary of Education, state licensing agencies, other state regulatory agencies, accrediting agencies, the public, and other interested parties an opportunity to comment on proposed new accreditation standards or changes to existing standards to which ABHES-accredited institutions and programs are subject.~~

~~Comments from constituents are reviewed by the Commission to finalize revisions.~~

~~If the ABHES Commission determines that it needs to make changes to its standards, it initiates action within 12 months to make the changes and completes that action within a reasonable period of time.~~

I.B.32.b. Essential review components

Essential components of the ~~standard review~~ process include, but are not limited to, the following activities:

- i. Continual emphasis on the development of well-defined, outcome-specific standards, focusing on multiple measures.
- ii. Frequent objective evaluations of compliance based upon information gathered and verified during routine ~~on-site assessments and administrative reports~~ ~~evaluation visits.~~
- iii. Comprehensive analysis of individual and group data to identify patterns of performance.
- iv. Systematic reviews of compliance through committees that examine ~~these~~ data, determine their significance, and make recommendations for appropriate action.

~~During this~~ review process, consideration is ~~also~~ given to the ~~consequences-impact~~ of ~~these activities~~ ~~revisions~~ on the profession and community at large. ~~Such measures~~ ~~The process~~ evaluates the relevancy and clarity of existing standards ~~against~~ industry trends ~~and~~ content emphasis ~~to inform and~~ frequency of ABHES training workshops, necessity for follow-up visitations, interim reports, and other similar activities. The ultimate objective is to establish a productive cycle of

Commented [KC18]: Subsection title changed to better align with content

Commented [KC19]: The changes in this section match better to clarify current practices.

Commented [KC20]: List struck as it seems better not to specify constituencies as they may change and the lists was not all inclusive as written.

Commented [KC21]: Expands on detailing the steps of the standards review process.

Commented [KC22]: Clarity to specify which process instead of use of "this"

Commented [KC23]: Visits might not necessarily be on-site and want to be more inclusive

Commented [KC24]: The changes in this section reflect current practices with more clarity.

activities that ensures current and meaningful requirements, increased standards compliance, and improved process integrity and product quality on a continual basis.

Subsection 43 Fees and assessments

I.B.43. The Commission establishes and periodically modifies annual sustaining fees based on the needs of ABHES and user fees based on the approximate cost of providing ~~the evaluation services~~ for an institution or program (see [Appendix G: Fees](#)).

Commented [KC25]: Grammatical change.

Failure to pay fees timely may result in ~~adverse or probationary equivalent action, including up to~~ withdrawal of accreditation.

Commented [KC26]: Reflects Commission discretion and possible severity of failure to pay fees

Subsection 54 Complaints

I.B.54.a. Overview

ABHES reviews complaints against an accredited institution or program, ~~or an applicant~~ that ~~provide credible information to indicate that the institution or program is not in compliance with the relate to the accreditation requirements standards~~ set forth in the *Accreditation Manual*. If a complaint raises a question of possible violation of these requirements, the institution or program will be given the opportunity to respond to the complaint in accordance with the procedural requirements below. If a violation is found, ABHES will take appropriate action. ABHES maintains all records of complaints received against institutions or programs.

Commented [KC27]: Reflects that ABHES receives and investigates complaints against initial applicants.

Commented [KC28]: Enhances description of applicable information.

I.B.54.b. Complaint requirements

1. **Submission process.** All complaints and supporting documentation must be submitted using the ABHES ~~on-line~~ complaint system at <https://complaintsabhes.com>. ABHES reviews complaints that are accompanied by documentation and set forth facts and circumstances in sufficient detail to permit an effective response from the institution or program.

Commented [KC29]: Updated to "online" for consistency throughout Manual.

2. **Documentation.** The complaint should include all of the following:

- A narrative section for each complaint type.
- The accreditation standards and requirements published in the current ABHES Accreditation Manual that are germane to the complaint.
- Evidence of efforts to resolve the complaint through the institution or program's internal grievance procedures, or ~~evidence explanation~~ that such efforts would be unproductive.
- Any additional supporting documentation.

Commented [KC30]: The burden of evidence may set the requirement too high for a complainant; an explanation may be a more reasonable bar to meet.

~~3. **Timing.** Complaints must be made within 90 days of the last event that is material to the complaint.~~

Commented [KC31]: This modification relocates timing to "Scope" below.

~~4.3. **Anonymous complaints.** ABHES accepts anonymous complaints but will require the institution or program to respond only if, in the absence of the identity of the complainant, it can be determined that the allegations constitute a possible violation of accreditation requirements. When the identity of the complaint is a material fact necessary to permit the institution or program a full and fair opportunity to respond or the lack of identity of the complainant makes it impossible to determine with reasonable certainty that a violation of accreditation requirements may have occurred, then the anonymity of the complainant may be a basis for dismissing a complaint. Anonymity ~~may also will prevent ABHES from~~~~

~~communicating with a complainant and obtaining information that may be required for the complainant's resolution. Notification to complainants and requests to complainants for additional information set forth in this section which are therefore not applicable to anonymous complaints.~~

Commented [KC32]: This change acknowledges that sometimes complaints are received with no way to contact the complainant to receive additional clarifying information.

5.4. Requests for confidentiality. Complainants may request that ABHES withhold their identity from an institution or program named in the complaint. ABHES will review the complaint but, in its discretion, may not be able to process a complaint where the identity of the complainant is a material fact necessary to determining whether a violation has occurred or is needed to permit the institution or program a full and fair opportunity to respond to the complaint allegations.

5. Limitations Scope. The scope of the ABHES complaint process relates specifically to the standards set forth in the *Accreditation Manual*. ABHES will not intervene on behalf of individuals in cases of personnel action, and will not review an institution or program's internal administrative decisions in such matters as admissions decisions, academic dishonesty, assignment of grades, or similar matters unless the context of an allegation suggests that unethical or unprofessional conduct or action may have occurred that may raise questions about the institution or program's compliance with an ABHES standard or accreditation requirement. ~~If the complaint falls outside of ABHES' scope, the complainant may be referred to the appropriate regulatory agency or entity with jurisdiction over the subject matter of the complaint.~~

Commented [KC33]: New language intended to be clearer to complainants on ABHES' scope.

~~ABHES accepts, actively researches, and responds to complaints that are submitted within a reasonable amount of time following the last event that is material to the complaint, typically one year. ABHES may elect not to pursue a claim if it is received after this timeframe. ABHES will pursue a claim if the complaint alleges conduct or circumstances that present an ongoing risk to students or faculty or threaten the academic quality of the institution's programs.~~

Commented [KC34]: This modification takes former number 3 Timing and builds on it. The original timeline was overly narrow, and the new language allows for more flexibility and discretion around basis of a complaint.

6. Referrals to other agencies. ABHES may refer complaints and/or complainants to appropriate federal, state, or private agencies with jurisdiction or special expertise that is relevant to the complaint where compliance with ABHES standards or other accreditation requirements is not central to the complaint. ~~In these instances, ABHES may exercise its discretion to provide a copy of the complaint may be provided to the subject institution or program.~~

Commented [KC35]: This mostly grammatical change aligns with practice.

7. Conflict of interest. ABHES's conflict of interest policy apply to the investigation and resolution of complaints.

I.B.54.c.

Complaint procedures

1. Complaint review and assessment. Within 15 ~~business~~ days of receipt of the complaint, ABHES will assess whether the complaint states a possible violation of accreditation requirements. For the purposes only of this initial assessment of the complaint, ABHES will accept facts alleged in the complaint as true. If more information is needed to assess the complaint, ~~and the identity of the complainant is known,~~ ABHES will request it from the complainant, who ~~then~~ must ~~then~~ provide the information in order for ABHES to continue the complaint process. A complaint that lacks sufficient detail to permit an institution or program to respond effectively will be dismissed and the complainant so notified.

Commented [KC36]: The modification allows staff sufficient time to review and for the complaints team to confer on next steps.

Commented [KC37]: Acknowledges some information is anonymous.

2. **Initial complaint closure.** If the complaint does not allege a violation of accreditation requirements, or fall outside of the scope of the ABHES complaint policy, ABHES will inform the complainant and the file will be closed. The complainant may request in writing that a decision to close the complaint at this stage be reviewed by the Executive Committee. The Executive Committee will consider such request within 30 days and will either affirm the decision to close the complaint or reopen the complaintase and direct the institution or program to respond. The complainant will be notified of this decision.
3. **ABHES response.** ABHES will forward the complaint to the institution or program for a response if the allegation(s) could potentially constitute a violation of accreditation requirements. ABHES will also provide a summary of possible violations of accreditation requirements based on its analysis of the complaint. This summary is not to be taken as comprehensive or conclusive since ABHES may determine, during the course of further review, that there is evidence of non-compliance with other accreditation requirements not included in the original summary.
4. **Institution/program response.** The institution or program must respond directly to the complaint and provide any specific information or documentation requested by ABHES. The institution or program will be provided no more than 30 days from the date of the ABHES letter to respond to the complaint. The response should be structured as follows:
 - a. deny the allegation(s) of the complaint and present evidence to the contrary
 - b. acknowledge the allegation(s) of the complaint and demonstrate the allegation(s) do not constitute violation(s) of accreditation requirement(s), and/or
 - c. accept the allegation(s) and document the actions taken to assure that the violation has been corrected and will not occur in the future.
5. **Response assessment.** Within 15 business days of receipt of the response, ABHES will determine whether it appears more likely than not that there is a violation of an accreditation requirement. ABHES may request additional information from either the complainant or respondent if it believes such information is necessary to the resolution of the complaint and will reevaluate the response after the institution or program has had an opportunity to submit such additional information.
6. **Action and notification.** The following actions may apply to complaints that have been fully reviewed vetted through the ABHES complaint procedure:
 - a. **No violation.** If it appears there is no violation of accreditation requirements, ABHES will inform both the complainant and the respondent that the complaint has been closed.
 - b. **Evidence of compliance.** If it appears there was a violation of an accreditation requirement and the institution or program has demonstrated it has taken sufficient corrective action to come into compliance, ABHES will inform both the complainant and the respondent that the complaint has been closed.
 - c. **Possible violation.** If it appears more likely than not that there may be a violation of an accreditation requirement and the institution or program has not demonstrated sufficient corrective action, or if the complaint review reveals non-compliance of a more systemic nature, the matter will be referred to the Executive Committee for action and the institution or program will be notified of the referral. Within 30 days of receipt of a referral, the Executive Committee will:
 - i. determine that there is no violation and dismiss the matter

Commented [KC38]: Provides clarification to complaints that fall outside of scope and the policy.

Commented [KC39]: Complaints are not considered cases, so this change reflects consistency in language throughout the section.

Commented [KC40]: Notes that changes may occur through review.

Commented [KC41]: The modification allows staff sufficient time to review and for the complaints team to confer on next steps.

Commented [KC42]: This change reflects the terminology used in the process, which is a review.

- ii. request additional information from the institution or program
 - iii. order the institution or program to take specific actions to bring it into compliance,
 - iv. issue a show cause order, or
 - v. refer the complaint to the Commission for action which may include a show cause directive, program specific warning or up to and including withdrawal of accreditation.
- d. In all cases, the complainant and the respondent will be notified of the final disposition of the complaint once it becomes final.

Commented [KC43]: These changes build out details of the current process.

I.B.54.d. **Complaints against ABHES**

ABHES reviews complaints against ABHES in a timely, fair, and equitable manner, and applies unbiased judgment to take follow-up action, as appropriate, based on the results of its review. The Commission maintains all records of complaints s received against ABHES.

The process for complaints against ABHES is as follows:

1. **Submission Process.** All complaints against ABHES must be submitted using the ABHES on-line complaint system at <https://complaintsabhes.com>.
 - a. If the complaint pertains to ABHES staff or any ABHES representative, the written complaint may be addressed to the Executive Director directly at complaints@abhes.org or mailed to the ABHES office located at 6116 Executive Boulevard, Suite 730, North Bethesda, Maryland 20852.
 - b. If the complaint pertains to the Executive Director, the written complaint must be addressed to the Chair of the ABHES Commission.
2. **Documentation.** The complaint must state in narrative format the specific allegations in sufficient detail and with sufficient supporting documentation to permit understanding of the nature of the complaint and its factual support.
3. **Review and assessment.** The complaint and its supporting documentation will be reviewed within 30 days of receipt by ABHES. Thereafter, the reviewer(s) will act to gather any additional relevant information deemed relevant to the disposition of the complaint.
4. **Action and notification.** The reviewer(s) will issue a decision on the complaint. Notice of the decision will be provided to the complainant.

Commented [KC44]: These changes make specific who the complaint is sent to and clarifies what will be reviewed.

I.B.54.e. **Complaint Reports**

A Complaint Report is provided to the Commission at each Commission meeting.

Subsection 65 Dual enrollment

I.B.65.a. **Definition and eligibility**

Dual enrollment also known as “concurrent enrollment” or “dual credit” allows s students without a high school diploma or GED to enroll in courses for which college credit is offered. Accredited institutions and programs may participate in a Dual Enrollment agreement with another entity only if that entity is a participating school that is authorized to offer Ddual eEnrollment under its state statutes, policies, and regulations.

Commented [KC45]: These changes made the capitalization more consistent.

I.B.65.b. Dual enrollment agreements

All Dual Enrollment Agreements must be approved by ABHES prior to implementation. The institution seeking approval must submit a Dual Enrollment Agreement that minimally includes the following:

- i. a description of the student selection process
- ii. the location of course(s) and/or programs
- iii. as well as the delivery method(s) utilized for the course(s) and/or programs
- iv. transfer of credit eligibility of credits for transfer

The institution must explain the process for payment of coursework and state specifically if federal financial aid is used. In the event of Title IV funding is utilized, a copy of the approval from the U.S. Department of Education must also be submitted.

All programs and courses offered through dual enrollment are held to ABHES institutional standards and a statement indicating that the institution retains responsibility for its compliance must be submitted along with the Dual Enrollment Agreement. Dual enrollment students must meet student achievement indicators as defined by ABHES.

Commented [KC46]: The changes in this section add clarity around expected information.

Commented [KC47]: Consistency with above romanette.

Commented [KC48]: Clarifies expectations.

Subsection 76 Education provider agreements

I.B.76.a. Definitions

Education provider agreements refer to situations in which an ABHES accredited institution or program, referred to as the home institution or program, arranges to have some portion of its education program curriculum provided by another party institution, or host. Such agreements ~~They~~ may also be called consortium agreements, ~~or~~ contracting agreements or written arrangements. In these cases, the coursework provided is treated as if it had been provided directly by the home institution or program. In all cases, home institutions and programs should provide, to prospective and enrolled students, clear disclosure of the nature of their educational delivery agreements.

Agreements to provide student instruction must be approved by ABHES prior to implementation.

I.B.76.b. Consortium agreements

Consortium agreements are arranged between two or more institutions or programs accredited by ABHES or another agency recognized by the U.S. Department of Education (USDE) or the Council for Higher Education Accreditation (CHEA). Under a consortium agreement, the degree- or certificate-granting institution school accepts the credits taken at another institution(s) as if they were offered by the student's home institution. The assumption is that the institution has found another school or organization's academic standards to be ~~the~~ equivalent in rigor to its own level of instruction.

All schools and campuses involved in a consortium agreement the sharing of courses must have any required approvals (by an accreditor recognized by the USDE or CHEA and state authorizing agencies) to offer the courses that are part of the consortium, which will be shared. If a host institution or program is offering courses via distance education delivery, it should also have the appropriate distance education approvals.

Commented [KC49]: This aligns with terminology in 34 CFR 668.5

Commented [KC50]: These changes reflect language clarification.

I.B.76.c. Contracting agreements

Distinct from consortium agreements, a contracting agreement is the execution of a contract under which an institution, organization, or program not certified to participate in the Title IV, Higher Education Act programs offers up to 49% of the accredited institution’s educational program. The home institution must provide clear evidence of the capacity of the partner to provide the education and evidence that the program complies with all ABHES standards. This provision is not intended to apply to clinical affiliation agreements.

Subsection **87** Transfer of credit and articulation agreements

I.B.87.a. Overview

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 and include a statement of the criteria established by the institution regarding transfer of credit earned at another institution of higher education. Institutions are encouraged to accept transfer credits to promote academic mobility and to avoid requiring students ~~to unnecessarily to repeat prior~~ equivalent coursework.

Commented [KC51]: Grammatical change.

I.B.87.b. Accepting credits or clock hours

An institution or program may accept credits or clock hours earned at another institution accredited by an agency recognized by the U.S. Department of Education or the Council for Higher Education Accreditation to satisfy specific requirements for completion of a program. An institution or program may accept credits or clock hours earned at another institution that is not located in the United States or its territories if the ~~specific foreign education coursework has been~~ is evaluated by an agency ~~qualified to which attest that the specific courses for which transfer credit is being awarded is~~ to the qualitative and quantitative ~~equivalent of courses offered at the receiving institution. foreign education equivalency and the specific course or courses for which transfer credit is to be awarded.~~ The institution seeking to ~~have evaluate foreign education equivalency~~ evaluated must use the credential evaluation services of an agency that has published standards for membership, affiliations to U.S. based international higher education associations, and are frequently linked to and used by federal agencies, state agencies, educational institutions, and employers (e.g., NACES and AICE).

Commented [KC52]: Simplification of language.

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 ~~that it replaces for which it substitutes~~ and meets all ABHES requirements, including ~~for the achievement of competencies. competency achievement.~~

Commented [KC53]: Grammatical changes.

I.B.87.c. Articulation agreements

As an alternative to case-by-case consideration of requests for transfer of credit, an institution or program may enter into an articulation agreement with an institution accredited by an agency recognized by USDE or CHEA. Articulation agreements are encouraged to provide opportunities for students’ academic mobility.

An articulation agreement formalizes transfer of credits under certain specific conditions stated in the agreement and provides for acceptance of specific credits earned at the other institution to satisfy specific requirements for completion of a program. Credits accepted from another institution pursuant to such an agreement are transfer credits and must meet all provisions regarding transfer credits. The receiving institution or program must demonstrate the basis for

concluding that each transfer credit accepted is equivalent to the credit that it replaces in terms of the knowledge and skill the credit represents in the curriculum design.

Subsection 98 Minimum completion requirement

I.B.98. At a minimum, 25% of the credits or the recognized clock-hour equivalent required for completion of a program must be earned through coursework offered by and completed at the institution or program granting the credential.

Subsection 109 Non-instructional service provider contracts

I.B.109. ABHES requires institutions to ~~must~~ maintain authority over their ~~institution's~~ operations and ensure stability in the delivery of education and student support services, including maintaining authority and responsibility over educational quality. Of particular interest to ABHES is the extent to which such contracts may impact key metrics such as student outcomes, satisfaction, or the administrative and financial capabilities of an institution or program. Institutions or programs are expected to have systems in place to identify and monitor such effects if they occur. Institutions or programs are responsible for ensuring service or vendor contract terms, bundled services contracts, and online program management contracts are sustainable, ~~and~~ support the continuity of educational delivery, and meet requirements of all relevant regulatory bodies.

Commented [KC54]: Grammatical changes.

Common forms of non-instructional service provider contracts include but are not limited to marketing, admissions/recruitment, IT infrastructure/support, institutional research, data analytics, regulatory compliance, student finance (billing, collections, default management), financial aid, HR (benefits, Title IX), payroll, legal, bookstore, food service, and housing. Non-instructional service provider contracts are agreements for services not including instruction, clinical affiliation, practicum, or externship. (See **Subsection 7 – Education Provider Agreements** for contracts related to the delivery of academic content).

Commented [KC55]: These changes were incorporated following the U.S. Department of Education's Dear Colleague letter released 2/2023, which is more restrictive than the ABHES definition.

Institutions or programs may not enter into non-instructional service provider contracts for the following: establishing admissions criteria for students; making final admissions decisions; selecting, approving, and appointing faculty; awarding credit for prior or experiential learning; awarding and recording of academic credit and credentials; approving course content and program curriculum; assigning grades and the evaluation of student performance; and assessing program and institutional outcomes (defining outcomes, analyzing, and interpreting evidence, using information for improvement).

While non-instructional service provider contracts do not require prior approval from ABHES, institutions or programs may be required to make such contracts available during the course of any accreditation review.

CHAPTER II – ELIGIBILITY AND CLASSIFICATIONS

SECTION B Classifications of Facilities

Subsection 1 Main campus

II.B.1. A main campus is the primary physical an educational facility at which the institution offers eligible programs, within the same ownership structure of the institution, and that is approved as such by ABHES and the state in which it is located to provide post-secondary educational programs and services. An institution's grant of accreditation includes its *main campus, non-main campus(es), and separate educational center(s)* as applicable.

Commented [KC56]: Alignment with U.S. Department of Education definition updates.

CHAPTER III – GENERAL PROCEDURES

SECTION A Application, Evaluation, Approval Process, and Recordkeeping

Subsection 7 Teach-out requirements

III.A.7.a. Teach-out plans

~~1.~~ The Commission will direct an institution or program that it accredits to submit a teach-out plan for review and approval upon the occurrence of any of the following events:

- a. **Emergency action.** ABHES is notified by the U.S. Secretary of Education (Secretary) that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any Title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA, and that a teach-out plan is required.
- b. **Financial instability.** ABHES is notified by the Secretary that a nonprofit or proprietary institution's independent auditor expresses doubt about the institution's ability to operate as a going concern or indicating an adverse opinion or a finding of material weakness related to financial stability.
- c. **Required as condition for provisional program participation.** ABHES is notified by the Secretary that the institution is participating in Title IV, HEA programs under a provisional program participation agreement and the Secretary has required a teach-out plan as a condition of participation.
- d. **Placed on payment method requiring Secretary's review of supporting documentation.** The Secretary notifies ABHES that the institution has been placed on the reimbursement payment method described in 34 CFR § 668.162(c) or the heightened cash monitoring payment method described in 34 CFR § 668.162(d)(2) requiring the Secretary's review of the institution's supporting documentation.
- e. **Withdrawal, termination, or suspension of accreditation by institutional accrediting agency.** ABHES is notified by the agency that accredits an institution with a program that is

programmatically accredited by ABHES that the agency has acted to withdraw, terminate, or suspend the accreditation of the institution.

- f. **License or legal authority revoked.** ABHES is notified by a state approval agency that the institution's or program's license or legal authorization to provide an educational program has been or will be revoked.
- g. **Intention to cease operations.** ABHES is notified by the institution that it intends to cease operations entirely or close a location that provides 100% of at least one program.
- h. **Show cause or program specific warning by ABHES.** The Commission has issued a show cause or a program specific warning.
- i. **Withdrawal of accreditation by ABHES.** The Commission withdraws the accreditation of the institution or program.

~~2-~~ The Commission may direct an institution or program to provide a teach-out plan in response to:

- a. Low annual student retention rate that does not meet ABHES guidelines.
- b. Low annual pass rate on required credentialing and/or licensing examinations that does not meet ABHES guidelines.
- c. Low annual graduate placement rate that does not meet ABHES guidelines.
- d. Any circumstances in which ABHES concludes that a teach-out plan is appropriate.

~~3-~~ A teach-out plan must be submitted to ABHES for approval with the required Teach-Out Plan Form.

~~4-~~ The teach-out plan must be consistent with applicable standards and regulations and provide for the equitable treatment of students. This includes, but is not limited to, evidence that:

- a. **Accreditation.** The teach-out institution is accredited by an institutional accrediting agency recognized by the U.S. Secretary of Education.
- b. **Capacity.** The teach-out institution has the capacity to carry out its mission and meets all obligations to existing students.
- c. **Sufficient experience, resources, and support services.** The teach-out institution has the necessary experience, resources, and support services to provide educational program(s) that are of acceptable quality and reasonably similar in content, structure, and scheduling to those provided by the institution or program that may cease operations either entirely or at one of its locations. This includes graduates' access to the same credentialing exams, as applicable. An alternate method of delivery may be offered to students but is not sufficient unless an option by the same method of delivery as the original educational program is also offered.
- d. **Access.** Students are provided access to the program and services without requiring them to move or travel substantial distances or durations.

- e. **Financial information.** Students are provided information about any additional charges.
- f. **Notification.** Students will be provided with *direct notice* regarding their rights and opportunities for teach-out, transfer, and refunds.
- g. **Student list.** Teach-out plans include a listing of currently enrolled students.
- h. **Program list.** All teach-out plans include the names of other institutions that offer similar program(s) and that could potentially enter into a teach-out agreement. Institutional teach-out plans include a list of all academic programs offered by the institution.

~~5. When an institution chooses to cease operation of a program(s) at one of its locations or entirely, it The plan may seek approval propose that thefor a teach-out plan. The institution may propose a self-teach-out of currently enrolled students or may propose a teach-out to be completed be accomplished by the institution or program that may cease operations, either entirely or at one of its locations, or by another institution(s), so long as the requirements for teach-out listed above are met. Teach-out plans should specify the amount of time within which the teach-out will be concluded. ABHES reserves the right to approve the teach-out plan for a shorter or longer amount of time than specified by the institution or program.~~

~~If the approved teach-out plan is implemented, institutions may not enroll new students into the program(s). Institutions may not re-enroll withdrawn students that cannot reasonably complete the program(s) within the time of the approved teach-out.~~

~~I~~

~~6. If ABHES approves a teach-out plan that includes a program accredited by another recognized accrediting agency, ABHES will notify that accrediting agency of its approval.~~

~~7. Once a school has requested and received teach-out approval of the program(s), ABHES determines whether an accreditation visit is necessary.~~

~~8. If ABHES requires a teach-out plan, the institution or program must publish notice that is readily available to enrolled and prospective students of the reason for the teach-out plan within seven business days of the date of the Commission’s notice to the institution.~~

~~9. The institution or program may request an extension of accreditation up to one year beyond the grant of accreditation, for the sole purpose of teaching out students. Extensions will be reviewed only if:~~

- a. ~~I~~the institution or program has an approved teach-out plan and
- b. ~~£~~Ithe institution has submitted a Campus Closure Form.

III.A.7.c. **Teach-out agreement submission requirements**

An institution that enters into a teach-out agreement with any other institution, either on its own or at the discretion or request of ABHES or any other agency or authority, must submit that teach-out agreement to ABHES for approval using the required Teach-Out Agreement Form.

- ~~1.~~ The teach-out agreement must include:
 - a. A complete list of students currently enrolled in each program in teach-out. Updates are normally required on a quarterly basis.

Commented [KC57]: The purpose of this change is to speak to both actual and proposed teach outs as well as self or outside teach outs. Further, this adds the concept from above that ABHES may alter the timeline allowed for completing the teach out.

Commented [KC58]: This addition notes that entering teach out means a ceasing of new enrollments and only allows re-entries when it does not alter the timeline for teaching out the program.

- b. The program requirements each student has completed.
- c. A plan to provide all potentially eligible students with information on obtaining a closed school discharge or information on state refund policies.
- d. A record retention plan provided to all enrolled students and delineates the final location where student records (academic and financial) will be maintained.
- e. Information on the number and types of credits the teach-out institution will accept prior to the student's enrollment.
 - i. ABHES may waive requirements regarding the percentage of credits that must be earned by a student at the institution awarding the educational credential if the student is completing his or her program through a written teach-out agreement or transfer. ABHES requires all transfer credit notifications provided to students to be submitted for review to ensure that information accurately represents students' ability to transfer credits.
- f. A clear statement about tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out institution.

ABHES will only approve teach-out agreements that provide for the equitable treatment of students by ensuring that each of the required elements of a teach-out plan listed above are met. ~~If ABHES deems necessary, the amount of time to conduct the teach-out may be approved for a shorter or longer amount of time than the institution or program requested.~~

Commented [KC59]: This was struck and relocated above to III.A.7.a.

SECTION B Institutional Changes

Subsection 4 Notifications

III.B.4.a. *List of changes requiring notification*

Notification to ABHES is required for the below changes. Notification must be provided to ABHES within 10 business days of the effective date of the change unless otherwise specified below.

- i. **Adverse or probationary equivalent action** placed upon an institution or program by a recognized accrediting agency, state approval agency, or federal regulatory agency.
- ii. **Campus closure.** ~~Institutions-Notification must be submitted notification~~ prior to closing. Notification must be submitted on the Campus Closure Form.
- iii. **Discontinuation of a program.** Institutions and programs must submit notification when a program is discontinued.
NOTE: An inactive program is defined as any program that has not been in operation for a continuous 12-month period, and inactive programs must be discontinued.
- iv. **Discontinuation of a previously approved delivery method.** Institutions and programs must submit notification when a program delivery method [residential, blended, or full distance education] is discontinued.
NOTE: An inactive method of delivery is defined as any method of delivery that has not been in operation for a continuous 12-month period, and inactive delivery methods must be discontinued.
- v. **Hiring or appointment of a new On-site Administrator.**
- vi. **Change of length in weeks** to an existing program(s). Notification must be submitted prior to implementation of this change.
- vii. **The practice of allowing an individual who is not enrolled in a program of study at an institution to enroll in and take individual courses.** ~~register in a course or courses while not~~

Commented [KC60]: The changes in this section clarify timeliness requirements regarding when notifications need to be submitted to ABHES.

~~enrolled in a program of study at the institution. Notification including the course name, hours, and credit awarded must be submitted included in the notification. This practice is only permitted for courses that exist as part of an approved program. Notification must be submitted prior to implementation of this change.~~

- viii. **Any change in board members or overall board composition.** Notification must be submitted on the Notification of Board Composition Form.

Subsection 6 Addition of a non-main campus

III.B.6.a. Requirements and process

An institution must submit to ABHES an Application for Non-Main Campus Inclusion, which includes a business plan for the addition of a non-main campus. This business plan will demonstrate that the institution has the fiscal and administrative capability to operate the non-main campus. Visit www.abhes.org to access applicable applications. Each application identifies the application requirements.

The review process includes verification of the following:

- i. academic control
- ii. adequate faculty facilities, resources, and academic and student support systems
- iii. financial stability
- iv. institutional engagement in long-range planning prior to this expansion
- v. ~~student achievement indicators within the *institutional grouping*~~
- iv-vi. ~~status with applicable regulatory oversight bodies~~

If the non-main campus will offer any programs not offered at the main or other non-main campuses within the *institutional grouping*, then the institution must also complete the Application for New Program Approval. If the new non-main campus will deliver any programs in a blended or full distance format, the institution must also complete the appropriate distance education approval application.

III.B.6.c. Limitations

A newly accredited institution owned or operated by an individual(s) or organization that did not previously hold accreditation through another institution(s) may not file a non-main campus application until a 12-month period of initial accreditation has transpired.

The Commission reserves the right to require an on-site evaluation to the main campus and the proposed non-main campus prior to approval of the campus. The Commission reserves the right to limit the number of non-main campuses approved based on its review of demonstrated administrative and financial capabilities.

As a general rule, the Commission will not approve more than three new non-main campuses within any 12-month period unless an institution can demonstrate, through a written proposal, that it has the financial and administrative capacity to successfully operate additional non-main campuses. The proposal will be considered by the ABHES Executive Committee. The Executive Committee will either:

- Approve the proposal and invite the submission of an Application for Non-Main Campus Inclusion.

Commented [KC61]: The revision in this area specifies that these courses must be part of an approved program. The previous language confused some institutions who assumed that they may offer stand-alone courses for credit. ABHES has no provision for stand-alone courses - the current pathways are inclusion where a course is part of an approved program or exclusion where a course has been determined to be continuing education.

Commented [KC62]: This addition resulted from the discussion of how to review institutional groupings adding more than three non-mains within a 12-month period. The Commission determined these additional factors should be reviewed for every new non-main a school applies for, not just when surpassing more than three.

- Request additional information, or
- Reject the proposal and invite the submission of a new or amended proposal.

Subsection 10 Change in legal status, ownership, or form of control

III.B.10.ed. Excluded transfers of ownership

An excluded transfer of ownership may include the following:

- The sale or transfer of ownership interest ~~after the death or retirement of~~ an owner of an institution to ~~either~~ a close family member, ~~or a current stockholder of the corporation may not be considered a change in ownership leading to a change in control, particularly where the recipient party of the stock has been actively involved in the prior operation of the institution.~~
- The transfer of an owner's interest in the institution or an entity to an irrevocable trust, so long as the trustees only include the owner and/or a family member. Upon the appointment of any non-family member as trustee for an irrevocable trust (or successor trust), the transaction is no longer excluded.
- Upon the death of the former owner who previously transferred an interest in the institution or an entity to a revocable trust, so long as the trustees include only family members. Upon the appointment of any non-family member as trustee for the trust (or a successor trust) following the death of the former owner, the transaction is no longer excluded
- A transfer to an individual owner with a direct or indirect ownership interest in the institution who has been involved in the management of the institution for at least two years preceding the transfer and who has established and retained the ownership interest for at least two years prior to the transfer, either upon the death of another owner or by transfer from another individual owner who has been involved in the management of the institution for at least two years preceding the transfer and who has established and retained the ownership interest for at least two years prior to the transfer, upon the resignation of that owner from the management of the institution.

The Commission may determine that other transfers should also be excluded.

An institution seeking an excluded transfer of ownership must submit a completed application for excluded transfer of ownership at least 90 days prior to the planned date of change. In the event of death or other unplanned transfer of ownership, the institution must submit a completed application for excluded transfer of ownership no more than 15 days after the transfer of ownership. If the transfer is determined to not be excluded, completion and submission of the application for change in legal status, ownership, or control – part II is required.

III.B.10.de. Process for submission and approval of change of legal status, ownership, or form of control

Institutions must submit a completed application for institutional change in legal status, ownership, or control – part I to ABHES at least 90~~45~~ days prior to the planned date of change. Completion and submission of the application for change in legal status, ownership, or control – part II is required within 5 days following the change in legal status, ownership, or control, which ABHES consented via approval of the Part I application. *Sponsoring institutions* that hold ABHES programmatic accreditation must submit a completed application for programmatic change in legal status, ownership, or control within 5 days following the change in legal status, ownership, or control. Visit www.abhes.org to access applicable applications. Each application identifies the application requirements.

Commented [KC63]: This addition gives ABHES and its institutions additional flexibility in approving or denying requests related to growth of more than three new non-main campuses by an accredited institution within any 12-month period.

Commented [KC64]: This section is being moved down as it is about exclusions, which has a separate submission process, so the submission is being moved up to be closer to its pertinent information.

Commented [KC65]: The U.S. Department of Education's new language in 34 CFR § 600.31, set to become effective on July 1, 2023, provides clarification regarding what is considered an excluded transfer of ownership. These revisions align ABHES processes better with the Department changes.

Commented [KC66]: This change details the new process for submitted an application to ABHES for excluded transfers of ownership.

Commented [KC67]: This change better aligns with other substantive change submission requirements, allowing time for review by all required levels before the change is effective.

The Substantive Change Committee of the Commission has the ability to approve a change of control. Only the full Commission can deny an application. An on-site evaluation to an institution will be made within six months of the effective change date following after Commission approval of a change in control. A post change of ownership visit is not required for sponsoring institutions that hold only programmatic accreditation.

Institutions participating in Title IV programs are reminded of their responsibility to notify the U.S. Department of Education in writing of all such changes and that approval by ABHES in no way indicates approval by any other agency.

CHAPTER IV – EVALUATION STANDARDS APPLICABLE TO INSTITUTIONALLY ACCREDITED MEMBERS

SECTION D Compliance with Government Requirements

IV.D.2. *An institution that participates in a federal student aid program is required to self-report to ABHES.*

The following must be self-reported **within 10 business days**:

Commented [KC68]: Conforming change with III.B.4.a.

- Status as a participant in the Federal program and immediately informs ABHES of any change in that status.
- Federal student loan default rates as defined by the U.S. Department of Education, and for any rates that are defined by the Department as too high, it must also submit a corrective action plan to address such rates.
- Any audit, program review or any other inquiry by federal agencies including the U.S. Department of Education or any Office of Inspector General regarding the institution's participation in Federal financial aid programs. Promptly update ABHES regarding all communications until resolution or conclusion.
- Any findings or actions by the U.S. Department of Education relative to the institution's participation in the Title IV program.

Failure of an institution to maintain compliance with its requirements under the Title IV program will be evaluated by ABHES to determine whether it raises a question of potential non-compliance with accreditation requirements. ABHES will direct the institution to provide whatever evidence it deems necessary to resolve the question and may conduct an on-site visitation.

SECTION E Representations, Advertising, and Recruitment

~~Subsection 6 – Disclosure~~

~~IV.E.6. *An institution discloses 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 (e.g., criminal record, credentialing requirements for employment).*~~

Commented [KC69]: Struck to be relocated to Chapter V and combined with former IX.H.4. so it is applicable to all programs not just institutions.

SECTION G Programs

IV.G.1.b. *Credit-awarding programs include outside hours. (Clock-hour programs do not fall under these requirements.)*

All programs that award credit hours must include outside hours **regardless of whether the institution requested recognition.**

Minimum course-by-course outside hours for certificates, diplomas, associate of occupational science degrees, and associate of applied science degrees are calculated by using the following formula:

Semester Credit Hours: 7.5 outside hours for each credit hour of lecture/laboratory (Outside hours for clinical experiences will be reviewed and evaluated on a case-by-case basis. In general, however, clinical experiences may not require outside hours. If outside hours are awarded, the institution or program must provide justification and the rationale for these hours).

Quarter Credit Hours: 5.0 outside hours for each credit hour of lecture/laboratory (Outside hours for clinical experiences will be reviewed and evaluated on a case-by-case basis. In general, however, clinical experiences may not require outside hours. If outside hours are awarded, the institution or program must provide justification and the rationale for these hours).

Minimum course-by-course outside hours for academic associate degrees, baccalaureate degrees, and master's degrees are calculated by using the following formula:

- a. For one hour of classroom or direct faculty instruction, a minimum of two hours of outside preparation.
- b. For one hour of laboratory work and other academic work leading to award of credit hours, a minimum of one hour of outside preparation.

The institution may elect to include more outside hours than the minimums listed above, and these will be reviewed for academic quality and rigor by course. The institution is also expected to justify outside hours and substantiate how these hours are determined. Justification of the outside additional hours must be on file for evaluation teams to review.

Institutions can seek ABHES approval to include recognized outside hours within a program's clock hour total.

Commented [KC70]: These changes better capture distinction of required vs. recognized outside hours.

SECTION J Physical Environment

IV.J.2. *An institution has a written emergency preparedness plan that is available to all students and staff.*

The emergency preparedness plan includes, but is not limited to, the following:

- a. Risk Assessment and Planning
- b. Policies and Procedures (including evacuation plans, sheltering in place, and tracking students, faculty, and staff during an emergency)
- c. Communication Plan (including communication with staff, students, designated emergency contacts (if applicable), visitors, and media during an incident to minimize or mitigate risks as well as immediately post-incident)
- d. Instructional Continuity Plan (including strategies to ensure students may resume coursework in the event of time-limited catastrophic events or emergencies)
- ~~e.~~ Responsible Person(s) designated to confirm emergency and execute communication plans
- ~~f.~~ Training and Testing (including method and timeframe for orienting staff and students and conducting tests of plan elements)

Commented [KC71]: This addition intends to evaluate that institutions are prepared for emergencies and that learning can reasonably continue without significant impact to students.

CHAPTER V – EVALUATION STANDARDS APPLICABLE TO ALL EDUCATIONAL PROGRAMS

SECTION A Goals and Oversight

V.A.4. *Resources exist to meet the educational goals and objectives.*

A program documents the following:

- a. Allocation of sufficient resources to support curriculum, including periodic revisions to reflect current practices, to maintain equipment, to procure supplies and teaching resources and to hire and retain a qualified faculty.
- b. Processes are in place for annually evaluating the program resources against a program's goals and objectives, including input from the program's interested parties/stakeholders.

Commented [KC72]: No change in intention or historical meaning of the standard, just modernization of the language.

SECTION B Curriculum, Competencies, Clinical Experiences

V.B.3. *Competencies required for successful completion of a program are identified in writing and made known to students.*

Competencies are of appropriate rigor for the credential level, field of study, and reflect industry standards and practices. Each student is clearly informed of competency requirements and the means of assessing individual student achievements of these requirements. Students are made aware any time the competencies or means of assessment are revised.

Commented [KC73]: Conforming change with proposal in IX.B.3.

V.B.4.c. *Supervision and evaluation of student performance is provided during the clinical experiences. (for applicable programs)*

An individual employed by the institution who meets the minimum qualifications of program faculty member is responsible for ensuring and documenting oversight and evaluation of students while on clinical experiences and is in regular contact with sites.

If a clinical experience includes a simulated component, the individual(s) employed by the institution to supervise that experience are trained in effective simulation instructional methods, including delivery, testing and evaluation, debriefing, and other techniques necessary to effectively facilitate the simulated clinical experience.

Commented [KC74]: Conforming change with proposal in IX.E.4.a.

Subsection 2 Instructional resources and delivery

V.C.2.a. *Instructors use a variety of contemporary teaching approaches or strategies to accomplish program goals and enhance student ability to achieve program outcomes.*

Teaching approaches and strategies may include case studies, problem-based scenarios, computer simulations, skills training kits, web-based and distance technologies, and field or community experiences. Instructional methods are conducive to students' capabilities and learning needs. Faculty and program administrators ensure that instructional techniques and

Commented [KC75]: Kits may be used to support objectives and do not replace lab or clinical experiences. The revision also links to proposed revisions in IX.E.2.c.

delivery strategies ~~are compatible with the~~ promote the achievement of stated program ~~objectives and curricular offerings~~ goals and competencies.

Directed study is permissible on a case by case basis and credit may be awarded. No more than 10% of the didactic portion a student’s program may be delivered in this format. Directed study must be under the supervision of a faculty member and a learning contract, signed by the faculty member and the student, must be developed to ensure that the course objectives are met. Directed study is the exception and not the rule. The number of courses that a student is allowed to take independently is limited.

SECTION D Student Assessment

Subsection 1 Admissions

V.D.1.b. *A program enrolls only students who can reasonably be expected to benefit from the instruction and complies with Appendix A, Enrollment of Ability-to-Benefit Students. (for applicable programs)*

Institutions that accept non-high school graduates (ability-to-benefit students) into programs that are 300 clock hours or more ~~their programs~~ must meet the additional requirements of Appendix A: Enrollment of Ability-to-Benefit Students, ~~with the exception of any program that is 300 clock hours or less.~~ The information relative to ATB student admission is submitted prior to enrollment.

Commented [KC76]: This change more clearly aligns V.D.1.b. and Appendix A around use of the same language.

Subsection 2 Student assessment and academic advising

V.D.2.b. Students are apprised of their academic status and progress throughout a course through continuous ~~evaluation and review~~ appropriate to the course and its delivery method.

Instructors grade assessments, evaluate other educational activities, and provide students feedback regarding graded assignments.

Commented [KC77]: I.e., didactic, laboratory, clinical

Commented [KC78]: Better aligns with inclusivity of various delivery methods and expectations for all students regardless of the delivery method of the course.

SECTION E Program Management and Faculty

Subsection 1 Program management

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

Each main and non-main campus 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 in the content area or program field at an institution accredited by an agency recognized by the U.S. Secretary of Education or the Council for Higher Education Accreditation; or
- (b) Graduation from an otherwise recognized training entity (e.g., hospital-based program) in the content area or program field; or

(c) Graduation from an institution located outside of the United States and its territories in the content area or program field must be supported with appropriate *foreign education equivalency*.

Exceptions to this requirement must be justified through documentation of an individual's alternative experience or education in the field (e.g., completed coursework, related professional certifications, documentation of expertise).

ii. A minimum of three years of teaching or occupational experience, or a combination of the two, in the program field.

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

Note: Full-time oversight in a full distance education program may be achieved on-site or remotely via the learning management system or distance education delivery system.

Subsection 2 General faculty requirements

V.E.2.c. Faculty meetings are held, and the minutes are recorded.

Minutes of these meetings are recorded and include:

- i. Topics discussed
- ii. Resolution of outstanding issues
- iii. Record of faculty input
- iv. Record of attendance

Distribution of meeting minutes to program personnel and other stakeholders interested parties is documented prior to the next meeting.

Subsection 4 Faculty training

V.E.4.a. Faculty receive initial training in effective educational and instructional methodology to enhance their effectiveness in the classroom.

Through onboarding and orientation, faculty receive initial training on education and instructional methodology, which may include delivery, testing, evaluation, and other techniques to effectively teach.

Faculty are trained in the use of the institution's current simulation technology prior to facilitating a simulation.

SECTION H Disclosures

V.H.3. An institution discloses 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 (e.g., criminal record, credentialing requirements for employment).

Commented [KC79]: The current standard is clear in how it applies to residential and blended programs. The note considers that full distance education programs do not have an on-site campus portion, so the addition allows for the same delivery tool (LMS) to be utilized for the on-site equivalency related to program oversight and availability to students, faculty, resources, etc.

Commented [KC80]: No change in intention or historical meaning of the standard, just modernization of the language.

Commented [KC81]: Conforming change with proposal in IX.E.4.a.

Commented [KC82]: Relocated from IV.E.6. (which is proposed as struck as well as striking IX.H.4. which will be covered with this). This way, the standard applies to all programs by being in Chapter V, not just institutionally accredited and DE where the concepts were in Chapters IV and IX.

SECTION I Student Achievement and Program Effectiveness

Subsection 1 Student achievement indicators

V.I.1.e. A program demonstrates that its required constituencies participate in completing program surveys.

A program must ~~evidence that it has a systematic process for~~ regularly surveying the following constituencies:

Commented [KC83]: Reduced redundancy and wordiness.

- i. Students
- ii. External clinical affiliates
- iii. Graduates
- iv. Employers

The purpose of the surveys is to collect data regarding a perception of a program's strengths and areas for improvement. Accordingly, a program must document that at a minimum the survey data included in its effectiveness assessment include the following:

Students:

Student surveys provide insight regarding student satisfaction relative to all aspects of the program, including the following:

- i. Instruction
- ii. Educational resources
- iii. Student services
- iv. Clinical experiences

External clinical affiliates:

External clinical affiliate surveys provide insight regarding affiliates' satisfaction relative to program training, including the following:

- i. A critique of collective student knowledge and skills upon completion of their in-school training and reflect how well the students are trained to perform their required tasks.
- ii. An assessment of the strengths and weaknesses, and proposed changes, in the instructional activities for currently enrolled students.
- iii. 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' clinical experience.

Graduates:

Graduate surveys provide insight regarding graduates' satisfaction with the following:

- i. Preparedness for entry into the program field
- ii. Training and education
- iii. Career services

Employers:

Employer surveys provide insight regarding employers' satisfaction with the following:

- i. Skill level of employees

ii. Would hire another graduate from the program

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:

Survey Participation Rate = SP/NSD

Acronym	Term	Definition
SP	Survey participation	Number of respondents Those who actually filled responded to the survey
NSD	Number of Surveys distributed	Total number of surveys sent out

Commented [KC84]: Clarifies expectations and simplifies review.

V.I.1.f. *A program demonstrates that each constituency satisfaction rate is determined based on program surveys.*

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

Satisfaction Rate = NSL/SP

Acronym	Term	Definition
NSL	Number Satisfied action level	Number of respondents meeting Determined by the satisfaction level defined by the institution, and the definition must be provided in the institution's Program Effectiveness Plan (PEP)
SP	Survey participation	These Number of respondents who actually filled out the survey

~~Number of~~ satisfaction level, survey participation, and calculation of satisfaction rate must be documented in the PEP; the rate alone is not acceptable.

Commented [KC85]: Clarifies expectations and simplifies review.

Subsection 2 Program Effectiveness Plan (PEP) content

V.I.2. *A program has an established documented plan for assessing its effectiveness annually 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. A plan should contain a cover page and identify the program objectives, which must be consistent with all other documents describing the program.

The PEP specifies a process and a timetable for the annual assessment of program effectiveness, and identifies the process for how data is collected, timetable for data collection, and parties responsible for data collection.

The *Program Effectiveness Plan* clearly describes the following elements:

a. 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 conduct an analysis of the data to identify any trends, including those related to the student population (characteristics/demographics) and other applicable factors; and based upon the analysis, 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. If any portion of a program is offered at a separate educational center that is beyond a reasonable and customary commuting distance, the PEP includes an assessment of the disaggregated retention rate.

b. 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 conduct an analysis of the data to identify any trends, including those related to the student population (characteristics/demographics) and other applicable factors; and based upon the analysis, 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. If any portion of a program is offered at a separate educational center that is beyond a reasonable and customary commuting distance, the PEP includes an assessment of the disaggregated examination participation rate.

c. 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 conduct an analysis of the data to identify any trends, including those related to the student population (characteristics/demographics) and other applicable factors; and based upon the analysis, 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. If any portion of a program is offered at a separate educational center that is beyond a reasonable and customary commuting distance, the PEP includes an assessment of the disaggregated examination pass rate.

d. Job placement rate

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 conduct an analysis of the data to identify any trends, including those related to the student population (characteristics/demographics) and other applicable factors; and based upon the analysis, 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. If any portion of a program is offered at a separate educational center that is beyond a reasonable and customary commuting distance, the PEP includes an assessment of the disaggregated job placement rate.

e. Surveys of students, external clinical affiliates, graduates, and employers

The survey participation rate and satisfaction 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, at a minimum,

annually reviews the results of the surveys conducted, and the 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).

f. Delivery method assessment

If program is offered in a blended or full distance education format, the PEP includes an assessment of the effectiveness of the instructional delivery method. Assessment may include input from constituency surveys, ~~stakeholders~~ interested parties, comparison of delivery method outcomes, changes in delivery method, student population, and scalability.

Commented [KC86]: No change in intention or historical meaning of the standard, just modernization of the language.

g. Curriculum assessment

An assessment of the curriculum that uses the 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.

CHAPTER VI – DEGREE PROGRAM STANDARDS

Subsection 6 Admissions

VI.B.6. *Students admitted to associate degree programs possess, at a minimum, a regular high school diploma or recognized equivalent.*

Evidence of the *regular high school diploma* or its recognized equivalent must be received prior to the first day of attendance. ~~A signed attestation is not sufficient evidence.~~

Commented [KC87]: This significant change went into effect 1/1/23 to be consistent with VI.C.6, as a result of review of the 2022 Call for Comment feedback. The Commission considered this change again at its May 2023 meeting and requests constituency feedback on this sentence in particular for consideration at its July 2023 meeting. The Commission is particularly interested in the impact of the requirement on schools and students, including risk assessment, portability and transferability of education, and barriers to accessing education.

CHAPTER VII – PROGRAMMATIC REQUIREMENTS

Overview

This chapter outlines standards used in evaluating the **Medical Assisting**, **Medical Laboratory Technology**, and **Surgical Technology** programs programmatically at institutions seeking and holding Accrediting Bureau of Health Education Schools (ABHES) institutional or programmatic accreditation. ABHES is recognized by the U.S. Secretary of Education to programmatically accredit Medical Assisting, Medical Laboratory Technology, and Surgical Technology programs through the associate levelprogrammatically.

Commented [KC88]: Aligns with ABHES' scope from the U.S. Secretary of Education

CHAPTER VII – MLT

EVALUATION STANDARDS FOR MEDICAL LABORATORY TECHNOLOGY

Overview

ABHES is recognized by the U.S. Secretary of Education as both an institutional and specialized programmatic accrediting agency for Medical Laboratory Technology programs through the associate level. Institutions that offer a Medical Laboratory Technician program and hold ABHES institutional accreditation are considered to be holding both ABHES institutional and programmatic accreditation. The purpose of this section is to ensure institutions offering Medical Laboratory Technology programs meet specific educational requirements.

This section is equally applicable to any education program offered by the institution that intends to prepare graduates for employment based on the knowledge and skills set forth in this section, whether using the words “medical laboratory technician,” “medical laboratory technology,” or any other name or designation that is reasonably understood by professionals in the field, students, or the public to have the same meaning.

Description of the Profession

Medical Laboratory Technicians use a variety of precise equipment, technologies, and methodologies to examine and analyze the fluids, cells, and tissues of the human body. These laboratory analyses assist physicians in patient diagnosis, treatment, and disease prevention. Medical Laboratory Technicians are educated in the various disciplines including, but not limited to:

- a. hematology
- b. microbiology
- c. clinical chemistry
- d. immunology
- e. immunohematology
- f. urinalysis and body fluids

Medical Laboratory Technicians are thoroughly trained in the use of sophisticated equipment and instruments.

Medical Laboratory Technicians are employed in:

- a. hospital, reference, and research laboratories
- b. clinics
- c. blood centers
- d. physician offices
- e. medical industry and biotechnology companies
- f. regulatory agencies

Credentialing

Credentialing in medical laboratory technology is required by most states to work in the field, is often required by employers, and is encouraged for graduates of ABHES-accredited programs. Programs are expected to prepare students in necessary aspects of the curriculum included in the national credentialing examinations that are available in this field of study.

SECTION A Curriculum, Competencies, and Clinical Experiences

MLT.A.2. A clinical experience is required for completion of the program.

Commented [KC89]: Makes sure definition of programmatic accreditation is clear in alignment with ABHES' scope from the U.S. Secretary of Education.

Commented [KC90]: MLTs typically get the more in-depth training (i.e., calibrating, monthly maintenance, and upkeep) on use of the equipment after being hired and being oriented to an employers equipment.

The following are considered in choosing, placing, and maintaining clinical site affiliations:

a. Assignment

The program provides a clinical laboratory experience for the students in a Clinical Laboratory Improvement Amendments (CLIA) certified laboratory. Clinical experiences include placement at facilities that perform various types of activities that will expose students to the necessary skills required of the profession.

Commented [KC91]: Grammatical change.

All approved clinical experiences are in a laboratory that examines materials derived from the human body and are in a:

- i. clinical or research laboratory (a) directed by a person holding an earned doctorate degree in one of the sciences or (b) approved for service to patients under “Conditions for Coverage of Services of Independent Laboratories” under Medicare; or
- ii. hospital laboratory accredited by the Joint Commission on Accreditation of Health Organizations, Commission of Hospitals of the American Osteopathic Association or College of American Pathologists.

Simulations may be substituted for clinical experiences (no more than 20% of the total required clinical hours) in the areas of immunohematology and/or microbiology.

b. Activities

The clinical experience covers the major sections of clinical laboratory testing, including chemistry, hematology/coagulation, body fluids/urinalysis, immunology/serology, immunohematology, and microbiology.

c. Supervision

No additional requirements beyond Chapter V.

d. Requirements for completion

No additional requirements beyond Chapter V.

SECTION B Program Supervision, Faculty, and Advisors

Subsection 1 Supervision

MLT.B.1. The program supervisor is qualified.

The program supervisor holds a credential from a nationally recognized and accredited agency as a medical technologist, ~~or a clinical laboratory scientist,~~ or a medical laboratory scientist and at a minimum holds a bachelor’s degree in the sciences from an institution accredited by an agency recognized by the U.S. Secretary of Education or the Council for Higher Education Accreditation. The program supervisor has five years of practical laboratory experience.

Commented [KC92]: Though ASCP is moving towards standardization of credentials, including medical laboratory scientist (MLS), some states (i.e., CA) still use CLS. Additionally, many individuals may have CLS and MT listed on resumes, so the list should be inclusive of all.

Subsection 2 Faculty and advisors

MLT.B.2.a. Faculty formal education/training and experience support the goals of the program.

Program faculty must demonstrate knowledge and proficiency in their content areas, and faculty teaching didactic and clinical core courses must:

- i. Be currently credentialed by a nationally recognized and accredited agency as a medical laboratory technician or medical technology/clinical laboratory scientist/medical laboratory scientist.
- ii. Hold, at minimum, an associate degree from an institution accredited by an agency recognized by the U.S. Secretary of Education or the Council for Higher Education Accreditation.

Commented [KC93]: Though ASCP is moving towards standardization of credentials, including medical laboratory scientist (MLS), some states (i.e., CA) still use CLS. Additionally, many individuals may have CLS and MT listed on resumes, so the list should be inclusive of all.

Faculty participate in teaching courses, supervising applied laboratory learning experiences, evaluating student achievement, developing curriculum, formulating policy and procedure, and evaluating program effectiveness.

SECTION C Educational Facilities and Resources

MLT.C.1.b. Instruments and equipment for instruction and experience are available in the program's laboratory facility.

At a minimum, the institution's laboratory facility must include:

- i. Microscope
- ii. Centrifuge
- iii. Spectrophotometer and/or chemistry analyzer
- iv. Glassware and pipettes
- v. Specimen collection supplies and equipment (e.g., needles, syringes, band aids, tubes, phlebotomy station)
- vi. Microscope slides
- vii. Blood culture bottles, or equivalent
- viii. Reagent strips
- ix. Diagnostic testing kits
- x. Hemocytometers
- xi. Stains
- xii. Incubator
- xiii. Culture media
- xiv. Identification systems for biochemical testing

Commented [KC94]: Due to method changes, other options should be included so this language broadens the possibilities.

Automated instrumentation

CHAPTER IX – DISTANCE EDUCATION EVALUATION STANDARDS APPLICABLE TO ALL EDUCATIONAL PROGRAMS OFFERING DISTANCE EDUCATION

Overview

The Accrediting Bureau of Health Education Schools is recognized to accredit programs delivered utilizing distance education methodologies. ABHES defines distance education as a formal educational process to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and instructor, either synchronously or asynchronously. Correspondence education is not within ABHES' scope of recognition and therefore is not eligible for accreditation by ABHES.

SECTION AF Approvals and Agreements

IX.AF.1. *Maintain documentation of ABHES and applicable local, state, and federal approvals for distance education delivery.*

Institutions or programs that deliver distance education outside of the state in which the institutions or programs are physically located comply with all rules and regulations of the states in which they operate. For all states in which the institution delivers distance education, the institution must have on file state authorizations, if required, and/or a list of states in which authorization is not required.

If an institution offers postsecondary education through distance education in a state that participates in a state authorization reciprocity agreement, and the institution is covered by that agreement, the institution is considered to meet state requirements for it to be legally offering postsecondary distance education courses in that state. The institution is subject to any limitations in that agreement and any additional requirements of that state.

IX.AF.2. *Maintain records of education provider agreements and non-instructional service provider agreements regarding delivery of distance education.*

An institution or program has on file up-to-date records of contractual relationships and arrangements with external providers. This documentation must clearly delineate the responsibilities of the provider and institution or program and specify that the institution or program maintains responsibility for the academic quality of the offerings. Contracts with distance education delivery or learning management system providers are on file.

SECTION A – Goals and Oversight

~~IX.A.1. *Monitor academic progress to ensure that distance education students are advised of their progress in a timely manner and that assistance is offered, if needed.*~~

SECTION B Curriculum and Competencies, and Clinical Experiences

IX.B.1. *Distance education course design provides for timely, regular, and substantive interaction between faculty and students.*

Commented [KC95]: Relocated former section F to become Section A to align Chapter IX more closely with other chapters of the manual in structure.

Commented [KC96]: Relocated to IX.D.1. as fit better in that section of the Chapter.

Commented [KC97]: This section contains no clinical experience information

~~Distance education programs and courses are structured to academically engage faculty and students in designed opportunities of substantive interactions on a regular, predictable, and scheduled basis. An institution or program demonstrates that interaction between faculty and students is built into the distance education coursework regardless if the course is offered in a blended or full distance education format. Students receive opportunities for substantive interactions on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course or competency. Substantive interaction engages students in Distance education instructional design elements allow for substantive interaction via academic engagement, teaching, learning, and assessment and includes all of the following:~~

- a. ~~Providing d~~Direct instruction.
- b. ~~Assessing or providing feedback on a student's coursework. Learning opportunities that require assessment or feedback from the faculty.~~
- c. ~~Providing information or Forum for~~ responding to student questions about the content of a course or competency.
- d. ~~Facilitating Forum for faculty led~~ discussion regarding the content of a course or competency.

Commented [KC98]: Simplifies language to assist with implementation and evaluation of the standard.

~~IX.B.2.b.~~ *Distance education faculty engage students in timely, regular, and substantive interactions within the distance education environment.*

Commented [KC99]: Relocated to be right after design as this standard is about actual interaction in the DE environment.

~~Regular and substantive interactions between faculty and students are evidenced within the distance education delivery environment. The quality of interaction should approximate the residential instructional environment. This applies to both blended and full distance education delivery. Distance education programs and courses demonstrate regular, predictable, and scheduled substantive interaction between faculty and students that is commensurate with the length of time and the amount of content in the program, course, or competency. An institution or program defines the interaction expectations of faculty teaching in the modality. Academic engagement is evidenced within the distance education delivery environment, regardless if the course is offered in a blended or full distance education format, and includes all of the following elements of substantive interaction:~~

Commented [KC100]: Removes antiquated language and requirements that are appropriate for the delivery method.

- a. ~~Providing direct instruction.~~
- b. ~~Assessing or providing feedback on a student's coursework.~~
- c. ~~Providing information or responding to questions about the content of a course or competency.~~
- d. ~~Facilitating discussion regarding the content of a course or competency.~~

~~IX.B.23.~~ *The curricula for the distance education offerings ~~are demonstrate comparable in academic rigor to educational offerings on ground and utilize strategies appropriate for distance learning.~~*

Commented [KC101]: Aligns with definitions in Glossary and defines expectations for compliance.

~~Academic r~~Rigor of a distance education program or course (didactic, laboratory, and clinical experiences) must be comparable with that of a program or course delivered on ground commensurate with its length, learning objectives, and aligned to industry or professional practices.

~~Prior to beginning a clinical experience, competencies must be validated in writing along with a description of the method used to validate competencies.~~

Commented [KC102]: Struck here in tandem with a suggested revision in V.B.3. that helps to capture it in a more appropriate place within the *Accreditation Manual*.

SECTION C Technology and Learning Resources

~~IX.C.1. Provide a means to verify the hardware and software capability of the technology used to meet the technical requirements of the program or course.~~

Commented [KC103]: Relocated to IX.D.3. as better suited to that section of the chapter.

IX.C.21. Ensure appropriate authentication processes are used to verify student identity.

An institution demonstrates that appropriate measures are in place to ensure that the person who receives credit for coursework is the same person who enrolled in the course. This can be accomplished through a variety of methods including, but not limited to, the use of a secure login process, proctored examinations, or third-party identity verification systems.

~~IX.C.3. Utilize processes to protect student privacy.~~

~~Students have a private means to communicate with faculty and school administrators using methods including, but not limited to, email, phone, private online forum, and secure gradebook.~~

Commented [KC104]: Relocated to new Section F Safety for alignment with structure of the rest of the *Accreditation Manual*.

IX.C.42. Demonstrate that the selected distance education delivery system or learning management system has the following requirements.

- a. Appropriate infrastructure, policies, and procedures to safeguard against short and long-term data loss.
- b. Applicable scalability to accommodate both current and expected near-term enrollment growth.
- c. Sufficient resources to communicate, deliver and distribute learning materials without ~~noticeable-notable~~ service interruption.

Commented [KC105]: The revision is to capture extreme service interruptions outside of the control of the institution or program.

IX.C.53. Ensure sufficient facilities, equipment, technology, budget, staffing, and other resources to support distance education offerings and their growth.

Management must demonstrate that the infrastructure can support enrollment growth, which is monitored annually by ABHES.

SECTION D Student Assessment

~~IX.D.3. Monitor academic progress to ensure that distance education students are advised of their progress in a timely manner and that assistance is offered if needed.~~

Commented [KC106]: Relocated, was formerly IX.A.1., but seems to fit best under student assessment.

IX.D.1. Establish admissions requirements for distance education programs or course(s) and assess whether students have the skills and competencies to succeed in distance education.

Admissions requirements for distance education programs or courses should be published in the catalog and identify any special requirements in order to enroll in these types of courses. The institution is required to identify the process for assessing whether the students have the appropriate skills and competencies needed to succeed in taking courses through distance education. Assessment measures may reasonably include appropriate testing, review of

~~credentials experience with technology, in the area of distance education,~~ and/or a personal interview with each candidate.

Commented [KC107]: Provides clarity of expectations for ensuring applicants will be able to successfully participate in and complete distance education courses.

~~IX.DG.21. Provide a means for the student to verify that their hardware and software meet the technical requirements of the program or course.~~

Commented [KC108]: Formerly IX.C.1., relocated to a more suitable section of the chapter. The edits here make clear that it is a verification of the student's hardware/software, not the institution's.

SECTION E Program Management and Faculty

Subsection 1 Program ~~administration~~management

Commented [KC109]: Alignment with Chapter V.E. headings.

IX.E.1.a. Employ an individual(s) responsible for development of the instructional design of the distance ~~delivery education~~ model being used by the institution or program.

Commented [KC110]: General alignment in the Standards and the glossary.

Institutions or programs offering distance education, whether blended or full, employ at least one individual ~~who is substantively trained and experienced in instructional design for distance education. The individual(s) who is trained and/or experienced in the development and delivery of distance education and~~ participates in instructional design using the model currently in place at the institution. ~~This~~The individual(s) may be located at the campus or be a member of the staff at the parent corporation provided regular communication with the campus enrolling students in distance education is evidenced. ~~The institution or program may satisfy the requirements through one or a combination of individuals.~~

Commented [KC111]: Adds qualitative measures for the institution's employee/s who is/are responsible for the instructional design of DE.

Commented [KC112]: Allows for more flexibility and similar to requirement for program management in Chapter V.

IX.E.1.b. Employ an individual(s) responsible for ~~administering supporting~~ the delivery of the distance education.

Institutions or programs offering distance education, whether blended or full, employ at least one individual who is readily available and responsible for ~~administering supporting~~ the delivery of distance education programs and courses. This individual ~~will have regularis available to coordinate, assist, and/or facilitate communication with and for interaction with~~ students and faculty who are engaged in distance education. Whether this individual works remotely or on site, evidence must be provided to show the extent and frequency of engagement. ~~The institution or program may satisfy the requirements through one or a combination of individuals.~~

Commented [KC113]: These conforming changes align with updates to other standards and clarify expectations for the person(s) filling this role.

IX.E.1.c. Employ an individual(s) responsible for evaluating the effectiveness of faculty in the distance education environment.

Institutions or programs offering distance education, whether blended or full, employ at least one individual trained and/or experienced in evaluating instructional effectiveness of distance education faculty. This individual may be directly employed by the institution or the parent company and may work remotely or on site. ~~The institution or program may satisfy the requirements through one or a combination of individuals.~~

Commented [KC114]: Aligns with changes in other standards in this section.

Subsection 2 Faculty

IX.E.2.c. Evaluation of student performance is provided during distance laboratory experiences.

An individual who meets the minimum qualifications of a program faculty member is responsible for instructing, ~~documenting, and~~ assessing, ~~and documenting~~ students' competencies during

laboratory experiences. Examples of distance laboratory experiences may include, but are not limited to, virtual, simulation, remote, or skills training kit-based instruction.

Commented [KC115]: Grammatical change and alignment with proposed revisions in Chapter V regarding skills training kits.

Subsection 3 Ratios

IX.E.3. *Distance education course ratio of students to faculty does not exceed 25:1.*

Commented [KC116]: Clarifies that the ratio is not total student program population, but within each course.

Deviation from the stated ratio must demonstrate that the student-to-teacher ratio appropriately supports faculty-to-student interaction, facilitation of interaction among students, and interaction with curriculum to ensure course learning objectives are met.

Subsection 4 Faculty training

IX.E.4.a. *Distance education faculty are trained in effective distance education instructional methods.*

Commented [KC117]: Effective is implied, so struck in this instance.

Distance education faculty members receive training in instructional methodology, including delivery, testing and evaluation, and other techniques necessary to effectively teach in the distance education environment.

IX.E.4.b. *Distance education faculty are trained in the use of the institution's current distance education delivery system or learning management system and instructional resources.*

Prior to teaching a distance education course, faculty members complete comprehensive training on the utilization of the current learning management system, to include instructional resources required in a course or program (e.g., virtual simulation equipment and/or software, skills training kit, discussion boards, interactive forums, etc.).

Commented [KC118]: Skilled clinicians (faculty) need training in *both* the LMS and the unique instructional resources used to support learning in DE.

SECTION F Approvals and Agreements Privacy

Commented [KC119]: Parallel to Chap V Section F Safety, but customized for distance education to be Privacy

IX.F.1. *Utilize processes to protect student privacy.*

Students have a private means to communicate with faculty and school administrators using methods such as email, phone, private online forum, and secure gradebook.

Commented [KC120]: Grammatical change.

Commented [KC121]: Relocated from IX.C.3. to provide alignment with changing Section F to Privacy for consistency with Chapter V structure (Safety).

SECTION G Student Support Services

IX.G.3. *Provide access to a variety of student support services for students enrolled in distance education programs and courses.*

All students are provided access to comparable support services, regardless of appropriate for the instructional delivery method.

Commented [KC122]: Modernization and consistency with other proposed revisions.

SECTION H Disclosures

IX.H.2. *Notify students at the time of enrollment of any projected additional student charges associated with distance education.*

If there are specialized or specific fees associated with distance education, this information must be clearly disclosed to the student in writing at the time of enrollment. If an institution does not charge additional or specialized fees for participation in distance education this should be made clear to the student at the time of enrollment.

~~IX.H.4. Disclose in writing, prior to enrollment, any material circumstances that may adversely impact an applicant's ability to gain employment in the field for which the applicant is trained.~~

~~If the institution or program offers distance education outside the state in which the institution or program is physically located, it must disclose to the student prior to enrollment, in writing, any barriers to employment for students receiving education in those states.~~

Commented [KC123]: Relocated to Chapter V.H.3.

APPENDIX A ENROLLMENT OF ABILITY-TO-BENEFIT STUDENTS

ABHES requires that institutions accepting students, regardless of method of payment, who do not possess a high school diploma or its equivalent (General Equivalency Diploma), abide by the following requirements in admitting individuals to programs of 300 clock hours or more who may benefit from the training, hereby referred to as ability-to-benefit (ATB) students.

1. ATB students are not admitted into academic degree program(s).
2. An individual is beyond the age of compulsory school attendance in the state in which the institution is located and demonstrates the ability to benefit from the training offered.
3. An admission policy for all ATB students is based on the institution's stated objectives and is administered as written and published.
4. An institution consistently applies its criteria and maintains records for determining the student's ability to benefit from the training offered. These records include the following:
 - a. a signed recommendation by an appropriate individual(s) making the acceptance determination;
 - b. evidence of:
 - i. ~~b.~~ a passing score on an independently administered approved examination prior to enrollment (if a timed exam, the time limit must be observed),
 - ii. ~~evidence of~~ satisfactory completion of at least six credit hours or the equivalent coursework that are applicable toward a degree or certificate offered by the institution,
 - or
 - iii. ~~or evidence of~~ completion of a State process which has been approved by the Secretary of Education;
 - c. ~~practicum examinations, if applicable; evidence of concurrent enrollment in a recognized high school diploma equivalency program and the eligible career pathway program, if applicable;~~
 - d. complete records of adequate pre-admission and continuous advising; and
 - e. remediation, as necessary.
5. An institution maintains complete student records that document testing, screening, and counseling and that validate the basis of admission of each student.
6. An institution demonstrates and fully documents the entire system used for accepting students deemed to have the ability-to-benefit from the training offered.
7. An institution determines the student may develop marketable skills.
8. An institution makes a preliminary assessment of student advising and remediation requirements.
9. Annual evaluations are performed to verify the reliability and validity of an institution's admission requirements for ATB students, including the relationship between the test scores and student ~~retention and employment outcomes~~ achievement indicators. Results of these evaluations are used in setting admission entrance requirements, including minimum test scores.

Commented [KC124]: These changes are proposed in accordance with U.S. Department of Education communication around ATB enrollment.

- [EA ID: OPE Announcements-21-02 Ability to Benefit Frequently Asked Questions](#)
- [Dear Colleague Letter GEN-16-09 Subject: Changes to Title IV Eligibility for Students Without a Valid High School Diploma Who Are Enrolled in Eligible Career Pathway Programs](#)

Commented [KC125]: This alignment is around consistent use of language throughout the manual.

APPENDIX C CATALOGS

The following items are to be accurate and incorporated:

11. Educational programs offered, which includes the following information:
 - a. **Program Objectives:** clearly defined statement of goals of program, type of instruction, level of occupation for which training is intended and for whom the training is intended. The courses and academic standards required for successful completion of the programs and the credential given for successful completion are also stated.
 - b. **Program Schedule:** the number of total weeks and contact hours for the program. If credit hours are awarded, the credits are listed. If recognized outside hours are included in the total clock hours of the program, the recognized outside hours must be listed.
 - c. **Course Descriptions:** sufficiently detailed to define the scope and sequence, hours, and credit awarded, if applicable.
 - d. **Program Delivery:** an institution must identify the type of instructional delivery (i.e., residential, distance learning, or a combination of both).

Commented [KC126]: Explains that recognized hours should be published in the catalog.

APPENDIX E RECORDS MAINTENANCE

Institutions and program(s) maintain up-to-date records in an easily accessible and orderly fashion. Minimally, the following records must be maintained. A variety of methods may be used for retention of these documents.

A. Students (current, withdrawn, graduate, LOA)

1. Enrollment agreement.
2. Signed attestation of high school graduation or equivalent (e.g., diploma, transcript, or GED).
3. Admission determination documentation (e.g., admission exam, ~~counseling documentation for students admitted under an ability-to-benefit determination records~~).
4. Financial records (e.g., required financial aid documentation, tuition payments, refund calculations and evidence of monies returned). **NOTE:** Required for institutional members only.
5. Academic transcript (must be maintained indefinitely).
6. Attendance records (if applicable).
7. Progress reports or correspondence.
8. Evaluations for clinical experiences.
9. Documentation of placement activity.

Records must be maintained for a minimum of three years after the end of the institution's most recent fiscal year during which the students were last enrolled.

Commented [KC127]: This change conforms with proposed revisions in Appendix A.

APPENDIX G FEES

The following fees are non-refundable. Fees must be remitted in a timely manner. If an application fee is not remitted, the application will not be processed. ABHES also reserves the right to be reimbursed for time and processing fees associated for checks remitted with insufficient funds. Failure to remit fees may result in a probationary-equivalent or adverse action.

APPLICATIONS FOR ACCREDITATION	
<i>Note: Site visit expenses, as applicable, are assessed separately.</i>	
Initial Institutional or Programmatic Accreditation	
Initial (first location and all programs for institutional applicants; per program for programmatic applicants)	\$4,000
Initial (Each main campus, non-main campus, and separate educational center that is located beyond a reasonable and customary commuting distance includes all programs for institutional applicants)	\$4,000
(includes change in status from programmatic to institutional)	
Renewal Institutional or Programmatic Accreditation	
Renewal (Each main campus, and non-main campus, and separate educational center that is located beyond a reasonable and customary commuting distance)	\$2,500
(includes change in status from programmatic to institutional)	
OTHER APPLICATIONS	
Approval to Conduct Other Business on School Premises	\$150
Change in Academic Measurement (clock-to-credit hour or credit-to-clock hour)	\$750
Change of Location	\$750
Change in Mission	\$3075
Change of Name	\$3500
Change in Legal Status, Ownership, or Form of Control	
Main campus	\$34,000
Each non-main campus	\$2,500
Programmatically accredited, per campus	\$1,000
Change of Accreditation Status (institutional to programmatic)	\$3500
Distance Education (Initial)	\$1,200
(Each additional location, identical program, submitted at the same time)	\$500
Distance Education (Modification)	\$750
(Each additional location, identical program, submitted at the same time)	\$500
Residential Delivery (Modification)	\$500
Each additional location, identical program, submitted at the same time	\$250
Education Provider Agreement – Consortium	\$1,500
Updated applications to an existing approved consortium	\$250
Education Provider Agreement – Contracting	\$2,000

Commented [KC128]: This was added to make clear that all fees are non-refundable, that applications are not complete and moved forward in processing until payment is received, that bounced checks may result in additional fees, and that failure to pay any fee may result in action by the Commission. Some of these concepts were in various places in the manual, but this signifies that it is all encompassing of this list.

Commented [KC129]: This was struck as visit expenses are detailed below under **Visits**.

Commented [KC130]: Simplifies that initial accreditation is one cost to apply for each facility as described.

Commented [KC131]: This was moved as the cost for a programmatic member applying for institutional accreditation is \$4000, not \$2500.

Commented [KC132]: Aligns with change above and clarifies that there is one cost to apply for renewal for each facility as described.

Commented [KC133]: ABHES conducted a review of its application pricing for the first time since 2012. Adjustments are being proposed based on:

- Staff time needed to process each application.
- Whether Substantive Change Committee or senior staff review is necessary.
- Consistency with level setting between similar applications.

<u>Each additional location, identical program, submitted at the same time</u>	<u>\$250</u>
Excluded Continuing Education Courses/Program	\$750
Excluded Transfer of Ownership	<u>\$500</u>
Program Revision	\$500
New Program Approval	
New Program Approval, Residential only	\$1,270
Each additional location, identical program, submitted at same time	\$500
Combined New Program Approval with Distance Education (Initial)	\$2,490
Each additional location, identical program, submitted at the same time	\$500
Combined New Program Approval with Distance Education (Modification)	\$2,720
Each additional location, identical program, submitted at the same time	\$500
Non-main Campus Inclusion	\$3,000
Facility Reclassification or Reassignment	\$3,000
Separate Educational Center Inclusion – 50% and over of a program	<u>\$2,000</u>
Separate Educational Center Inclusion – under 50% of a program	<u>\$1,500</u>
VISITS	
Commission-Directed Focus Visit (plus on-site evaluation expenses)	\$3,000
On-Site Evaluation Visit	
Per team member for the first day	\$1,500
Per team member for each additional day	\$500
Virtual Evaluation Visit	
Per team member for each full day	\$500
Per team member for each half day (approximately four hours)	\$250
Visit Cancellation (effective date of visit confirmation letter) (plus incurred costs of team member expenses)	\$500
APPEARANCES	
In-Person Program-Specific Warning Appearance	\$3,000
In-Person Commission Expense	\$3,000
Virtual Program-Specific Warning Appearance	\$2,000
In-Person Show Cause Appearance	\$3,000
In-Person Commission Expense	\$3,000
Virtual Show Cause Appearance	\$2,000
APPEALS	
Appeal (denial, withdrawal)	\$5,000
Expense deposit	\$10,000
ACCREDITATION WORKSHOPS (per registrant)	
Registration 30 days or more in advance	
Early bird	\$650
<u>Registration Within Less than 30 days or in advance on-site</u>	\$700
School-sponsored (<u>per minimum of 10 attendees; \$400 per additional attendee required</u>)	\$650,000
LATE SUBMISSIONS	
Annual Report Delinquency (if received after published due date)	\$2,500
Financial Statements Late	\$1,500

Commented [KC134]: The Education Provider Agreement - Consortium and Contracting are being added to align with previous changes to the manual in I.B.7. related to consortium and contracting agreements.

Commented [KC135]: This is being proposed in conjunction with the new process proposed in III.B.10.e.

Commented [KC136]: The changes in this section better align the language for registration timing as well as between ABHES and school sponsored workshops.

Commented [KC137]: The Commission understands that this to include day of event registration.

General Late Submission (if received after Commission-directed deadline)	\$700
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ANNUAL SUSTAINING FEES *

Institutional Accreditation			
Group	Gross Annual Tuition Charged		Fee
Group I	\$0	- \$199,999	\$2,200
Group II	\$200,000	- \$399,999	\$2,700
Group III	\$400,000	- \$599,999	\$3,800
Group IV	\$600,000	- \$799,999	\$5,500
Group V	\$800,000	- \$999,999	\$6,500
Group VI	\$1,000,000	- \$2,999,999	\$8,200
Group VII	\$3,000,000	- \$4,999,999	\$8,700
Group VIII	\$5,000,000	- \$7,999,999	\$10,400
Group IX	\$8,000,000	- \$9,999,999	\$12,000
Group X	\$10,000,000	- and up	\$15,000

The Gross Annual Tuition Charged is defined as the total amount collected for tuition (minus any registration or other fees) charged by the institution.

Programmatic Accreditation (Medical Assisting, Medical Laboratory Technology, Surgical Technology)			
Group	Number of Students Enrolled		Fee
Group I	1	- 75	\$1,500
Group II	76	- 200	\$3,200
Group III	201	- 300	\$4,000
Group IV	301	- 500	\$5,500
Group V	501	- 750	\$6,500
Group VI	751	- 900	\$7,500
Group VII	901	- 1,200	\$8,500
Group VIII	1,201	- 2,500	\$9,500
Group IX	2,501	- 3,500	\$10,500
Group X	3,501	- 4,500	\$11,500
Group XI	4,501	- 6,000	\$12,500
Group XII	6,001	- and up	\$14,000

The Number of Students Enrolled is defined as the sum of the program's beginning enrollment, new starts, and re-entries.

~~* An Institution/Program that becomes a member (including non-main campus inclusions) during the first quarter of the fiscal year shall pay the full amount of applicable annual sustaining fees. An Institution/Program which becomes a member (including non-main campus inclusions) during any succeeding quarter shall pay a proportional amount of the applicable sustaining fees determined by the number of quarters remaining in the fiscal year after becoming a member including the quarter in which the Institution/Program became a member.~~

Institutions operating a separate educational center that is located beyond a reasonable and customary commuting distance from the main or non-main campus to which it is assigned will be assessed an additional

Commented [KC138]: These definitions were added to help clarify how sustaining fee group should be determined and reported.

Commented [KC139]: This note was relocated to the end of the section.

sustaining fee based upon the number of students in attendance at that facility within the ABHES reporting period of July 1 to June 30.

Commented [KC140]: Grammatical change.

Separate Educational Center			
Group	Number of Students in Attendance		Fee
Group I	04	- 75	\$1,500
Group II	76	- 200	\$3,200
Group	Number of Students in Attendance		Fee
Group III	201	- 300	\$4,000
Group IV	301	- 500	\$5,500
Group V	501	- 750	\$6,500
Group VI	751	- 900	\$7,500
Group VII	901	- 1,200	\$8,500
Group VIII	1,201	- 2,500	\$9,500
Group IX	2,501	- 3,500	\$10,500
Group X	3,501	- 4,500	\$11,500
Group XI	4,501	- 6,000	\$12,500
Group XII	6,001	- and up	\$14,000

Commented [KC141]: This clarifies that SECs are subject to fees following approval, even if no students are enrolled.

*An Institution/Program that becomes a member (including inclusions of any non-main campuses or separate educational centers that are located beyond a reasonable and customary commuting distance) during the first quarter of the fiscal year shall pay the full amount of applicable annual sustaining fees. An Institution/Program which becomes a member (including inclusions of any non-main campuses or separate educational centers that are located beyond a reasonable and customary commuting distance) during any succeeding quarter shall pay a proportional amount of the applicable sustaining fees determined by the number of quarters remaining in the fiscal year after becoming a member, including the quarter in which the Institution/Program became a member.

Commented [KC142]: This note was relocated to the end of the section as it applies to everything above. The old language was modified to make clear that this includes non-main campuses as well as separate educational centers beyond a reasonable and customary commuting distance in applicability of prorated sustaining fees.

GLOSSARY

Additional Location A physical facility that is geographically ~~apart-separate~~ from the main campus of the institution and within the same ownership structure of the institution, at which the institution offers at least 50% of an educational program and may qualify as a branch campus. Facilities classified as non-main campuses and separate educational centers may be considered additional locations.

Commented [KC143]: Alignment with U.S. Department of Education definition updates.

Assignment A specific task or amount of work performed by a student and submitted for evaluation.

Commented [KC144]: DE Committee rationale: a common definition with other agencies. Attendance in DE is captured by graded assignments or events (and not 'seat time') so this adds clarity.

Branch Campus A ~~location-physical facility of an institution~~ that is geographically ~~apart-separate from the main campus of the institution~~ and within the same ownership structure of the institution that is approved by the U.S. Secretary of Education as a branch campus and independent of the main campus of the institution. A location is independent if it (i) is permanent in nature; (ii) offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; (iii) has its own faculty and administrative or supervisory organization; and (iv) has its own budgetary and hiring authority. (See Additional Location)

Commented [KC145]: Alignment with U.S. Department of Education definition updates.

Course A learning experience of defined scope and duration, with intended learning outcomes, as described in a catalog and syllabus.

Commented [KC146]: This provides a common definition with other agencies and supports understanding of Chapter IX, in particular.