



American Association *of Colleges of Nursing*

ANNUAL STATE OF THE SCHOOLS



2002-2003

ANNUAL REPORT

AUGUST 2002

On August 1, 2002, AACN President Kathleen Ann Long was invited to the White House for the signing of the Nurse Reinvestment Act with President George W. Bush and other top health care leaders.

The U.S. Department of Education renewed its recognition of the Commission on Collegiate Nursing Education (CCNE) as a nationally recognized accrediting agency.

SEPTEMBER 2002

AACN served as lead coordinator of the 2002 State of the Science Congress which celebrated the contributions nurse researchers make to improving health care.

AACN President Kathleen Ann Long presented before the Institute of Medicine's Committee on the Work Environment for Nurses and Patient Safety.

NOVEMBER 2002

AACN launched the Professional Nursing Network, the only Web resource dedicated to matching graduates of baccalaureate and graduate degree programs in nursing with employers that value their education.

DECEMBER 2002

Ellen Olshansky from the University of Pittsburgh School of Nursing, was named editor of the *Journal of Professional Nursing*.

AACN releases data from the Fall 2002 survey which shows that enrollments in entry-level baccalaureate programs are up 8% over last year.

JANUARY 2003

The Helene Fuld Health Trust awards funding to AACN to extend the Leadership for Academic Nursing Program for another three years.

FEBRUARY 2003

AACN Executive Director Geraldine "Polly" Bednash presented testimony before the Institute of Medicine Committee on Institutional and Policy-Level Strategies for Increasing Diversity of the U.S. Health Care Workforce.

MARCH 2003

AACN sponsored a Capitol Hill Roundtable, titled *Safeguarding the Public's Health: Educating the Nation's Nurses*, to focus federal attention on the shortage of nurse faculty.

APRIL 2003

AACN established a partnership with CampusRN to offer a new scholarship program and create an online career center for students enrolled in baccalaureate and graduate nursing programs.

AACN and the University HealthSystem Consortium released a joint white paper titled *Building Capacity through University Hospital and University School of Nursing Partnerships*.

MAY 2003

AACN released a white paper on *Faculty Shortages in Baccalaureate and Graduate Programs in Nursing* that included practical strategies for bridging the faculty gap.

AACN published a draft white paper on the *Role of the Clinical Nurse Leader* which called for the creation of a new nursing role to better meet the needs of the health care system.

JUNE 2003

AACN and the National Association of Clinical Nurse Specialists announced a collaborative agreement to jointly collect data on clinical nurse specialist education programs.

AACN President-Elect Jean Bartels presented testimony at a field hearing in Atlanta convened by the Sullivan Commission on Diversity in the Healthcare Workforce.



AACN President Kathleen Ann Long and President George W. Bush at the Oval Office signing ceremony for the Nurse Reinvestment Act.

OUR MEMBERS

In 1969, the American Association of Colleges of Nursing (AACN) was established to answer the need for an organization dedicated exclusively to furthering nursing education in America's universities and four-year colleges. Representing schools of nursing at 577 public and private institutions, AACN is the national voice for baccalaureate- and graduate-degree nursing education programs.

OUR MISSION

AACN works to establish quality standards for baccalaureate- and graduate-degree nursing education; assist deans and directors to implement those standards; influence the nursing profession to improve health care; and promote public support of baccalaureate and graduate education, research, and practice in nursing — the nation's largest health care profession.

This report highlights the association's FY 2003 initiatives to help member schools meet the nation's demand for innovative and expanded nursing care.





FROM AACN'S PRESIDENT AND EXECUTIVE DIRECTOR

Education Makes a Difference

In today's increasingly complex and unpredictable health care environment, education makes a difference. The quality of our nation's health care hinges on our ability to create dynamic work environments where nurses may practice to the full extent of their knowledge and ability, and the skills of every health care provider are utilized to their optimal potential.

The American Association of Colleges of Nursing (AACN) is committed to improving the quality of our nation's health care by preparing a well-educated nursing workforce. AACN believes that education - the type and the amount - has an impact on the skills and competencies of a nurse. Clinicians prepared at the baccalaureate and higher degree levels are particularly well equipped to influence work environments, making them safer for both patients and nurses.

In the report *Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis* released in August 2002, the Joint Commission on Accreditation of Healthcare Organizations recommends staffing levels based on nurse competency as well as patient mix and acuity. The American Hospital Association Commission on Workforce echoes the same sentiment in the *In Our Hands* report by encouraging "new practice models based on workers' competencies, education, and experience."

While the health care system needs to employ nurses educated at all levels, AACN believes that patient care is improved when distinct scopes of practice are congruent with educational preparation. Evidence indicates that differentiated practice leads to good patient outcomes, reduces adverse events, lowers nurse turnover rates, reduces staffing costs, and enhances job satisfaction. By differentiating practice, the health care system capitalizes on the unique contributions that nurses educated at varying levels bring to the care delivery team.

To retain nurses, the health care system must embrace a model of care that holds nurses accountable for their own practice. Those who will lead in direct care environments must have educational preparation as:

- **Clinicians** able to understand the rationale for, and competently deliver complex care to an increasingly sicker population;
- **Critical Thinkers** able to evaluate treatment plans and use evidence-based practice in care planning and management;
- **Team Leaders** able to properly delegate and manage the nursing team;
- **Communicators** possessing the skills necessary to reach across cultures and collaborate with an interdisciplinary health care team;
- **Patient Advocates** adept at educating both patients and their families;
- **Computer Literates** able to use information systems at the point of care; and
- **Systems Analysts** able to review systems to enrich the quality of patient care delivery.

AACN will continue to work toward improved patient care by fostering the thoughtful consideration of new models for education and practice and advocating on behalf of our members for better work environments for our graduates. Our goals include meaningfully differentiated practice, enhanced nurse retention and ultimately better patient outcomes.

Kathleen Ann Long, PhD, APRN, FAAN
President

Geraldine "Polly" Bednash, PhD, RN, FAAN
Executive Director

ASSESSING THE ANNUAL STATE OF THE SCHOOLS

Findings explored in the 2003 State of the Schools are based on responses from 578 (84.8 percent) of the nation's nursing schools with baccalaureate- and graduate-degree programs that were surveyed in fall 2002. Data reflect actual counts; projections are not used.

Baccalaureate Enrollments Rise by 8.1 Percent

Enrollments in entry-level baccalaureate programs in nursing increased in fall 2002 for the second consecutive year. Though enrollments were up by 8.1 percent nationwide from 2001 to 2002, total enrollment in all baccalaureate programs is still down by more than 10% or 11,584 students from 1995, the year enrollments began to dip. See Figure 1 for changes in

enrollments and graduations from 2001 to 2002. See Figure 2 for data on enrollment changes over the past 10 years.

Data show that nursing school enrollments are up in all regions of the United States with the greatest increase realized in the North Atlantic, where enrollments in entry-level baccalaureate programs rose by 10.7 percent. Other regions reported the following increases from fall 2001 to fall 2002: schools in the West and Midwest were up by 8.0 percent; and schools in the South were up by 6.7 percent.

Despite the increase, trend analysis shows that graduations from entry-level baccalaureate programs in nursing are still declining. Since 1998 graduations have declined, on average, by 1,030 graduates each year. To account for variances in the number of schools reporting, AACN identifies trends by tracking the same group of schools for the past five years. The 1998-2002 cohort contains 363 schools.

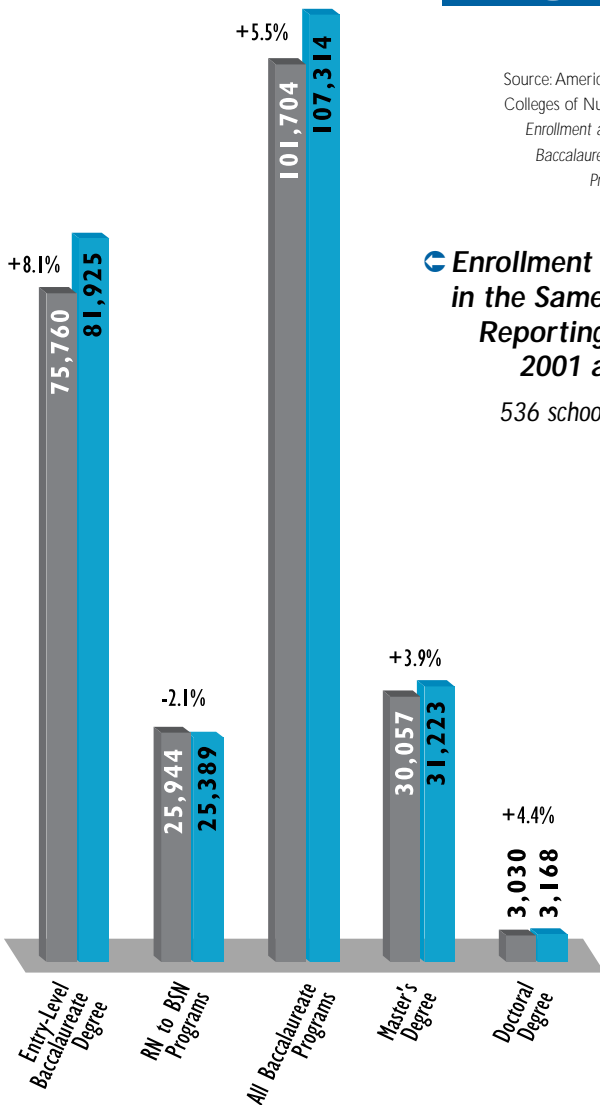
Overall, schools responding to the AACN survey reported 116,099 students enrolled in bachelor's-degree nursing programs in fall 2002. Included in this total are 85,415 entry-level students and 30,684 registered nurses with an

Figure One

Source: American Association of Colleges of Nursing, 2002-2003 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing

Enrollment Changes in the Same Schools Reporting in Both 2001 and 2002

536 schools reporting



Graduation Changes in the Same Schools Reporting in Both 2001 and 2002

532 schools reporting

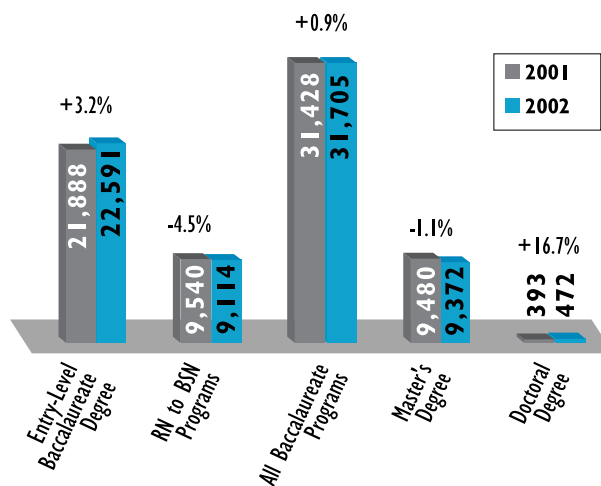
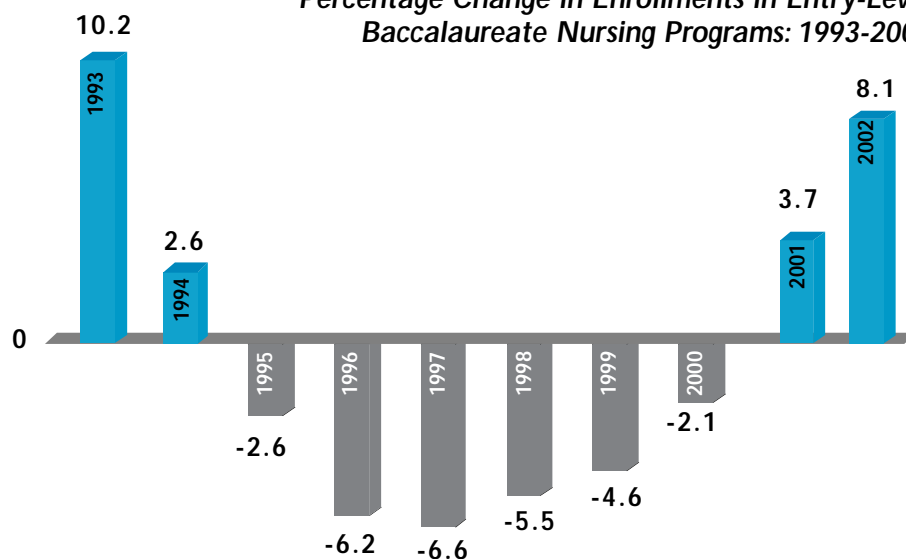


Figure Two

Percentage Change in Enrollments in Entry-Level Baccalaureate Nursing Programs: 1993-2002



Source: American Association of Colleges of Nursing, Research and Data Center, 1994-2003. AACN is not responsible for reporting errors by respondent institutions.

associate degree or hospital diploma who returned to school to obtain the bachelor's degree in nursing. Between August 2001 and July 2002, 34,016 students graduated from baccalaureate programs at responding schools (see Figure 3).

RN-to-Baccalaureate Enrollments Down Across the U.S.

Enrollments in RN-to-Baccalaureate programs continued to decline in fall 2002 with enrollments down in both the South and North Atlantic regions. Nationally, enrollments declined by 2.1 percent below the previous year (see Figure 1). Though enrollments were down by 8.1 percent in the South and 4.2 percent in the North Atlantic, schools in the Midwest (up 5.7 percent) and West (up 2.0 percent) saw enrollment gains this year in these degree completion programs.

RN-to-Baccalaureate programs graduated 10,351 students at responding schools between August 2001 and July 2002. In a matched sample of schools reporting in both 2001 and 2002, the number of RN-to-Baccalaureate graduates fell by 4.5 percent.

Enrollments Increase in Master's Degree Programs

Master's degree enrollments at nursing schools rose by 3.9 percent this year, following four years of enrollment declines (see Figure 1). Master's-degree enrollments grew in the West (up 9.7 percent), Midwest (up 8.2 percent), and the South (up 3.8 percent). Only schools in the North Atlantic

registered a decline in enrollments (down 2.2 percent).

In master's degree nursing programs, which prepare advanced practice clinicians in a wide array of specialties as well as administrators and educators, enrollments totaled 34,181 students in fall 2002. Master's programs graduated 10,360 students between August 2001 and July 2002. For schools reporting in both 2001 and 2002, the number of master's-degree graduates fell by 1.1 percent or 108 students.

Enrollments Rise in Doctoral Programs

Following a 1.5 percent increase last year, enrollments in doctoral nursing programs increased by 4.4 percent or 138 students

in 2002 (see Figure 1). Regionally, enrollments in doctoral programs were up in the South (9.0 percent), West (5.2 percent) and Midwest (3.4 percent). In North Atlantic states, enrollment in doctoral programs decreased by 2.1 percent or 16 students.

Enrollments in doctoral nursing programs totaled 3,168 students nationwide in fall 2002. Responding schools graduated 472 students with doctoral degrees between August 2001 and July 2002, a 16.7 percent increase (79 students) in a matched group of schools reporting in both years.

Minority Representation in Nursing Programs Remains Strong

Representation of racial/ethnic minority groups in nursing programs remained strong in fall 2002 with minority group members representing 22.9 percent of the undergraduate student population (see Figure 4).

In 2002-2003, minority group representation in baccalaureate programs was distributed as follows: 4.8 percent Asian, Native Hawaiian or Other Pacific Islander; 12 percent Black or African American; 0.6 percent American Indian or Alaskan Native; and 5.5 percent Hispanic or Latino. In master's nursing programs, representation of racial/ethnic minority groups was 19 percent including 4.9 percent Asian, Native Hawaiian or Other Pacific Islander; 9.2 percent Black or African American; 0.6 percent American Indian or Alaskan Native; and 4.3 percent Hispanic or Latino.

Figure Three

Year at a Glance: Enrollments and Graduations in Nursing Programs

578 schools reporting

Source: American Association of Colleges of Nursing, 2002-2003 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing

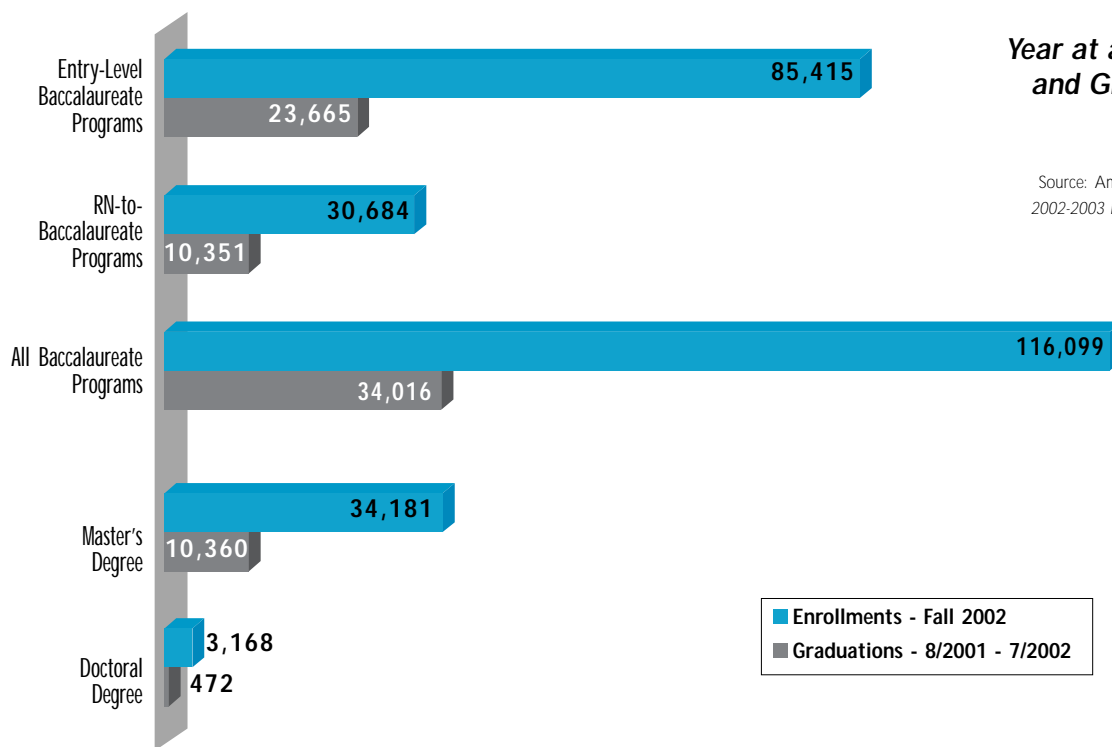
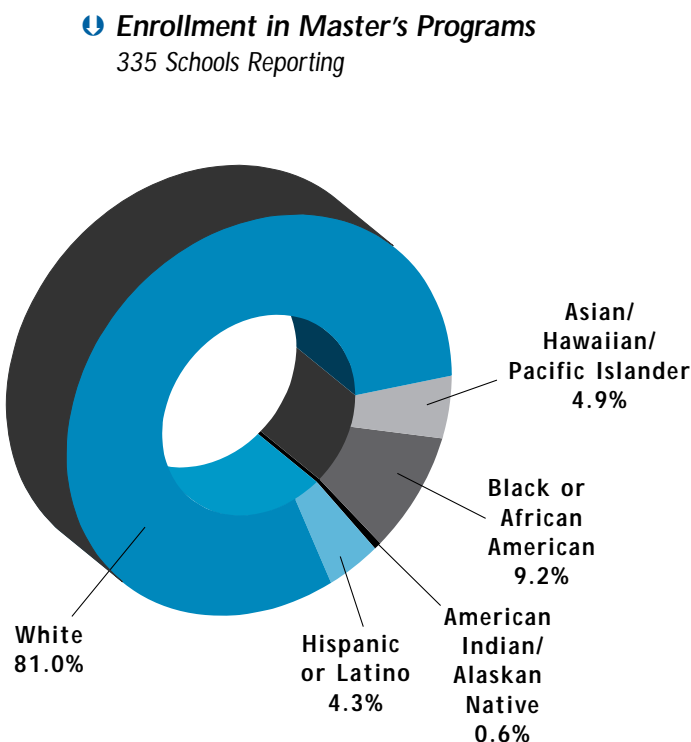
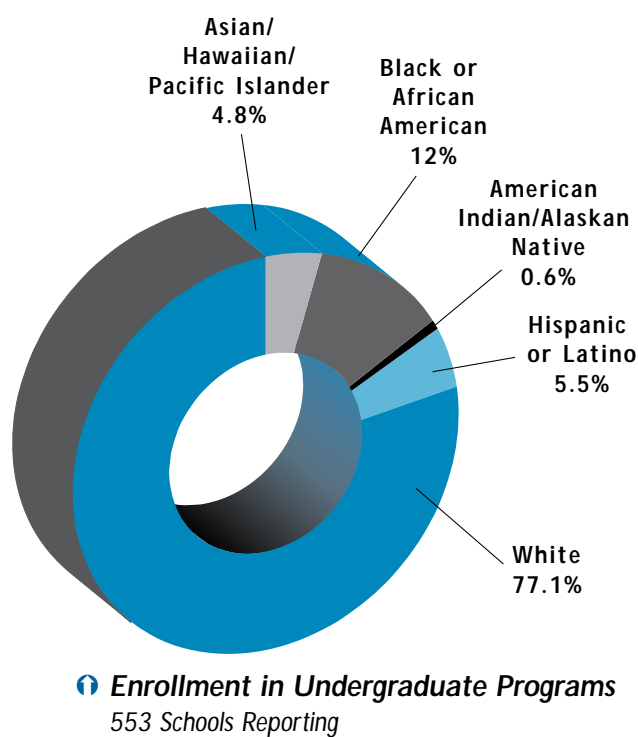


Figure Four

Racial/Ethnic Diversity in Baccalaureate and Graduate Nursing Programs, Fall 2002

Source: American Association of Colleges of Nursing, 2002-2003 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing



“Nursing leaders understand the connection between a culturally diverse nursing workforce and the ability to provide quality patient care. Though nursing has made great strides in recruiting and graduating nurses that closely mirror the patient population, we realize that more must be done before adequate representation becomes a reality.”



~ Geraldine 'Polly' Bednash, AACN Executive Director

From testimony presented to an expert committee of the Institute of Medicine in February 2003

Men continue to be underrepresented in nursing schools with only 8.3 percent of students in baccalaureate programs being male. In graduate programs, 9.5 percent of master's degree students and 6.6 percent of doctoral students are male.

Nursing Faculty Population

Nursing schools nationwide are struggling to fill faculty positions in an effort to accommodate all qualified students. In fall 2002, the total full-time faculty population in baccalaureate and higher degree programs reached 9,978 (555 schools reporting). As a group, nursing faculty are rapidly aging with the mean age across all ranks set at 51.2 years. Specifically, the average age of doctorally-prepared faculty by rank was 56.6 years for professors, 54.2 years for associate professors, and 50.5 years for assistant professors.

The survey found that the overwhelming majority of nursing faculty are white women. Only 9.5 percent of full-time faculty come from racial/ethnic minority groups, and only 4.2 percent are male. In terms of educational preparation, 49.9 percent of nursing school faculty are doctorally prepared with 29.7 percent holding nursing doctorates and 20.2 percent holding doctorates in related disciplines.

Accelerated Nursing Programs

Offered at both the baccalaureate and master's degree levels, accelerated nursing education programs build on pre-

vious learning experiences and transition individuals with undergraduate degrees in other disciplines into nursing. For those with a prior degree, accelerated baccalaureate programs offer the quickest route to becoming a registered nurse with programs generally running 12-18 months long. Generic master's degrees, also accelerated in nature and geared to non-nursing graduates, typically take three years to finish. Students in these programs usually complete baccalaureate-level nursing courses in the first year followed by two years of graduate study.

Though not new to nursing education, accelerated programs have proliferated over the past twelve years. According to AACN's latest annual survey, 105 accelerated BSN programs and 34 generic master's programs are currently offered nationwide. In addition, 53 new accelerated BSN programs are now in the planning stages. This number far outpaces all other types of entry-level nursing programs currently being considered at four-year nursing schools. Eighteen new generic master's programs are also taking shape.

Data Collection Efforts

Every fall, AACN's Research Center conducts the **Annual Survey of Institutions with Baccalaureate and Higher Degree Nursing Programs**. Information from the survey forms the basis for the nation's premier database on trends in enrollments and graduations; student and faculty demographics; and faculty and deans' salaries. Complete survey results from the current year were compiled in three separate reports:

- *2002-2003 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*
- *2002-2003 Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing*
- *2002-2003 Salaries of Deans in Baccalaureate and Graduate Programs in Nursing*

To order the most current reports, see

<http://www.aacn.nche.edu/IDS/datarep.htm>.



LEADING THROUGH TASK FORCE INITIATIVES

AACN's Board of Directors forms task forces as needed to focus on issues of primary concern to nursing school deans and faculty.

In July 2002, the AACN Board established the **Task Force on Education and Regulation for Professional Nursing Practice #2** (TFER 2) to continue the work of TFER 1. Chaired by AACN President-Elect Jean Bartels, TFER 2 was charged with reconceptualizing the nursing roles and competencies needed to provide high quality patient care now and in the future. The task force identified the need for a new role, tentatively titled the Clinical Nurse Leader, and developed a white paper outlining why this role is necessary and how this clinician should be prepared for practice. In March 2003, a Stakeholders' Reaction Panel was convened with leaders from the practice setting to validate the need for a new nurse. Panel members supported the concept and confirmed that the Clinical Nurse Leader role has emerged and is being developed on an ad hoc basis. In May 2003, AACN released a draft white paper on *The Role of the Clinical Nurse Leader* which is available online at <http://www.aacn.nche.edu/NewNurse>. To move this initiative forward, the task force planned a pre-conference in conjunction with the Fall 2003 Semiannual Meeting to bring educators and their practice partners together to focus on the development and utilization of the new nurse.

The **Task Force on the Professional Clinical Doctorate**, chaired by Elizabeth Lenz of The Ohio State University, convened several times this year to develop a plan of action and share data gathered through interviews of various programs. This task force is charged with clarifying and describing the purpose of the professional clinical doctorate, specifically core content and core competencies; describing trends over time in clinical doctoral education; assessing the need for clinically-focused doctoral programs; and identifying the potential

for various tracks and role options. Members are drafting a position statement on the recommended title, core competencies, and purpose of a nursing practice doctorate.

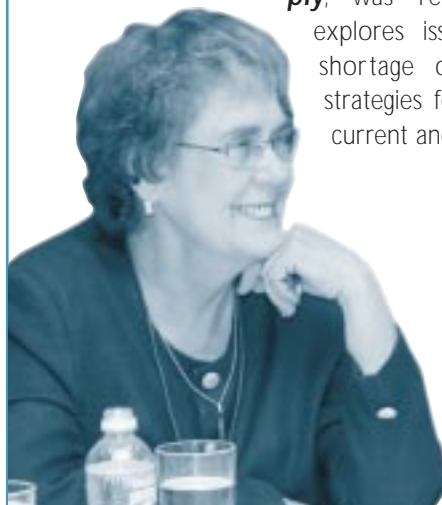
The **Task Force on Options for Participation in AACN**, chaired by Lea Acord of Marquette University, held its first meeting in October 2002. The task force is exploring possible structural changes to the association and will determine the strategic value of expanding options for participation in AACN. This year, members surveyed similar organizations to see how affiliate groups are maintained and compiled data on the structure of member institutions. Final recommendations are due to the Board in July 2003.

Chaired by Jeanette Lancaster from the University of Virginia, the **Leadership Transition Task Force** completed its work this year, which included examining ways in which AACN members could get more involved in the organization's committees as well as leadership development and succession. Based on the task force's recommendation, the first forum on leadership opportunities was held at the Spring Annual Meeting in March 2003. A print and online brochure, *Be A Leader Among Leaders*, was also produced which outlines how members can get more involved in AACN leadership.

In response to the growing shortage of nurse faculty, the Board created the **Task Force on Future Faculty** chaired by Kathleen Dracup of the University of California - San Francisco. The task force was charged with developing a white paper on the current faculty shortage in nursing and on the challenge of expanding the number of future faculty. In May 2003 the white paper titled **Faculty Shortages in Baccalaureate and Graduate Nursing Programs: Scope of the Problem and Strategies for Expanding the Supply**, was released. This publication explores issues contributing to the shortage of faculty and identifies strategies for expanding the pool of current and future nurse educators.

"Patients have every reason to be worried. Now we have proof from research that people can actually die from lack of nursing care – something nurses have always known. This should be a wake-up call to make the nursing shortage a public priority."

~ Kathleen Ann Long, AACN President,
From the article *The Nursing Squeeze* which appeared in the May
2003 issue of the *AARP Bulletin*.



WORKING TOGETHER TO ADVANCE NURSING EDUCATION

AACN actively pursues collaborative initiatives and opportunities that support our mission and advance the goals of nursing education, practice, and research.

This year, six new members of the University Health-System Consortium (UHC) were selected to participate in the **AACN-UHC Post-Baccalaureate Residency Program**. The initial six institutions - New York University, University of Arizona, University of Colorado, University of Kentucky, University of Pennsylvania, and University of Utah - completed the first year of the post-baccalaureate residency developed through the partnership. Initial feedback and evaluation indicate that residents and mentors are extremely pleased with the process and development that has occurred. A second round of residency site applicants has been selected, including Oregon Health and Science University, SUNY-Stony Brook, University of Kansas, University of New Mexico, University of North Carolina-Chapel Hill, and University of Texas Medical Branch. External audiences continue to express a keen interest in this initiative.

A separate AACN-UHC working group, chaired by Mary Mundt with the University of Louisville, released a joint white paper in April 2003 titled *Building Capacity through University Hospital and University School of Nursing Partnerships*. With an eye toward expanding enrollments in baccalaureate nursing programs, the white paper explores the need to increase student capacity, focuses on the importance of pursuing strategic alliances, and offers various short- and long-term solutions.

The work of the **International Nursing Coalition for Mass Casualty Education** (INCMCE) gained momentum this year. Formed by Vanderbilt University with support from the Office of Emergency Preparedness, the INCMCE is a coalition of national nursing, accrediting, and health organizations working to create the curriculum needed to train nurses to provide better emergency care during mass casualty disasters. Joan Stanley, AACN's Director of Education Policy, chairs the group charged with developing a publication that outlines what all nurses must know to respond appropriately to mass casualty incidents, including bioterrorism.

In February 2003, AACN joined with our colleagues at the **Association of American Medical Colleges** as a friend of the court in support of the University of Michigan in the *Grutter v. Bollinger* case. This case challenged the university's practice of taking race and ethnicity into account when making admissions decisions. AACN and the larger higher education community support race-conscious admissions practices and actively seek to diversify student populations. AACN opposes any restrictions on admissions policies that would hinder diversity and deny equal opportunity to students from minority populations.

AACN participated as a national sponsor of the inaugural **Cover the Uninsured Week** campaign held March 10-16, 2003. An initiative of The Robert Wood Johnson Foundation, this national grassroots effort was designed to raise public awareness of the 41 million Americans who lack health insurance. AACN member institutions were actively engaged in this campaign that included town hall meetings, campus discussions, and interfaith events in communities across the country.



“Professional nursing education must inevitably and powerfully change if we are to adequately prepare the next generation of nurses to participate as full partners in shaping the future. Improving the quality of education in order to meet the demands, challenges and opportunities of the future will require internal motivation, a collaborative culture, and the continuous cycle of using data to improve teaching and learning.”

~ Jean Bartels, AACN President-Elect
From her presentation at the
2003 Master's Education Conference



This year, the **Joint Commission on Accreditation of Healthcare Organizations** (JCAHO) invited AACN President Kathleen Ann Long to join its newly established Nursing Advisory Council. JCAHO is committed to working with leaders in nursing and nursing education to advance solutions to address critical issues in health care such as the nursing shortage. The Council is charged with addressing recommendations made in JCAHO's report on *Health Care at the Crossroads: Strategies for Addressing the Evolving Nursing Crisis* which was issued in August 2002.

AACN Executive Director Geraldine "Polly" Bednash was asked to serve on the newly formed **Sullivan Commission on Diversity in the Healthcare Workforce**. Organized by Duke University School of Medicine and the W. K. Kellogg Foundation, the commission will make recommendations to bring about systematic improvements in America's medical, dental and nursing schools. Following a series of regional hearings, health care leaders from across disciplines will generate workable solutions to improve access to care for all Americans and dismantle barriers to education and quality health care.

AACN and the **National Association of Clinical Nurse Specialists** (NACNS) announced a collaborative agreement this year to jointly collect data on clinical nurse specialist (CNS) education programs. This effort between the two organizations is aimed at creating the nation's most complete and accurate database on CNS education programs, including data related to student demographics and enrollment patterns by specialty area. This joint effort will begin in fall 2003 as a featured part of AACN's annual survey of enrollments and graduations in baccalaureate and graduate education programs in nursing.

AACN is engaged as a member of the Steering Committee for **Nursing's Agenda for the Future** (NAF), a coalition involving more than 60 organizations looking to move the nursing profession forward. AACN serves as co-leader for the work of approximately 20 organizations to address the Education Domain work objectives. In December, the steering committee met to determine the progress to date on specific goals and objectives, identify potential fundraising options for NAF implementation, and discuss future actions.

As a member of the **Tri-Council for Nursing**, AACN continued its joint lobbying efforts on behalf of nursing education with the American Nurses Association, American Organization of Nurse Executives, and National League for Nursing. This year, the Tri-Council's advocacy work addressed the reauthorization of Title VIII of the Public Health Service Act and involved working with the larger nursing community to establish a long-range funding strategy for nursing education.

In September, AACN President Kathleen Ann Long presented testimony before the **Institute of Medicine** (IOM) Committee on Work Environment for Nurses and Patient Safety. AACN's testimony focused heavily on the preparation of expert nurses and the need to have a more highly educated nursing workforce in today's complex health care system. AACN Executive Director Geraldine "Polly" Bednash was also asked to present testimony before the IOM at a separate hearing convened by the Committee on Institutional and Policy-Level Strategies for Increasing Diversity of the U.S. Health Care Workforce. Her remarks addressed the need and benefits of diversifying the nursing workforce, including the nurse faculty population.

In November, the first meeting of the **Nursing Organizations Alliance** was held in Indianapolis. The Alliance is the result of the dissolution of two other coalitions of nursing organizations – the Nursing Organization Liaison Forum (NOLF) and the National Federation of Specialty Nursing Organizations (NFSNO). AACN joined the Alliance to develop closer working relationships with multiple specialty organizations.

On the international front, AACN continued its support for **Nursing Overseas**, a division of Health Volunteers Overseas, which is dedicated to advancing professional nursing education around the world. This organization works with the indigenous nursing care community to develop standards of nursing practice and education. This year, Nursing Overseas announced volunteer opportunities in Cambodia, India, Tanzania, and sub-Saharan Africa. Announcements about volunteer opportunities supported by this group are listed online at <http://www.hvovusa.org>.

STRENGTHENING GERIATRIC NURSING EDUCATION

AACN is committed to improving the care of older adults by enhancing nursing education and supporting careers in geriatric advanced practice nursing.

AACN is proud to administer the **Geriatric Nursing Education Project**, a program generously funded by The John A. Hartford Foundation of New York. Recognizing that nurses play a critical role in the care of older adults, the Foundation thus far has committed over \$30 million to strengthening gerontological nursing capacity in both academic and clinical settings.

The two grant-funded initiatives within the Geriatric Nursing Education Project are:

- Enhancing Geriatric Nursing Education for Baccalaureate and Advanced Practice Nursing Programs
- Creating Careers in Geriatric Advanced Practice Nursing

Enhancing Geriatric Nursing Education

This initiative is designed to increase geriatric nursing content in nursing programs through grants to baccalaureate and higher degree schools of nursing. Grant awards may be used to redesign existing gerontology curriculum; provide faculty development in the specialty of gerontology; develop innovative clinical experiences; prepare new leaders in geriatric practice; and improve utilization of available resources through the development of collaborative groups in gerontology. Since the program's cre-

ation in 2001, thirty schools have received funding, including 20 baccalaureate and 10 master's programs. The award recipients will generate a broad array of products and models that will be disseminated to all collegiate nursing programs. AACN also awarded smaller "Pioneer" awards to six schools to facilitate the integration of gerontology content in the undergraduate nursing curriculum.

Creating Careers in Geriatric Advanced Practice Nursing

The need for geriatric advanced practice nurses is clear, but the number of students pursuing this field of expertise has not expanded enough, nor is it distributed appropriately across regions and health care settings. To meet this challenge, AACN received a grant from The John A. Hartford Foundation of New York to provide scholarships to schools of nursing to assist more nursing students who choose a career in geriatric advanced practice nursing. Competitive scholarship funds will be awarded to over 160 students at the following 23 schools of nursing:

Boston College; Case Western Reserve University; Duke University; Emory University; George Mason University; Long Island University, Brooklyn Campus; Northeastern University; Oregon Health & Sciences University; Radford University; Rush University; Seattle Pacific University; University of California, Los Angeles; University of California, San Francisco; University of Illinois at Chicago; University of Maryland; University of Michigan; University of Minnesota; University of Pennsylvania; University of Rhode Island; University of Texas Health Science Center at San Antonio; University of Washington; Wilkes University; and Yale University

The **Awards for Exceptional Baccalaureate Curriculum in Gerontological Nursing** is a collaborative effort between AACN and The John A. Hartford Foundation Institute for Geriatric Nursing. Now in its fifth year, this national awards program recognizes model baccalaureate programs in nursing with a strong focus on gerontological nursing. Beyond innovation, programs must also demonstrate relevance in the clinical environment and have the ability to be replicated at schools across the country. The following 2002 winners were announced at the Fall Semiannual Meeting in October: first place to Texas Tech University Health Sciences Center; second place to The University of Iowa; and honorable mention to Southeastern Louisiana University.



ENHANCING END-OF-LIFE NURSING CARE

With funding provided by The Robert Wood Johnson Foundation, AACN is developing a core of expert nurse educators in end-of-life care.

The **End-of-Life Nursing Education Consortium** (ELNEC) is a national training initiative to improve end-of-life nursing care administered jointly by AACN and The City of Hope National Medical Center. Launched in 2000, ELNEC has trained over 1,500 nurse educators, including representatives from all 50 states. These ELNEC-trained professionals have in turn shared their new found expertise with thousands of students in the classroom and nurses in a variety of practice settings.

During the 2002-2003 year, ELNEC saw its reach expand to graduate faculty and educators within the pediatric and oncology nursing specialties. Thanks to generous support from The Robert Wood Johnson Foundation and a \$1.4 million grant from the National Cancer Institute, ELNEC was able to modify its existing curriculum and begin planning 9 new trainings for nearly 600 caregivers. Training highlights this year include:

- Sixty **graduate faculty** members attended the first of four graduate training programs in June 2003. It is estimated that at the conclusion of these trainings, 63% of the nation's graduate nursing schools will have an ELNEC trainer on their faculty.
- Tailored to meet the unique needs of **pediatric nurses**, the pediatric palliative care curriculum was finalized this year, and the first training will take place in August 2003. Representing 34 states plus the District of Columbia, over 100 nurses have been selected to attend.
- Project coordinators adapted the ELNEC curriculum for **oncology nurses** and began planning a series of workshops to educate 240 oncology nurses over the next five years. The project will reach educators through a national network of nurses belonging to chapters of the Oncology Nursing Society.

Project Outcomes

Data released in November 2002 confirm that ELNEC is having a significant impact on nursing education across the U.S. Nurse educators who attended the first two ELNEC training sessions reported sharing their new expertise with over 16,000 nursing students and/or clinicians, which greatly magnifies the reach of this project. These data reflect only the evaluations from the first two training cohorts. The ELNEC project has had a significantly greater impact on nursing education since 11 additional courses have been offered. Over the next few years, project leaders estimate that ELNEC-trained educators will touch the lives of six million patients and their families facing the end of life.

To facilitate the spread of ELNEC beyond the initial trainings, project officers continued to enhance the **ELNEC Web site** – <http://www.aacn.nche.edu/ELNEC>. The site received over 172,000 hits and almost 55,000 visits between June 2002 and June 2003. New features include sections about the graduate and pediatric curricula and articles from a new palliative care series in *The American Journal of Nursing (AJN)* that builds on the ELNEC project.

The **Excellence in ELNEC Awards** were established in November 2002 to annually recognize trainers making particularly noteworthy contributions to end-of-life education. The winners are recognized at AACN's Baccalaureate Education Conference, highlighted on the Web site, and featured in the quarterly newsletter, *ELNEC Connections*.



ONGOING INITIATIVES & NEW HORIZONS

AACN pursues grant-funded initiatives and new projects that expand the association's reach and provide new member services.

In January 2003, the Helene Fuld Health Trust provided funding to extend AACN's **Leadership for Academic Nursing Program** for another three years. Launched in 2002, this program is designed to enhance the leadership capabilities of individuals aspiring to lead academic nursing organizations and those new to the role of chief academic administrator of baccalaureate or graduate nursing programs. This year, 60 Fellows were selected through a competitive process to participate in the leadership program. The Fellows were engaged in a year-long program that provided a focused assessment experience, a range of content and case studies related to successful leadership, and the opportunity to establish networks for the development of long-term partnerships and shared growth.

The **Colleagues in Caring** program completed its seventh year of funding from The Robert Wood Johnson Foundation and closed its project office in June 2003. The Colleagues program utilized state and regional consortia to develop, direct, interpret and act on data relevant to nursing workforce issues. The project was built on the idea that nursing workforce issues and the forces that control and regulate them are largely state based. Using a collaborative approach, key stakeholders worked together to make substantive changes in workforce data collection and analyses, educational mobility plans, and recruitment and retention. Though the project has been phased out, many of the resources and links developed through this project remain active on the AACN Web site at <http://www.aacn.nche.edu/Caring-Project>.

AACN continued to play a lead role this year in the administration of the **Secretary's Award for Innovations in Health Promotion and Disease Prevention**. This national program recognizes creative strategies in health promotion advanced by students of nursing and the other health professions. The program is sponsored by HRSA's Bureau of Health

Professions in collaboration with the Federation of Associations of Schools of the Health Professions, and is coordinated by AACN. Open to all health professions students, nursing was represented this year with a Third Place prize in the Interdisciplinary category.

To provide a higher level of member service, AACN launched the Web-based **Professional Nursing Network** that matches graduates of baccalaureate and graduate programs with employers who value their education. This online resource features employers nationwide who must complete a brief survey and acknowledge that nurses with higher levels of education bring unique skills to the practice setting. To date, almost 200 employers in 40 states have been added to the network, including 15 Magnet Hospitals and 24 members of the University HealthSystem Consortium. For details, see <http://www.aacn.nche.edu/pnn>.

In support of the Professional Nursing Network, AACN entered into a new partnership with **CampusRN**, a leading online service dedicated to serving the career planning needs of nursing students and potential employers nationwide. The AACN-CampusRN partnership involves two components: A new **Scholarship Program** for currently enrolled nursing students and an **Online Career Center** for recent graduates looking to transition into the professional practice environment. Information on applying for scholarships and accessing services may be found at <http://aacn.campusrn.com>.



ADVOCATING FOR NURSING EDUCATION AND RESEARCH

AACN actively works with Congress and health care coalitions to introduce and shape legislation that supports nursing education and research.

The **Nurse Reinvestment Act** (NRA) was adopted by both the House and Senate in late July and signed by the President on August 1, 2002. This legislation addresses the nursing shortage by providing scholarships to students, encouraging careers as nursing faculty, assisting nurses in furthering their education, and supporting career ladder partnerships between nursing schools and practice settings. AACN President Kathleen Ann Long was invited to participate in the Oval Office signing ceremony for the NRA as the representative from nursing education.

With authorizing legislation in hand, AACN and others in the nursing and health care communities pursued funding through the **appropriations process**. Once start-up funding of \$20 million was appropriated in February 2003, AACN began working with the Health Resources and Services Administration and the Division of Nursing (DON) to devise a regulatory framework for the administration of the new grant programs. The Division hosted four meetings to establish structures and guide funding for the NRA programs, which include the Nursing Faculty Loan Program; Comprehensive Geriatric Education; Nursing Education, Practice and Retention; and Loan Repayment and Scholarship Programs. At these meetings, DON staff presented a document that folded the new authorities from the NRA into the existing Title VIII statute.

Building on the heightened awareness of the need to **support nursing education programs**, AACN continued its ongoing efforts through the appropriations process to increase funding for Nursing Workforce Development programs (Title VIII); complete the 5-year effort to double the budget for the National Institute for Nursing Research; and fund programs to increase diversity among nursing students

and faculty. AACN also worked to influence and enact legislation that recognizes nursing education's role in bioterrorism response and patient safety.

In support of the Nursing Qualification Standards at the Department of Veterans Affairs, AACN facilitated opportunities for deans to provide **oral and written testimony** before the National Commission on Veterans Affairs (VA) Nursing. In April 2003, the Commission conducted four regional field hearings across the country to collect information on the VA's employment practices related to nursing. AACN provided written testimony and invited members to represent the association at each hearing. AACN representatives included Elizabeth Humphrey from Louisiana State University; Gloria Donnelly from Drexel University; Sheila Haas from Loyola University Chicago; and retired dean Janet Rodgers from the University of San Diego.

Throughout the year, AACN's government affairs staff sent regular **information updates** to keep members abreast of breaking news and calls to action. Staff worked to forge stronger alliances with legislative advocates from member schools in an effort to share resources and unify messages. Fact sheets, legislative summaries, side-by-side comparisons of pending legislation, and the Web-based Write to Congress function are all available to assist advocacy efforts. Members were also sent information on **Opportunity Alerts** which include announcements of grants, fellowships, scholarships, and other funding sources for nursing programs, students, and research.

"We commend Congress for working so quickly in 2002 to enact the Nurse Reinvestment Act. Moving this legislation from inspiration to enactment in only one year's time is a clear indication that Congress places a high priority on addressing the nursing shortage."

~ Kathleen Ann Long,
AACN President, From the article
Nursing Groups Agree that Funding for NRA is Priority for Year Ahead
from the December 30, 2002 issue of
Legislative Network for Nurses



ENCOURAGING PROFESSIONAL DEVELOPMENT

AACN conferences and seminars give nurse educators personal contact with key decision makers in health care, higher education, and government.

Association **conferences and meetings** offer a stimulating source of continuing education and professional development that builds leadership and administrative skills. Ten conferences were offered July 2002-June 2003 including the Summer Seminar, Fall Semiannual Meeting, Baccalaureate Education Conference, Doctoral Education Conference, Master's Education Conference, Executive Development Series, Nursing Advancement Professionals Conference, Spring Annual Meeting, Business Officers of Nursing Schools Annual Meeting, and Hot Issues Conference.

In addition, AACN co-directed the International **State of the Science Congress** with Sigma Theta Tau International (STTI) held September 26-28, 2002. For two years, Jennifer Ahearn, AACN's Deputy Executive Director, worked with lead staff at STTI to coordinate logistics and abstract review and selection. An advisory group of approximately 14 nursing organizations provided insight and commentary on the themes of the meeting and the invited plenary session speakers. Dean Joan Shaver from the University of Illinois at Chicago served as AACN's co-chair for this group. Over 700 individuals attended the conference, a record for this event. A large cadre of AACN staff members was present throughout the meeting to support and monitor presentations, registration, and information technology needs. Strong positive feedback was provided by the group for the very capable and organized staff efforts.

Programming at the **Fall Semiannual Meeting** and **Spring Annual Meeting** centered around the many high profile reports released this year on the need to reform health care and address the nursing shortage. Presenters at these well-attended events included Jim Bentley, Vice President of Strategic Policy Planning for the American Hospital Association; Dennis O'Leary, President of the Joint Commission on Accreditation of Healthcare Organizations; and Sue Hassmiller, Senior Program Officer with The Robert Wood Johnson Foundation. For the first time, associate deans were invited to accompany their deans to the Fall Semiannual Meeting. AACN members embraced this new practice, which will be repeated in Fall 2003.

Recurrent themes addressed in several AACN conferences this year included the importance of collaboration between education and practice; leadership development; promoting student diversity; improving cultural competence; enhancing the teaching role; innovations in education; addressing the nursing shortage; and stimulating interest in academic careers.

UPCOMING CONFERENCES

Doctoral Conference

February 4-7, 2004

South Seas Resort, Captiva, FL

Faculty Practice Conference

February 25-26, 2004

Doubletree Paradise Valley Resort, Scottsdale, AZ

Master's Education Conference

February 26-28, 2004

Doubletree Paradise Valley Resort, Scottsdale, AZ

Nursing Advancement Professionals Meeting

March 26-27, 2004

Fairmont Hotel, Washington, DC

Spring Annual Meeting

March 27-30, 2004

Fairmont Hotel, Washington, DC

Business Officers of Nursing Schools Annual Meeting

April 21-23, 2004

Elliot Grand Hyatt Seattle, Seattle, WA

Summer Seminar

July 25-28, 2004

El Dorado Hotel, Santa Fe, NM

Fall Semiannual Meeting

October 23-26, 2004

Fairmont Hotel, Washington, DC

Executive Development Series Baccalaureate Conference

November 2004

ENSURING QUALITY THROUGH ACCREDITATION

The Commission on Collegiate Nursing Education (CCNE) is the autonomous accrediting arm of AACN charged with ensuring the quality and integrity of baccalaureate and graduate nursing education programs.

CCNE was established by a vote of the AACN membership seven years ago. Now in its sixth year of accreditation review activities, CCNE has accredited 485 baccalaureate or master's degree programs at 306 regionally accredited colleges and universities. In the next two years, CCNE is scheduled to make accreditation decisions for an additional 205 nursing programs at 134 institutions.

In July 2002, the **U.S. Department of Education** renewed its recognition of CCNE as a nationally recognized accrediting agency. Citing no stipulations or compliance concerns, Secretary Rod Paige concurred with the National Advisory Committee on Institutional Quality and Integrity's recommendation to continue recognition of CCNE as a national agency for the accreditation of baccalaureate and graduate nursing education programs for the maximum period of 10 years. Secretary Paige stated that CCNE accreditation meets the federal funding criteria for accredited nursing education programs wishing to participate in programs administered by federal agencies. He also expressed his appreciation for CCNE's "continuing efforts to improve the quality of post-secondary education in the United States."

In a move to strengthen professional nursing education programs nationwide, the CCNE Board of Commissioners agreed in May 2003 to **propose changes to the accreditation standards** used to ensure quality in baccalaureate and graduate level nursing programs. The revisions were proposed by the CCNE Standards Committee following the committee's comprehensive review of the document and feedback received from the Commission's community of interest. The revisions proposed by the Board ensure consistency in use of terminology, clarify intent, and eliminate redundancy. The most significant proposed change relates to the use of professional nursing standards and guidelines. Specifically, the proposed standards identify three sets of professional nursing guidelines that programs must use as the foundation for curricula: *The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 1998)*, *The Essentials of Master's Education for Advanced Practice Nursing*

(AACN, 1996) and the *Criteria for Evaluation of Nurse Practitioner Programs* revised by the National Task Force on Quality Nurse Practitioner Education in 2002.

To complete the process, the CCNE Board actively solicited feedback on the proposed changes from all stakeholders through June 2003. The CCNE Board will consider all comments and vote on the adoption of the revised standards at its October 2003 meeting.

AACN convened two meetings this year of the **Alliance for Nursing Accreditation**, an informal coalition of approximately 15 nursing organizations involved in accreditation, certification, or development of standards for baccalaureate and graduate nursing education. The Alliance was established as a result of a mandate from AACN members that the association take the lead in accreditation of nursing at the baccalaureate and graduate levels and that AACN also establish a framework and mechanism to foster collaboration among the regulatory bodies that oversee or review baccalaureate and graduate education. The major nursing certification bodies, four accreditation organizations, the National Council of State Boards of Nursing, and several organizations that set standards for nursing education are a part of this Alliance.

The October 2002 meeting was co-sponsored by the National Certification Board of Pediatric Nurse Practitioners and Nurses. Collaboration to improve coordination and decrease regulatory burden for schools was addressed. In March 2003, the National Association of Clinical Nurse Specialists met with the Alliance to discuss issues related to CNS education and credentialing. The agenda included continued review of the National Council of State Boards of Nursing efforts to develop uniform criteria for recognition of advanced practice nurses (APNs) and interstate practice authority for APNs.



COMMUNICATING AACN'S MISSION

AACN's publications, media relations and outreach efforts present the association's mission and message to stakeholders in many arenas.

In January 2003, Ellen Olshansky, the Chair of the Department of Health and Community Systems at the University of Pittsburgh School of Nursing, became the editor of the *Journal of Professional Nursing* (JPN). Now in its 19th year, JPN is AACN's scholarly journal that presents observations by nursing leaders on the diverse roles of baccalaureate- and graduate-prepared nurses, as well as insightful columns on clinical, legislative, regulatory,

and ethical concerns of interest to nursing educators, researchers, and practitioners.

Among the other publications currently active in our catalog or introduced this year are the following:

- First published by Simon & Schuster in 2001, **Ask a Nurse: From Home Remedies to Hospital Care** spotlights the unique expertise of nurses and distills practical self-care guidance from hundreds of professional nurses nationwide. This book was a collaborative effort between AACN and The People's Medical Society.
- **SYLLABUS** is a bimonthly newsletter designed to keep members and nonmembers updated on key legislation and regulatory programs, and provide news on funding opportunities.
- **The Essentials of Baccalaureate Education for Professional Nursing Practice**, a revision of the landmark publication first published in 1986, establishes a standardized core curriculum for registered nurses prepared in the baccalaureate degree programs.

"The American Association of Colleges of Nursing is committed to improving the quality of our nation's health care by preparing a well-educated nursing workforce. AACN values education and believes that education – the type and the amount – has an impact on the skills and competencies of a nurse. Specifically, baccalaureate prepared nurses are better equipped to shape and influence work environments, making them safer for both patients and nurses."

~ Kathleen Ann Long, AACN President,
From testimony presented in September 2002 before the
Institute of Medicine's Committee on Work Environment
for Nurses and Patient Safety



“In a time when nursing schools are being challenged to produce more registered nurses at a faster rate, accelerated programs may just be the answer to bridging the nursing workforce gap. Accelerated programs provide an efficient vehicle for transitioning new segments of the workforce into nursing.”



~ Joan Stanley, AACN Director of Education Policy, From the article *Accelerated Programs Offer Students Fast Track to Nursing* which appeared in the October 15, 2002 issue of the NurseZone.com newsletter

- **Peterson's Guide to Nursing Programs**, 8th edition, provides the general public with a comprehensive, concise directory of baccalaureate and graduate programs in nursing in the United States and Canada.
- Two **AACN white papers** were published this year including *Building Capacity through University Hospital and University School of Nursing Partnerships*, a joint paper with the University HealthSystem Consortium, and *Faculty Shortages in Baccalaureate and Graduate Nursing Programs: Scope of the Problem and Strategies for Expanding the Supply*. A draft white paper titled *The Role of the Clinical Nurse Leader* was also released.
- Two new **AACN Issue Bulletins** were released this year, including *Accelerated Programs: The Fast Track to a Nursing Career* and *Using Strategic Partnerships to Expand Nursing Education Programs*.

AACN has been actively engaged in two **national media campaigns** designed to generate interest in nursing careers. Last year Johnson & Johnson launched the Campaign for Nursing's Future, a multimedia initiative to polish the image of nursing that includes paid television commercials, a recruitment video, and a Web site. AACN Executive Director Geraldine "Polly" Bednash serves as a campaign advisor and conducted a 16-city "radio tour" in conjunction with National Nurses Week. AACN staff serve on the Executive Committee of Nurses for a Healthier Tomorrow, a coalition of 45 organizations working to raise interest in nursing careers among middle and high school students. The

coalition has secured over \$600,000 in sponsorship, launched a Web site, and designed print ads that can be downloaded at <http://www.nursesource.org>.

This year, AACN received widespread **media coverage** in conjunction with the nursing shortage and was featured in stories on the faculty shortage, the rise in enrollments, strategies to attract diverse populations into nursing, accelerated nursing programs, and career horizons. The association was referenced in most of the nation's top newspapers, and assisted reporters working on stories for *CBS This Morning*, *U.S. News and World Reports' Guide to Graduate Schools*, *People Magazine*, National Public Radio and CNN.

To keep members and other stakeholders abreast of new developments in professional nursing education, **AACN NewsWatch** was distributed to a wider audience this year. This monthly email advisory contains information about the association's new initiatives, political advocacy, publications, conferences, collaborations, and other news of interest to nurse educators. AACN members are encouraged to share this newsletter with their faculty and submit news items to be featured in this widely circulated piece.

Johnson & Johnson campaign organizers Andrea Higham (left) and Nancy Lewin (right) with AACN Executive Director Geraldine "Polly" Bednash.



INDEPENDENT AUDITORS' REPORT



GELMAN, ROSENBERG & FREEDMAN
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
American Association of Colleges of Nursing
Washington, D.C.

We have audited the accompanying statement of financial position of the American Association of Colleges of Nursing (AACN) as of June 30, 2003, and the related statements of activities and change in net assets, functional expenses and cash flows for the year then ended. These financial statements are the responsibility of AACN's management. Our responsibility is to express an opinion on these financial statements based on our audit. The prior year summarized comparative information has been derived from AACN's June 30, 2002 financial statements and, in our report dated August 16, 2002, we expressed an unqualified opinion on those statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the American Association of Colleges of Nursing as of June 30, 2003, and its change in net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with Government Auditing Standards, we have also issued our report dated September 12, 2003 on our consideration of American Association of Colleges of Nursing's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grants. That report is an integral part of an audit performed in accordance with Government Auditing Standards and should be read in conjunction with the report in considering the results of our audit.

Gelman, Rosenberg & Freedman

September 12, 2003

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Exhibit A

Statement of Financial Position as of June 30, 2003 with Summarized Financial Information for 2002

ASSETS

	2003			2002
	AACN	CCNE (note 2)	Total	Total
Current Assets				
Cash and Cash Equivalents	\$ 299,916	\$ 168,978	\$ 468,894	\$ 1,679,931
Investments (Note 3)	3,435,666	792,289	4,227,955	3,314,307
Grants Receivable (Note 4)	2,443,499	-	2,443,499	2,625,636
Accounts Receivable	42,745	633	43,378	37,113
Accrued Interest Receivable	3,929	1,411	5,340	5,704
Due to/from CCNE	(12,441)	12,441	-	-
Prepaid Expenses	59,155	28,414	87,569	68,143
<i>Total Current Assets</i>	6,272,469	1,004,166	7,276,635	7,730,834
Furniture, Equipment and Leasehold Improvements				
Furniture and Equipment	394,817	122,404	517,221	531,095
Leasehold Improvements	187,204	74,429	261,633	261,633
	582,021	196,833	778,854	792,728
Less: Accumulated Depreciation and Amortization	(370,987)	(124,181)	(495,168)	(430,714)
<i>Net Property and Equipment</i>	211,034	72,652	283,686	362,014
Other Assets				
Long Term Grants Receivable (Note 4)	1,167,092	-	1,167,092	2,048,833
TOTAL ASSETS	\$ 7,650,595	\$ 1,076,818	\$ 8,727,413	\$ 10,141,681

LIABILITIES and NET ASSETS

	2003			2002
	AACN	CCNE (note 2)	Total	Total
Current Liabilities				
Accounts Payable	\$ 233,878	\$ 19,763	\$ 253,641	\$ 141,490
Accrued Vacation	75,788	15,225	91,013	86,769
Deferred Revenue				
Dues	733,500	-	733,500	604,330
Meetings	56,202	-	56,202	55,374
Accreditation	-	262,200	262,200	279,400
Royalties	-	-	-	6,000
<i>Total Current Liabilities</i>	1,099,368	297,188	1,396,556	1,173,363
Net Assets				
Unrestricted	2,931,067	779,630	3,710,697	3,151,977
Temporarily Restricted (Note 5)	3,531,957	-	3,531,957	5,732,341
Permanently Restricted	88,203	-	88,203	84,000
<i>Total Net Assets</i>	6,551,227	779,630	7,330,857	8,968,318
TOTAL LIABILITIES AND NET ASSETS	\$ 7,650,595	\$ 1,076,818	\$ 8,727,413	\$ 10,141,681

See accompanying notes on pages 24 and 25.

Exhibit B

Statement of Activities and Change in Net Assets for the Year Ended June 30, 2003 with Summarized Financial Information for 2002

	2003						2002
	Unrestricted			AACN Temporarily Restricted	AACN Permanently Restricted	Total	Total
	AACN	CCNE (Note 2)	Total				
REVENUE							
Contract Awards	\$ 6,429	\$ -	\$ 6,429	\$ 1,014,659	\$ -	\$ 1,021,088	\$ 3,214,605
Contributions	-	-	-	-	4,203	4,203	5,000
Membership Dues	1,525,730	-	1,525,730	-	-	1,525,730	1,442,745
Registration Fees	926,608	13,050	939,658	-	-	939,658	627,289
Publication Sales	169,867	-	169,867	-	-	169,867	187,009
Investment Income	200,290	52,762	253,052	294	-	253,346	17,549
Annual Fees	-	711,498	711,498	-	-	711,498	663,779
Application Fees	-	109,500	109,500	-	-	109,500	175,000
Miscellaneous Income	28,174	12,168	40,342	-	-	40,342	14,049
Site Evaluation Fees	-	380,800	380,800	-	-	380,800	303,600
Net Assets Released From Donor Restrictions (Note 5)	3,215,337	-	3,215,337	(3,215,337)	-	-	-
Total Revenue	6,072,435	1,279,778	7,352,213	(2,200,384)	4,203	5,156,032	6,650,625
EXPENSES							
Program Services:							
Regional							
Collaboratives (CIC)	531,075	-	531,075	-	-	531,075	558,798
End of Life Projects	840,001	-	840,001	-	-	840,001	1,147,884
Gerontology/Geriatric Projects	1,704,167	-	1,704,167	-	-	1,704,167	1,558,434
Curriculum/Awards Projects	156,518	-	156,518	-	-	156,518	218,007
Research	281,506	-	281,506	-	-	281,506	280,423
Education Policy	188,413	-	188,413	-	-	188,413	136,998
Government Affairs/ Lobbying	324,779	-	324,779	-	-	324,779	339,988
Public Affairs	229,185	-	229,185	-	-	229,185	198,199
Publications	182,413	-	182,413	-	-	182,413	162,814
Meetings	713,098	-	713,098	-	-	713,098	508,420
Accreditation	-	1,028,239	1,028,239	-	-	1,028,239	928,781
Total Program Services	5,151,155	1,028,239	6,179,394	-	-	6,179,394	6,038,746
Supporting Services:							
General and Administrative	500,012	114,087	614,099	-	-	614,099	531,453
Total Expenses	5,651,167	1,142,326	6,793,493	-	-	6,793,493	6,570,199
Change in Net Assets	421,268	137,452	558,720	(2,200,384)	4,203	(1,637,461)	80,426
Net Assets at Beginning of Year	2,509,799	642,178	3,151,977	5,732,341	84,000	8,968,318	8,887,892
NET ASSETS AT END OF YEAR	\$ 2,931,067	\$ 779,630	\$ 3,710,697	\$ 3,531,957	\$ 88,203	\$ 7,330,857	\$ 8,968,318

See accompanying note on page 25.

Exhibit C

Statement of Cash Flows for the Year Ended June 30, 2003 with Summarized Financial Information for 2002

	2003	2002
CASH FLOWS FROM OPERATING ACTIVITIES		
Change In Net Assets	\$ (1,637,461)	\$ 80,426
Adjustments to Reconcile Change in Net Assets to Net Cash Provided (Used) by Operating Activities:		
Realized Loss	14,013	612
Unrealized Loss	(130,907)	98,328
Depreciation and Amortization	94,700	102,796
Loss on Disposal of Asset	225	-
(Increase) Decrease in:		
Grants Receivable	1,063,878	651,955
Accounts Receivable	(6,265)	57,161
Accrued Interest Receivable	364	12,029
Prepaid Expenses	(19,426)	3,374
Increase (Decrease) in:		
Accounts Payable	112,151	(61,834)
Accrued Vacation	4,244	2,765
Deferred Revenue:		
Dues	129,170	2,290
Meetings	828	13,468
Accreditation	(17,200)	64,800
Royalties	(6,000)	(13,998)
<i>Net Cash Provided (Used) by Operating Activities</i>	<i>(397,686)</i>	<i>1,014,172</i>
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of Furniture, Equipment and Leasehold Improvements	(16,598)	(117,165)
Purchase of Investments	(2,410,753)	(2,159,412)
Proceeds From Sale of Investments	1,614,000	2,364,666
<i>Net Cash Provided (Used) by Investing Activities</i>	<i>(813,351)</i>	<i>88,089</i>
Net Increase (Decrease) in Cash and Cash Equivalents	(1,211,037)	1,102,261
Cash and Cash Equivalents at Beginning of Year	1,679,931	577,670
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$ 468,894	\$ 1,679,931

Exhibit D

Statement Of Functional Expenses for the Year Ended June 30, 2003 with Summarized Financial Information for 2002

	Regional Collaboratives (CIC)	End of Life Projects	Gerontology/ Geriatric Projects	Curriculum/ Awards Projects	Research	Education Policy
Salaries	\$ 144,304	\$ 203,778	\$ 176,895	\$ 36,679	\$ 179,721	\$ 138,129
Fringe Benefits (Note 6)	38,746	50,183	43,562	8,746	42,868	32,805
Printing	3,878	1,140	2,168	6,601	15,059	-
Rent	-	-	-	-	13,512	11,448
Professional Fees	-	-	-	-	-	-
Insurance	-	-	-	-	-	-
Depreciation and Amortization	-	-	-	-	-	-
Telephone	11,540	5,522	5,475	926	3,101	1,427
Staff/Officer Travel	68,066	18,780	33,915	4,038	1,188	5,325
Consulting	178,483	10,038	18,950	30,638	17,500	-
Postage and Duplication	4,681	5,611	11,716	3,009	7,077	804
Repairs and Maintenance	1,024	-	-	-	-	-
Supplies	4,657	7,007	4,765	1,515	912	816
Subscription Cost to Members	-	-	-	-	-	-
Board and Committees	7,243	16,225	37,161	4,370	-	-
Public Relations	-	-	-	-	-	-
Continuing Education	400	-	-	-	-	-
Legislative Affairs	-	-	-	-	-	-
Dues and Subscriptions	245	-	-	-	68	754
Conference Support	-	-	6,364	-	-	-
Meetings	29,229	141,619	1,307,101	44,821	-	-
Honoraria	-	-	-	-	-	-
Miscellaneous	943	7,728	1,542	3,310	500	-
Grants and Contracts						
Overhead	37,636	44,098	36,997	11,865	-	(3,095)
Subcontracts	-	328,272	17,556	-	-	-
Evaluator Training	-	-	-	-	-	-
Evaluator Travel	-	-	-	-	-	-
State of the Science Conference	-	-	-	-	-	-
Total	\$ 531,075	\$ 840,001	\$ 1,704,167	\$ 156,518	\$ 281,506	\$ 188,413

See accompanying note on page 25.

Notes to financial statements June 30, 2003

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GENERAL INFORMATION

Organization

The American Association of Colleges of Nursing (AACN) was formed in 1969 as a non-profit organization to establish quality standards for bachelor's and graduate degree nursing education, assist deans and directors to implement those standards, influence the nursing profession to improve health care, and promote public support of baccalaureate and graduate education, research, and practice in nursing.

Basis of presentation

The accompanying financial statements are presented on the accrual basis of accounting, and in accordance with Statements of Financial Accounting Standard No. 117, "Financial Statements of Not-for-Profit Organizations".

Exhibit D

CONTINUED

2003						2002	
Govt. Affairs/ Lobbying	Public Affairs	Publications	Meetings	Accreditation	General and Admini- strative	Total Expenses	Total Expenses
\$ 171,487	\$ 123,642	\$ 92,762	\$ 139,568	\$ 288,121	\$ 303,699	\$ 1,998,785	\$ 1,864,666
40,938	30,737	22,255	33,982	62,479	55,311	462,612	407,328
-	30,215	21,640	26,752	26,297	2,165	135,915	118,214
13,152	9,528	7,044	12,000	25,821	28,465	120,970	123,986
-	-	-	-	14,925	12,391	27,316	11,981
-	-	-	1,276	11,200	10,301	22,777	20,159
-	-	-	-	25,853	68,847	94,700	102,796
2,620	919	862	5,187	5,610	9,356	52,545	60,481
7,965	671	3,950	50,725	15,233	53,451	263,307	334,508
-	11,128	-	9,700	11,985	10,215	298,637	382,137
1,171	11,141	2,825	21,321	18,701	11,955	100,012	129,311
-	-	-	-	1,928	5,607	8,559	10,125
1,095	492	1,522	12,657	6,712	23,575	65,725	62,755
-	-	24,328	-	-	-	24,328	23,622
489	-	-	1,933	118,087	72,716	258,224	268,016
3,000	-	-	-	-	19,122	22,122	13,052
-	-	-	-	499	9,619	10,518	10,562
73,387	-	-	-	-	-	73,387	64,412
10,251	634	-	-	9,829	15,041	36,822	35,899
-	5,094	-	3,641	-	-	15,099	13,190
425	4,977	-	287,387	-	3,232	1,818,791	1,774,577
-	-	5,000	-	-	-	5,000	5,000
699	466	225	49,830	11,003	24,173	100,419	76,802
(1,900)	(459)	-	-	-	(125,142)	-	-
-	-	-	-	-	-	345,828	333,108
-	-	-	-	109,592	-	109,592	73,289
-	-	-	-	264,364	-	264,364	250,223
-	-	-	57,139	-	-	57,139	-
\$ 324,779	\$ 229,185	\$ 182,413	\$ 713,098	\$ 1,028,239	\$ 614,099	\$ 6,793,493	\$ 6,570,199

Notes to financial statements June 30, 2003 (continued)

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GENERAL INFORMATION

(continued)

Net assets

Unrestricted net assets include unrestricted revenue and contributions received without donor imposed restrictions. These net assets are available for operations.

Temporarily restricted net assets include gifts of cash and other assets with donor stipulations that limit the use of the donated assets. When a donor restriction expires (a stipulated time restriction ends or the purpose of the restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the Statement of Activities and Change in Net Assets as net assets released from restrictions.

Permanently restricted net assets represent funds that are to be invested in-perpetuity with the investment income used for general support of AACN. Permanently restricted net assets at June 30, 2003 were \$88,203.

Notes to financial statements June 30, 2003 (continued)

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GENERAL INFORMATION (continued)

Contributions and grants

Contributions and grants are recorded as revenue in the year notification is received from the donor. Contributions and grants are recognized as unrestricted support only to the extent of actual expenses incurred in compliance with the donor imposed restrictions. Contributions and grants received in excess of expenses incurred are shown as temporarily restricted net assets in the accompanying financial statements.

Revenue

Membership dues are recognized as revenue on a pro rata basis over the term of the membership period. Interest income is recognized when earned. Application and annual fees from the accreditation program received in advance are included in deferred revenue.

Investments

Investments are carried at market value. Realized and unrealized gains or losses are included in investment income in the Statement of Activities and Change in Net Assets.

Cash and cash equivalents

Cash and cash equivalents include cash on hand and other highly liquid instruments with maturities of less than three months.

Concentration of credit risk

At times during the year, AACN maintains cash balances at financial institutions in excess of the Federal Deposit Insurance Corporation (FDIC) limits. Management believes the risk in these situations to be minimal.

Furniture, equipment and leasehold improvements

Furniture and equipment are stated at cost. Furniture and equipment are depreciated on a straight-line basis over the estimated useful lives of the related assets, generally three to five years. Leasehold improvements are being amortized over the lesser of their estimated useful life or the lease period.

Income taxes

AACN is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes has been made in the accompanying financial statements. AACN is not a private foundation.

Functional allocation of expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the Statement of Activities and Change in Net Assets. Accordingly, certain costs have been allocated between the program and supporting services benefited.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

2. COMMISSION ON COLLEGIATE NURSING EDUCATION (CCNE)

CCNE was established in 1996 as an autonomous arm of AACN to have the sole purpose of accrediting baccalaureate and graduate nursing education programs. AACN shares its premises and administrative personnel with CCNE. Costs are allocated between the two organizations and are based on actual expenditures or a percentage of salaries.

3. INVESTMENTS

Investments as of June 30, 2003 are comprised of the following:

	Cost	Market
AACN		
Mutual Funds	\$3,205,755	\$3,196,648
Certificates of Deposits	239,018	239,018
	3,444,773	3,435,666
CCNE		
Mutual Funds	751,880	792,289
TOTAL INVESTMENTS	\$ 4,196,653	\$ 4,227,955

Included in investment income on the Statement of Activities and Change in Net Assets is an unrealized gain of \$130,907 and a realized gain of \$14,013.

Notes to financial statements June 30, 2003 (continued)

4. GRANTS RECEIVABLE

All grants receivable are considered to be collectible within one year unless otherwise stated by the donor. Grants which will not be collected within one year have been discounted using the prime rate of 4.00% at June 30, 2003.

Following is summary by years of grants receivable as of June 30:

2004	\$2,443,499
2005	1,062,184
2006	69,939
2007	34,969
	<hr/>
	3,610,591
Less: Amounts receivable within one year:	(2,443,499)
	<hr/>
TOTAL NONCURRENT GRANTS RECEIVABLE	\$ 1,167,092

5. TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets are available for the following purposes at June 30, 2003:

Regional Collaboratives (CIC)	\$9,487
End of Life Projects	326,616
Gerontology/Geriatric Projects	1,481,634
Hartford Scholarship Project	1,510,118
Curriculum/Awards Projects	188,977
Bonus Program	14,060
Friends of the Division of Nursing	1,065
	<hr/>
	\$ 3,531,957

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes for the year ended June 30, 2003 as follows:

Regional Collaboratives (CIC)	\$531,075
End of Life Projects	840,001
Gerontology/Geriatric Projects	1,102,817
Hartford Scholarship Project	627,929
Curriculum/Awards Project	83,699
Bonus Program	4,816
Friends of the Division of Nursing	25,000
	<hr/>
	\$ 3,215,337

6. RETIREMENT PLAN

AACN maintains a defined contribution retirement plan covering all employees who have completed one year of service and have reached the age of 21. Contributions to the plan are applied to individual annuities issued to each participant by the Teachers Insurance and Annuity Association (TIAA) and/or the College Retirement Equities Fund (CREF). Participants contribute five percent of covered compensation; AACN contributes ten percent of covered compensation. Retirement plan expense for the year ended June 30, 2003 was \$124,041.

7. OPERATING LEASES

AACN leases office space under a noncancelable operating lease which commenced July 1, 1997. The lease provides for base rent with annual adjustments for increases in operating expenses. Minimum lease payments are as follows for the year ended June 30:

2004	128,090
2005	128,090
2006	128,090
2007	128,090
	<hr/>
	\$ 512,360

GOVERNANCE AND ORGANIZATION

AACN is governed by an 11-member Board of Directors, each of whom represents a member institution. The Board consists of four officers and seven members-at-large, all elected by the membership for a two-year term.

Some members-at-large are designated by the president to serve two-year terms as chairs of standing committees, which include Finance, Government Affairs, Membership, and Program. The elected treasurer chairs the Finance Committee. The Nominating Committee is elected for a one-year term. The Board appoints task forces as issues arise that require study and action.

COMMITTEES LISTINGS OF ALL GOVERNANCE PANELS ARE AS OF JUNE 30, 2003.

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Deans of member schools, as well as AACN officers and staff, represent the association on a number of advisory councils, panels, agencies, committees, and other high profile initiatives within the nursing and higher education communities including:

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Institutional membership is open to any institution offering a baccalaureate or higher-degree nursing program that meets the following criteria:

- is legally authorized to grant the credential to which the program leads,
- is regionally accredited, and
- is approved by the state agency that has legal authority for educational programs in nursing (not applicable to

nursing programs over which the state board of nursing has no jurisdiction).

The dean or other chief administrative nurse in the nursing program serves as institutional representative to AACN. Membership dues are \$2,850 annually; the fiscal year runs from July 1 - June 30. Other categories of membership are Emeritus, Honorary, and Honorary Associate, and are conferred to individuals at the discretion of the Board of Directors.

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GUAM

University of Guam

HAWAII

Hawaii Pacific University • University of Hawaii at Manoa

IDAHO

Boise State University • Idaho State University • Lewis-Clark State College • Northwest Nazarene University

ILLINOIS

Aurora University • Benedictine University • Blessing-Rieman College of Nursing • Bradley University • Chicago State University • DePaul University • Elmhurst College • Governors State University • Illinois State University • Illinois Wesleyan University • Lakeview College of Nursing • Lewis University • Loyola University Chicago • MacMurray College • Millikin University • North Park University • Northern Illinois University • Olivet Nazarene University • Rush University Medical Center • Saint Anthony College of Nursing • Saint Francis Medical Center • Saint Xavier University • Southern Illinois University Edwardsville • St. John's College • Trinity Christian College • Trinity College of Nursing • University of Illinois at Chicago • University of St. Francis • West Suburban College of Nursing

INDIANA

Anderson University • Ball State University • Bethel College of Indiana • Goshen College • Indiana State University • Indiana University • Indiana University Northwest • Indiana University Southeast • Indiana University-Kokomo • Indiana University-Purdue University (Fort Wayne) • Indiana University-South Bend • Indiana Wesleyan University • Marian College • Purdue University • Purdue University-Calumet • Saint Mary's College • University of Evansville • University of Indianapolis • University of Saint Francis • University of Southern Indiana • Valparaiso University

IOWA

Allen College • Clarke College • Coe College • Grand View College • Luther College • Mercy College of Health Sciences • Mount Mercy College • St. Ambrose University • University of Iowa

KANSAS

Baker University • Bethel College of Kansas • Fort Hays State University • MidAmerica Nazarene University • Pittsburg State University • Tabor College • University of Kansas • Washburn University • Wichita State University

KENTUCKY

Bellarmine University • Berea College • Eastern Kentucky University • Kentucky Christian College • Morehead State University • Murray State University • Northern Kentucky University • Spalding University • University of Kentucky • University of Louisville • Western Kentucky University

LOUISIANA

Dillard University • Grambling State University • Louisiana College • Louisiana State University Health Sciences Center • Loyola University-New Orleans • McNeese State University • Nicholls State University • Northwestern State University of Louisiana • Our Lady of Holy Cross College • Southeastern Louisiana University • Southern University and A&M College • University of Louisiana at Lafayette • University of Louisiana at Monroe

MAINE

Husson College • Saint Joseph's College • University of Maine • University of Maine-Fort Kent • University of Southern Maine

MARYLAND

Bowie State University • College of Notre Dame of Maryland • Columbia Union College • Coppin State College • Johns Hopkins University • Salisbury University • Towson University • Uniformed Services University of the Health Sciences • University of Maryland • Villa Julie College/Union Memorial

MASSACHUSETTS

American International College • Boston College • Curry College • Elms College • Emmanuel College • Endicott College • Fitchburg State College • MGH Institute of Health Professions • Northeastern University • Regis College • Salem State College • Simmons College • University of Massachusetts-Amherst • University of Massachusetts-Boston • University of Massachusetts-Dartmouth • University of Massachusetts-Lowell • University of Massachusetts-Worcester • Worcester State College

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Andrews University • Calvin College • Eastern Michigan University • Ferris State University • Grand Valley State University • Hope College • Lake Superior State University • Madonna University • Michigan State University • Northern Michigan University • Oakland University • Saginaw Valley State University • University of Detroit Mercy • University of Michigan • University of Michigan-Flint • Wayne State University • Western Michigan University

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MISSOURI

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MONTANA

Carroll College • Montana State University-Bozeman

NEBRASKA

Clarkson College • Creighton University • Nebraska Methodist College • Nebraska Wesleyan University • Union College • University of Nebraska Medical Center

NEVADA

Nevada State College • University of Nevada-Las Vegas • University of Nevada-Reno

NEW HAMPSHIRE

Colby-Sawyer College • Rivier College • Saint Anselm College • University of New Hampshire

NEW JERSEY

Bloomfield College • Fairleigh Dickinson University • Felician College • Kean University • Monmouth University • New Jersey City University • Richard Stockton College of New Jersey • Rutgers, The State University of New Jersey • Rutgers, The State University of New Jersey-Camden • Saint Peter's College • Seton Hall University • The College of New Jersey • Thomas Edison State College • University of Medicine & Dentistry of New Jersey • William Paterson University

NEW MEXICO

New Mexico State University • University of New Mexico

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NORTH DAKOTA

Medcenter One College of Nursing • Tri-College University • University of Mary • University of North Dakota

OHIO

Ashland University • Capital University • Case Western Reserve University • Cedarville University • Cleveland State University • College of Mount St. Joseph • Kent State University • Kettering College of Medical Arts • Lourdes College • Malone College • Medical College of Ohio • Mercy College of Northwest Ohio • Miami University • Mount Carmel College of Nursing • Ohio University • Otterbein College • The Ohio State University • University of Akron • University of Cincinnati • Urbana University • Ursuline College • Walsh University • Wright State University • Xavier University

OKLAHOMA

Northwestern Oklahoma State University • Oklahoma Panhandle State University • Oklahoma Wesleyan University • Southern Nazarene University • Southwestern Oklahoma State University • University of Oklahoma • University of Tulsa

OREGON

Linfield College • Oregon Health and Science University • University of Portland

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PUERTO RICO

Turabo University • Universidad de Puerto Rico • University of Puerto Rico-Mayaguez

RHODE ISLAND

Rhode Island College • Salve Regina University • University of Rhode Island

SOUTH CAROLINA

Charleston Southern University • Clemson University • Lander University • Medical University of South Carolina • University of South Carolina • University of South Carolina Aiken • University of South Carolina Spartanburg

SOUTH DAKOTA

Augustana College • South Dakota State University

TENNESSEE

Austin Peay State University • Baptist Memorial College of Health Sciences • Belmont University • Carson-Newman College • Cumberland University • East Tennessee State University • King College • Middle Tennessee State University • Tennessee State University • Tennessee Technological University • Tennessee Wesleyan College • Union University • University of Memphis • University of Tennessee-Knoxville • University of Tennessee Health Science Center • University of Tennessee-Chattanooga • Vanderbilt University

TEXAS

Abilene Intercollegiate School • Angelo State University • Baylor University • East Texas Baptist University • Lamar University • Midwestern State University • Prairie View A & M University • Southwestern Adventist University • Tarleton State University • Texas A&M University-TeXarkana • Texas A&M University-Corpus Christi • Texas Christian University • Texas Tech University Health Sciences Center • Texas Woman's University • University of Mary Hardin-Baylor • University of Texas at Brownsville • University of Texas Health Science Center-Houston • University of Texas Health Sciences Center-San Antonio • University of Texas Medical Branch • University of Texas-Arlington • University of Texas-Austin • University of Texas-El Paso • University of Texas-Pan American • University of Texas-Tyler • University of the Incarnate Word • West Texas A&M University

UTAH

Brigham Young University • University of Utah • Weber State University • Westminster College

VERMONT

University of Vermont

VIRGIN ISLANDS

University of the Virgin Islands

VIRGINIA

Christopher Newport University • Eastern Mennonite University • George Mason University • Hampton University • James Madison University • Jefferson College of Health Sciences • Liberty University • Lynchburg College • Marymount University • Norfolk State University • Old Dominion University • Radford University • Shenandoah University • University of Virginia • University of Virginia College at Wise • Virginia Commonwealth University

WASHINGTON

Gonzaga University • Northwest College • Pacific Lutheran University • Seattle Pacific University • Seattle University • University of Washington • Washington State University

WEST VIRGINIA

Bluefield State College • Marshall University • Mountain State University • Shepherd College • University of Charleston • West Liberty State College • West Virginia University • Wheeling Jesuit University

WISCONSIN

Alverno College • Bellin College of Nursing • Cardinal Stritch University • Carroll College • Columbia College of Nursing-Mount Mary College Nursing Program • Concordia University Wisconsin • Edgewood College • Marian College • Marquette University • Milwaukee School of Engineering • University of Wisconsin-Eau Claire • University of Wisconsin-Green Bay • University of Wisconsin-Madison • University of Wisconsin-Milwaukee • University of Wisconsin-Oshkosh • Viterbo University

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