This annual report highlights the initiatives of the American Association of Colleges of Nursing to help member schools meet the nation's demand for innovative and expanded nursing care. Information is provided in the broad areas of: the state of the schools, leading through task force initiatives, working together to advance nursing education, pursuing grant-funded initiatives, advocating for nursing education and research, enhancing data services, rewarding innovations in nursing education, conferences and seminars, the Commission on Collegiate Nursing Education (CCNE), communicating the association's mission, independent auditor's report, and governance and organization. (EV)
JULY 2001
Over 100 member deans gather in Vancouver for AACN's annual Summer Seminar.

AUGUST 2001
Culminating a two-year project, AACN staff present the final report on Women's Health in Baccalaureate Nursing School Curriculum to representatives of the Health Resources and Services Administration and other federal agencies.

SEPTEMBER 2001
As a member of the Steering Committee, AACN participates in the Call to the Profession, an alliance of leading nursing organizations working to create a strategic plan for the profession.

AACN members Dr. Joan Bartels, Georgia Southern University, and Dr. Catherine Garner, University of Phoenix, discuss academic solutions to the nursing shortage before the House Committee on Education and the Workforce.

OCTOBER 2001
Funded by The John A. Hartford Foundation of New York, AACN awards 30 grants to schools of nursing in support of innovations in geriatric nursing education.

Three recipients of the 2001 Awards for Exceptional Baccalaureate Curriculum in Gerontologic Nursing were announced at the Fall Semiannual Meeting.

November 2001
AACN members approved a new position statement on the Indicators of Quality in Research-Focused Doctoral Programs in Nursing.

NOVEMBER 2001
AACN President Carolynn A. Williams and staff led two focus group discussions on the Vision 2020 position statement of the Nursing Practice and Education Consortium at Sigma Theta Tau International’s convention in Indianapolis.

DECEMBER 2001
AACN releases its annual survey data which show that enrollments in entry-level baccalaureate nursing programs rise for the first time in six years.

In an effort to recruit men and underrepresented groups into nursing, AACN releases a new Issue Bulletin on Effective Strategies for Increasing Diversity in Nursing Programs.

The Nurse Reinvestment Act, introduced to address the RN and nursing faculty shortages, passes both the House and the Senate.

The National Advisory Committee on Institutional Quality and Integrity recommends that the Secretary of Education continue recognition of CCNE as a national agency for the accreditation of baccalaureate and graduate nursing education programs.

MARCH 2002
Dr. Kathleen Ann Long, dean of the University of Florida School of Nursing, begins her two-year term as AACN President.

AACN releases a new White Paper on the Hallmarks of the Professional Nursing Practice Setting together with a companion brochure titled What Every Nursing Graduate Should Consider When Seeking Employment.

Simon & Schuster releases the book Ask a Nurse: From Home Remedies to Hospital Care in paperback.

APRIL 2002
AACN’s Task Force on Education and Regulation for Professional Nursing Practice publishes its final report which includes a variety of education models that frame various approaches to nursing education for professional practice.

AACN releases a new fact sheet titled Associate Degree in Nursing Programs and AACN’s Support for Articulation which clearly conveys the association’s long-standing support for articulation and continuing nursing education.

MAY 2002
With funding provided by The John A. Hartford Foundation, AACN awards grant monies to 23 schools of nursing to support the education and career development of more than 160 geriatric advanced practice nurses.

AACN endorses the Campaign to Advance Liberal Learning, a national effort in support of liberal education launched by the American Association of Colleges and Universities.

JUNE 2002
Funded by the Holme Fulford Health Trust, AACN publishes Moving Forward with Community-Based Nursing Education, a guidebook and CD for implementing innovative curriculum in undergraduate nursing programs.

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In 1969, the American Association of Colleges of Nursing 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 570 public and private institutions, AACN is the national voice for baccalaureate- and graduate-degree nursing education programs.

AACN works 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 — the nation's largest health care profession.

This report highlights the Association's FY 2002 initiatives to help member schools meet the nation's demand for innovative and expanded nursing care.
From AACN’s President and Executive Director

TURNING THE TIDE

We began this year with some encouraging news for all of us in the nursing education community -- enrollments were up in entry-level BSN programs for the first time in six years. Gains were reported in all parts of the country with an overall 3.7% increase in enrollments nationwide.

Why are enrollments up? Nursing schools are working hard to find creative solutions to expand capacity and recruit new students. Many deans have successfully negotiated with central administration to expand nursing programs in light of the nursing shortage. Student recruiters have stepped up their efforts and launched aggressive marketing campaigns. Political advocates have lobbied successfully to retain federal funding for nursing education. Administrators are bridging the faculty shortage gap through strategic partnerships between schools and health care facilities able to supply teachers and clinical support. All of these efforts are paying off.

Though enrollment levels are moving in the right direction, we still have a long way to go. This year, 40% of all four-year nursing colleges and universities experienced no change or a decline in entry-level BSN enrollments. RN-to-BSN enrollments continued their downward slide, master’s degree programs were struggling, and the number of doctoral students increased by only 1.5%.

In real terms, the enrollment increase is only a drop in the bucket when you consider the escalating demand for nursing care. According to the Bureau of Labor Statistics, one million new and replacement registered nurses will be needed by the year 2010 to fill new positions and vacancies. Clearly the gap between the number of nurses in the educational pipeline and the number of nurses needed continues to grow.

As nurse leaders and educators, we play a central role in the stability of the nursing workforce and the future of the profession. We must act decisively and mobilize our efforts to advance the goals of professional nursing. AACN is your partner in this charge, and we will continue to direct our energies to supporting schools of nursing by:

- Defining curriculum standards and sharing best practices;
- Lobbying for legislation that benefits nursing education;
- Providing resources and data needed to expand programs and justify growth;
- Boosting faculty recruitment efforts and reaching out to diverse student populations;
- Identifying funding sources and pursuing grant opportunities on behalf of schools; and
- Seeking solutions to the shortage and forming collaborations to move the profession forward.

Together we can make a real difference by turning the tide on nursing school enrollments and sparking new interest in nursing as a dynamic, rewarding career.

Kathleen Ann Long, PhD, RNCS, FAAN
President

Geraldine Bednash, PhD, RN, FAAN
Executive Director

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AMERICAN ASSOCIATION of COLLEGES of NURSING
Findings explored in the 2002 State of the Schools are based on responses from 548 (80.8 percent) of the nation's nursing schools with bachelor's- and graduate-degree programs that were surveyed in fall 2001. Data reflect actual counts; projections are not used.

Baccalaureate Enrollments Rise by 3.7 Percent

Enrollments in entry-level baccalaureate programs in nursing increased in fall 2001 ending a six-year period of decline. Though enrollments were up by 3.7 percent nationwide from 2000 to 2001, total enrollment in all baccalaureate programs was still down by 17% or 21,126 students from 1995, the year enrollments began to dip.

Two-year data show that nursing school enrollments were up in all regions of the United States (see Table 2A) with the greatest increase realized in the South with a 4 percent rise in enrollments in entry-level baccalaureate programs. Other regions reported the following increases from fall 2000 to fall 2001: North Atlantic schools were up by 3.5 percent; Midwest schools by 3.5 percent; and schools in the West by 3.4 percent.

Despite the slight increase, trend analysis shows that enrollments in entry-level baccalaureate programs in nursing are declining. On average over the past seven years, the number of enrollees and graduates have declined by 2,293 and 837 each year, respectively. To account for variances in the number of schools reporting, AACN identifies trends by tracking the same group of schools for the past seven years. The 1995-2001 cohort contains 310 schools. (see Table 1)

<table>
<thead>
<tr>
<th>Year</th>
<th>Enrollments</th>
<th>Graduations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995</td>
<td>21,601</td>
<td>11,294</td>
</tr>
<tr>
<td>1996</td>
<td>22,433</td>
<td>12,072</td>
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<tr>
<td>1997</td>
<td>23,265</td>
<td>12,851</td>
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<td>1998</td>
<td>24,102</td>
<td>13,630</td>
</tr>
<tr>
<td>1999</td>
<td>24,939</td>
<td>14,410</td>
</tr>
<tr>
<td>2000</td>
<td>25,767</td>
<td>15,189</td>
</tr>
<tr>
<td>2001</td>
<td>26,601</td>
<td>15,970</td>
</tr>
</tbody>
</table>

Source: American Association of Colleges of Nursing, 2001-2002 Enrollment and Graduation Trends in Entry-Level Baccalaureate Nursing Programs 310 schools reporting

On average over the seven-year period, the number of enrollees and graduates declined by 2,293 and 837 each year, respectively.


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Year at a Glance:
Enrollments and Graduations in Nursing Programs
548 schools reporting

Source: American Association of Colleges of Nursing. 2007-2002
Enrollment and Graduations in Baccalaureate and Graduate
Programs in Nursing

Table 2

Overall, schools responding to the AACN survey reported 106,557 students enrolled in bachelor's-degree nursing programs in fall 2001. Included in this total are 77,958 entry-level students and 28,599 registered nurses (with an associate degree or hospital diploma) who returned to school to obtain the bachelor's degree in nursing in RN-to-baccalaureate programs. Between August 2000 and July 2001, 22,593 students graduated from entry-level baccalaureate programs at responding schools. (See Table 2)

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

Enrollments in RN-to-Baccalaureate programs continued to decline in fall 2001 with enrollments down in most regions of the country. Nationally enrollments in these programs declined by 3.9 percent below the year before. Enrollment declines ranged from 0.6 percent in the Midwest, 2.7 percent in the South, and 10.3 percent in the North Atlantic states. Despite the overall decline, nursing schools in the Western states real-
ized an 18 percent increase in enrollments in RN-to-Baccalaureate programs.

RN-to-Baccalaureate programs graduated 9,950 students at responding schools between August 2000 and July 2001. In a matched sample of schools reporting in both 2000 and 2001, the number of RN-to-Baccalaureate graduates fell by 8.7 percent.

**Declining Enrollments Moderate in Master’s Programs**

Master’s degree enrollments at nursing schools declined by 0.1 percent this year, compared to a 0.9 percent drop in fall 2000. (SEE TABLE 3) However, master’s-degree enrollments did increase in some regions. Although the number of master’s students fell by 2.4 percent in the West and 0.9 percent in the Midwest, enrolments were up by 0.2 percent in the South and 1.4 percent in the North Atlantic states.

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 30,567 students in fall 2001. Master’s programs graduated 9,658 students between August 2000 and July 2001. For schools reporting in both 2000 and 2001, the number of master’s-degree graduates fell by 3.0 percent.

**Enrollments Rise in Doctoral Programs**

Following a 2.5 percent increase last year, enrollments in doctoral nursing programs increased by 1.5 percent or 46 students in 2001. (SEE TABLE 3) Regionally, enrollments in doctoral programs were up in the West (5.0 percent) and the South (3.3 percent) and down in the Midwest (0.8 percent) and North Atlantic (0.3 percent).

Enrollments in doctoral nursing programs totaled 3,070 students nationwide in fall 2001. Responding schools graduated 394 students with doctoral degrees between August 2000 and July 2001, an 11.1 percent decrease (49 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 2001 with minority group members representing 21.5 percent of the undergraduate student population. (SEE TABLE 4)

In 2001-2002, minority group representation in baccalaureate programs was distributed as follows: 4.4 percent Asian, Native Hawaiian or Other Pacific Islander; 11.2 percent Black or African American; 0.7 percent American Indian or Alaskan Native; and 5.2 percent Hispanic or Latino. In master’s nursing programs, representation of racial/ethnic minority groups was 17.4 percent including 4.7 percent Asian, Native Hawaiian or Other Pacific Islander; 8.4 percent Black or African American; 0.5 percent American Indian or Alaskan Native; and 3.8 percent Hispanic or Latino.

Men continue to be underrepresented in nursing schools with only 8.6 percent of students in baccalaureate programs being male. In graduate programs, 9.6 percent of master’s degree students and 6.7 percent of doctoral students are male.

“Serious consideration should be given to developing a new strategy that reflects both the differences inherent in the variety of entry-level educational programs and the expectations for practice upon graduation.”

Carolyn A. Williams, AACN Immediate-Past President

From her editorial in Nurse Week, "Licensure System Could Use an Overhaul,” July 30, 2001
Nursing Faculty Population

Nursing schools nationwide are struggling to fill faculty positions in an effort to accommodate all qualified students. In fall 2001, the total full-time nurse faculty population in baccalaureate and higher degree programs reached 9,767 (542 schools reporting). As a group, nursing faculty are rapidly aging with the median age across all ranks set at 51.0 years. Specifically, the average age of doctorally-prepared faculty by rank was 56.2 years for professors, 53.8 years for associate professors, and 50.4 years for assistant professors.

The survey found that the overwhelming majority of nursing faculty is white women. Only 9.2 percent of faculty come from racial/ethnic minority groups, and only 3.7 percent are male.

In terms of educational preparation, 49.4 percent of nursing school faculty are prepared at the doctoral level. (SEE TABLE 5)

<table>
<thead>
<tr>
<th>Selected Characteristics of Full-Time Nursing School Faculty</th>
<th>542 schools reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree Level</td>
<td></td>
</tr>
<tr>
<td>Doctoral</td>
<td>49.4%</td>
</tr>
<tr>
<td>Nondoctoral</td>
<td>50.6%</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.7%</td>
</tr>
<tr>
<td>Female</td>
<td>96.3%</td>
</tr>
<tr>
<td>Racial/Ethnic Diversity</td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>0.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.6%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>5.7%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>1.4%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.1%</td>
</tr>
<tr>
<td>White</td>
<td>90.4%</td>
</tr>
<tr>
<td>Unknown</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Source: American Association of Colleges of Nursing, 2001-2002 Salaries of Instructional and Administrative Nursing Faculty.
AACN’s board created a number of task forces this year to focus on issues of primary concern to nursing school deans and faculty. Chaired by Dean Karen Miller of the University of Kansas, the TASK FORCE ON HALLMARKS OF THE PROFESSIONAL PRACTICE SETTING completed a White Paper on the Hallmarks of the Professional Nursing Practice Environment that was released in March 2002. This paper identified the characteristics of work environments that support professional nursing practice by allowing nurses educated at the baccalaureate and higher degree levels to practice to their full potential. A companion piece, What Every Nursing Graduate Should Consider When Seeking Employment, was also developed as a tool to match nursing program graduates with practice settings that value their education.

The TASK FORCE ON EDUCATION AND REGULATION FOR PROFESSIONAL NURSING PRACTICE (TFER), chaired by Dr. Kathleen Ann Long of the University of Florida, developed a variety of education models that frame various approaches to nursing education for professional practice. These models were created based upon the need to produce a well-qualified generalist nurse clinician who can provide high quality, effective, and safe nursing care. Having completed its work, the Board created the TFER 2 Task Force to continue the work of this important group.

The TASK FORCE TO REVISE QUALITY INDICATORS FOR DOCTORAL EDUCATION, chaired by Dr. Sandra Edwardson of the University of Minnesota, revised the position statement on the Indicators of Quality in Research-Focused Doctoral Education in Nursing. Approved in October 2001, the updated indicators reflect changes in the growth and number of doctoral programs since the adoption of the last set of doctoral indicators in 1993.

In January 2002, the Board created a new TASK FORCE ON THE PROFESSIONAL CLINICAL DOCTORATE which is chaired by Dean Elizabeth R. Lenz of The Ohio State University. Among its charges, the task force is working to clarify the purpose of the clinical doctorate including core content and competencies; describe trends over time in clinical doctoral education; assess the need for clinically focused doctoral programs; and describe the potential for various tracks and role options.

In response to the growing shortage of nursing faculty, the Board created the TASK FORCE ON FUTURE FACULTY chaired by Dean Kathleen Dracup of the University of California - San Francisco. The task force is charged with developing a White Paper on the current faculty shortage in nursing and on the challenges of expanding the number and capacity of future faculty.

“Nurse educators must work together to prepare nurses for roles congruent with their educational preparation. As leaders in higher education, we believe that education – the type and the amount – has an impact on the skills and competencies of a nursing clinician.”

Geraldine Bednash, AACN Executive Director
From her editorial, “Differences in Nursing Education” in the San Diego Union-Tribune, May 6, 2002
AACN actively pursues collaborative initiatives and opportunities that support our mission and advance the goals of nursing education, practice, and research.

This year, AACN played an active role in the Steering Committee of the CALL TO THE PROFESSION, a coalition of 60 nursing organizations working to define Nursing's Agenda for the Future. As co-chair of the Education “domain,” the association is reexamining and reshaping nursing education to improve nursing practice, polish nursing’s image, and enhance patient care. This work includes defining the desired future state of nursing education, identifying strategies to achieve this vision, and implementing action plans. The final Call to the Profession report was published and distributed to the nursing community and the media in April 2002.

AACN continues its work with the UNIVERSITY HEALTHSYSTEM CONSORTIUM (UHC), an alliance of the clinical enterprises of university hospitals based in Chicago. Through a joint working group, the two organizations are working to build capacity in baccalaureate programs and develop post-BSN residencies. One subgroup of AACN-UHC members is developing a curriculum for a post-baccalaureate residency piloted by New York University, University of Arizona, University of Colorado, University of Kentucky, University of Pennsylvania, and University of Utah. Another subgroup is working to build capacity in schools of nursing by identifying opportunities for creating community partnerships, improving the practice setting, and defining professional practice models.

As a member of the TRI-COUNCIL FOR NURSING, AACN hosted three meetings this year at our offices in Washington, DC. The Tri-Council is an alliance of four autonomous nursing organizations (AACN, American Nurses Association, American Organization of Nurse Executives, and National League for Nursing), each focused on leadership for education, practice, and research. While each organization has its own membership and unique mission, they are united by common values and convene regularly for the purpose of dialogue and consensus building.

This year, the Tri-Council worked to unite advocacy efforts for additional Title VIII funding (Nursing Education Act) and also adopted a set of guiding principles for future collaborative efforts in the legislative arena.

One area of collaboration that has taken on a greater urgency in the wake of September 11 is AACN’s participation in the INTERNATIONAL NURSING COALITION FOR MASS CASUALTY EDUCATION. This coalition of national nursing, accrediting, and health organizations was formed by Vanderbilt University with support from the Office of Emergency Preparedness to create the curriculum needed to train nurses to provide better emergency care during mass
We applaud HHS' commitment to funding grant programs that directly increase the pool of highly trained nurses needed to deliver patient care today. However, federal efforts to address the nursing shortage are not going far enough considering the scope of this health care crisis. I encourage Congress to revisit the capitation grant program that had a stabilizing effect on the nursing shortage of the 1970s. This program provided grants to schools of nursing to increase enrollments each year, add faculty, update clinical labs, and recruit new students. This funding would provide the catalyst for schools to expand capacity and feed the pipeline of new nurses.

Kathleen Ann Long, AACN President
From the article, "HHS Awards Grants to Train More RNs," in Legislative Network for Nurses, June 17, 2002

casualty disasters. Dr. Jean Bartels, Georgia Southern University, and Dr. Joan Stanley, AACN's Director of Education Policy, have joined the coalition to represent the association. Other AACN members active in this initiative include coalition chair Dr. Colleen Conway-Welch of Vanderbilt University School of Nursing; Dr. Patricia Hinton-Walker, Uniformed Services University of the Health Sciences; Dr. Nancy Langston, Virginia Commonwealth University; Dr. Deiores Sands, University of Texas at Austin; and Dr. Eileen Zungolo, Duquesne University.

AACN is working with the ASSOCIATION OF ACADEMIC HEALTH CENTERS to increase access to health care through the Academics for Access to Health Care Initiative. Supported by a broad-based coalition of higher education leaders and organizations, this initiative seeks to provide health care coverage for all Americans and reduce the size of our nation's uninsured population.

In May 2002, AACN announced its endorsement of the Campaign to Advance Liberal Learning initiated by the AMERICAN ASSOCIATION OF COLLEGES AND UNIVERSITIES (AAC&U). With support from more than 500 college presidents from all parts of the higher education community, AAC&U initiated this national effort to increase public understanding of liberal education and to foster a societal commitment to providing a quality liberal education to every college student, regardless of the student's field of study.

On the international front, AACN continued its support for NURSING 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 two opportunities for nurse volunteers needed for projects in Cambodia and Uganda. Announcements about volunteer opportunities supported by this group are listed online at www.hvousa.org.

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Grant funding is essential to AACN’s ability to meet mission objectives and expand the association’s reach into key areas of member interest. This year, the association is grateful for the generous support provided by the Helene Fuld Health Trust, The John A. Hartford Foundation of New York, and The Robert Wood Johnson Foundation.

The COLLEAGUES IN CARING program completed its sixth year of funding from The Robert Wood Johnson Foundation. The Colleagues program utilized state/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. Over 40 states are now part of the Colleagues’ network.

Also funded by The Robert Wood Johnson Foundation, 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. The 3-1/2 year effort was launched to develop a core of expert nursing faculty in end-of-life care and to coordinate national nursing efforts related to end-of-life issues. To date, ELNEC has trained over 1,000 nurse educators representing all 50 states. In June, a pediatric-specific ELNEC course was pilot tested.

"Nurses must be prepared to meet the new care demands of the growing older adult population and be ready to deliver that care in a variety of settings beyond hospitals, including long-term care centers, community centers, adult day care, and nursing homes. We need strong advocates for geriatric care leading the charge as we enter this new era in health care."

Joan Stanley, AACN Director of Education Policy
From the Nurse Zone article on "Grant Programs Prepare Nurses for the Aging Population," April 19, 2002
by 20 pediatric palliative care experts from across the country and will be offered in Summer 2003.

In February, AACN selected 60 Fellows to participate in the 2002 LEADERSHIP FOR ACADEMIC NURSING PROGRAM. Supported by the Helene Fuld Health Trust, the 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. The year-long program provided participants with a focused assessment experience, a range of content and case studies related to successful leadership, and the opportunity to establish networks of mentors and peers.

AACN is currently administering two initiatives in the area of geriatric nursing education funded by The John A. Hartford Foundation of New York. The ENHANCING GERIATRIC NURSING EDUCATION PROJECT is designed to increase geriatric nursing content in baccalaureate and advanced practice nursing programs. In October, grant monies were dispersed to 20 baccalaureate and 10 master’s programs at both large and small nursing schools across the country. Innovative curricula and education models developed through this project will be disseminated to the full body of collegiate nursing programs.

In September, The John A. Hartford Foundation awarded AACN a $2 million grant to provide scholarship monies to schools of nursing to expand opportunities for nursing students to choose a career in geriatric advanced practice nursing. Through this initiative, called CREATING CAREERS IN GERIATRIC ADVANCED PRACTICE NURSING, over 160 students at 23 schools nationwide will receive financial assistance. Both Hartford-sponsored projects are designed to better equip nurses to provide quality care to older adults.

In June, AACN published MOVING FORWARD WITH COMMUNITY-BASED NURSING EDUCATION, a guidebook and CD for implementing innovative curriculum in undergraduate nursing programs. This publication is the culmination of a four-year grant from the Helene Fuld Health Trust, HSBC Bank USA, Trustee which also funded faculty workshops, a monograph, and a listserv. The guidebook and CD assists nursing faculty in transitioning to community-based pedagogy. These resources build on the monograph, Implementing Community-Based Education in the Undergraduate Nursing Curriculum, published in 2000.

“As the Congress investigates solutions to the current shortage, it must focus on the long-range issues that affect the nursing profession. While concerns about salary must be addressed, steps must also be taken to evaluate and improve the practice environment. Simultaneously, schools of nursing must be adequately funded to strengthen and expand the capacity to educate the nursing workforce for the coming century. However, the nursing profession and other dedicated stakeholders must take the bold step to define the education and training requirements and practice competencies for all nursing care providers.”

Jean Bartels, AACN President-Elect
From testimony presented before the House Committee on Education and the Workforce, September 25, 2001
AACN is actively working with Congress to shape legislation that supports nursing education, practice, and research. This year, the association focused on passing legislation to address the nursing shortage and maintaining funding for federal programs that support nursing education.

AACN worked to keep the nursing shortage at the forefront of the national agenda, and we were pleased that Congress moved quickly in 2001 to pass legislation to address this crisis. In late December, both chambers passed versions of the NURSE REINVESTMENT ACT (HR 3487 and S 1864), legislation introduced to address the shortage of registered nurses and nursing faculty. Though the law was enacted, no funding has been assigned. AACN is working with the health care community to secure appropriations for the many new programs created through this legislation. We encourage all nursing school deans and faculty to contact their federal legislators to express support for funding the Nurse Reinvestment Act.

To underscore the need for a federal response to the nursing shortage, AACN facilitated opportunities for deans to provide TESTIMONY BEFORE CONGRESS. In September, the House Committee on Education and the Workforce held its first nursing shortage hearing, The Nursing Shortage: Causes, Impact, and Innovation. AACN members Dr. Jean Bartels, Georgia Southern University, and Dr. Catherine Garner, University of Phoenix, focused their remarks on academic solutions to the nursing shortage. Written testimony was also submitted by AACN in May to increase funding to the National Institute for Nursing Research (NINR) and Title VIII of the Public Health Service Act.

Building on the heightened awareness of the need to SUPPORT NURSING EDUCATION PROGRAMS, AACN advocated for increasing funding for existing Title VIII programs and expanding the reach of the Nurse Education Act to include a capitation grant program, post-baccalaureate residencies, and other innovations. AACN worked to influence and enact legislation that recognizes nursing education’s role in bioterrorism response and is actively tracking legislation related to this growing concern. In the FY 2003 budget submitted by President Bush, nursing education programs were thankfully spared, though deep funding cuts were proposed for other health professions programs.

Throughout the year, AACN sent regular INFORMATION UPDATES to keep members abreast of breaking news and calls to action. Governmental Affairs 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 a Web-based Write to Congress function were made available to assist advocacy efforts.
AACN members, policy makers, media contacts, and the health care community at large have come to rely on the association’s Research and Data Center as the primary source for trend and statistical information related to nursing higher education.

Every December, the Research and Data Center conducts the **ANNUAL SURVEY OF INSTITUTIONS WITH BACCALAUREATE AND HIGHER DEGREE NURSING PROGRAMS** (see this year’s results on pages 3-7). 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:

- 2001-2002 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing
- 2001-2002 Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing
- 2001-2002 Salaries of Deans in Baccalaureate and Graduate Programs in Nursing

In March, AACN and the National Organization of Nurse Practitioner Faculties (NONPF) issued a new publication, *Master’s-Level Nurse Practitioner Educational Programs: Findings from the 2000-2001 Collaborative Curriculum Survey*. Survey findings related to general nurse practitioner program characteristics and requirements; core master’s and clinical course content; faculty workload; interdisciplinary education; and Web-based curriculum. A total of 275 schools with nurse practitioner programs (83.8 percent response rate) participated in this survey.

In the March-April 2002 issue of *Nursing Outlook* magazine, Dr. Linda Berlin, AACN’s Director of Research and Data Services, and Dr. Karen Sechrist of Berlin Sechrist Associates examined an issue impacting nursing school enrollments nationwide in an article titled *The Shortage of Doctorally Prepared Nursing Faculty: A Dire Situation*. The authors analyzed a wide range of data sources that show how the steadily increasing faculty age, a shortening of time to likely retirement, and a loss of younger faculty are exacerbating the faculty shortage issue. The AACN data referenced throughout the article was compiled by Dr. Berlin.
AACN administers two national award programs designed to reward and recognize innovation in health promotion and geriatric curriculum development.

The Secretary's Award for Innovations in Health Promotion and Disease Prevention recognizes creative strategies in health promotion advanced by students of nursing and 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 FASHP-member AACN. Association staff have consistently earned high marks for their administration of this awards program, and HRSA has awarded AACN the contract to administer this program for the next three years. Applications for the current year's awards program are now published on the AACN Web site.

The Awards for Exceptional Baccalaureate Curriculum in Gerontologic Nursing is a collaborative effort between AACN and The John A. Hartford Foundation Institute for Geriatric Nursing. Now in its fourth year, this national awards program was created to recognize model baccalaureate programs in nursing with a strong focus on gerontological nursing. Awards are presented to nursing programs that exhibit exceptional, substantive, and innovative baccalaureate curriculum in gerontology. 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 winners of this award for the year 2001 were announced at the Fall Semiannual Meeting in October: first place to The Medical College of Georgia; second place to The University of the Virgin Islands; and honorable mention to Wilkes University (PA). The curricula innovations advanced by all winners are posted on the Hartford Foundation's Web site at http://www.hartfordign.org.
AACN conferences and seminars give nurse educators personal contact with key decision makers in health care, higher education, and government. Association meetings offer a stimulating source of continuing education and professional development that builds leadership and administrative skills.

This year, AACN achieved all-time high attendance for both the Doctoral and Master's Education Conferences. In January, AACN hosted 230 nurse educators at Sanibel Island, Florida for the DOCTORAL EDUCATION CONFERENCE which supported the theme, Managing for Today: Planning for Tomorrow. The MASTER'S EDUCATION CONFERENCE held in February at Amelia Island Plantation, Florida attracted 260 educators with programs focused on Contrasts and Decision Points: Innovative Models for Master's Education. Strong attendance was also recorded at the BACCALAUREATE EDUCATION CONFERENCE (340 attending) in December and the SPRING ANNUAL MEETING (303 attending) in March.

For a listing of upcoming conferences, see page 30.

Also on the conference front, AACN and Sigma Theta Tau International agreed to serve as the lead cosponsors for the 2002 STATE OF THE SCIENCE CONGRESS coming to Washington, D.C. in September 2002. Sponsored by a coalition of 23 nursing organizations, the Congress provides a national forum to communicate emerging scientific discoveries related to nursing practice and creates a platform to influence the nursing research agenda of the future. Over 180 papers and 100 posters will be presented. Preconference highlights include the Nightingala Reception hosted by the Friends of the National Institute of Nursing Research and a media training session featuring journalist Suzanne Gordon. Joan Shaver, dean at the University of Illinois at Chicago College of Nursing, serves as the planning committee co-chair for AACN.

Eleven meetings were offered July 2001-June 2002

- Summer Seminar
- Fall Executive Development Series
- Spring Executive Development Series
- Fall Semiannual Meeting
- Baccalaureate Education Conference
- Master's Education Conference
- Doctoral Conference
- Faculty Practice Conference
- Spring Annual Meeting
- Business Officers Meeting
- Development Officers Meeting
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 six years ago. Now in its fifth year of accreditation review activities, CCNE has accredited 389 baccalaureate or master's degree programs at 244 regionally accredited colleges and universities. In the next two years, CCNE is scheduled to make accreditation decisions for an additional 223 nursing programs at 144 institutions.

In December 2001, the NATIONAL ADVISORY COMMITTEE ON INSTITUTIONAL QUALITY AND INTEGRITY, a panel of the U.S. Department of Education, voted to recommend that the Secretary of Education continue recognition of the CCNE as a national agency for the accreditation of baccalaureate and graduate nursing education programs. The Advisory Committee concluded that CCNE was in full compliance with the Secretary's Criteria for Recognition of Accrediting Agencies. Of the eleven accrediting agencies reviewed at the meeting, CCNE was the only agency reviewed for continued recognition that was not cited for any compliance concerns or other issues. The Advisory Committee's vote was unanimous.

In addition, CCNE has been granted recognition by the COUNCIL FOR HIGHER EDUCATION ACCREDITATION (CHEA) this year. In January 2002, the CHEA Board of Directors accepted the Committee's recommendation to recognize CCNE for the maximum period of ten years. No compliance concerns or other issues were cited. Founded in 1996, CHEA offers formal, non-governmental recognition of higher education accrediting bodies.
AACN's publications convey the latest developments in collegiate nursing education and bring the association's mission and message before the larger nursing community.

Following strong sales in its initial year, the book *Ask a Nurse: From Home Remedies to Hospital Care* was published by Simon & Schuster in paperback in March 2002. This book, which showcases the expertise of hundreds of nurses, was a collaborative effort of AACN and The People's Medical Society. Among the other publications currently active in our catalog are the following:

- The *Journal of Professional Nursing* is AACN's bimonthly publication that features scholarly articles examining nursing education, practice, cultural diversity, research, and public policy.
- *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 APNs and all other registered nurses who are prepared at the baccalaureate degree level.

- Peterson's Guide to Nursing Programs, 8th edition, provides the general public with a comprehensive, concise directory of four-year and graduate programs in nursing in the United States and Canada.

- A new guidebook and CD on Moving Forward with Community-Based Nursing Education funded by the Helene Fuld Health Trust.

- Two AACN position statements were published this year including Hallmarks of the Professional Nursing Practice Environment and Indicators of Quality in Research-Focused Doctoral Programs in Nursing.

- A new Issue Bulletin on Effective Strategies for Increasing Diversity in Nursing Programs was released in December 2001.

In February, JOHNSON & JOHNSON launched a multi-year advertising and public awareness initiative, The Campaign for Nursing's Future, to spark interest in nursing careers. The campaign includes paid television commercials; brochures and recruitment videos sent to 30,000 high schools, nursing schools, and hospitals; and a Web site (www.discovernursing.com) with a searchable database of nursing programs and scholarship opportunities. AACN Executive Director Dr. Geraldine Bednash serves as a campaign advisor.

The NURSES FOR A HEALTHIER TOMORROW (NHT) coalition continues to grow and is now up to 40 participating organizations. The public service announcement (PSA) released to the media in the fall has been shown over 2,000 times in 47 markets nationwide. Since the launch of the PSA, Web traffic to the NHT site, www.nursesource.org, has more than doubled. AACN serves on the NHT Executive Committee and is also active on the Web Site Committee.

This year, AACN received widespread MEDIA COVERAGE in conjunction with the nursing shortage and was featured in stories on the nursing faculty shortage, nursing education and professional practice, enrollment trends, and career horizons. This year, the association was referenced in many top newspapers including the Wall Street Journal, New York Times, Los Angeles Times, Chicago Tribune, Boston Globe, Washington Post, and the Atlanta Journal-Constitution. In addition to national coverage, AACN data was cited in hundreds of regional newspapers, leading health care journals, government reports, scholarly articles and specialty publications.

Advisors to Johnson & Johnson's National Marketing Campaign include (left to right) Dr. May L. Wyjeka, Case Western Reserve University; AACN Executive Director Dr. Geraldine Bednash; and AACN Board Member Dr. Cynthia Flynn Copera, University of Akron.
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, 2002, 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, 2001 financial statements and, in our report dated August 24, 2001, 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, 2002, 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.

Gibbs, Fuersting & Freeman

August 16, 2002

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AMERICAN ASSOCIATION of COLLEGES of NURSING
Statement of Financial Position as of June 30, 2002
with Summarized Financial Information for 2001

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<tr>
<th>ASSETS</th>
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<th>2001</th>
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<td><strong>Net Property and Equipment</strong></td>
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<th>LIABILITIES and NET ASSETS</th>
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<td><strong>Total Net Assets</strong></td>
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<td><strong>TOTAL LIABILITIES AND NET ASSETS</strong></td>
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<td>$955,249</td>
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See accompanying notes to financial statements.

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<tr>
<th>Unrestricted</th>
<th>2002</th>
<th>2001</th>
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<td><strong>REVENUE</strong></td>
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<td>Miscellaneous Income</td>
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<td>Site Evaluation Fees</td>
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<td><strong>Total Revenue</strong></td>
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<td><strong>EXPENSES</strong></td>
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<td>Program Services:</td>
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<td>Regional Collaborative (CIC)</td>
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<td>End of Life Projects</td>
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<td>Curriculum/Awards Projects</td>
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<td>Government Affairs/Lobbying</td>
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<td><strong>Total Expenses</strong></td>
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<td><strong>Change in Net Assets</strong></td>
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<td><strong>Net Assets at Beginning of Year</strong></td>
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<td><strong>NET ASSETS AT END OF YEAR</strong></td>
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See accompanying notes to financial statements.
<table>
<thead>
<tr>
<th>Description</th>
<th>2002</th>
<th>2001</th>
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<tbody>
<tr>
<td><strong>CASH FLOWS FROM OPERATING ACTIVITIES</strong></td>
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<td>Change In Net Assets</td>
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<td>Operating Activities:</td>
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<td>Realized Loss</td>
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<td><strong>(Increase) Decrease in:</strong></td>
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<td>Increase (Decrease) in:</td>
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<td><strong>CASH FLOWS FROM INVESTING ACTIVITIES</strong></td>
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<td>Purchase of Investments</td>
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<td>Proceeds From Sale of Investments</td>
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<td><strong>Net Cash Provided (used) by Investing Activities</strong></td>
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<td>Net Increase (Decrease) in Cash and Cash Equivalents</td>
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See accompanying notes to financial statements.

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<tr>
<th>2002</th>
<th>Regional Collaboratives (CIC)</th>
<th>End of Life Projects</th>
<th>Gerontology/ Geriatric Projects</th>
<th>Curriculum/ Awards Projects</th>
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<td>6,168</td>
<td>4,221</td>
<td>2,542</td>
<td>686</td>
<td>829</td>
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<tr>
<td>Subscription Cost to Members</td>
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<td>-</td>
<td>-</td>
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<td>60,022</td>
<td>25,379</td>
<td>6,274</td>
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<td>(237)</td>
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<td>Public Relations</td>
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<td>-</td>
<td>-</td>
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<td>-</td>
<td>-</td>
<td>-</td>
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<td>Legislative Affairs</td>
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<td>Dues and Subscriptions</td>
<td>492</td>
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<td>-</td>
<td>-</td>
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<td>5,000</td>
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<td>279,895</td>
<td>1,204,123</td>
<td>60,698</td>
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<tr>
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<td>-</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Miscellaneous</td>
<td>3,846</td>
<td>4,160</td>
<td>21,037</td>
<td>249</td>
<td>216</td>
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<tr>
<td>Grants and Contracts</td>
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<td>-</td>
<td>-</td>
<td>-</td>
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<td>32,361</td>
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<td>27,305</td>
<td>18,088</td>
<td>(181)</td>
<td>(5,404)</td>
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<td>Subcontracts</td>
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<td>324,527</td>
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<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Evaluator Training</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Evaluator Travel</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$558,798</td>
<td>$1,147,884</td>
<td>$1,558,434</td>
<td>$218,007</td>
<td>$280,423</td>
<td>$136,998</td>
</tr>
</tbody>
</table>

Notes to financial statements June 30, 2002

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".

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See accompanying notes to financial statements.
### Notes to financial statements June 30, 2002 (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, 2002 were $84,000.

---

### Table

<table>
<thead>
<tr>
<th>Govt. Affairs/ Lobbying</th>
<th>Public Affairs</th>
<th>Publications</th>
<th>Meetings</th>
<th>Accreditation</th>
<th>General and Administrative Expenses</th>
<th>Total Expenses</th>
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<td><strong>2002</strong></td>
<td><strong>2001</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>$178,441</td>
<td>$109,972</td>
<td>$87,012</td>
<td>$149,673</td>
<td>$246,296</td>
<td>$294,039</td>
<td>$1,864,666</td>
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<td>42,955</td>
<td>27,924</td>
<td>21,926</td>
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<td>57,256</td>
<td>11,099</td>
<td>407,328</td>
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<td>15,225</td>
<td>18,218</td>
<td>12,150</td>
<td>14,404</td>
<td>30,791</td>
<td>5,461</td>
<td>118,214</td>
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<td>-</td>
<td>10,449</td>
<td>6,987</td>
<td>13,998</td>
<td>25,655</td>
<td>11,981</td>
<td>10,010</td>
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<td>1,094</td>
<td>1,373</td>
<td>4,006</td>
<td>10,084</td>
<td>15,690</td>
<td>60,481</td>
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<td>5,169</td>
<td>424</td>
<td>2,094</td>
<td>35,801</td>
<td>16,913</td>
<td>41,093</td>
<td>344,508</td>
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<tr>
<td>6,581</td>
<td>8,032</td>
<td>-</td>
<td>28,626</td>
<td>30,744</td>
<td>23,446</td>
<td>382,137</td>
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<td>2,985</td>
<td>9,444</td>
<td>2,314</td>
<td>21,988</td>
<td>22,521</td>
<td>14,259</td>
<td>129,311</td>
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<tr>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1,772</td>
<td>7,149</td>
<td>10,125</td>
<td>12,317</td>
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<td>1,079</td>
<td>1,056</td>
<td>431</td>
<td>6,747</td>
<td>5,861</td>
<td>27,428</td>
<td>62,755</td>
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<tr>
<td>-</td>
<td>23,622</td>
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<td>-</td>
<td>-</td>
<td>23,622</td>
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<td>1,003</td>
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<td>998</td>
<td>92,581</td>
<td>59,996</td>
<td>268,016</td>
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<td>4,051</td>
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<td>-</td>
<td>9,001</td>
<td>13,052</td>
<td>18,151</td>
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<td>1,649</td>
<td>8,763</td>
<td>10,562</td>
<td>21,262</td>
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<tr>
<td>64,412</td>
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<td>64,412</td>
<td>43,421</td>
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<tr>
<td>12,105</td>
<td>449</td>
<td>-</td>
<td>9,462</td>
<td>12,784</td>
<td>35,999</td>
<td>28,167</td>
</tr>
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<td>-</td>
<td>8,190</td>
<td>-</td>
<td>-</td>
<td>13,190</td>
<td>11,614</td>
<td></td>
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<tr>
<td>125</td>
<td>762</td>
<td>192,927</td>
<td>-</td>
<td>1,110</td>
<td>1,774,577</td>
<td>506,051</td>
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<td>-</td>
<td>5,000</td>
<td>-</td>
<td>-</td>
<td>5,000</td>
<td>5,000</td>
<td></td>
</tr>
<tr>
<td>2,248</td>
<td>3,366</td>
<td>966</td>
<td>9,308</td>
<td>31,406</td>
<td>76,802</td>
<td>74,202</td>
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<tr>
<td>- (1.181)</td>
<td>(95)</td>
<td>-</td>
<td>(150,003)</td>
<td>333,108</td>
<td>76,111</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>-</td>
<td>-</td>
<td>73,289</td>
<td>73,289</td>
<td>56,034</td>
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<td>-</td>
<td>-</td>
<td>-</td>
<td>250,223</td>
<td>250,223</td>
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</table>

**Total**

|$339,988$ | $198,199$ | $162,814$ | $508,420$ | $928,781$ | $531,453$ | $6,570,199$ | $4,400,273$
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, 2002 are comprised of the following:

<table>
<thead>
<tr>
<th></th>
<th>Cost</th>
<th>Market</th>
</tr>
</thead>
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<tr>
<td>AACN</td>
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<tr>
<td>Mutual Funds</td>
<td>$2,623,220</td>
<td>$2,510,420</td>
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<td>Certificates of Deposits</td>
<td>352,998</td>
<td>352,998</td>
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<td></td>
<td>2,976,218</td>
<td>2,863,418</td>
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<td>CCNE</td>
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<tr>
<td>Mutual Funds</td>
<td>437,694</td>
<td>450,889</td>
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<td>TOTAL INVESTMENTS</td>
<td>$3,413,912</td>
<td>$3,314,307</td>
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</table>

Included in investment income on the Statement of Activities and Change in Net Assets is an unrealized loss of $98,328 and a realized loss of $612.
Notes to financial statements June 30, 2002 (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 4.75% at June 30, 2002.

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

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>$2,625,636</td>
</tr>
<tr>
<td>2004</td>
<td>1,911,583</td>
</tr>
<tr>
<td>2005</td>
<td>137,250</td>
</tr>
<tr>
<td></td>
<td>4,674,469</td>
</tr>
</tbody>
</table>

Less: Amounts receivable within one year: 2,625,636

TOTAL NONCURRENT GRANTS RECEIVABLE $2,048,833

5. TEMPORARILY RESTRICTED NET ASSETS
Temporarily restricted net assets are available for the following purposes at June 30, 2002:

- Regional Collaboratives (CIC) $ 322,680
- End of Life Projects 854,960
- Gerontology/Geriatric Projects 2,414,884
- Hartford Scholarship Project 2,081,112
- Curriculum/Awards Projects 44,720
- Bonus Program 12,920
- Friends of the Division of Nursing 1,065

$ 5,732,341

6. TEMPORARILY RESTRICTED NET ASSETS
Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes for the year ended June 30, 2002 as follows:

- Regional Collaboratives (CIC) $ 558,798
- End of Life Projects 1,147,884
- Gerontology/Geriatric Projects 1,457,084
- Hartford Scholarship Project 67,116
- Curriculum/Awards Project 137,978
- Bonus Program 2,929

$ 3,371,769

7. 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 Teachers Insurance and Annuity Association (TIAA) and/or 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, 2002 was $140,040.

8. 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:

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
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<tr>
<td>2004</td>
<td>128,090</td>
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<td>2005</td>
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<tr>
<td>2006</td>
<td>128,090</td>
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<tr>
<td>2007</td>
<td>128,090</td>
</tr>
<tr>
<td></td>
<td>$ 640,450</td>
</tr>
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</table>

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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, Governmental 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, 2002.**

**Finance Committee**
C. Fay Raines (Chair), The University of Alabama in Huntsville
Sandra Baird, University of Northern Colorado
Debra Davis, University of South Alabama
Thomas Kippenbrock, Arkansas State University
Elisabeth Pennington, University of Massachusetts – Dartmouth

**Governmental Affairs Committee**
Pamela Watson (Chair), University of Texas Medical Branch
Virginia Adams, University of North Carolina – Wilmington
Julie Johnson, University of Nevada – Reno
Betty Rabnur, University of Vermont
Linda Samson, Governors State University
Kathleen Thias, Colby-Sawyer College

**Membership Committee**
Cynthia Flynn Capers (Chair), University of Akron
Terry Misener, University of Portland
Linda Niedrighaus, Elmhurst College
Elizabeth Parato, Marian College
Rosemary Porter, University of Missouri – Columbia

**Dean Mentoring Subcommittee**
Terry Misener (Chair), University of Portland
Ruth Davishizar, Bethel College of Indiana
Mary Ella Graham, Tennessee State University

**Nominating Committee**
Nancy DeBasio, (Convener), Research College of Nursing
Andrea Lindell, University of Cincinnati
Marilyn Rothert, Michigan State University

**Program Committee**
Mary Mundt (Chair), University of Louisville
Cynthia Crabtree, Spalding University
Joan Creasia, University of Tennessee – Knoxville
Maureen Keene, University of Utah
Jane Kirschling, University of Southern Maine
Mary Beth Mathews, University of Hartford
Katharyn May, University of Wisconsin – Madison

**Baccalaureate Education Conference Subcommittee**
Cynthia Crabtree (Chair), Spalding University
Alma Dixon, Bethune-Cookman College
Susan Fetsch, Avila University
Judeen Schulte, Alverno College
Hodi Taylor, West Texas A&M University

**Doctoral Education Conference Subcommittee**
Maureen Keefe (Chair), University of Utah
Patricia Burns, University of South Florida
Ada Lindsey, University of Nebraska Medical Center
Mary Nies, Wayne State University
Barbara Parker, University of Virginia

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"To ensure that we meet the healthcare needs of all people, we must work to match our enrollment and graduates with that of our population. A culturally diverse nursing workforce is essential in achieving that goal."

Geraldine Bednash, AACN Executive Director

From the article, "Mirroring Our Diversity" in Nursing Spectrum, February 11, 2002

COMMITTEES (continued)

Executive Development Series Subcommittee
Mary Beth Mathews (Chair), University of Hartford
Mary Brown, Milwaukee School of Engineering
Marcella Copes, Coppin State College
Andrea Gregg, University of Florida
Cesarina Thompson, Southern Connecticut State University

Hot Issues Subcommittee
Katharyn May (Chair), University of Wisconsin – Madison
Susan Bakewell-Sachs, The College of New Jersey
Ann Marie Brooks, The Catholic University of America
Elaine Sorensen Marshall, Brigham Young University
Kathy Mason, Florida State University

Master's Conference Subcommittee
Jane Kirschling (Chair), University of Southern Maine
Gail Havens, University of Vermont
Dayle Joseph, University of Rhode Island
Cynthia Russell, Grand Canyon University
Elaine Sorensen Marshall, Brigham Young University

Summer Seminar Subcommittee
Joan Creasia (Chair), University of Tennessee – Knoxville
Pat Moritz, University of Colorado Health Sciences Center
Susan Bowar-Ferres, New York University Medical Center
Linda Q. Everett, The University of Iowa Hospitals and Clinics
Patricia Sosu Fitzsimons, Yale-New Haven Hospital
Carolyn Williams, University of Kentucky

Dr. Elizabeth Norman, author of We Band of Angels: The Untold Story of American Nurses Trapped on Bataan by the Japanese, delivered the John P. McGovern Award lecture at AACN's Fall 2001 Semi-Annual Meeting.

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UPCOMING CONFERENCES

Doctoral Conference
January 29-February 1, 2003
Sundial Beach and Tennis Resort, Sanibel Island, FL

Master's Education Conference
February 27-March 1, 2003
Amelia Island Plantation, Amelia Island, FL

Executive Development Series
March 21-22, 2003
Fairmont Hotel, Washington, DC

Nursing Advancement Professionals Conference
March 21-22, 2003
Fairmont Hotel, Washington, DC

Spring Annual Meeting
March 22-25, 2003
Fairmont Hotel, Washington, DC

Business Officers of Nursing Schools Annual Meeting
April 23-25, 2003
San Antonio Marriott Rivercenter, San Antonio, TX

Hot Issues Conference
April 24-26, 2003
San Antonio Marriott Rivercenter, San Antonio, TX

Summer Seminar
July 20-23, 2003
Coronado Island Marriott Resort, San Diego, CA

Executive Development Series
October 23-25, 2003
Fairmont Hotel, Washington, DC

Fall Semiannual Meeting
October 25-28, 2003
Fairmont Hotel, Washington, DC

Baccalaureate Education Conference
November 2003

JOURNAL OF PROFESSIONAL NURSING

Editor
Eleanor J. Sullivan, University of Kansas Medical Center

Editorial Board
(four officers of AACN and one appointed member): Kathleen Ann Long, University of Florida; Joan Bartels, Georgia Southern University; C. Fay Raines, University of Alabama – Huntsville; Dorothy Powell, Howard University; Joan Hrubetz, St. Louis University

Assistant Editors
Sue K. Donaldson, Johns Hopkins University; Rita M. Carty, George Mason University; M. Josephine Snider, University of Florida; Daniel J. Pesut, Indiana University; Joanne Disch, University of Minnesota; Norma Lang, University of Pennsylvania; Helen R. Connors, University of Kansas Medical Center

TASK FORCES

Task Force on Education and Regulation for Professional Nursing Practice 2
Jean Bartels (Chair), Georgia Southern University
Carol Allen, Oakwood College
Tina DeLapp, University of Alaska – Anchorage
Melanie Dreher, University of Iowa
Donna Hartweg, Illinois Wesleyan University
Elizabeth Lenz, The Ohio State University
Terry Miler, Pacific Lutheran University
Robert Olson, South Dakota State University
Cathy Rick, Department of Veterans Affairs
Elias Vasquez, University of Maryland

Task Force on Leadership Transition
Jeanette Lancaster (Chair), University of Virginia
Carole Anderson, The Ohio State University
Linda Hodges, University of Arkansas for Medical Sciences
John Lantz, University of San Francisco

Task Force on the Professional Clinical Doctorate
Betty Lenz (Chair), The Ohio State University
Kathleen Andreoli, Rush University
Jean Bartels, Georgia Southern University
Sandra Edwards, University of Minnesota
Catherine Gilliss, Yale University
Judie Honig, Columbia University
Lucy N. Marion, University of Illinois – Chicago
Lynne Pearcey, University of North Carolina – Greensboro
Julie Sebastian, University of Kentucky
Marita Titter, University of Iowa

Task Force on Future Faculty
Kathleen Dracup (Chair), University of California – San Francisco
Doris Greiner, University of Virginia
Sheila Haas, Loyola University Chicago
Pamela Kidd, Arizona State University
Rose Liegner, Azusa Pacific University
Richard Maclntyre, Mercy College
M. Dee Williams, University of Florida

Task Force on Options for Participation in AACN
Lee Acord, Montana State University
Harriet Feldman, Pace University
Sally Lunze, University of Wisconsin, Milwaukee
Nancy Ridenour, Illinois State University
Arlene Sargent, Samuel Merritt St. Mary’s Nursing Consortium

Journal of Professional Nursing Task Force
Patricia Starck (Chair), The University of Texas Health Science Center at Houston
Betty Ferrull, City of Hope National Medical Center
Nancy Fugate Woods, University of Washington

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AFFILIATIONS

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:

AACN/NONPF Collaborative Advisory Committee on Nurse Practitioner Data
Linda Berlin, AACN Staff

Ad Hoc Group for Medical Research Funding Executive Committee
Debbie Campbell, AACN Staff

American Association of Colleges of Pharmacy—Education Scholar Program
Barbara Penn, AACN Staff

American Medical Association, Panel of Nurse Consultants
Kathleen Ann Long, University of Florida

American Society of Health-System Pharmacists—Medication Safety
Geraldine Bednash, Barbara Penn, Deirdre Thornlow, AACN Staff

Association of Academic Health Centers, Health Professions Education Council
Geraldine Bednash, AACN Staff

Call to the Profession
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- 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).

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