COMPLAINTS REGARDING ACCREDITED ORGANIZATIONS

ANCC
AMERICAN NURSES CREDENTIALING CENTER
ACCREDITATION

Guidelines

Submission

A written complaint form must be submitted to the ANCC Accreditation Program at accreditation@ana.org. Anonymous complaints will not be investigated. Complaints must be submitted within 12 months of the date of the activity or issue being reported.

Review

1. The Senior Operations Manager (SOM) will investigate and respond to complaints pertaining to accredited and applicant organizations that involve or may involve a violation of ANCC's Accreditation Program standards.
2. Complaints pertaining to approved providers or approved activities will not be reviewed. These complaints will be forwarded to the Accredited Approver for investigation and response.
3. Organizations against which a complaint has been filed will receive written notification of the nature of the complaint from the SOM.
4. The name of the complainant will be disclosed to the affected organization if requested by the affected organization.
5. Organizations against which a complaint has been filed are expected to comply with all requests for information by ANCC in a timely manner.
6. In the event that a complaint cannot be resolved by the SOM or may require action by the Commission on Accreditation, the SOM will submit the complaint to the COA for further investigation.
7. The organization against which a complaint has been filed will be notified as to the outcome of the review and advised if no basis for the complaint was found or if corrective action is necessary.
8. Notification will be provided to the individual who initiated the complaint when the investigation has been concluded. No details about the investigation and resulting actions will be provided.
9. Substantiated complaints about an organization are reviewed when the organization applies for reaccreditation.
10. Organizations against which a complaint has been filed are expected to respond professionally and not take any retaliatory action against a complainant. Failure to comply may result in suspension, probation or loss of accreditation.

Accreditation Complaint Form

Date (MM/DD/YYYY)

Name

Address

City State Zip/Postal Code Country

Phone E-Mail

1. Name of Accredited Organization

2. Nature of Problem/Inquiry: ☐ Administrative ☐ Educational Design

3. Description of Problem/Inquiry:

4. If specific educational activity:

Title

Date (MM/DD/YYYY)

Location

5. Have you contacted agency directly? ☐ Yes ☐ No

Name of person contacted Date (MM/DD/YYYY)

If yes, what was the outcome?

Questions: E-mail accreditation@ana.org

OR

mail to ANCC Accreditation

8515 Georgia Avenue, Suite 400, Silver Spring, MD 20910