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# Policies & Procedures

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**October 2010**

Accreditation Commission for  
Acupuncture & Oriental Medicine

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# PART I

## Policies and Procedures of the Eligibility Process

### 1.0 Overview

A program that wishes to achieve candidacy status, as the initial step toward accreditation, must:

- Host a one-day ACAOM staff orientation visit (Master's-level programs only);
- Submit a Letter of Intent officially indicating, in writing, the program's commitment to pursue the candidacy review process;
- Attend an ACAOM Eligibility Workshop (Master's-level programs only);
- Complete an Eligibility Report for Candidacy;
- Host a candidacy site visit; and
- Submit a Formal Institutional Response (FIR) to the site visit report with other required documentation.

For those institutions seeking candidacy status for a doctoral program as part of the Commission's *pilot process*, also see Section 3.6 of *ACAOM Policies and Procedures Manual*.

**The Commission reserves the right to accept Eligibility Reports only from institutions and programs that fall within its scope and for which ACAOM has competence to review. A school or campus seeking candidacy for its master's or doctoral-level programs must have had students enrolled in the program for at least one calendar year prior to submitting an Eligibility Report.**

**Post-graduate doctoral programs:** An institution that has been approved to offer a post-graduate Doctor of Acupuncture and Oriental Medicine ("DAOM") program pursuant to the Commission's substantive change policies, must submit an Eligibility Report no sooner than twelve months and no later than eighteen months from the date it receives ACAOM approval under the Commission's substantive change procedures. Substantive change approval to offer a doctoral program will automatically lapse if the institution fails to submit its Eligibility Report within eighteen months from the date it receives substantive change approval unless the institution documents, to the Commission's satisfaction, reasonable grounds for an extension.

The Commission does not consider its acceptance of an Eligibility Report as a measure of the program's potential for accreditation nor as assurance that Candidacy status will be granted.

Upon successful completion of the Eligibility Process, a program that meets the fundamental eligibility criteria for Candidacy, as outlined in Section 2.1 of the *Structure, Scope, Eligibility Requirements, Standards and Criteria Manual*, may be granted the status of ACAOM Candidacy.

### **1.1 The Staff Orientation Visit**

For master's-level programs, the institution must request an "Orientation Visit" by ACAOM staff. A member of ACAOM's professional staff conducts a one-day visit to the institution to provide information about the accreditation process, the Commission's accreditation policies, procedures, Eligibility Requirements and Standards, and how to prepare an appropriately documented Eligibility Report (See, 1.3, *The Candidacy Workshop*).

### **1.2 The Letter of Intent**

A master's level or doctoral program must submit a Letter of Intent to pursue candidacy status, which has been authorized by the institution's governance structure.

The Letter of Intent must be received by the Commission no later than September 1 for Commission review of candidacy status at its summer meeting or by March 1 for review at the Commission's winter meeting.

### **1.3 The Candidacy Workshop**

Following the submission of a Letter of Intent, a representative of a master's-level program seeking candidacy status must attend an ACAOM Candidacy Workshop, which provides detailed instruction in the preparation of an Eligibility Report. Because there should be broad participation in the preparation of an Eligibility Report, a team consisting of the Program Director and other key school personnel should attend this workshop.

Candidacy Workshops are conducted annually by the Commission, either as part of a national AOM meeting or as a separate workshop at the Commission office. Information regarding the time and location of workshops and registration instructions are posted to the Commission web site [www.acaom.org](http://www.acaom.org) under the "News and Meetings" link.

## 1.4 The Eligibility Report

The program develops an Eligibility Report that addresses and documents compliance with ACAOM standards, with particular emphasis placed on compliance with each of the **Eligibility Requirements** and its progress and action plans for meeting fully the Standards and Criteria for Accreditation. The master's or doctoral program prepares three copies of its Eligibility Report in paper format, and one electronic copy.

The program submits one copy of its Eligibility Report, along with a non-refundable review fee, to the ACAOM office, and one copy to each member of the Commission Review Committee for that program by **October 1** if the program is to be considered for candidacy at a summer Commission meeting or by **April 1** for consideration at a winter Commission meeting. The report must be prefaced by a completed Eligibility Report cover sheet. Commission staff reviews the report for completeness and substance to assess whether the program is ready for a site visit.

Before an Eligibility Report can be accepted for processing, it must present a factual and complete compilation of narratives with supporting documentation, where applicable, providing evidence that the program meets each of Eligibility Requirements and its progress and action plans for meeting fully the Standards and Criteria for Accreditation. (The Eligibility Requirements, Standards and Criteria are described and enumerated in the ACAOM Standards and Criteria Handbook.) For master's level programs, please refer to the document entitled "Guide for Preparing the Eligibility Report (Master's Level Programs)" and for doctoral programs, please refer to the document entitled "Guide for Preparing the Eligibility Report (Doctoral Programs)."

A program may withdraw an Eligibility Report for Candidacy at any time before a final decision is made by the Commission on candidacy status.

## 1.5 The Eligibility Report Review

Commission staff review the Eligibility Report to determine whether the program is ready for a site visit. Based on the results of the review, staff may: 1) require additional or clarifying information from the program, 2) reject the report if it fails to adequately document and demonstrate compliance with the Eligibility Requirements and progress towards meeting the Standards and Criteria, or 3) accept the report and approve a site visit.

A program may appeal an ACAOM staff decision to reject an Eligibility Report by submitting the report to members of the Review Committee within 5 business days of the date the program is notified of the rejection. An appeal may only be made on the following grounds: 1) that the program demonstrates with specificity that staff,

in its review of the report, failed to adhere to the Commission's published procedures in a manner that was materially prejudicial to the program; or, 2) that the program demonstrates that the decision to reject the report was inconsistent with the contents of the report and was arbitrary and capricious. The basis for an appeal relative to ground #2 is expressly limited to the Eligibility Report that was submitted by the program and reviewed by staff. The Review Committee will not accept or consider additional documentation or evidence as part of an appeal that was not contained in the Report submitted by the program. Final rejection decisions require the program to submit a new Eligibility Report with the review fee for a subsequent Commission program review cycle if the program intends to pursue ACAOM candidacy status.

## **1.6 The Candidacy Site Visit**

A three-day Eligibility Site Visit is conducted by a qualified site visit team to validate the contents of the Eligibility Report and to assess compliance with ACAOM Eligibility Requirements and the degree to which the program meets ACAOM Standards for purposes of granting or denying candidacy status.

Site Visit Team members shall include:

- One or more acupuncture and Oriental medicine (AOM) *educators* who are familiar with AOM curricula, methods of training, program assessment and development.
- One or more acupuncture and Oriental medicine *practitioners* who are competent to assess the quality of AOM training;
- A *management specialist* in administration and the business aspects of school operation;
- An *educational specialist* in instructional methods and educational processes;

A *practitioner member* on the site visit team is defined as an individual who is regularly engaged, as his or her primary professional role, in the provision of acupuncture and Oriental medicine services and has relevant expertise in reviewing the quality of acupuncture and Oriental medicine training. An *acupuncture and Oriental medicine educator* is defined as an individual who has in-depth knowledge in one or more areas of acupuncture and Oriental medicine and participates in acupuncture and Oriental medicine education, methods of training, evaluation and program development.

While the site visit team must have at least one representative per category, it is not unusual for members of a team to have expertise in at least one or more of the

other categories. If the Commission should determine that the particular circumstances of a program being visited require particular expertise in addition to those listed above, a person with that expertise may be added to the site visit team.

The program has an affirmative obligation to notify the Commission of any proposed site visit team members who they believe to have *conflicts of interest*. The program may advise the Commission of any objection to the proposed site visitors, documenting the reason for that objection. If the objection is based on *reasonable cause*, as determined by the Commission, the Commission shall replace the visitors. *Reasonable cause* is defined as bias, conflict of interest or other prejudicial infirmity. The Commission will not knowingly appoint a site visitor to a team who has potential or apparent conflicts of interest with the program being reviewed (See, Section 3.8.1).

The Commission may notify regional, state or other accreditation agencies and other state licensing authorities that may be interested in the impending visit, inviting the possibility of joint visits.

During the visit, the site visitors prepare a written site visit report of their findings for the Commission. The site visit team chair submits a copy of the draft site visit report to the program. The program is provided five business days to communicate to the site visit team perceived errors of fact contained in the report. The site visit team may, at its discretion, amend the report to reflect the factual corrections. A copy of the final site visit report is submitted to the program and the Commission.

### **1.7 Formal Institutional Response to Site Visit Report**

The program must submit a formal institutional response (FIR) to the final site visit report with the requisite number of copies of its catalog and financial statements. [The program is provided not less than ten \(10\) calendar days to submit its FIR.](#) The formal institutional response may not exceed 15 pages including essential documentation. As such, the formal institutional response may exceed this limit only in those rare instances in which the institution or program can document that the findings of the team are at variance with the facts being supplied by the institution. In no instance may a formal institutional response exceed 25 pages.  
(revised 07-2009)

### **1.8 Commission Review of a Program's Eligibility for Candidacy**

During its biannual meetings (Summer/Winter), the Commission considers the candidacy status of each program based upon the program record. A closed hearing with a program's authorized representative may be conducted to clarify the record at the request of either the Commission or the program. The Chief Executive Officer of the institution/Program Director and/or other person(s) authorized to represent the program, may appear for the hearing.

Written third-party testimony in reference to an institution or program that is being reviewed for Candidacy may be submitted to the Commission as required under the U.S. Secretary of Education's Criteria for Recognition. Any third party testimony received by the Commission is submitted to the institution/program, as well, in order to provide it the opportunity to respond to the testimony in writing.

During Executive Session, the Commission deliberates and takes action on the candidacy status of the program based on its review of the record. Only Commissioners and ACAOM staff without actual or potential conflict of interest may participate in the candidacy deliberations. The Commission may, at its discretion, invite any official of a state, federal or accreditation agency to observe its deliberations. No other persons may be present without the approval of the program and the Commission.

### **1.9 Range of Commission Actions on Candidacy**

The Commission considers institutional reports in conjunction with site visit reports and other information in the record to determine whether an institution meets ACAOM requirements for candidacy as published in the *ACAOM Structure, Scope, Process, Eligibility Requirements, Standards and Criteria Manual*.

The Commission takes action on candidacy following a review of the record regarding the institution's compliance with Commission Eligibility Requirements, Standards and Criteria. Other Commission actions may follow an on-site evaluation, a follow-up interim report, an annual report, substantive change request, or may occur at any point during candidacy.

The Commission may conduct a review of a candidate institution or program at any time if it has evidence that the institution may no longer meet the Eligibility Requirements or is not making progress toward meeting the Standards and Criteria for accreditation. If the institution reports developments and changes or conducts activities that affect the educational effectiveness of the institution/program or its ability to meet ACAOM standards, the Commission reserves the right to review the institution's candidate status, without regard to any previously indicated schedule. If the Commission determines that the institution no longer meets ACAOM Eligibility Requirements or is not making sufficient progress towards meeting the Standards and Criteria for accreditation, the Commission will require an institution to "Show Cause." Show Cause is a non-compliance action requiring an institution to demonstrate why its candidacy status should not be removed. Show Cause may or may not result in the adverse action of Withdrawal of Candidacy.

If an institution or program fails to submit a required follow-up or other report, including its annual report, fails to respond to Commission requests for information

or scheduling a visit, or has not submitted dues or fees owed the Commission by the required deadline, the institution will be considered to have voluntarily allowed its candidacy to lapse. The institution will be allowed to present its case for continued candidacy status by means of a substantive report and/or an on-site evaluation, or other action as determined by the Commission. The Commission may require the institution to show cause as to why its candidacy status should not be removed. All actions are published and made available to the public in accordance with Commission policy.”

### ***Types of Commission Actions***

#### ***1.9.1 Granting Initial Candidacy Status***

In the event that an institution or program meets the Commission’s Eligibility Requirements and demonstrates adequate development and plans for meeting the Standards and Criteria for Accreditation and there is no question or concern regarding the institution’s compliance, the Commission may act to grant candidacy.

#### ***1.9.2 Monitoring Actions***

A monitoring action indicates that the Commission has identified one or more standards and criteria with which an institution may not be in compliance if the institution fails to give due attention and continue to make progress. Interim reports, annual reports, biannual progress reports, supplemental information reports, monitoring reports and interim site visits constitute the principle methods for a monitoring action.

#### ***1.9.3 Procedural Actions***

The Commission takes a procedural action when it requires further information in order to make a decision regarding candidacy or initial accreditation. The Commission may postpone a decision and request a supplemental information report when it has determined that there is insufficient information to substantiate institutional/program compliance with one or more ACAOM Eligibility Requirements, Standards or Criteria. Supplemental information reports are intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial action. A Lapse of Candidacy is also considered to be a procedural action. (See, *Lapsed Candidacy*, below.)

#### ***1.9.4 Non-Compliance Actions***

A non-compliance action indicates that the Commission has identified one or more areas in which the institution or program does not meet the Eligibility Requirements, Standards or Criteria. These areas are identified as requirements in a team, reviewers’, or other report, and they are specifically stated in the Commis-

sion's action.

If the Commission determines at any time during candidacy that an institution/program no longer meets ACAOM Eligibility Requirements or is not making sufficient progress towards meeting the Standards and Criteria, the Commission may require an institution to "Show Cause." Show Cause is a non-compliance action and requires an institution/program to demonstrate why its candidacy status should not be removed. For Show Cause, the Commission may require a substantive report and/or an on-site evaluation.

#### 1.9.5 Adverse Action

In an adverse action, the Commission withdraws or denies candidacy status or places the institution/program on probation. (See, also Section 1.15 – **Adverse Action**.) The program is encouraged to consult with Commission staff before seeking reconsideration of a decision to deny Candidacy status. A program that has been denied Candidacy may begin the Eligibility Process again by submitting a new Eligibility Report for Candidacy with fee *after one calendar year* from the date of its denial. The program must demonstrate that it has corrected the deficiencies noted in the former Eligibility Process.

#### 1.9.6 Administrative Actions

In the event that the Commission is unable to evaluate the institution in candidacy status due to circumstances, which the Commission determines to be outside of the institution or the Commission's control, the Commission may take an administrative action. This action does not speak to the inability of the institution or program to meet ACAOM standards, but rather the ability of the Commission to conduct an appropriate review and to determine compliance. The institution maintains its candidacy status with the Commission during an administrative action. These actions are as follows:

##### Extend Candidacy-

Subject to Section 1.13.1 of the Handbook, the Commission may act to Extend Candidacy for a period not to exceed one year if the Commission determines that the delay is appropriate to ensure a current and accurate representation of the institution/program or in the event of circumstances beyond the institution's control (e.g., natural disaster resulting in suspension of academic programs, some instances of change in ownership, or U.S. State Department travel warnings to areas in which institution is located). The institution maintains its candidacy status with the Commission during this period.

##### Suspend Candidacy-

The Commission may act to Suspend Candidacy if, after candidacy has

been extended for one year, it is not possible to conduct an appropriate review of the institution/program. This action is considered to be a procedural action and would result in Removal of Candidacy if the visit cannot be performed within the one-year time frame. The institution maintains its status with the Commission during this period, subject to 1.13.1 of the Handbook. An action to Suspend Candidacy is followed by an Adverse Action if the circumstances restricting the Commission's review of the institution/program are not changed. If circumstances change to allow the Commission's review, the Commission may at its discretion require resubmission or revision of any reports on which the review would be based.

#### *1.9.7 Lapsed Candidacy*

If an institution or program fails to submit a required follow-up or other report, including its annual report, fails to respond to Commission requests for information or scheduling a visit, or has not submitted dues or fees owed the Commission by the required deadline, the institution will be considered to have voluntarily allowed its candidacy to lapse. The institution will be allowed to present its case for continued candidacy status by means of a substantive report and/or an on-site evaluation, or other action as determined by the Commission. The Commission may require the institution to "show cause" as to why its candidacy status should not be removed. All actions are published and made available to the public in accordance with Commission policy.

### **1.10 Types of Follow-Up**

The Commission may initiate various follow-up measures to ensure continued compliance with the requirements of candidacy, to provide more information in order to make a decision regarding candidacy, or simply to keep the Commission informed of institutional/program progress. Levels of follow-up include letters, reports, and visits.

Commission actions of postponement or warning, none of which is deemed to constitute an adverse action under these procedures, automatically result in further Commission review of the institution's status prior to the expiration of the maximum time period allowed for such action. Such review will either result in the lifting of the non-adverse action, the imposition of a subsequent non-adverse action, or the imposition of an adverse action. The Commission is not bound by the sequence suggested above nor precluded from taking an action at any level (e.g., a "warning" need not precede "probation;" the next action following a warning may be show cause).

#### *1.10.1 Interim Report*

The Commission may direct the institution/program to describe in an interim report

its progress relative to remediating findings of the Commission on candidacy or at any time during the candidacy period. The Commission also may require the institution/program to address activities that were being planned or implemented at the time of the on-site evaluation to enhance institutional/program effectiveness.

#### *1.10.2 Supplemental Information Report*

In the event that the Commission has determined that there is insufficient information to substantiate institutional/program compliance with one or more of the Eligibility Requirements and progress towards meeting the Standards and Criteria, the Commission will request a Supplemental Information Report. These are intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial actions.

#### *1.10.3 Monitoring Report*

The Commission will request a monitoring report when it is concerned about the potential for future non-compliance with one or more requirements of candidacy, when issues are more complex or more numerous, or when the issues require a more substantive, detailed response. Institutions/programs that are required to submit monitoring reports must report on compliance with specific standards at regular designated intervals as determined by the Commission (e.g., quarterly, bi-annually).

#### *1.10.4 Interim Site Visit*

An interim site visits is conducted most often in conjunction with a request for a monitoring report, interim report or supplemental information report. A visit is required if verification of institutional/program status and/or progress requires an on-site review, in addition to a paper review. A visit may be conducted by a staff or individual evaluator, by a small team, or by a full team, depending on the nature and number of the Commission's concerns. A visit is often required with a Show Cause action.

Reports submitted for follow-up actions may be accepted, acknowledged, or rejected. The Commission "Accepts" a report when its quality, thoroughness, and clarity are sufficient to respond to all of the Commission's concerns, without requiring additional information in order to assess the institution/program's status. The Commission "Acknowledges" a report when it addresses the Commission's concerns only partially because of incomplete content or insufficient quality. The Commission typically requires additional information in order to assess the institution/program's status. A report is "Rejected" when its quality or substance are insufficient to respond appropriately to the Commission's concerns. The Commission requires the institution to resubmit the report and may, at its discretion, require a visit. Note that the Commission may similarly "acknowledge receipt

of,” “reject” or “grant” a Substantive Change request.

### **1.11 Time Frames for Follow-Up**

Current U.S. Department of Education regulations require a maximum two-year time frame for the Commission to withdraw candidacy when an institution or program has been found not to be in compliance with the Commission requirements for candidacy. The Commission typically requires institutions and programs to remediate a non-compliance with ACAOM Standards within one year.

Time limits are based upon the date of Commission action (not the date of the team visit). The Commission may, at its discretion, require an institution to report on progress sooner than the maximum time allowed, and subject to Section 1.13.1 of the Manual, may for good cause extend the time for demonstrating compliance. Good cause for extending the duration of a non-adverse action shall exist, for example, when in its discretion, the Commission determines that the institution is making a good faith effort to remedy existing deficiencies and a reasonable expectation exists that such deficiencies will be remedied within the period of extension if adverse action is postponed. No single period of extension may be greater than the length of the initial action.

If another accrediting body, the U.S. Secretary of Education or a state Department of Education should take adverse action against an ACAOM-Candidate institution or program, the Commission will promptly review the program to determine if it is in compliance with its Eligibility Requirements, Standards and Criteria. Except for good cause, the Commission will not knowingly take action to grant Candidacy to any institution or program that is the subject of an action potentially leading to suspension, revocation, or termination of accreditation, candidacy or authorization by a state agency or by another accrediting agency or to any institution/program that has been notified of a threatened loss of accreditation, candidacy or authorization by a state agency or by another accrediting agency. In such instances of good cause, the Commission will develop an explanation, consistent with its standards, why the action of the other accreditor or agency does not preclude the Commission’s grant of or continuation of candidacy. Such explanation will be provided to the US Department of Education.

Adverse Commission actions are subject to appeal in accord with due process as provided for in the Commission’s “Reconsideration and Appeal” policies. An institution/program’s candidacy is maintained (a) while it complies with the Commission’s request for information, additional reports, special visits, or other non-adverse action, and (b) during an institution’s appeal of a Commission action.

The program is provided the opportunity to respond formally after the final action is taken by the Commission. The program is notified, in writing, of the Commission action within 30 days of the action.

## **1.12 Acceptance of Candidacy**

Within 10 business days of receiving notification of Candidacy status, a program must submit one time only, non-refundable Candidacy acceptance dues.

The formal acceptance of Candidacy by a program is the submission to the Commission of the required Candidacy acceptance dues. Failure to accept Candidacy status by paying the dues within 30 days of receiving notification of Candidacy status shall result in the lapse of Candidacy and shall require the institution to undergo the entire candidacy review process, including the submission of a new Eligibility Report, with review fee, and hosting a Candidacy site visit.

## **1.13 Terms of Candidacy**

### *1.13.1 Length of Candidacy*

Candidacy status is limited to three years, subject to the conditions set forth in the action letter granting Candidacy and the accreditation procedures. If, in the opinion of the Commission, a program demonstrates progress in its development and in its Self-Study, the Commission may, at its discretion and upon request of the program, extend Candidacy beyond the three-year period. Such extensions shall be for a maximum of one year. No more than two extensions may be granted.

### *1.13.2 The Certificate of Candidacy*

The Certificate of Candidacy is the document presented by the Commission in acknowledgment of a program's candidate status. The Certificate of Candidacy is the property of the Commission and is to be surrendered by the program upon either the withdrawal of candidate status or when the institution achieves initial accreditation.

### *1.13.3 Advertisement and Announcement of Candidacy Status*

A program achieving Candidacy shall receive, along with notification that it has satisfied all requirements for Candidacy, designated language to be used in institutional publications that refer to the program's Candidacy status. The language shall be similar to the following statement:

The *{name of the program}* of the *{name of the institution}* has been admitted to Candidacy status by the Accreditation Commission for Acupuncture and Oriental Medicine ("ACAOM") and is in the process of seeking accreditation. **ACAOM: Maryland Trade Center #3, 7501 Greenway Center Drive, Suite 760, Greenbelt, MD 20770, Phone: (301) 313-0855.**

For a doctoral program, the language must also include the following disclaimer statement

**NOTE: ACAOM is not currently recognized by the US Department of Education for its candidacy or accreditation reviews with respect to doctoral programs in the field.**

Use of language other than the language so designated by the Commission is not permitted without prior written permission from Commission staff. The program must submit to the Commission, within 30 days of its public announcement of its status, a copy of its announcement of Candidacy status. This must include the name, address and telephone number of ACAOM.

The action of the Commission regarding Candidacy of a program shall be published pursuant to Section 3.1 of these policies. If program releases information that misrepresents or is misleading with respect to any action by the Commission regarding any action of the Accreditation Process, or the status of affiliation with the Commission, the Chief Executive Officer of the institution will be notified and informed that corrective action must be taken. If the misrepresentation or misleading information is not promptly corrected, the Commission may, at its discretion, release a public statement in such a form and content as it deems necessary to provide the correct information.

#### *1.13.4 Annual and Biannual Progress Reports*

Annual reports are required of all Candidate programs. Reports must be submitted by March 1 for programs reviewed in the summer or by September 1 for programs reviewed in the winter. These reports must include any changes in the program, any additions of programs offered at the institution, the impact of these changes on other areas of the institution, and other information required in accordance with the annual report form. The current reviewed financial statement of the program, the budget, and required institutional/program statistics must also be provided in the annual report.

The Commission also seeks continuing evidence of compliance with the Eligibility Requirements and progress toward meeting the Standard and Criteria for Accreditation for Candidacy to be maintained, and for this purpose, requires biannual progress reports from Candidate programs on deficiencies identified in prior Commission reviews. Progress reports are due on the date specified in the Commission's action letter and must address all the issues identified therein. Based on its review of progress reports, the Commission reserves the right to require additional reports and interim site visits.

The Commission may require additional information from a program, including requiring reports and or site visits, on any matter and at any time during Candidacy.

#### *1.13.5 Annual Sustaining Candidacy Dues*

Candidate programs are required to pay annual sustaining dues, due on the date designated by the Commission, until either the program achieves Accreditation status or its Candidacy status lapses or is withdrawn. The dues are based upon the dues and fees schedule published on the ACAOM web site.

### **1.14 Notification of Institutional Changes**

Candidacy does not transfer automatically when changes occur in the program or in its ownership or control, as such changes could substantially affect the program's policies, staff, curricula, reputation, legal or financial status. **As Candidate programs are generally in a developmental stage, they may not develop branch campuses where a significant portion of the full program is offered.** The program is required to inform the Commission, and in some cases to seek approval, of changes in the institution according to the following categories: non-substantive and substantive changes.

#### *1.14.1 Non-Substantive Changes*

Non-substantive changes generally do not require prior notice to the Commission. However, a Candidate program must notify the Commission with full and complete supporting documentation within 30 days of inception or installation of any of the following non-substantive changes. Any of these changes may result in requests for additional information, and/or review and action by the Commission. (revised 07-2009)

1. A change from a diploma program to a degree-granting program, or any change in degree or certificate-granting authority or practice.
2. The change in location or addition of an auxiliary classroom or clinic facility outside the main campus, in which only a small portion of the program is offered.
3. A change in the name of the institution.
4. An addition or change in Accredited or Candidate status with another accrediting agency, i.e., if Accreditation or Candidacy has been granted, withdrawn or if the program has been placed on probation by any other agency.
5. Loss of approval, notice of possible adverse action or probation by any state agency that either approved the institution/program to operate, to grant

degrees/diplomas, or approved its graduates to take a licensing examination.  
(revised 07-2009)

6. A change in upper management.
7. A significant change to the present facilities.
8. A significant change to the Candidate program.
9. A significant alteration in the size of the faculty or student body. If the number of enrolled students as reported in an institution/program's ACAOM annual report increased by 25% or more as compared to student enrollment reported in the annual report for the previous year, the institution must submit an analysis of the impact of the enrollment increases on the capacity of the institution and its AOM programs to continue to meet ACAOM standards.  
(revised 07-2009)
10. Any matter that might be deemed to have a significant impact upon the character or quality of the program.
11. The addition of another program if the institution is accredited by an institutional accrediting agency recognized by the U.S. Secretary of Education.

#### 1.14.2 Substantive Changes

Substantive changes require prior notice by the institution/program and advance approval by the Commission to ensure that the change will not adversely impact the institution, its candidate program, or compliance with ACAOM Eligibility Requirements, Standards and Criteria. Plans for substantive changes, except as otherwise noted, are to be reported to the Commission at least 90 days in advance of the change to permit Commission approval before the change is instituted. Plans for substantive change numbers 1, 3, 6 and 8 are to be reported at least six months in advance to permit Commission approval before the change is instituted. Plans for substantive change numbers 4 and 5 are to be reported to the Commission at least one year in advance to permit Commission approval before the change is instituted. Commission review of the change may require a site visit. Forms for reporting on plans for substantive changes can be obtained from the Commission's main office. The Commission may, *at its discretion*, permit notification in less than the applicable notice period. The Commission may also require that the program suspend implementation of the change pending Commission action, e.g., because insufficient information was furnished, because insufficient institutional evaluation has taken place). Substantive changes may not be initiated by the program prior to the program's receiving approval from the Commission. When a substantive change is made, the Candidacy of the program is maintained until a full review of the change is completed. (revised 07-2009)

The Commission will not review or approve a substantive change for a candidate institution or program on probation except when the change addresses and overcomes those deficiencies noted in probation.

The Commission considers the following to be substantive changes.

1. A change in the type of program offered by the program (e.g., change from an Acupuncture to an Oriental Medicine program). (Six month notice)
2. A change in the location of the full institutional operation. (Note: A Candidate program may not develop a branch campus while in Candidacy status.) (90 day notice)
3. The offering in another language of the same program that is in Candidate status. (Six month notice)
4. The development of a doctoral-level program in acupuncture or Oriental medicine. (One year notice)
5. The addition of a separate program when the institution is not institutionally accredited by an agency recognized by the U.S. Secretary of Education. (One year notice)
6. The addition of another program in the field. (Six-month notice)
7. A change in the ownership or control or in the legal status of the institution (90-day notice)
  - a. For non-profit institutions: a change in the majority of the membership of the Board, a change in the sponsorship of the institution, or the initiation or change of affiliation or merger with another/other institution(s), or any other matter that affects ownership or control.
  - b. For proprietary or for-profit institutions: the sale or change of equity or change in the majority ownership of stock, or the initiation or change of affiliation or merger with another institution(s), or any other matter that affects ownership or control.
  - c. A change in the tax status (e.g., for-profit to non-profit or vice versa) of the institution.
  - d. A change in the governance structure of the institution (e.g., from a sole proprietorship or partnership to a corporation or vice versa).

e. A change in ownership or control may require the institution and its program to undergo a total re-evaluation, which would place the program into a new accreditation cycle. If required by the Commission, the institution/program must prepare a new Eligibility Report and host a Team Site Visit with corresponding fees paid to the Commission for the review.

8. A change in the mission or objectives of the institution. (Six month notice)

9. A change from clock to credit hours or vice versa, or a significant increase in clock hours, credit hours or program length. (90 day notice)

10. Teach-Out Plans and Agreements: an institution must submit a teach out plan upon the occurrence of any of the following events: a) the US Department of Education has notified the Commission that it has initiated action against the institution to limit, suspend, or terminate the institution's participation in Title IV HEA programs and that a teach out plan is required; b) ACAOM acts to withdraw, terminate or suspend accreditation or candidacy status; c) the institution notifies ACAOM that it intends to cease operations of its AOM program(s); or, d) a State licensing or authorizing agency provides notice that an institution's license or legal authorization to provide an educational program in AOM has been or will be revoked. Refer to Section 3.11 – *Policy Statement on Closure of an Institution or Program, Teach-Out Plans and Agreements* of this Manual. (90 day notice) (revised 07-2009)

#### 1.14.3 Public Disclosure Regarding Substantive Change

**Unless otherwise specified in the Commission's official letter approving a substantive change, substantive change approval relative to the offering of a new program pursuant to these Sections does not constitute candidacy or accreditation of the subject program, but rather only signifies a determination by the Commission that the implementation and operation of the program in question will not adversely affect the capacity of the institution to continue to meet Commission Eligibility Requirements and Standards. It is therefore the affirmative obligation of each institution holding status with the Commission to ensure that members of the public are provided full and accurate information concerning the status of programs that are *not* accredited or pre-accredited (candidacy) by the Commission.**

Once an institution has received substantive change approval respecting the implementation and operation of a program in the field of acupuncture and Oriental medicine that is not subject to accreditation or candidacy by ACAOM, the institution must:

1. Include in its public announcements and other publications, including recruiting literature, catalogs, enrollment agreements, websites, and print and online advertisements, the following statement:

***The [name of school] [description of unaccredited/non-candidate program] is not accredited or preaccredited (candidacy) by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). Graduates of this program are not considered to have graduated from an ACAOM accredited or candidate program and may not rely on ACAOM accreditation or candidacy for professional licensure or other purposes.***

A statement such as the one above must be displayed immediately adjacent to and as prominently as any reference to ACAOM's candidacy or accreditation.

2. If the subject program is accredited or pre-accredited by another accrediting agency the institution may make the following additional disclosure:

***This program is accredited/pre-accredited by [name of accrediting agency], which is located at \_\_\_\_\_, telephone: \_\_\_\_\_.***

3. If the school intends to seek ACAOM accreditation for the program, the institution may make the following additional disclosure:

***This program is eligible for ACAOM accreditation and [name of school] is currently in the process of seeking ACAOM candidacy/accreditation for the program. However, [name of school] can provide no assurance that candidacy or accreditation will be granted by ACAOM.***

4. If students enrolled in the program, the offering of which has obtained substantive change approval pursuant to ACAOM substantive change policies would not be eligible to participate in the Federal programs of financial assistance pursuant to Title IV of the Higher Education Act of 1965, as amended, the school must include the following statement:

***Students enrolled in this program are not eligible to participate in the Federal grant and loan programs.***

## 1.15 Adverse Actions

### 1.15.1 Probationary Candidacy

The Commission may, for reasonable cause, place a program on Probationary Candidacy. An institution/program placed upon probation shall receive written notice of the reason for probationary status and a notice of the right to reconsideration and appeal of such a decision under Section 3.5 of this Manual.

The placing of a program on probation is a clear warning that, if the program does not substantially correct the deficiencies noted by the Commission by the end of the probationary period, Candidacy status will be withdrawn.

The Commission may take action to place a candidate program on probation if:

1. Evidence of progress toward meeting the ACAOM Standards and Criteria is lacking;
2. The circumstances under which the program was admitted to Candidacy are substantially altered;
3. The program appears to be in substantial non-compliance with any of the Commission's Eligibility Requirements, Standards or Criteria;
4. The program violates the Commission's procedures.

Probationary Candidacy shall be limited to a specific time period, which may be extended by the Commission upon a showing of progress toward remediating the deficiency(ies) that led to the probation and any other deficiencies that developed or became apparent in the interim provided. The probationary period, as extended, may not extend beyond one year from the time probation began unless the Commission, for good cause, determines to further extend the period. If the deficiencies are corrected within the probationary period, probationary status shall be lifted. If the deficiencies are not corrected within the probationary period, Candidacy will be withdrawn. In no event shall probationary status extend beyond the maximum period of candidacy status, including any extensions thereto.

A program placed on Probationary Candidacy must publicize that status to its students, faculty, administration, and applicant pool within 30 days of the Commission action to place the program on probation, or within 30 days of the disposition of a request for reconsideration or appeal, if either is filed, whichever shall later occur. The Commission shall publicize Probationary Candidacy in accordance with Section 3.2 of this Manual.

#### *1.15.2 Withdrawal of Candidacy Status*

The Commission may withdraw Candidacy status from a program directly, after due notice, if:

1. The deficiencies to be corrected during a Probationary Candidacy period are not corrected within that period;
2. The Candidate program fails to achieve accredited status within three years of acceptance as a Candidate, or within any period of extension granted by the Commission;
3. The program has not corrected the specific Requirements of Candidacy within the time set by the Commission and without cause satisfactory to the Commission;
4. The Commission concludes that the Candidate program has engaged in illegal conduct or is deliberately misrepresenting itself or presenting false information to the faculty, staff, students, the public or the Commission;
5. The Candidate program fails to provide fully and truthfully all pertinent information and materials requested by the Commission;
6. The Candidate program does not submit its annual report, progress report, interim report or any other report required by the Commission;
7. The Candidate program refuses to host a required site visit;
8. The program fails to seek and obtain advance approval by the Commission of any “substantive” change or addition;
9. The program fails to report to the Commission, with complete supporting documentation, the inception or installation of a “non-substantive” change within 30 days of the change;
10. The program fails to pay a Candidacy fee, sustaining Candidacy dues, site visit fee or any other dues or fee sets by the Commission within the time limit set by the Commission; or
11. The program no longer exists or is not functional.

Except for item #1 above, the Commission need not place a program on probation before withdrawing Candidacy.

Upon authorization of the institution’s governing entity, the Chief Executive Officer of the institution in which the candidate program is located may request the removal of the program from Candidacy at any time. The Commission will comply with such a request and delete the program from the ACAOM list of Candidate programs.

A program whose Candidacy has been withdrawn or which withdraws from Candidacy may not reapply for Candidacy until, in the judgment of the Commission, the reasons for the withdrawal of Candidacy have been satisfactorily addressed.

If Candidacy status is withdrawn by the Commission or the program withdraws from Candidacy or permits its Candidacy to lapse, the program must publicize that its Candidacy has been withdrawn to its students, faculty, administration, and applicants within 30 days of either the Commission action to withdraw, the program's voluntary withdrawal from Candidacy, or within 30 days of the disposition of a request for reconsideration or appeal, if either is filed, whichever shall later occur. All references and claims of Candidacy from catalogs, advertising, and other printed promotional materials must be deleted. The Commission shall publicize the withdrawal of Candidacy in accordance with Section 3.1 of this Manual.

## PART II

### Policies and Procedures of the Self-Study Process

#### 2.0 Overview

During the period of Candidacy, the program submits annual and bi-annual progress reports and submits its annual sustaining candidacy dues, submits its letter of intent to pursue initial accreditation, attends a Self-Study workshop, conducts its Self-Study process, submits a Self-Study Report, hosts an accreditation site visit, and submits a formal institutional response to the site visit report with other required documentation. During this period, the Commission maintains liaison with the Candidate program.

While Commissioners, Commission staff, and Visiting Team members are unable to act as formal consultants to the candidate program, the Commission staff is available to provide technical assistance to programs throughout the accreditation process, including information and advice on the purposes of and how to prepare a Self-Study.

During the candidacy period, the program should focus on implementing its plans for meeting the Standards and Criteria for Accreditation and implementing its Self-Study process according to the guidance provided by the Commission in the *ACAOM Self-Study Guide*. The term “self-study” is intended to convey the concept that self-study is, in itself, an assessment, examination and evaluation of the institution/program, whether it be a program in a small specialized institution or one in a large departmentalized institution, by the entire educational community - board, faculty, students, administration and staff. The process culminates in the drafting of the findings and recommendations of the self-study for the program's own action. This report of the collected findings, data and other materials is called the “Self-Study Report.” The self-study should not be viewed as a single purpose, one-time event required to achieve initial or renewed accreditation. Rather, the self-study process and the documentation of outcomes are most effective when there is a broad and ongoing institutional and program commitment to assessment.

A program may complete the self-study process and submit its Self-Study Report at any time during the Candidacy period after the Commission has accepted the school's first annual report and its bi-annual progress reports, but must submit the report no later than 10 months prior to the end of the Candidacy period, unless it can show cause for an extension (Section 1.13.1 of this Manual). A program is only eligible for Initial Accreditation after it has graduated at least one class of students.

If a program is making sufficient progress toward its self-study, but anticipates that it will not complete the self-study by the due date, the program may request that the Commission extend its Candidacy status for a one-year period. The Commission, at its discretion, may extend the Candidacy period for a maximum of one year pursuant to Section 1.13.1. In no case will the Commission grant more than two one-year extensions to the three-year candidacy period. Should the program fail to achieve accredited status within three years of acceptance as a Candidate, or within any period of extension granted by the Commission, the Commission will withdraw Candidacy status from the program.

A program may withdraw its application for Accreditation at any time during the Candidacy period before the Commission makes a final decision on its accreditation status.

## **2.1 Annual and Biannual Progress Reports during Candidacy**

Within one year of achieving Candidacy, a program submits to each member of its Review Committee a copy of its first annual report. Annual reports are due on March 1 if Candidacy was achieved at a summer meeting of the Commission, or September 1 if Candidacy was achieved during a winter meeting. Subsequent annual reports must be submitted each year during Candidacy to the Commission office.

The first annual report must include:

1. the program statistics required on the annual report form,
2. changes that have occurred within the program during the past year and the impact of these changes on the institution and its program,
3. the program's plans for self-study, including an outline of the process that the program is using to conduct its self-study;
4. a brief outline of the major issues to be discussed and assessed in the self-study; and
5. a timeline for submitting the Self-Study Report.

The Commission also requires candidate programs to submit biannual progress reports on the program's progress in correcting any deficiencies identified in prior Commission reviews and implementing its plans for meeting fully the Standards and Criteria for Accreditation. These reports are due on the dates specified in the Commission's candidacy action letter.

## **2.2 Letter of Intent**

Prior to attending the mandatory Self-Study Workshop (for a master's program) and the submission of a Self-Study Report (master's-level and doctoral programs), the program must submit a "Letter of Intent" to pursue accreditation or reaccreditation status, which has been authorized by the institution's governance structure.

The letter of intent must be received by the Commission's office no later than September 1 for a program to be reviewed for (re) accreditation at the Commission's summer meeting, or by March 1 to be reviewed at the Commission's winter meeting.

## **2.3 Self-Study Workshop**

Following submission of a letter of intent, representatives of a master's level program seeking accreditation or reaccreditation must attend a Self-Study Workshop prior to submission of its Self-Study Report to the Commission.

Workshops are conducted by the Commission annually, either as part of a national AOM meeting or as a separate workshop at the Commission office. Information regarding the time and location of workshops and registration instructions are posted to the Commission web site, [www.acaom.org](http://www.acaom.org) under the "News and Meetings" link. Because there should be broad participation in the preparation of a Self-Study Report, a team consisting of the Program Director and other key personnel should attend this workshop.

## **2.4 The Self-Study Report**

The program submits a Self-Study Report that addresses and documents the degree to which it is achieving its mission, goals, objectives and outcomes and compliance with ACAOM Standards and Criteria. The program prepares three copies of its Self-Study Report in paper format and one electronic copy.

The program submits by October 1 for review of (re) accreditation status at a Commission summer meeting, or by April 1 for review at a winter meeting.

One paper and one electronic copy of the Self-Study Report are submitted to the Commission office and one copy is submitted to each member of the Commission Review Committee for the program.

## **2.5 Self-Study Report Review**

Commission staff reviews the Self-Study Report to determine whether the report is reflective of an institution-wide self-study, satisfies the requirements in the Self-Study Guide, and whether the program is ready for a site visit. Based on the review, staff may require additional or clarifying information from the program or may reject the report if it does not reflect an institution-wide self study, does not meet the requirements of ACAOM's Self-Study Guide, or does not adequately document compliance with Commission Standards and Criteria. A program may appeal a decision to reject a Self-Study Report by submitting the report to members of the Review Committee within 5 business days of the date the program is notified of the rejection. An appeal may only be made on the following grounds:

- 1) that the program demonstrates with specificity that staff, in its review of the report, failed to adhere to the Commission's published procedures in a manner that was materially prejudicial to the program; or,
- 2) that the program demonstrates that the decision to reject the report was inconsistent with the contents of the report and was arbitrary and capricious. The basis for an appeal relative to ground #2 is expressly limited to the report that was submitted by the program and reviewed by staff. The Review Committee will not accept or consider additional documentation or evidence as part of an appeal that was not contained in the report submitted by the program. Final rejection decisions may result in either the loss of Candidacy/accreditation or deferral of action on (re) accreditation.

Deferral of action on accreditation or reaccreditation for a deficient Self-Study Report or process will be for a one-year period. During the period of deferral the program may, at the Commission's discretion, be placed on probationary status. In instances where a Self-Study Report is rejected and action on reaccreditation is deferred, the maximum reaccreditation period, which can be subsequently granted to the program, will be reduced by the period of deferral.

## **2.6 (Re) Accreditation Site Visit**

A three to four-day (re) accreditation Site Visit is conducted to validate the contents of the Self Study Report and to assess compliance with ACAOM Standards and Criteria. The Commission may notify regional, state or other accreditation agencies and other state licensing authorities that may be interested in the impending visit, inviting the possibility of joint visits.

### *2.6.1 Appointment of Site Visit Teams*

The Commission constructs an appropriately qualified site visit team to assess the degree to which the program meets ACAOM Standards and Criteria for purposes of granting or denying (re)accreditation status.

Site Visit team members shall include:

- One or more acupuncture and Oriental medicine educators who are familiar with AOM curricula, methods of training, program assessment and development.
- One or more acupuncture and Oriental medicine practitioners who are competent to assess the quality of AOM training;
- A management specialist in administration and the business aspects of school operation;
- An educational specialist in instructional methods and educational processes;

A practitioner member on the site visit team is defined as an individual who is regularly engaged, as his or her primary professional role, in the provision of acupuncture and Oriental medicine services and has relevant expertise in reviewing the quality of acupuncture and Oriental medicine training. An acupuncture and Oriental medicine educator is defined as an individual who has in-depth knowledge in one or more areas of acupuncture and Oriental medicine and participates in acupuncture and Oriental medicine education, methods of training, evaluation and program development. While the site visit team must have at least one representative per category, it is not unusual for members of a team to have expertise in at least one or more of the other categories. If the Commission should determine that the particular circumstances of a program being visited require particular expertise in addition to those listed above, a person with that expertise may be added to the site visit team.

The program has an obligation to notify the Commission of any proposed site visit team members who have conflicts of interest. The program may advise the Commission of any objection to the proposed site visit team members documenting the reasons for that objection. If the objection is based on reasonable cause, as determined by the Commission, the Commission shall replace the visitor(s).

Reasonable cause is defined as bias, conflict of interest or other prejudicial infirmity. The Commission will not knowingly appoint a site visitor to a team who has potential or apparent conflicts of interest with the program being reviewed (See Section 3.8.1 of this Manual).

### *2.6.2 The Visiting Team Summary Report*

During the site visit, the team prepares for the Commission a written site visit report of their findings relative to compliance with the Standards and Criteria for Accreditation as well as the degree to which the program is achieving its mission, goals, objectives and outcomes.

The site visit team chair submits a copy of the draft site visit report to the program. The program is provided five business days to communicate to the site visit team perceived errors of fact contained in the report. The site visit team may, at its discretion, amend the report to reflect the factual corrections. A copy of the final site visit report is submitted to the program and the Commission.

### *2.6.3 Formal Institutional Response to Site Visit Report*

The program must submit a formal institutional response to the final site visit report with the requisite number of copies of its catalog and financial statements. **The program is provided not less than ten (10) calendar days to submit its FIR.** The formal institutional response may not exceed 15 pages including essential documentation. As such, the formal institutional response may exceed this limit only in those rare instances in which the institution or program can document that the findings of the team are at variance with the facts being supplied by the institution. In no instance may a formal institutional response exceed 25 pages.  
(revised 07-2009)

## **2.7 Commission Review of Programs Seeking Accreditation**

The Commission considers the (re) accreditation status of a program based upon the program record. A hearing with the program to clarify the record may be conducted at the request of the Commission or the program. The Chief Executive Officer of the institution, Program Director and/or other person(s) authorized to represent the program should appear for the hearing.

Written third party testimony may be submitted on a program that is being reviewed for (re) accreditation as required under the U.S. Secretary of Education's Criteria for Recognition. Any third party testimony received by the Commission is submitted to the program for its opportunity to respond in writing.

The Commission deliberates and takes action on the (re) accreditation of the program in an Executive Session (Winter/Summer Cycles) based on its review of the record. Only Commissioners and ACAOM staff without an actual or potential conflict of interest may participate in the program deliberations. No other person may be present without the approval of the program and the Commission. However, the Commission may, at its discretion, invite to observe its deliberations any official of a state, federal or accreditation agency.

## **2.8 Range of Commission Actions on Accreditation**

The Commission considers institutional reports in conjunction with site visit reports and other information in the record to determine whether an institution meets ACAOM Standards and Criteria for accreditation as published in *ACAOM Structure, Scope, Process, Eligibility Requirements, Standards and Criteria Manual*.

The Commission takes action on initial or renewal of accreditation status following a review of the record regarding the institution's compliance with Commission Standards and Criteria. Other actions may follow an on-site evaluation, a follow-up interim report, an annual report, substantive change request, or may occur at any point during accreditation.

The Commission may conduct a review of an accredited institution or program at any time if it has evidence that the institution/program may no longer meet Commission Eligibility Requirements, Standards or Criteria for Accreditation. If the institution reports developments and changes or conducts activities that affect the educational effectiveness of the institution/program or its ability to meet ACAOM standards, the Commission reserves the right to review the institution's accredited status without regard to any previously indicated schedule. If the Commission determines that the institution no longer meets ACAOM Eligibility Requirements or Standards and Criteria, the Commission will require an institution to "Show Cause."

Show Cause is a non-compliance action requiring an institution to demonstrate why its accredited status should not be removed. Show Cause may or may not result in the adverse action of Withdrawal of Accreditation.

If an institution or program fails to submit a required follow-up or other report, including its annual report, fails to respond to Commission requests for information or scheduling a visit, or has not submitted dues or fees owed ACAOM by the required deadline, the institution will be considered to have voluntarily allowed its accreditation to lapse. The institution will be allowed to present its case for continued accreditation status by means of a substantive report and/or an on-site evaluation, or other action as determined by the Commission. The Commission may require the institution to show cause as to why its accreditation status should not be removed. All actions are published and made available to the public in accordance with Commission policy.

## **2.9 Types of Commission Actions**

### *2.9.1 Accrediting Actions*

In the event that an institution or program meets the Commission's Eligibility

Requirements, Standards and Criteria for Accreditation and there is no question or concern regarding the institution's compliance, the Commission may act to grant accreditation or reaccreditation.

#### *2.9.2 Monitoring Actions*

A monitoring action indicates that the Commission has identified one or more standards and criteria with which an institution may not be in compliance if the institution fails to give due attention and continue to make progress. Interim reports, annual reports, supplemental information reports, monitoring reports and interim site visits constitute the principle methods for implementing a monitoring action.

#### *2.9.3 Procedural Actions*

The Commission takes a procedural action when it requires further information in order to make a decision regarding accreditation. The Commission may postpone a decision and request a supplemental information report when it has determined that there is insufficient information to substantiate institutional/program compliance with one or more ACAOM Standards or Criteria for Accreditation. Supplemental information reports are intended only to allow the institution/program to provide further information, not to give it time to formulate plans or initiate remedial action. A Lapse of Accreditation is also considered to be a procedural action.

#### *2.9.4 Non-Compliance Actions*

A non-compliance action indicates that the Commission has identified one or more areas in which the institution or program does not meet the Eligibility Requirements, Standards or Criteria for Accreditation. These areas are identified as requirements in a team, reviewers', or other report, and they are specifically stated in the Commission's action.

A Show Cause action may follow a non-compliance action requiring an institution/program to demonstrate why the institution/program's accreditation should not be removed. For Show Cause, the Commission may require a substantive report and/or an on-site evaluation.

#### *2.9.5 Adverse Actions*

In an adverse action, the Commission withdraws or denies accreditation status or places the institution/program on probation. (See, **2.15, Adverse Actions**) A program that has been denied accreditation or that has had its accreditation status withdrawn may begin the process of accreditation again by submitting a new Eligibility Report for Candidacy *no earlier than one calendar year* from the date

accreditation status was denied or withdrawn. The program must demonstrate that it has corrected the deficiencies noted in the former accreditation process.

### *2.9.6 Administrative Actions*

In the event that the Commission is unable to evaluate the institution/program due to circumstances which the Commission determines to be outside of the institution/program or the Commission's control, the Commission may take an administrative action. This action does not speak to the inability of the institution or program to meet ACAOM Standards, but rather the ability of the Commission to conduct an appropriate review and to determine compliance. The program maintains its candidacy or accreditation status with the Commission during an administrative action. These actions are as follows:

#### Extend Accreditation or Candidacy -

The Commission may act to extend accreditation or candidacy for a period not to exceed one year if the Commission determines that the delay is appropriate to ensure a current and accurate representation of the institution/program or in the event of circumstances beyond the institution's control (e.g., natural disaster resulting in suspension of academic programs, some instances of change in ownership, or U.S. State Department travel warnings to areas in which institution is located). The institution maintains its status with the Commission during this period.

#### Suspend Accreditation or Candidacy -

The Commission may act to Suspend Accreditation or Candidacy if, after accreditation or candidacy has been extended for one year, it is not possible to conduct an appropriate review of the institution/program. This action is considered to be a procedural action and would result in Removal of Accreditation or Candidacy if the visit cannot be performed within the one year time frame. The institution maintains its status with the Commission during this period. An action to Suspend Accreditation or Candidacy is followed by an Adverse Action if the circumstances restricting the Commission's review of the institution/program are not changed. If circumstances change to allow the Commission's review, the Commission may at its discretion require resubmission or revision of any reports on which the review would be based.

## **2.10 Types of Follow-Up**

The Commission may require some level of follow-up to ensure continued compliance with the requirements of accreditation, to provide more information in order to make a decision regarding (re) accreditation, or simply to keep the Commission informed of institutional/program progress. Levels of follow-up include

reports and visits.

Commission actions of postponement or warning, none of which is deemed to constitute an adverse action under these procedures, automatically result in further Commission review of the institution's status prior to the expiration of the maximum time period allowed for such action. Such review will either result in the lifting of the non-adverse action, the imposition of a subsequent non-adverse action, or the imposition of an adverse action. The Commission is not bound by the sequence suggested above nor precluded from taking an action at any level (e.g., warning need not precede probation; the next action following warning may be show cause).

#### *2.10.1 Interim Report*

The Commission may direct the institution/program to describe in an interim report its progress relative to remediating findings of the Commission on (re) accreditation or at any time during the accreditation period. The Commission also may require the program to address activities that were being planned or implemented at the time of the on-site evaluation to enhance institutional/program effectiveness.

#### *2.10.2 Supplemental Information Report*

In the event that the Commission has determined that there is insufficient information to substantiate institutional/program compliance with ACAOM standards, the Commission will request a Supplemental Information Report. These are intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial actions.

#### *2.10.3 Monitoring Report*

The Commission will request a monitoring report when it is concerned about the potential for future non-compliance with one or more Commission Standards and Criteria, when issues are more complex or more numerous, or when the issues require a more substantive, detailed response. Institutions that are required to submit monitoring reports must report on compliance with specific standards at regular designated intervals as determined by the Commission (e.g., quarterly, bi-annually).

#### *2.10.4 Interim Site Visit*

An interim visit is most often conducted in conjunction with a request for a monitoring report, interim report or supplemental information report. A visit is required if verification of institutional/program status and/or progress requires an on-site review, in addition to a paper review. A visit may be conducted by a staff or individual evaluator, by a small team, or by a full team, depending on the nature

and number of Commission concerns. A visit is often required with a Show Cause action.

Reports submitted for follow-up actions may be accepted, acknowledged, or rejected. The Commission “Accepts” a report when its quality, thoroughness, and clarity are sufficient to respond to all of the Commission’s concerns, without requiring additional information in order to assess the institution/program’s status. The Commission “Acknowledges” a report when it addresses the Commission’s concerns only partially because of incomplete content or insufficient quality. The Commission may require additional information in order to assess the institution/program’s status. A report is “Rejected” when its quality or substance are insufficient to respond appropriately to the Commission’s concerns. The Commission requires the institution/program to resubmit the report and may, at its discretion, require a visit. Note that the Commission may “acknowledge receipt of,” “reject” or “grant” a Substantive Change request.

## **2.11 Time Frames for Follow-Up**

Current U.S. Department of Education regulations require a maximum two-year time frame for the Commission to withdraw accreditation when an institution has been found not to be in compliance with Commission Standards or Criteria.

Time limits are based upon the date of Commission action (not the date of the team visit). The Commission may, at its discretion, require an institution to report on progress sooner than the maximum time allowed, and may for good cause extend the time for demonstrating compliance. Good cause for extending the duration of a non-adverse action shall exist, for example, when in its discretion the Commission determines that the institution/program is making a good faith effort to remedy existing deficiencies and a reasonable expectation exists that such deficiencies will be remedied within the period of extension if adverse action is postponed. No single period of extension may be greater than the length of the initial action.

If another accrediting body, the U.S. Secretary of Education or a state Department of Education should take adverse action against an ACAOM-accredited institution or program, the Commission will promptly review the program to determine if it is in compliance with the Standards and Criteria. Except for good cause, the Commission will not knowingly take action on any institution or program that is the subject of an action potentially leading to suspension, revocation, or termination of accreditation, candidacy or authorization by a state agency or by another accrediting agency or on any institution that has been notified of a threatened loss of accreditation, candidacy or authorization by a state agency or by another accrediting agency. In such instances of good cause, the Commission will develop an explanation, consistent with its standards, why the action of the other accreditor or

agency does not preclude the Commission's grant of or continuation of accreditation. Such explanation shall be provided to the US Department of Education.

Adverse Commission actions are subject to appeal in accord with due process as provided for in the Commission's "Reconsideration and Appeal" policies. An institution/program's accreditation status, subject to the maximum (re)accreditation period under ACAOM policies, is maintained: (a) while it complies with the Commission's request for information, additional reports, special visits, or other non-adverse action; and, (b) during an institution's appeal of a Commission action.

The program is provided the opportunity to respond formally after the final action is taken by the Commission. The program is notified, in writing, of the Commission action within 30 days of the action.

## **2.12 Acceptance of Initial Accreditation**

Within 10 business days of receiving notification of initial accredited status, a program must submit one-time, non-refundable initial accreditation acceptance dues. The formal acceptance of accreditation by a program is the submission to the Commission of the required accreditation acceptance dues. Failure to accept (re) accredited status by paying the dues within 30 days of receiving notification of (re) accredited status, shall result in the lapse of accreditation and shall require the re-institution of the entire accreditation process, including Candidacy.

## **2.13 Terms of Accreditation**

### *2.13.1 Length of Accreditation*

Accreditation is valid for the period set forth in the Commission's grant of accreditation - the maximum period for accreditation being seven years. Shorter (re) accreditation periods may be required for new programs, programs that require further development relative to compliance with ACAOM Standards, rapidly changing programs, programs in institutions with recent significant changes, etc. Notwithstanding the length of the accreditation period provided for in the Commission action, the Commission may determine for good cause that a program conduct an earlier reaccreditation process. In such instances, the Commission shall notify the program to implement the reaccreditation process and establish a date for the submission of the program's Self-Study Report.

Accredited programs should begin the reaccreditation process no later than two years prior to the date of expiration of the current (re) accreditation period and must report on its progress in implementing the self-study process in its annual reports submitted to the Commission. Master's level programs must attend a Self-Study Workshop prior to submitting a Self-Study Report for reaccreditation.

The Commission, at its discretion and upon the program's request, may grant an extension of the (re)accreditation period. Such an extension may be granted when the Commission has determined that the program has made all due and timely efforts toward reaccreditation, and that information critical to determining the status of the program cannot be provided based on significant events currently bearing on the institution/program. An extension of accreditation may be granted for increments of no greater than a maximum of six months from the end of the accreditation period. The program shall be notified of such extension and of the necessary information that must be provided.

### *2.13.2 The Certificate of Accreditation*

The Certificate of Accreditation is the document presented by the Commission in acknowledgment of the program's accredited status. The Certificate of Accreditation is the property of the Commission and is to be surrendered by the program upon the withdrawal or lapse of accredited status.

### *2.13.3 Advertisement and Announcement of Accreditation*

A program achieving (re) accreditation shall receive, along with notification of accreditation, designated language to be used in institutional publications that refer to the program's accreditation status. The language shall be similar to the following statement:

The {name of the program} of the {name of institution} is accredited by the Accreditation Commission for Acupuncture and Oriental Medicine ("ACAOM"). ACAOM: Maryland Trade Center #3, 7501 Greenway Center Drive, Suite 760, Greenbelt, MD 20770; Phone (301) 313-0855; FAX (301) 313-0912.

For a doctoral program, the language must also include the following disclaimer statement:

**NOTE: ACAOM is not currently recognized by the US Department of Education for its candidacy or accreditation reviews with respect to doctoral programs in the field.**

Use of language other than the language so designated by the Commission is not permitted without prior written permission from Commission staff.

The program must submit to the Commission, within 30 days of its public announcement of its status, a copy of the announcement of its accredited status. The announcement must include the name, address and telephone number of ACAOM.

The actions of the Commission regarding (re) accreditation of a program shall be published pursuant to Section 3.1 of this Manual. If an institution/program releases information that misrepresents or is misleading with respect to any action by the Commission regarding any action of the accreditation process, or the status of affiliation with the Commission, the Chief Executive Officer of the institution will be notified and informed that corrective action must be taken. If the misrepresentation or misleading information is not promptly corrected, the Commission may, at its discretion, release a public statement in such a form and content, as it deems necessary to provide the correct information.

#### *2.13.4 Annual and Interim Reports*

Annual reports are required of all accredited programs. Reports must be submitted by March 1 for programs reviewed in the summer or by September 1 for programs reviewed in the winter. These reports must include any changes in the program, any additions of programs offered at the institution, and the impact of these changes on other areas of the institution, measures the institution has taken to remedy any weaknesses or deficiencies identified by the Commission in its previous reviews of the institution/program, and any other information required in accordance with the annual report form. The current reviewed financial statement of the program, the budget, the catalog, and required institutional/program statistics must also be provided in the report.

The Commission also seeks continuing evidence of compliance with ACAOM Standards for accreditation to be maintained, and for this purpose, may require reports and/or site visits from accredited programs on deficiencies identified in prior Commission reviews. Such reports are due on the date specified by the Commission and must address all the issues for which clarification is sought. The Commission may require additional information of a program, including reports and/or site visits, on any matter and at any time during accreditation.

#### *2.13.5 Annual Sustaining Accreditation Dues*

Accredited programs are required to pay annual sustaining dues due on the date designated by the Commission for each year the program is in accredited status. The dues are based Dues and Fees Schedule published on the ACAOM web site.

### **2.14 Notification of Institutional Changes**

Accreditation does not transfer automatically when changes occur in the institution/program or in its ownership or control, as such changes could substantially affect the program's policies, staff, curricula, reputation, legal or financial status. The program is required to inform the Commission and, in some cases, seek

approval of changes in the institution according to the following categories of institutional changes: non-substantive and substantive changes.

#### *2.14.1 Non-Substantive Changes*

Non-substantive changes generally do not require prior notice to the Commission. However, an accredited program must notify the Commission with full and complete supporting documentation within 30 days of implementation of any of the following non-substantive changes. Any of these changes may result in further requests for additional information, and/or review and action by the Commission. (revised 07-2009)

1. A change from a diploma program to a degree-granting program, or any change in degree or certificate-granting authority or practice;
2. The change in location or addition of an auxiliary classroom or clinic facility outside the main campus in which only a small portion of the program is offered;
3. A change in the name of the institution;
4. An addition or change in accredited or candidate status with another accrediting agency, e.g., if Accreditation or Candidacy has been granted, withdrawn or if the program has been placed on probation by any other agency;
5. Loss of approval, notice of possible adverse action or probation by the U.S. Secretary of Education or any state agency that either approved the institution to operate, to grant degrees/diplomas, or approved its graduates to take the licensing examination;
6. A change in upper management;
7. A significant change to the present facilities;
8. A significant change to the accredited program;
9. A significant alteration in the size of the faculty or student body. If the number of enrolled students as reported in an institution/program's ACAOM annual report increases by 25% or more as compared to student enrollment reported in the annual report for the previous year, the institution must submit an analysis of the impact of the enrollment increases on the capacity of the institution and its AOM programs to continue to meet ACAOM standards. (revised 07-2009);
10. Any matter that might be deemed to have a significant impact upon the character or quality of the program;
11. The addition of another program if the institution is accredited by an institutional accrediting agency recognized by the U.S. Secretary of Education.

#### *2.14.2 Substantive Changes*

Substantive changes require prior notice by the institution/program and advance approval by the Commission to ensure that the change will not adversely impact the institution, its candidate program, or compliance with ACAOM Eligibility Requirements and Standards. Plans for substantive changes, except as otherwise noted, are to be reported with full and complete documentation to the Commission at least 90 days in advance of the change to permit approval before the change is instituted. Plans for substantive change numbers 1, 3, 6, 8, 9 and 10 are to be reported to the Commission at least six months in advance to permit Commission approval before the change is instituted. Plans for substantive change numbers 4 and 5 are to be reported to the Commission at least one year in advance to permit Commission approval before the change is instituted. Commission review of the change may require a site visit. Forms for reporting on plans for substantive changes can be obtained from the Commission's main office. *At its discretion*, the Commission may permit notification in less than the applicable notice period. The Commission may also require that the program suspend implementation of the change pending Commission action, e.g., insufficient information was furnished or because insufficient institutional evaluation has taken place. Substantive changes may not be initiated by the program prior to receiving approval from a review committee or the full Commission. When a substantive change is made, the accreditation of the program is maintained until review of the change is completed. (revised 07-2009)

The Commission will not review or approve a substantive change for a program on probation except when the change addresses and overcomes those deficiencies noted in probation.

The following are considered to be substantive changes.

1. A change in the type of program offered by the program (e.g., change from an acupuncture to an Oriental medicine program). (Six month notice)
2. A change in the location of the full institutional operation or a branch campus or site where a significant portion of the program is offered. (90 day notice)
3. The offering in another language of the same program that is accredited. (Six month notice)
4. The development of a doctoral level program in acupuncture or Oriental medicine. (One year notice)
5. The addition of a separate program when the institution is not institutionally accredited by an agency recognized by the U.S. Secretary of Education. (One year notice)
6. The addition of another program in the field. (Six month notice)

7. A change in ownership or control or in the legal status of the Institution. (90 day notice)
  - a. For nonprofit institutions: a change in the majority of the membership of the Board, a change in the sponsorship of the institution, or the initiation or change of affiliation or merger with another/other institution(s) or any other matter that affects ownership or control.
  - b. For proprietary or for-profit institutions: the sale or change of equity or change in the majority ownership of stock, or the initiation or change of affiliation or merger with another institution(s), or any other matter that affects ownership or control.
  - c. A change in the tax status (e.g., for-profit to nonprofit or vice versa) of the institution.
  - d. A change in the governance structure of the institution (e.g., from a sole proprietorship or partnership to a corporation or vice versa).

A change in ownership or control may require the institution and its program to undergo a total re-evaluation, which will place the program into a new accreditation cycle. If required by the Commission, the institution/program must prepare a new Self-Study Report and host a site visit within six months of the change.
8. A change in the mission or objectives of the institution. (Six month notice)
9. The establishment of an additional location or branch campus geographically apart from the main campus at which the institution offers at least 50 percent of an AOM education program. Refer to Section 3.4 of this Manual for the Commission's policy governing additional locations and branch campuses. The addition of a new location or branch campus as defined in this section will require a site visit to the site within six months of its establishment and are considered separate institutions that must attain accreditation independent of the parent campus. (Six month notice)
10. A change of classification. An institution may seek reclassification of its auxiliary classroom facility as a branch facility, if it intends to offer at least 50 percent of the AOM educational program at that location. Refer to Section 3.4 for the Commission's policy governing additional locations and branch campuses. (Six month notice)
11. A change from clock to credit hours or vice versa, or a significant increase in clock hours, credit hours, or program length. (90 day notice)
12. Teach-Out Plans and Agreements: an institution must submit a teach out plan upon the occurrence of any of the following events: a) the US Department of Education has notified the Commission that it has initiated action against the institution to limit, suspend, or terminate the institution's participation in Title IV HEA programs and that a teach out plan is required; b)

ACAOM acts to withdraw, terminate or suspend accreditation or candidacy status; c) the institution notifies ACAOM that it intends to cease operations of its AOM program(s); or, d) a State licensing or authorizing agency provides notice that an institution's license or legal authorization to provide an educational program in AOM has been or will be revoked. Refer to Section 3.11 – *Policy Statement on Closure of an Institution or Program, Teach Out Plans and Agreements* of this Manual. (90 day notice) (revised 07-2009)

#### 2.14.3 Public Disclosure Regarding Substantive Change

**Unless otherwise specified in the Commission's official letter approving a substantive change, substantive change approval relative to the offering of a new program pursuant to these Sections does not constitute candidacy or accreditation of the subject program, but rather only signifies a determination by the Commission that the implementation and operation of the program in question will not adversely affect the capacity of the institution to continue to meet the Commission's accreditation standards. It is, therefore, the affirmative obligation of each institution holding status with the Commission to ensure that members of the public are provided full and accurate information concerning the status of programs that are *not* accredited or pre-accredited (candidacy) by the Commission.**

Once an institution has received substantive change approval respecting the implementation and operation of a program in the field of acupuncture and Oriental medicine that is not subject to accreditation or candidacy by ACAOM, the institution must:

1. Include in its public announcements and other publications, including recruiting literature, catalogs, enrollment agreements, websites, and print and online advertisements, the following statement:

***The [name of school] [description of unaccredited/non-candidate program] is not accredited or preaccredited (candidacy) by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). Graduates of this program are not considered to have graduated from an ACAOM accredited or candidate program and may not rely on ACAOM accreditation or candidacy for professional licensure or other purposes.***

Such statement must be displayed immediately adjacent to and as prominently as any reference to ACAOM's candidacy or accreditation.

2. If the subject program is accredited or pre-accredited by another accrediting agency, the institution may make the following additional disclosure:

***This program is accredited/pre-accredited by [name of accrediting agency], which is located at \_\_\_\_\_, telephone: \_\_\_\_\_***

3. If the school intends to seek ACAOM accreditation for the program, the institution may make the following additional disclosure:

***This program is eligible for ACAOM accreditation and [name of school] is currently in the process of seeking ACAOM candidacy/accreditation for the program. However, [name of school] can provide no assurance that candidacy or accreditation will be granted by ACAOM.***

4. If students enrolled in the program, the offering of which has obtained substantive change approval pursuant to ACAOM substantive change policies would not be eligible to participate in the Federal programs of financial assistance pursuant to Title IV of the Higher Education Act of 1965, as amended, the school must include the following statement:

***Students enrolled in this program are not eligible to participate in the Federal grant and loan programs.***

## **2.15 Adverse Actions**

### *2.15.1 Probationary Accreditation*

The Commission may, for reasonable cause, place a program on Probationary Accreditation. A program placed upon probation shall receive written notice of the reason for probationary status and a notice of the right to reconsideration and appeal of such a decision under Section 3.5 of this Manual.

The placing of an institution or program on probation is a clear warning that, if the program does not substantially correct the deficiencies noted by the Commission by the end of the probationary period, accreditation status will be withdrawn.

The Commission may take action to place an accredited program on probation if:

1. Evidence of progress toward complying with ACAOM standards and criteria previously identified by the Commission is lacking;
2. The circumstances under which the program was accredited are substantially altered;
3. The program appears to be in substantial non-compliance with any of the Commission's Eligibility Requirements, Standards or Criteria;

4. The program violates the Commission's procedures.

Probationary accreditation shall be limited to a specific time period, which may be extended by the Commission upon a showing of good faith progress toward remedy of the deficiencies that led to the probation and any other deficiencies that developed or became apparent in the interim provided the probationary period, as extended, may not extend beyond one year from the time probation began unless the Commission, for good cause, determines to further extend the period. If the deficiencies are corrected within the probationary period, probationary status will be lifted. If the deficiencies are not corrected within the probationary period, accreditation will be withdrawn.

A program placed on Probationary Accreditation must publicize that status to its students, faculty, administration, and applicant pool within 30 days of the Commission action to place the program on probation, or within 30 days of the disposition of a request for reconsideration or appeal if either is filed, whichever shall later occur. The Commission shall publicize Probationary Accreditation in accordance with Section 3.2 of this Manual.

#### *2.15.2 Withdrawal of Accreditation*

The Commission may withdraw Accreditation from a program directly, after due notice, if:

1. The deficiencies to be corrected during a probationary accreditation period are not corrected within that period;
2. The program has not corrected the specific requirements of accreditation within the time period specified by the Commission and without cause satisfactory to the Commission;
3. The Commission concludes that the program has engaged in illegal conduct or is deliberately misrepresenting itself or presenting false information to the faculty, staff, students, the public or the Commission;
4. The program fails to provide fully and truthfully all pertinent information and materials requested by the Commission;
5. The program does not submit its annual report, progress report, interim report, Self-Study Report or any other report required by the Commission;
6. The program fails to seek and obtain advance approval by the Commission of any "substantive" change or addition ;
7. The program fails to report to the Commission, with complete supporting documentation, the inception or installation of a "non-substantive" change within 30 days of that change;

8. The program fails to pay the accreditation acceptance dues, sustaining accreditation dues, site visit fees, or any other fees set by the Commission within the time limit set by the Commission; or
9. The program no longer exists or is not functional.

Upon authorization of the institution's governing entity, the Chief Executive Officer of the institution in which the accredited program is located may request the removal of the program from accreditation status at any time. The Commission will comply with such a request and delete the program from the official list of accredited programs.

A program whose accreditation has been withdrawn or which withdraws from accreditation may not reapply for accreditation until in the judgment of the Commission the reasons for the withdrawal of accreditation have been satisfactorily addressed.

If accreditation is withdrawn by the Commission or the program withdraws from accreditation or permits its accreditation to lapse, the program must publicize that its accreditation has been withdrawn to its students, faculty, administration, and applicants within 30 days either of the Commission action to withdraw accreditation, the program's voluntary withdrawal from accreditation, or within 30 days of the disposition of a request for reconsideration or appeal, if either is filed, whichever shall later occur. All references and claims of accreditation in catalogs, advertising, and other printed promotional materials must be deleted. The Commission shall publicize the withdrawal of accreditation in accordance with Section 3.2 of this Manual.

## PART III

# GENERAL POLICIES AND PROCEDURES OF THE ACCREDITATION PROCESS

### 3.0 Questions & Answers About Accreditation

#### 1. What is a "specialized and professional accrediting agency?"

A specialized and professional accreditation agency is an accrediting agency within a specific professional, occupational or disciplinary area. It accredits programs that prepare professionals or members for a special occupation. Specialized accreditation assures that a program is educationally sound and relevant to current practice in the professional field.

ACAOM is a specialized accreditation agency, recognized by the U.S. Secretary of Education.

#### 2. What is a "first professional master's degree" program?

A "professional master's degree" program is defined as "a coherent program designed to assure the mastery of specified knowledge and skills," emphasizing "instruction in professional affairs and practice" and often serving "as preparation for a career in a profession." In a few fields, the "first professional" program indicates the education level that is required for entry into the field and/or is a prerequisite for a license. (The Council of Graduate Schools in the United States, April 1981)

A "professional master's degree" program can also be explained by contrasting it with four other levels of programs:

- a. To a training program for assistants in a profession that limits practice to carrying out instructions of, or in some other way assisting, another health care practitioner who has arrived at a diagnosis and established a plan of treatment;
- b. To an academic master's program, which provides an introduction to scholarly activities and research and often serves as preparation for teaching careers in public schools, community colleges, and in some colleges and universities. For example, an academic master's program in acupuncture would include the theory, history, and sociology of acupuncture, and perhaps qualitative and quantitative analysis in the field, but would not prepare the student for the actual practice of acupuncture;

- c. To a professional doctorate program, which would provide education and clinical training beyond the professional level of the master's program (described above);
- d. To an academic doctoral program, which would primarily provide advanced scholarly activities and research in the field, with qualitative and quantitative analysis and experimentation.

### **3. What is a "professional master's level program"?**

Degree-granting authority is authorized by relevant state regulatory authorities. The Commission is aware that some states may not presently authorize the awarding of a professional master's degree in acupuncture or Oriental medicine. In addition, certain states have different levels of degree-granting authority and institutional operation. Because state degree-granting authority is not under the Commission's control, the Commission deliberately does not base its scope upon the awarding of such a degree but rather upon the education and training at that "level" of instruction [described above in 2]. An institution that offers a coherent professional program at the master's degree level is eligible to seek accreditation whether or not it is located in a state that permits the institution to grant a professional master's degree.

The "Master of Acupuncture" is the preferred terminology to be used when degree-granting authority is available to an acupuncture program. The "Master of Oriental Medicine" is the preferred terminology to be used when degree-granting authority is available to an Oriental medicine program.

### **4. What is a "professional master's level certificate or diploma program in acupuncture" and a "professional master's level certificate or diploma program in Oriental medicine"?**

In 1985, the four national acupuncture and Oriental medicine associations in existence (The Accreditation Commission for Acupuncture and Oriental Medicine, the Council of Colleges of Acupuncture and Oriental Medicine, the National Certification Commission Acupuncture & Oriental Medicine, and the American Association of Acupuncture and Oriental Medicine) reached consensus that this Accreditation Commission would examine programs that prepare students to function as professional practitioners in the field of acupuncture. Graduates of such programs would be able to work unsupervised as acupuncture providers, and in a collaborative relationships with other health professionals in patient care.

The level of education required for such training was determined to be at least five years of study beyond high school, including at least two years of accredited postsecondary education and at least three academic years of

professional acupuncture study. The acupuncture program was designed to be of a scope and breadth generally recognized in American higher education as being worthy of a professional master's degree, requiring comprehensive clinical and didactic training and based on specified standards of student evaluation, supervision, and outcomes assessment. Such programs would include the study of historical foundations, theoretical concepts, and contemporary practical applications, sufficient to permit the graduate to diagnose and to formulate and carry out a treatment plan based on theories and standards of Oriental medicine. Although each program is required to provide training leading to the achievement of defined professional competencies as a basis for its professional master's degree level program, a program's expression of these objectives may be based on the distinct tradition, culture or historical perspective that it embodies.

In 1989, the Accreditation Commission adopted standards at the professional master's level for programs that choose to teach both major modalities of Oriental medicine, acupuncture and herbal therapy. An Oriental medicine program is determined to be at least six years of study beyond high school, including at least two years of accredited postsecondary education and at least four academic years of professional Oriental medical study, which covers the same professional competencies as the master's level program in acupuncture, but with an additional academic year of training to achieve competencies in administering herbal therapy and manual therapy, exercise/breathing therapy, and diet counseling.

In states where authority to grant a master's degree in the field is not available, programs may award a "diploma" or "certificate" for successful program completion.

**5. What is the relationship between the professional master's degree and professional master's level certificate or diploma programs and a license to practice acupuncture?**

While most states that license acupuncturists accept, and some require, graduation from an ACAOM-accredited or candidate program as meeting some or all of the educational components of their licensing requirements, others have licensing regulations that may include specific requirements in addition to those mandated by this Commission's accreditation standards. In addition, many states that license acupuncturists require passage of the exams administered by the National Certification Commission for Acupuncture & Oriental Medicine ("NCCAOM"), which currently requires graduation from an ACAOM-accredited or candidate program as a prerequisite for NCCAOM certification.

Although graduation from a professional master's degree or master's level certificate or diploma program in acupuncture or Oriental medicine is not the only way to enter the profession, the general consensus, though not the universal practice, is that this level of education has in fact been adopted by a number of state licensure authorities as a key requirement for licensure.

**6. What does "based on the theory of Oriental medicine" mean?**

Acupuncture is but one treatment modality within the whole system of Oriental medicine. The common thread among the various treatment modalities is Oriental medical theory of physiology and diagnosis. From that base extend a number of distinct treatment modalities, which include herbal therapy, diet counseling, manual therapy, and exercise/breathing therapy, in addition to acupuncture.

The Commission examines programs in acupuncture and Oriental medicine that are based upon Oriental medicine theory. In these programs, acupuncture or herbal therapy is presented as part of a configuration of healing modalities based upon the underlying principles of Oriental medicine.

The Commission does not accredit abbreviated programs designed to familiarize other health practitioners with acupuncture and/or to provide them with a procedure adjunct to an already existing medical practice.

The Commission currently accredits programs preparing individuals for the professional practice of acupuncture and Oriental medicine. The Commission does not now accredit independent separate programs in herbal therapy, diet counseling, exercise/breathing therapy, manual therapy, and aspects of Oriental medicine other than acupuncture. However, the Commission does accredit professional master's degree and master's degree level acupuncture programs and professional master's degree and master's degree level Oriental medicine programs, which includes training in both acupuncture and Oriental herbal therapy. The Commission also accredits postgraduate clinical doctoral programs in acupuncture and in Oriental medicine as a pilot process.

**7. What is the definition of "three academic years" and "four academic years?"**

An academic year is equivalent to a minimum of 30 semester credit hours or 45 quarter credit hours. Thus, three academic years is equivalent to a minimum of 90 semester credit hours or 135 quarter credit hours, and four academic years is equivalent to a minimum of 120 semester credit hours and 180 quarter credit hours.

One academic year can consist of full-time study completed in either four quarters, two semesters, or three trimesters.

Full-time study is not to be satisfied by a correspondence course or occasional weekend instruction, but by a concentrated educational process as a matriculated student in a classroom and clinical setting, which requires a combination of professional instruction, clinical guidance, and individual study.

**8. What is considered to be "two years of accredited postsecondary education?"**

This generally means a minimum of 60 semester or 90 quarter general academic units at the postsecondary level that have been achieved at an institution accredited by an accrediting agency recognized by the U.S. Secretary of Education. This prerequisite educational experience may or may not involve the awarding of an associate degree. The content of the pre-acupuncture and Oriental medical education is not specified, although some institutions may require, and some states may mandate, a certain course of study or certain prerequisite courses before matriculation into such programs.

**3.1 Effective Dates, Publicizing of Commission Actions and Adverse Actions by States or other Accrediting Agencies**

Commission actions are effective as of the adjournment of the meeting of the Commission when the decision is made. The Commission makes every effort to notify institutions of all accrediting decisions as soon after each Commission meeting as possible, but no later than 30 calendar days following a Commission meeting. The Commission provides notification of accreditation decisions as outlined below.

*3.1.1 Action Letters*

The Commission sends letters of notification regarding any Commission action to institutions within 30 calendar days following each Commission meeting that specifies the basis for the action taken.

*3.1.2 Candidacy, Initial or Renewed Accreditation*

The Commission provides written notice of decisions on candidacy status, initial or renewed accreditation within 30 calendar days of the decision to:

- the U.S. Secretary of Education
- the appropriate State licensing or authorizing agency
- the appropriate accrediting agencies
- the public via ACAOM's website.

Within 30 calendar days of each Commission meeting, ACAOM forwards a letter to the U.S. Secretary of Education listing all final Commission candidacy and accreditation actions from that meeting. A written notice of all final Commission actions is also sent to appropriate state licensing and authorizing agencies and to relevant regional and specialized accrediting agencies.

The public is informed within 30 calendar days of accreditation actions through the ACAOM website at [www.acaom.org](http://www.acaom.org).

### 3.1.3 Final Decisions on Probation, Suspension, Denial, Withdrawal, Termination

The Commission provides, within 30 days, written notice of final adverse accreditation actions (i.e., probation, and final decisions to suspend, deny, withdraw, or terminate candidacy or accreditation) at the same time it notifies the institution to:

- the U.S. Secretary of Education
- the appropriate State licensing or authorizing agency
- the appropriate accrediting agencies

The Commission provides written notice of such decisions to the public within 24 hours of informing the institution.

The Commission also makes available a brief statement, called a Public Disclosure Notice, summarizing the reasons for final decisions to suspend, deny or terminate accreditation or candidacy or to place an institution/program on probation, including any comments submitted by the affected institution, as soon as possible but within 60 days of the final decision to:

- the U.S. Secretary of Education
- the appropriate State licensing or authorizing agency
- the appropriate accrediting agencies, and
- members of the public.

In the event that an institution voluntarily withdraws from candidacy or accreditation or its candidacy or accreditation status lapses, the Commission will notify, within 30 days of the institution's decision:

- the U.S. Secretary of Education

- the appropriate State licensing or authorizing agency
- the appropriate accrediting agencies, and
- members of the public.

Notification of final accreditation and candidacy decisions is also conducted through the Summary of Accreditation Actions prepared and distributed after each Commission meeting to the communities of interest and posted to the “News and Meetings” link of the ACAOM web site.

The Commission updates its official list of Accredited and Candidate programs to reflect final actions on candidacy and accreditation status. The updated list is posted to the ACAOM web site, published in its biannual accreditation newsletters and provided through other written communications as determined by the Commission. The official list of Accredited and Candidate programs is updated within 30 days of the Commission meeting to reflect the latest decisions of the Commission, except that no change in the status of a program will be reflected in the list if, after an adverse action, the time in which the program may seek reconsideration or appeal has not yet passed, or should the program have filed a timely request for reconsideration or for appeal, which has not yet been decided.

The Commission reserves the right to disclose any adverse action to the public or to relevant state, federal or accrediting agencies, even prior to or while such action is being reconsidered or is on appeal, in those instances in which the Commission reasonably believes it is legally required to disclose such information, or where the Commission, upon the taking of adverse action, finds that there is risk, financial or otherwise, to the students, the public, or government funds, or that conditions at a program are sufficiently unstable as to be a threat to students and prospective students. In such instances, the Commission shall include in its notification that time for reconsideration or appeal has not yet expired, or that a timely filed petition for reconsideration or appeal has not yet been decided. Should the Commission notify any state, federal or accreditation agency of an adverse action, the Commission may make available to that agency material in its files pertinent to the action.  
(revised 07-2009)

### **3.2 Time Provisions**

Whenever any period for the filing of any papers or the taking of any action within this Accreditation Handbook concludes on a Saturday, Sunday, or a national holiday, the period shall be extended to the next business day.

Any requirement for written notification, including official notification, shall be satisfied by a facsimile transmission or electronic communication with receipt confirmation.

### **3.3 Branch Campus Policy**

- A. A branch campus will be classified as an operationally separate unit if it:
  - (a) is under the general control of a parent institution or central administration in a multi-unit system; (b) has a distinct core faculty, a separate student body, and resident administration; and (c) offers a program or programs comprising a totality of educational experience as defined by ACAOM (50% or more of the educational program). The Commission reserves the right to interpret its definition of separate units.
  
- B. Units ("branch campuses") classified as operationally separate, which share the accreditation of a parent institution or system in 2000 at the time this policy was adopted continue in that status until they can be reviewed as independent entities. A grace period (not to exceed three years), as determined by the Commission, will be granted to such units to permit a reasonable time for them to seek and obtain accreditation status independent from the parent institution.<sup>1</sup>
  
- C. Accredited institutions seeking to establish new operationally separate units are required to submit a substantive change report and receive Review Committee approval before the new unit may begin operations. The new unit is expected to seek accreditation status according to the following process:
  - 1) The new unit is site visited not later than 6 months from the date of the unit's establishment.
  
  - 2) Based on the unit's substantive change application, the site visit report, and the unit's formal institutional response to that report, the Commission will act to either grant or deny a Candidacy status to the new operationally separate unit.
  
  - 3) If the new operationally separate unit attains candidacy status, it must achieve accreditation status pursuant to the Commission's procedures for candidate institutions and programs seeking initial accreditation. A Self-Study for accreditation will not be accepted until there are students in each year of the program and matriculated students have been enrolled in the program for a minimum of 24 months.
  
  - 4) Institutions not previously granted accredited or candidacy status which merge, affiliate with, or otherwise come under the control of an accredited institution are not considered accredited if they are opera-

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<sup>1</sup> There is no guarantee that such units will achieve accreditation status during the grace period. Units that do not achieve accreditation status by the time the grace period ends may lose eligibility for Title IV funding.

tionally separate as defined above. These institutions are expected to seek accreditation through the usual procedures.

- D. When an operationally separate unit is governed by a single Board of Directors with a central system administration, the unit must obtain and provide to the Commission from the parent institution, with its applications and reports, the following:
- 1) A complete description of the governing board and its policies, procedures and protocols for the oversight of the separate unit;
  - 2) A complete description of the procedures for the development and approval of academic policy and practice;
  - 3) A comprehensive assessment of the effectiveness of the system's academic program review process, particularly as this applies to quality education;
  - 4) A detailed outline of the budget process and resources devoted to the unit;
  - 5) A comprehensive explanation of relationships with and authority of the parent over the unit;
  - 6) A comprehensive explanation of relationships with and delegation of authority between the parent and the unit;
  - 7) Identification of system-wide groups, their organization and function. Such groups might include chief institutional administrators as well as groups representing faculty, students, and alumni;
  - 8) A comprehensive assessment of the effectiveness of the unit in meeting the mission, goals, objectives and outcomes expected of AOM programs offered by the parent institution.

The unit includes in its self-study, interim, annual and other reports either in a separate section or otherwise, an appraisal of its identity as an institutional system member and the effect of system-wide policies in achieving institutional mission, goals, objectives and outcomes.

Programs not classified as operationally separate by the Commission are included in the Commission's assessment of the parent institution, regardless of location.

### **3.4 Confidentiality**

All materials and reports (Eligibility Reports, Self-Study Reports, Interim Reports, Annual Reports and other reports) that are submitted by an institution or program to the Commission are the exclusive property of the institution and accordingly will not be shared with any persons, agencies, entities or other persons, except as required or permitted by federal or state laws and regulation or relevant ACAOM policies, as determined by the Commission, unless the institution authorizes the Commission to share the information.

### **3.5 Reconsideration and Appeal Procedures**

#### *3.5.1 Appellant Rights*

Notice of an Adverse [Accrediting Action](#), as defined in [Section 3.15](#) of in this Manual, which is subject to reconsideration or appeal under these procedures shall be accompanied by a copy of these procedures and a statement respecting the obligation of the Appellant to share the Common Costs incurred in affording the appeal, and to assume further costs if the appeal is deemed frivolous. (revised 07-2009)

1. If an Appellant fails to file its request for reconsideration or notice of intent to appeal, the required filing fee [for an appeal](#), or its appeal document, in a timely fashion, the Appellant shall have waived its right to appeal.
2. An Appellant must first request [Commission](#) reconsideration of an Adverse [Accrediting Action](#) by filing a written request directed to the Chair of the Commission with a copy to the ACAOM Executive Director within fifteen (15) days of receipt of the Adverse Action. The written request shall contain a concise statement setting forth the basis for the request.
3. The accreditation or candidacy status of an Appellant automatically remains in effect until the expiration of the period within which Appellant may file a Request for Reconsideration, or the completion of the appeals process, whichever shall later occur.

#### *3.5.2 Grounds for Reconsideration*

Reconsideration will be granted when the Appellant demonstrates by clear and convincing evidence that the Commission failed to adhere to its published policies or denied due process the program and such failure or denial was materially prejudicial to the Commission's review of the program, or that the [Adverse Accrediting Action](#) was inconsistent with the [official institutional/program record](#) defined in [Section 3.5.3](#) and was arbitrary and capricious.

#### *3.5.3 Form of Request for Reconsideration*

Except as otherwise provided in this section, a Request for Reconsideration shall be based solely upon the record before the Commission at the time the Adverse Accrediting Action was made, and shall specify the particular asserted error or errors in the Action. In the event that an Adverse Accrediting Action is based solely upon the failure to meet Commission Eligibility Requirements or Standards pertaining to finances, the institution may seek review during reconsideration of significant financial information that was unavailable to the institution or program prior to the Commission's *Adverse Accrediting Action* and that bears materially on the financial deficiencies cited in the Commission's action letter. Financial information submitted to the Commission pursuant to this subsection will be included and considered by the Commission as part of the official record for the institution or program under review. The institution may seek Commission review of new financial information only once and any determination by the Commission respecting that review shall not provide the basis for a separate appeal. (revised 07-2009)

#### 3.5.4 Action on Request for Reconsideration

The Commission Review Committee for the institution/program shall review a Request for Reconsideration together with all admissible submissions, including any new financial information submitted by the institution pursuant to Section 3.5.3, and shall issue a written decision whether to grant the Request within thirty days of receipt of the Request. In the event a Request for Reconsideration is granted, the decision shall provide the Commission with such guidance as the Review Committee deems necessary to ensure that the issues raised in the Request for Reconsideration are properly addressed. (revised 07-2009)

1. If the Review Committee grants the Request for Reconsideration, the Adverse Accrediting Action with the official record for the institution or program under review shall be remanded to the Commission for further proceedings.
2. If the Review Committee denies the Request for Reconsideration, the Adverse Accrediting Action shall take effect on the eleventh day after receipt by Appellant of notice of denial, unless Appellant appeals said Decision in accordance with these procedures.
3. An Adverse Accrediting Action that has been remanded to the Commission for further proceedings shall not be subject to further Requests for Reconsideration, but shall be appealable to ACAOM in accordance with these procedures.

#### 3.5.5 Nature of Appeals

Except as otherwise specifically set forth in Section 3.5.3 of this Manual, appeals from Adverse Accrediting Actions shall be based solely on the evidence and record

before the Commission at the time the action was taken. The burden shall be upon the Appellant to demonstrate that:

1. There were errors or omissions in carrying out prescribed procedures on the part of the evaluation team or the Commission, which materially affected the Commission's decision;
2. There was demonstrable bias or prejudice on the part of one or more members of the [site visit](#) evaluation team, Commission staff, or Commissioners, which materially affected the Commission's decision;
3. The evidence cited by the Commission in reaching the decision, which is being appealed was in error on the date when it made the decision [or was in error based on new financial information submitted by the institution pursuant to Section 3.5.3](#) and the error materially affected the Commission's decision; or
4. The decision of the Commission was not supported by substantial evidence and was arbitrary and capricious.

### *3.5.6 Cost of Appeals*

The program shall pay [by certified or cashier's check](#) at the time of filing a notice of intent to appeal the estimated "**appeal costs**" as defined in the "Glossary of Terms" set forth in Section 3.15 of the [ACAOM Policies and Procedures Manual](#). Failure to furnish the certified/cashier's check in the correct amount by the date on which the notice of intent to appeal must be filed shall constitute a waiver of the right to appeal. If the Commission prevails in the appeal, the program shall be responsible for the full costs of the appeal, plus the Commission's reasonable attorney's fees. If the Hearing Panel finds that the Commission was arbitrary and capricious in taking the Adverse [Accrediting](#) Action, the Commission will bear the entire cost of the proceeding, less travel, meal, lodging costs and attorneys' fees of the Appellant.

### *3.5.7 Timing and Form of Notice of Intent to Appeal*

Notice of intent to appeal a denial of a Request for Reconsideration, or of an Adverse [Accrediting](#) Action remanded to the Commission on the basis of a prior Request for Reconsideration, must be filed in writing with the Commission Chair, with a copy to the Executive Director of the Commission, within ten (10) days of receipt by Appellant of notice of the action. The Notice of Intent to Appeal shall specify the particular asserted error or errors in the Adverse [Accrediting](#) Action, and shall be signed by Appellant's chief executive officer.

### 3.5.8 Selection of Hearing Panel

Upon receipt of a Notice of Intent to Appeal the ACAOM Chair, in consultation with the Executive Director of the Commission, shall select three persons to serve as the Appeal Hearing Panel. The Commission shall provide the Appellant with the names and biographical data of each person.

1. An Appeal Panel member with a conflict of interest, as defined in ACAOM conflict of interest policies, shall immediately notify the Executive Director and Commission Chair, and a replacement will be selected.
2. An Appeal Panel member is also disqualified from serving on a Hearing Panel if she or he has participated in any way in the process leading to the decision being appealed, is in close geographical proximity of the appealing institution, or has had any prior relationship with the Appellant.
3. Appellant may challenge the selection of any Hearing Panel member on the basis that the member has a conflict of interest or should otherwise not participate in the proceeding, for cause as described in this section, by giving written notice of the basis of the challenge within five business days of receipt of the list of Hearing Panel members. The Chair of the Commission shall rule on such challenges, the benefit of doubt to be afforded to the Appellant. In the event an Appeal Panel member is recused, the Chair of the Commission shall select a replacement, and the replacement shall be subject to the same challenge.
4. The Hearing Panel members shall elect, from among their number, a chair and all actions of the Hearing Panel shall be by majority vote of the full panel.
5. The Chair of the Hearing Panel shall control all aspects of the hearing. The Chair may limit the duration of the hearing and shall endeavor to divide the time equitably among the parties. The Chair shall rule on all questions pertaining to the conduct of the hearing, including the admissibility of evidence, and may extend any of the deadlines set forth in these procedures for good cause shown by the requesting party.

### 3.5.9 Form of Appeal

Within thirty (30) days of receipt of notice of the action from which the appeal is taken, the Appellant shall submit to the Commission office seven (7) copies of written argument in support of its appeal, referencing the record below as appropriate.

### *3.5.10 Response by Commission*

Within thirty (30) days of receipt of Appellant's written argument, the Commission shall prepare seven (7) copies of written argument in support of its action, referencing the record below as appropriate, and shall simultaneously provide the Appellant with a copy of its submission.

### *3.5.11 Scheduling of Hearing*

The chair of the Hearing Panel shall, not less than fifteen (15) and not more than thirty (30) days after receipt of the response by the Commission, notify Appellant and the Commission of the date, time and place of the [appeal](#) hearing.

1. The Chair may, but [is](#) not required to, convene in such form as shall be convenient to the parties, a prehearing conference for the purpose of discussing procedural matters.
2. Hearings shall be held at the offices of the Commission or other location that the Chair deems convenient to the parties, provided the Appellant or the Commission may petition the Chair, for good cause, to set the hearing for a different date or location. The decision of the Chair shall be final.

### *3.5.12 Procedures for Oral Hearing*

Proceedings before a Hearing Panel are before an appellate tribunal. As the Hearing Panel is limited to consideration of evidence contained in the [official](#) record on appeal, the Chair of the Hearing Panel shall ensure that extraneous evidence is excluded from consideration. The Chair shall be advised by counsel to the Commission respecting the course of proceedings, and the procedural determinations of the Chair shall be final. Appellant and the Commission may be represented by counsel, and their respective cases may be presented by counsel or any other designee(s).

1. Appellant shall have the burden of going forward and the burden of proof in seeking to reverse or modify an Adverse [Accrediting](#) Action. The Commission shall have an opportunity to present argument in rebuttal, and each party shall have an opportunity to make a closing statement. The members of the Hearing Panel may question either party at any point in the proceedings.
2. As the proceeding before the Hearing Panel is appellate in nature and limited to the record on appeal, no discovery shall be permitted for either side and no evidence not already in the record on appeal shall be accepted, provided that the parties may offer witnesses for the limited pur-

pose of [clarifying admissible](#) of evidence before the Hearing Panel. The Chair shall rule on the admissibility of offered testimony.

The Hearing Panel may hear argument that evidence substantially material to the ability of Appellant to present its case before the Commission was improperly excluded by the Commission, and if so persuaded, the Hearing Panel shall remand the case to the Commission for further proceedings allowing for the consideration of such evidence.

3. The Chair of the Panel, at his or her discretion, may request post-hearing briefs of both parties to clarify issues before the Hearing Panel. Such submissions shall be due within ten (10) days of notification by the Chair of the Hearing Panel.
4. A transcript shall be made of the proceedings before the Hearing Panel. A party requesting expedited production of a transcript shall pay the entire incremental cost of such expedition.

#### 3.5.13 *Decision of the Hearing Panel*

The Hearing Panel shall render its decision in writing within fifteen (15) days of the conclusion of the hearing or the submission of post-hearing briefs, whichever is later, [a copy of which is provided to the Appellant and to the Commission](#).

The Hearing Panel may recommend that an Adverse Action be affirmed, reversed or modified, in which case the decision will be remanded to the Commission for further proceedings consistent with the recommendation of [the Hearing Panel](#) provided that the recommendation is consistent with ACAOM policies.

1. The decision of the Commission affirming, reversing or modifying an Adverse [Accrediting](#) Action so remanded shall be deemed the final action of the Commission, is not subject to any further review or appeal within ACAOM, [will be conveyed to the Appellant and to appropriate public authorities in accordance with law, and will be effective upon its issuance](#).
2. Notwithstanding the foregoing, an Adverse Action by the Commission that is inconsistent with the direction of the Hearing Panel and ACAOM policies on remand shall be appealable to the same Hearing Panel, which shall retain jurisdiction for the limited purpose of determining whether its direction on remand has been carried out, and if not to provide further direction to the Commission.

#### 3.5.14 *Rescission of Prior Actions*

The Commission may, for good cause shown and solely in the exercise of its discretion, rescind an Adverse Action previously taken.

### **3.6 Policy Statement on the Professional Doctorate in Acupuncture and Oriental Medicine in the United States**

The Commission's current scope of recognition with the U.S. Department of Education ("USDE") is for first professional master's degree and professional master's level certificate and diploma programs in acupuncture and first professional master's degree and professional master's level certificate and diploma programs in Oriental medicine with concentrations in both acupuncture and herbal therapies. The Commission's USDE scope of recognition does not currently include the accreditation of professional doctoral degree or doctoral level programs.

In the late 1980's, the Commission adopted the position that accredited and candidate schools could not offer doctoral level education based on its findings that the faculties, curricula, libraries and learning resources of U.S. acupuncture and Oriental medicine institutions were in a developmental stage, and that they were not of a breadth and scope to justify offering credible and accreditable programs in the field of acupuncture and Oriental medicine. This policy acknowledged that the improved quality of U.S. acupuncture and Oriental medicine institutions could justify the development of credible doctoral programs in the future, but that such programs would need to be carefully reviewed relative to professional standards that are reasonably developed, seriously applied and, most importantly, based upon integrity.

In the years since the Commission's adoption of this policy, some U.S. acupuncture and Oriental medicine institutions have developed sufficiently to justify the Commission's reconsideration of its policy on doctoral-level education. In addition, there has been strong and growing support within the Oriental medicine educational and practitioner community for doctoral education in acupuncture and Oriental medicine within the United States. Based on this support and the maturation of educational institutions within the field, the Commission developed accreditation standards for post-graduate doctoral programs in acupuncture and in Oriental medicine.

The following policy applies to ACAOM-accredited institutions wishing to offer a doctoral program in Oriental medicine:

- A. An institution of sufficient strength and resources may currently begin the initial developmental process of planning to develop a doctoral program in acupuncture or in Oriental medicine.

It is the Commission's position that only the strongest institutions with significant resources and experience in higher education should initiate planning to develop a doctoral program. It is incumbent on schools to engage in a careful self-analysis to assess their ability to offer a credible and accreditable doctoral program in acupuncture or in Oriental medicine before implementing this planning process.

- B. If an institution in the ACAOM accreditation process which has engaged in extensive planning to develop a doctoral program in acupuncture or Oriental medicine wishes to begin such a program, it must notify the Commission of its intent and present to the Commission its comprehensive plans with a full resource analysis pursuant to the Commission's substantive change policies. As a substantive change, the offering of a doctoral program in Oriental medicine requires the submission of a complete and comprehensive substantive change report, with complete supporting documentation, according to the Commission's Substantive Change Application form. The institution must receive Commission approval of the substantive change prior to advertising, making public representations, accepting admissions applications or otherwise implementing the program.

The Commission's substantive change review will include an analysis of the institution's compliance with relevant eligibility requirements, its plans, the strength of the institution, the proposed curriculum, faculty, administration, academic leadership, record keeping procedures, assessment mechanisms, library and learning resources, its governance structure, proposed student services and activities, physical facilities and equipment, financial resources, proposed publications and advertising, and the general resources available for offering a credible doctoral program in Oriental medicine without adversely impacting the institution's capacity to meet ACAOM Standards and Criteria. The purpose of this review is to assess the impact of the proposed doctoral program on the institution's continued compliance with ACAOM Eligibility Requirements and Standards. Based on the Commission's analysis of the institution's substantive change report, the Commission will determine whether to grant approval to begin offering a doctoral program. Substantive change approval does not constitute ACAOM candidacy, accreditation or any other official status with the Commission.

An institution that has been approved to offer a doctoral program pursuant to the Commission's substantive change policies and which seeks to pursue ACAOM Candidacy status must submit an Eligibility Report no sooner than twelve months and no later than eighteen months from the date it receives ACAOM approval under the Commission's substantive change procedures.

- C. The Commission will consider the program for candidacy and accreditation

status pursuant to its standards, policies and procedures.

### **3.7 Policy Statement on Integrity in the Accreditation Process**

#### *3.7.1 The Principles of Integrity*

ACAOM expects and requires institutions and programs of acupuncture and Oriental medicine to meet the highest standards of integrity in the accreditation process. ACAOM believes that the integrity of an institution and its acupuncture and/or Oriental medicine program is manifested and judged by the professional competence, experience, personal responsibility and ethical practices evidenced by each and all individuals constituting the ownership, control and/or administration of the institution.

In its relationship with the Commission, the institution and its program shall, at all times, demonstrate honesty and integrity. Accordingly, the institution agrees to comply with Commission requirements, policies, procedures, guidelines, self-study requirements, decisions, and requests.

- A. In the accreditation process, the institution shall be completely candid and provide all pertinent information.
- B. With due regard for the rights of individual privacy, the institution and its program shall provide the Commission with access to all parts of its operations, and with complete and accurate information about institutional/programs affairs, including reports and actions of other accrediting, regulatory and auditing agencies.
- C. The institution shall cooperate fully with the Commission in preparation for visits and shall comply with the Commission's requests for acceptable reports.

Each chief administrative officer shall sign a statement on each report submitted to the Commission (*Eligibility Report, Self-Study Report, Annual Report, Progress or Interim Report, etc.*) that states that the report complies with the principles of integrity of the Commission.

#### *3.7.2 Breaches of Integrity*

Plagiarism of reports or the institution's failure to report honestly, by presenting false information, by omission of essential information or by distortion of information with the intent to mislead, constitutes a breach of integrity, in and of itself. If it appears to the Commission or its staff that the program has violated the principles of integrity in any reports or materials submitted to the Commission or in any other manner that requires immediate attention, the Commission will conduct an investigation and the institution will be offered an opportunity to respond to alleged

violations. Evidence of violation of the principles of integrity may affect the institution/program's status with the Commission.

### **3.8 Policy Statement on Conflict of Interest**

All Commissioners, staff, and site visitors must disclose immediately to the Commission any existing, potential or apparent conflict of interest with an institution or program being reviewed before assignments are made to review reports, to participate in site visits and/or to take Commission action on an institution or its program.

To avoid even the appearance of conflicts, the Commission adheres to the following policies and practices in order to avoid any conflicts of interest in its evaluations, peer reviews and accreditation protocols.

#### *3.8.1 Visiting Team Member Conflicts*

1. The visiting team is constructed so that:
  - a. No institutional member of the team will be currently from the institution/program's same geographic area.
  - b. No member of the team will have been a recent employee or appointee of the program or the sponsoring institution or will have close relatives who are appointees or employees.
  - c. No member of the team will have been a graduate of the institution/program.
  - d. No member of the team will have publicly expressed opinions bearing on the accreditability of the institution/program.
  - e. No member of the team is involved with another program in the same geographic area or has special knowledge of, a special relationship with, or any other potential conflict of interest with the institution or its program.
2. Visiting team members must refuse a team invitation if any actual or apparent conflict of interest is deemed to exist.
3. The Commission submits a list of the proposed visiting team members to the institution for comment before team members are appointed to serve. The institution may, within a time set by the staff, notify the Commission of any objection to the proposed visiting team members. Any member objected to for reasonable cause shall be replaced.
4. A site visitor may not suggest, nor will s/he permit a representative of an institution/program to suggest before, during or immediately following the visit and prior to final action by the Commission that he/she serve as a consultant or in a temporary/permanent position with the institution/program visited.

5. Members of the site visit team pool shall serve in their personal and individual capacities and carry no implication of participation by any institution or other organization by which that person may be employed, a member or otherwise associated.
6. Failure on the part of any site visitor to adhere to these requirements or any of the conduct requirements set forth in the Site Visitor Manual is grounds for the permanent removal from the Commission's roster of site visitors.
7. If the Commission receives evidence that a site visitor may have violated any of these requirements, the Commission will submit to the site visitor written notice of the allegations providing the site visitor an opportunity to respond in writing. Based on its review of the record, the Commission may remove or retain the site visitor on the Commission's official site visitor roster. Site visitors removed from the roster for cause will be excluded from participation on future site visits.

### *3.8.2 Commissioner Conflicts with Reviewed Programs*

Commissioners will not have access to the written documents and reports submitted by the institution/program and must recuse himself/herself when review, discussion and vote takes place by the Commission on an institution/program if:

1. The Commissioner's home institution is part of the same system;
2. The Commissioner has been a candidate for employment in the evaluated institution within the past year;
3. The Commissioner has been employed by the institution within the past five years;
4. The Commissioner is a member of the institution's governing body;
5. The Commissioner has a personal, business, consultative, or other interest in or relationship with the institution under review and other considerations that could affect his or her objectivity;
6. The Commissioner's institution has a material interest in the candidacy or accreditation review outcome based on a significant business or other fiduciary agreement (excluding routine articulation or similar inter-institutional agreements);
7. The Commissioner's AOM institution is in the same geographical area as

the evaluated institution;

8. The Commissioner has a family member who is an employee, board member, candidate for employment, or student at the institution;

9. The Commissioner has expressed personal opinions bearing upon the accreditability of the institution;

10. The Commissioner is an alumnus of the institution;

11. The Commissioner or his or her immediate family member(s) hold shares of stock (excluding shares held indirectly through mutual funds, insurance policies or blind trusts) in an applicant, candidate or accredited institution, or their respective parent company or affiliated entity. An "immediate family member" would ordinarily include all persons in the same household, such as a roommate, spouse, minor child, or other dependent;

12. The Commissioner served on the site visit team of institution that is being evaluated, or

13. In the Commissioner's judgment, there are any other circumstances that could be perceived as a conflict of interest.

### 3.8.3 *Commissioner Consulting Roles*

Commissioners may not be involved in both personal advisory services relative to acupuncture and Oriental medicine institutions and programs and in evaluation services relative to acupuncture and Oriental medicine accreditation.

### 3.8.4 *Commission Staff or Consultants with Conflicts*

1. Commission Staff or Consultants with a conflict of interest may not serve as a site visitor or Staff Reviewer for an institution/program and may not participate in the discussion of the program during Commission review deliberations.

2. Commission Staff or Consultants who served on a site visit team for the program being reviewed will not participate in discussions on the program in executive session.

### 3.8.5 *Appeal Panelist Conflicts*

In an appeal of a Commission decision, individuals serving on a Hearing Panel shall have no current or prior employment, governance, consultant or other direct affiliation with the Appellant and shall have no affiliation with an acupuncture or Oriental medicine institution/program in the same geographical area as the

Appellant program. Nor shall the individuals have family members who are affiliated with the Appellant or with an acupuncture or Oriental medicine institution/program in the same geographical area as the Appellant program.

### **3.9 Procedure for the Review of Complaints** (revised 10-2010)

The Commission accepts and reviews complaints about ACAOM-accredited, candidate, or approved programs from students, faculty, staff, other institutions or programs and member(s) of the public that allege violations of ACAOM Eligibility Requirements, standards, policies or procedures.

#### **Nature of Complaint**

ACAOM's complaint policy is not a mechanism for adjudication of disputes between individuals and programs. As such, the Commission will only consider complaints that allege violations of ACAOM Eligibility Requirements, standards, policies or procedures. The Commission cannot, for instance, direct a program to change a grade, re-admit a student, or reinstate a faculty member. The Commission shall only entertain a complaint when it believes that the institution's policies, procedures or practices indicate that the institution may be in noncompliance with ACAOM Eligibility Requirements, standards, policies or procedures.

The Commission normally requires that the complainant exhaust institutional grievance and review mechanisms available to the complainant within the institution prior to submitting a complaint to the Commission. To be processed, a complaint must be submitted on an official ACAOM complaint form (available on the ACAOM web site or by request from the Executive Office) that provides the following information:

1. The identity, authorized signature (on paper or electronic), and complete contact information of the individual, group or legal entity making the complaint (complainant);
2. Evidence that the complainant has exhausted all internal institutional grievance and review mechanisms that were available to the complainant. For example, a student who is enrolled in a program, would need to show s/he exhausted all grievance procedures at his/her school without a satisfactory conclusion, before initiating a complaint with ACAOM.
3. Evidence supporting the allegation that the subject institution/program may have violated one or more of ACAOM's Eligibility Requirements, Standards, policies or procedures; and,
4. A description of the status of legal action, if any, related to the complaint;

Complaints must be submitted to the ACAOM office on the ACAOM complaint form. Complaints must describe clearly the specific nature of the complaint, provide supporting documents where available, and identify the name(s) and relationship(s) to the education program of the individual(s) submitting the complaint.

### **Confidentiality**

The complaining party may request confidentiality by checking the appropriate box on the ACAOM complaint form. Accordingly, the identity of the complainant shall be maintained as confidential unless such disclosure:

- i) is necessary to afford the institution due process in responding to the complaint;
- ii) is required by law including, but not limited to, a legally valid subpoena, regulatory inquiry, US Department of Education regulations, or other legal process.

In instances where the complainant's identity must be divulged to afford the institution due process in responding to a complaint following a request for confidentiality, ACAOM staff will contact the complainant requesting a written release of his/her identity. Unless the complainant submits the release to the Commission in writing, the complaint will be dismissed.

Institutions and programs are explicitly prohibited from retaliating against individuals or entities filing complaints with the Commission. Such retaliation constitutes grounds for the Commission to initiate adverse action against the institution.

### **Acknowledgment and Resolution**

ACAOM will acknowledge receipt of each properly filed complaint received about an accredited, candidate, or approved program within 15 days of receipt. The complaint will be reviewed for a determination of relevancy to ACAOM Eligibility Requirements, standards, policies or procedures. If the complaint, or any part of it is found to be relevant, ACAOM will inform the Chief Executive Officer of the institution of the relevant aspects of the complaint within 30 days, and will request that the institution submit a written response within 30 days following the notification.

After receipt of the institution's written response, ACAOM may seek an informal resolution without formal action by the Commission. Upon any informal resolution, the complaint will be closed, documented with a copy placed in the institution's file, and appropriate notice sent to the affected parties.

Absent an informal resolution, the complaint record is forwarded to an ACAOM Review Committee to consider the complaint. At its discretion, the review committee may:

1. Seek additional information from the complainant or the institution;
2. Dismiss the complaint as not establishing a violation of ACAOM Eligibility Requirements, standards, policies or procedures.
3. Determine that the complaint record establishes a violation of ACAOM Eligibility Requirements, standards, policies or procedures. Accordingly, the Commission will require the institution/program to take corrective action and document its action in a follow-up report or in a subsequent site visit. Corrective action may include; an earlier comprehensive review process with a complete Self-Study Report and site visit, additional report(s) addressing the Commission findings, a focused site visit, or a response to a request for a Show Cause letter to the institution as to why the Commission should not take adverse action.
4. Place the complaint on the meeting agenda for full Commission action.

ACAOM will notify the Chief Executive Officer of the institution and the complainant of a final decision on a complaint within 30 days of the decision.

Complaints will normally be addressed within 120 calendar days from the date of the notification to the subject of the complaint.

### **3.10 Procedure for Review and Revision of Eligibility Requirements, Standards and Criteria**

#### *3.10.1 Policy on Review of Standards*

The Commission engages in a systematic program of review every five years that demonstrates that its standards are adequate to evaluate the quality of education and training provided by the institutions and programs it accredits and are relevant to the professional needs of students.

If the Commission determines, at any point during its systematic program of review, that changes to the standards are needed, action will be initiated within 12 months to make the changes. Action for revising the standards must be completed within a reasonable period. All Commission communities of interest including accredited institutions/programs, candidates for accreditation, state and accrediting agencies, acupuncture and Oriental medicine organizations, and members of the public will be notified of the proposed changes and encouraged to submit comments. The ACAOM Standards and Criteria Committee will consider the

comments received before finalizing the changes and presenting them to the Commission for consideration.

### *3.10.2 Procedures for Revising Standards*

1. The Commission considers proposals for changes to its Standards and Criteria when they are presented to the Commission:
  - a. Through internal suggestions by Commissioners or staff.
  - b. Through suggestions by ACAOM communities of interest.
  - c. Through third party testimony, either written or verbal, from students, graduates, faculty, college administrators, clinical instructors, practitioners, professional organizations or members of the public, among others.
  - d. Through new regulations or provisions for recognition promulgated by the U.S. Secretary of Education.
2. The Commission, through its Standards and Criteria Committee, conducts a comprehensive review of Commission Standards every five years.
3. The Commission implements the following procedures for adopting changes to ACAOM Eligibility Requirements and Standards. Note that the Commission may adopt non-substantive changes in ACAOM Eligibility Requirements and Standards for the purpose of clarification, adopt Standards that are mandated by the US Secretary of Education, or adopt changes in ACAOM policies and procedures without implementing this procedure.
  - a. Suggestions for change are reviewed by the Commission and, if appropriate, incorporated into a draft proposal for change.
  - b. Draft proposals are presented to the Commission for its decision on whether to solicit public comment.
  - c. The Commission provides opportunities for public comment on all standards proposals, which may include the solicitation of written comments, on-line standards surveys and public hearings.
  - d. The Commission reviews all public comment in considering whether to amend or adopt the proposal. Eligibility Require-

ments, Standards and Criteria that are adopted by the Commission are published on the ACAOM web site and included in any addendum or revised editions of the ACAOM Structure, Scope, Eligibility Requirements and Standards Manual.

### **3.11 Policy Statement on Closure of an Institution or Program, Teach-Out Plans and Agreements**

#### *3.11.1 Teach-Out Plans*

An institution or program in the ACAOM accreditation process must submit a teach out plan to the Commission for prior approval pursuant to ACAOM substantive change policies upon the occurrence of any of the following events:

1. The US Department of Education notifies the Commission that it has initiated action against the institution to limit, suspend, or terminate the institution's participation in Title IV HEA programs and that a teach out plan is required;
2. ACAOM acts to withdraw, terminate or suspend accreditation or candidacy status;
3. A State licensing or authorizing agency provides notice that the institution's legal authorization to provide an educational program in AOM has been, or will be, revoked; or,
4. The institution notifies ACAOM that it intends to cease operations entirely or close its AOM programs.

ACAOM will evaluate the teach-out plan to ensure that it provides for the equitable treatment of students pursuant to criteria established by the Commission, specifies additional charges, if any, and provides for notification to students of any additional charges. If ACAOM approves a teach-out plan for an institution that offers a program that is accredited by another recognized accrediting agency, the Commission will notify the agency of its approval.

Following Commission approval of a teach out plan that includes arrangements with another accredited or candidate institution to teach out students of a closing institution or program, the closing and teach out institutions must submit to the Commission for approval a teach out agreement that addresses each of the requirements specified in the Commission Teach Out Substantive Change Application.

The Commission will approve a teach out plan and agreement only if it determines that:

1. The teach out institution has the necessary experience, resources and support services to provide an educational program in AOM that is of acceptable quality and is reasonably similar in content, structure and scheduling to that provided by the institution or program that is ceasing its operations.
2. The teach out institution is administratively and financially stable, is achieving its mission, goals and objectives, and conducting the teach out will not adversely impact the ability of the institution to meet all obligations to its existing students or its capacity to continue to meet ACAOM standards.
3. The teach out institution demonstrates that it can provide students access to the program and services without requiring them to move or travel substantial distances and that it will provide students with information about additional charges, if any.

If an ACAOM accredited or candidate institution or program closes without a teach out plan or agreement, ACAOM will work with the Department of Education and appropriate state agencies to assist students in finding reasonable opportunities to complete their education without additional charges.

Regardless of the reason for the closure of an ACAOM accredited or candidate institution or program, such a decision requires planning and consultation with all affected constituencies. Accordingly, a teach out plan must include provisions for informing the communities of interest of the institution or program's closure. The determination to close a program, branch campus, or the institution should be made through a consultative process and only after alternatives have been considered. However, responsibility for the final decision rests with the board of trustees of the institution. Since the immediate interests of current students and faculty are most directly affected, their present and future prospects require timely attention and involvement. When an ACAOM accredited or candidate institution meets ACAOM requirements for the submission of a teach out plan, the plan must include consideration of one of the following options:

1. The closing institution or program teaches out its currently enrolled students; no longer admits new students to the program(s); and terminates the program(s), the operations of its branch campus, or the operations of the institution after students have graduated.
2. ACAOM-accredited or candidate institution or program to teach out the educational programs or program. Such a teach-out agreement requires Commission approval prior to implementation. The teach out plan must document that the institution identified to conduct the teach out program:
  - a. Is accredited by or in candidacy status with ACAOM;

- b. Possesses the necessary experience, resources and support services to provide an educational program in AOM that is of acceptable quality and is reasonably similar in content, structure and scheduling to that provided by the institution or program that is ceasing its operations;
- c. Is administratively and financially stable, is achieving its mission, goals and objectives, and is able to meet all obligations to its existing students;
- d. Documents that conducting the proposed teach out program will not adversely impact the capacity of the institution to continue to meet ACAOM standards; and,
- e. Demonstrates that it can provide students access to the program and services without requiring them to move or travel substantial distances and that will provide students with information about additional charges, if any.

### *3.11.2 Teach-Out Agreements*

A teach-out agreement is defined as a written agreement between accredited institutions that provides for the equitable treatment of students if one of those institutions stops offering an educational program before all students enrolled in that program complete the program. If an institution enters into a teach-out agreement with another institution, it must submit the agreement to the Commission office for approval prior to its implementation. For approval by the Commission, the agreement must be between institutions that offer ACAOM accredited or candidate programs, be consistent with relevant ACAOM Eligibility Requirements, Standards, policies and procedures, provide for the equitable treatment of students by ensuring that, and address each of the elements set forth in the Commission's Teach Out Substantive Change Application form.

### *3.11.3 Closing a Program*

When the decision is made to close an ACAOM accredited or candidate program, the institution must make a good faith effort to assist affected students, faculty, administrative and support staff so that they experience a minimal amount of disruption in the pursuit of their course of study or professional careers. In all cases, individuals **must** be notified of the decision to close a program as soon as possible so that they can make appropriate plans. Students who have not completed their programs **must** be advised by faculty or professional counselors regarding suitable options including transfer to comparable programs. Arrangements should be made to reassign faculty and staff or assist them in locating other employment.

### *3.11.4 Closing a Branch Campus*

After the decision has been made to close a branch campus, all affected constituencies **must** be notified promptly including students, faculty, administrative and support staff. The chief executive officer/College President **must** notify the

Commission in writing as soon as possible. Every effort **must** be made to assist current students to continue their education without disruption. Faculty and staff either should be reassigned or assisted in locating other employment.

### 3.11.5 Closing an Institution

A decision to close requires **the development and implementation of specific plans that address the needs of students, faculty, and administrative staff, and the disposition of the institution's assets. General guidelines for the closure of an institution are as follows:**

1. Students who have not completed their degrees should be provided for according to their needs. Arrangements for transfer to other institutions will require complete academic records and all other related information gathered in dossiers which can be transmitted promptly to receiving institutions. Agreements made with other institutions to receive transferring students and to accept their records should be in writing. Where financial aid is concerned, particularly federal, or state grants, arrangements should be made with the appropriate agencies to transfer the grants to the receiving institution. Where such arrangements cannot be completed, students should be informed. In cases where students have held institutional scholarships or grants, appropriate agreements should be negotiated if there are available funds, which can be legally used to support students while completing degrees at other institutions.
2. Academic Records and Financial Aid Transcripts: Arrangements should be made with the state board for higher education or other appropriate agency for the filing of student records. If there is no state agency to receive records, arrangements should be made with a state university, with the state archives, or with a private organization to preserve the records. Notification should be sent to every current and past student indicating where the records are being stored and what the accessibility to those records will be. Where possible, a copy of a student's record should also be forwarded to the individual student. The institution must notify the Commission regarding the final filing of student records.
3. Provision for Faculty and Staff: Whenever possible, the institution should arrange for continuation of those faculty and staff that are necessary for the completion of the institution's work pending the closing date. In those **instances** where faculty and staff will no longer be needed, the institution should make every effort to assist them in finding other employment. It should be understood that the institution can make no guarantees, but good faith efforts to assist in relocation and reassignment are **expected**.
4. Final Determinations: Determinations must be made to allocate whatever financial resources and assets remain after the institution provides for the basic

needs of current students, faculty, and staff. When the financial resources of the institution are inadequate to honor commitments, the board should investigate prior to its decision to close what alternatives and protection are available under applicable bankruptcy laws. If bankruptcy can be avoided but funds are insufficient to maintain normal operations through the end of the closing process, the institution should not overlook the possibility of soliciting one-time gifts and donations to assist in fulfilling its final obligations. Every effort should be made to develop defensible policies for dividing the resources equitably among those with claims against the institution. One of the best ways of achieving this goal is to involve potential claimants in the process of developing the policies. Time and effort devoted to carrying the process to a judicious conclusion may considerably reduce the likelihood of lawsuits or other forms of confrontation. It is impossible to anticipate the many claims that might be made against the remaining resources of an institution, but institutions should give attention to the following three concerns:

- a. Students have the right to expect basic minimal services during the final semester not only in the academic division, but also in the business office, financial aid office, registrar's office, counseling, and other essential support services. Staff should be retained long enough to provide these services.
- b. Staff should be willing to accept the possibility of early termination of their contracts, provided that reasonable notice is given to all employees and that the reasons for retaining some personnel longer than others are based on satisfying the minimal needs of students and the legal requirements for closing.
- c. Every effort should be made to honor long-term financial obligations (loans, debentures, etc.) even though the parties holding such claims may choose not to press them.

5. **The Closing Date:** The final action of the board of trustees should be a formal vote to terminate the institution on a specified date. That date will depend on a number of factors including the decision to file or not to file for bankruptcy. Another key factor is whether or not all obligations to students have been satisfactorily discharged.

6. **Disposition of Assets:** In the case of a not-for-profit institution, the legal requirements of the State and the IRS must be carefully examined with respect to the disposition of institutional assets. Arrangements for the sale of the physical plant, equipment, the library, special collections, art, or other essential holdings, and for the disposition of any endowments or special funds must be explored. In the case of wills, endowments, or special grants, the institution should discuss with the donors, grantors, executors of estates, and other pro-

viders of special funds, arrangements to accommodate their wishes. State laws and IRS regulations regarding the disposition of assets from a non-profit institution must be meticulously followed. All pertinent federal and state agencies need to be apprised of the institution's situation and any obligations relating to state or federal funds cleared with the proper authorities.

7. Other Considerations: An institution must inform the Commission of its plans for closing and of its final closing date and promptly submit a teach out plan for ACAOM approval. The institution should establish a clear understanding with its creditors and all other agencies involved with its activities to assure that their claims and interests will be properly processed. The institution should make every effort to assure that its final arrangements will not be subject to later legal proceedings, which might jeopardize the records of its students or faculty.

### **3.12 Complaints Initiated Against ACAOM**

#### *3.12.1 Policy*

The Commission shall evaluate complaints made against it, including those that relate to monitoring program compliance with ACAOM Eligibility Requirements and Standards and the Commission's adherence to the accreditation procedures. When such a complaint is received, the Commission Chair shall appoint a special committee to investigate the complaint in a timely, fair, and equitable manner.

#### *3.12.2 Procedure*

1. All written complaints received regarding concern with ACAOM standards, procedures or in their application or with respect to other ACAOM activities shall be forwarded within 10 days of receipt to the Commission Chair and Executive Director. The Chair shall review the complaint and may request, as necessary, additional information from the complainant, ACAOM staff or Commissioners.
2. The Chair will appoint a special committee to study the matter and summarize its findings for presentation to and action by the Commission at its next regularly scheduled meeting.
3. The complainant will be notified in writing within 30 days of the Commission meeting of any action taken by the Commission in response to the complaint.

### **3.13 Policy Statement on ACAOM Access to School Graduate/Student Certification Licensure Examination Data**

As an integral part of the Commission's review of programs for candidacy or accreditation status, the Commission must review and assess relevant program outcome data that provide appropriate measures for assessing the quality of AOM education and training. One of the critical program outcome measures assessed by the Commission relative to compliance with ACAOM Standards is certification and licensure examination pass rate data for the students and graduates of ACAOM applicant, candidate and accredited programs.

To ensure that the Commission has access to reliable exam pass rate data, as a condition of continued participation in ACAOM's accreditation review process, programs explicitly acknowledge ACAOM's right to receive such data directly from the relevant examination authority. Programs agree, as a condition of continued participation in ACAOM's accreditation process, to execute the "Certification and Licensing Examination Authority Acknowledgement and Release" contained in the Commission's annual report, Self-Study cover sheet and Eligibility Cover Sheet forms that expressly permit relevant certification and licensing examination authorities to provide direct Commission access to these data.

### **3.14 GLOSSARY OF TERMS**

#### **Academic Year**

Equivalent to 30 semester credit hours or 45 quarter credit hours per year. An academic year is defined as at least 30 instructional weeks, which can consist of three-quarters, two semesters, or three terms or trimesters. (See also: credit, credit hour, credit-ratio)

#### **ACAOM or Commission**

The Accreditation Commission for Acupuncture & Oriental Medicine.

#### **ACAOM Chair**

The Chair of the Commission

#### **Accreditation**

A system for recognizing educational institutions and professional programs that meet appropriate standards for a level of performance, integrity, and quality which entitles them to the confidence of the educational community and the public they serve.

#### **Accredited Institution**

An accredited institution is one that is accredited by a recognized accrediting agency. (See "recognized accrediting agency").

### **Acupuncture**

Following diagnosis based on Oriental medical theory, acupuncture is treatment by insertion and manipulation of needles, and adjunctive therapy for the promotion and maintenance of health and prevention of disease.

### **Adverse Accrediting Action**

A decision to deny initial candidacy or accreditation status of an institution/program, to suspend or withdraw the candidacy or accreditation status of an institution/program or to place an accredited or candidate institution/program on probation.

### **Appeal Costs**

As used in ACAOM appeal policies and procedures, the costs incurred in empaneling a Hearing Panel and conducting a Hearing, travel and accommodation costs for panel members and ACAOM staff involved in the conduct of a hearing, costs of facilities for the conduct of the hearing, if held at other than the offices of the Commission, transcript fees, and legal fees incurred by the Hearing Panel in the conduct of the appeal. Appeal Costs do not include the costs incurred by the Commission or the institution/program in preparing for or participating in the appeal process.

### **Appellant**

As used in ACAOM appeal policies and procedures, an institution or program that is the subject of an Adverse Action.

### **Auxiliary Classroom or Clinic Site**

An auxiliary classroom or clinic site is a site that is separate from the main campus or branch and is operated and supervised by the main campus or branch to facilitate student accessibility to the program. Only a small portion of the program (i.e., less than 50%) is offered at an auxiliary classroom or clinic site. All administrative and support services, including admissions and enrollment, counseling and academic advising, financial aid and record keeping, are performed at the main campus or branch.

### **Baccalaureate**

Courses and programs that would lead to a bachelor's degree.

### **Branch or Additional Location**

A branch or additional location is a facility separate from the main campus, which offers a materially complete education and training program (49% or more) under the direction of the main campus. A branch must have its own comprehensive administrative and support services, including admissions and enrollment, counseling and academic advising, financial aid and record keeping, and it must

operate under the same authority and administrative policies and procedures of the accredited main campus.

### **Chair**

As used in ACAOM appeal policies and procedures, the chair of a Hearing Panel.

### **College-Level General Education**

Postsecondary learning that is unspecialized in nature and is gained in an institution that is accredited by an accrediting agency recognized by the U.S. Secretary of Education.

### **Credit**

Credit is referred to as a unit of credit, a credit unit or a credit hour. It is the standard unit for measuring a student's accomplishment and academic progress. One unit of credit represents a specific and comparative measurement of academic achievement as defined by each institution. It is both qualitative and quantitative. The same unit of measurement is applied to an institution's sessions as well as its term. A session is a special enrollment period within or exclusive of the defined academic year. For example, a summer period of study in addition to two regular semesters might be identified as a "summer session." (See also "academic year," "credit-hour" and "credit-ratio")

A unit of credit within an institution represents that institution's evaluation of learning, although the teaching/learning methodology may differ. Most, if not all, institutions standardize by means of the lecture hour. The acquisition of knowledge and skills in any laboratory, clinic, workshop, practicum, etc., is compared to that of the lecture hour, and is equated by some factor determined by each institution. (See also "credit hour" and "credit ratio")

### **Credit Conversion**

Quarter hours multiplied by two-thirds equal semester hours. Semester hours divided by one- and one-half equals quarter hours. Trimester hours are equal to semester hours unless the trimester is less than 15 weeks in duration, in which case the number of weeks and length of class sessions must be considered. In this Manual, semester credits are based on one credit being equivalent to 15 hours for didactic instruction.

### **Credit Hour**

The number of credits assigned to a course is usually determined by the number of in-class hours per week and the number of weeks in the session. One credit is usually assigned to a class that meets one hour per week over a period of a semester, quarter, or term. In laboratory, clinical, or practical instruction, one credit

hour is assigned to a class that meets two or three hours a week for a term. Quarter credit hours and semester credit hours are the two most common systems of measuring course work. Institutions on the trimester plan generally use the semester credit-hour system.

### **Credit Ratio**

Academic credit is a measure of the total time commitment required of a typical student in a particular course of study. Total time consists of three components:

- (1) time spent in class;
- (2) time spent in laboratory, clinic or fieldwork; and
- (3) time devoted to reading, studying, problem solving, writing, or preparation.

One credit hour is usually assigned the following ratio of component hours-per-week devoted to the course of study:

- (1) Lecture hours: one contact hour for each credit hour (two hours of outside study implied).
- (2) Laboratory or clinical course: at least two contact hours for each credit hour (one hour of outside preparation implied).
- (3) Independent study: at least three hours of work per week for each credit hour.

### **Criteria for Accreditation**

Criteria for Accreditation are the evaluative benchmarks by which the Commission determines if a program meets an ACAOM Standard. They expand and elaborate upon the Standards, describing in greater detail the specific applications of the Standards and the issues upon which the Commission expects the program to focus in its development. The Criteria do not exceed or alter the Standard itself.

### **Date of Receipt**

The date a document is actually received by a party, as evidenced by a postal service, courier or private carrier receipt.

### **Day**

Unless otherwise stated, a calendar day.

### **Educational Objectives**

A detailed list of expected student outcomes, the achievement of which can be measured and used to assess the degree to which the program is achieving its goals, e.g., graduates of the program will treat patients safely and effectively with acupuncture and herbal therapies.

### **Elective Courses**

Courses not required by the program, but which may be taken by a student at his/her option.

### **Eligibility Requirements**

Eligibility Requirements are ACAOM's basic threshold requirements for master's-level and post-graduate doctoral programs to achieve and maintain ACAOM candidacy and accreditation status.

### **Executive Director**

The Executive Director of the Commission.

### **Externship**

Clinical training that involves secondary, rather than direct relationship to the academic institution. Training may be carried out in private practices or clinics where a written agreement has been established with the academic institution for such training to be made available. Externships involve monitoring the training by less direct means than internship. Externships may or may not be carried out by regular faculty in private practice or clinical settings, and students may be selected by the practitioners supervising the externship. Externships usually involve individual students or a small number of students working at an existing acupuncture practice. The academic institution generally has less direct supervision of externship training, but may add or eliminate externship sites rather than replace faculty or administration. The college is responsible for establishing the objectives of the externship; however, the independent practitioner provides the evaluation of how a student achieves those objectives. Students shall evaluate how their supervisor(s) helped them achieve those objectives. The institution must establish effective protocols for ensuring that students in externship training settings are achieving expected program competencies.

### **Glossary**

A list of definitions of terms used in the body of a text to help explain the terms

### **Goals**

A written statement of what the institution and its program intends to do to achieve its mission and carry it out conceptually

### **Guidelines**

Guidelines are rubrics provided by the Commission for the purpose of consistently interpreting and meeting the Criteria for Accreditation.

### **Independent Study**

- (1) An intensive independent investigation, directed by a member of the faculty, of selected topics;
- (2) Independent research in the student's area(s) of special interest under the guidance of a member of the faculty; or,
- (3) Completion of a major project where the student will concentrate on an area of specialized interest under faculty supervision. An independent study for which credit can be granted shall culminate in an approved paper or

project. An independent study entails considerably more than a paper or project that might be required as homework in a course, e.g., for each credit awarded for independent study in a program that runs on a 15-week semester or trimester, the independent study should be expected to require a minimum of 45 clock hours of the student.

### **Internship**

Clinical training that is completely controlled by the academic institution. Training is carried out by regular faculty, and the administration has immediate and complete access to the training environment. Faculty schedules as well as faculty replacement may be carried out by the administration, and the entire teaching environment is under faculty and administrative direction. Such training would preclude clinical training that is not within reasonable proximity to the academic institution or that does not provide for immediate, unannounced access by program administrators. All students qualified for clinical training are permitted to enter an internship. The college is responsible for establishing the objectives of the internship as well as providing an assessment of how a student achieves those objectives. Students shall evaluate how their supervisor(s) helped them achieve those objectives.

### **Minimum Core Curriculum**

ACAOM core curriculum standards define the minimum curricular components of student direction and effort. It is composed of principles with which all acupuncturists should be familiar to engage in the safe and effective practice of acupuncture and Oriental medicine. The minimum core curriculum also represents fundamental elements of all major traditions, ensuring that all acupuncturists are generally familiar with the various traditions while permitting the program to focus on the achievement of its own mission, goals and objectives. The curriculum, thus, allows diversity in meeting the precise, yet evolving, outcomes and professional competencies to be attained by a graduate. The core curriculum in Oriental herbal therapy exists for programs also providing training and education in Oriental herbal therapy.

### **Mission**

The mission is the general and broad overall statement of the institution's direction or purpose for existing.

### **Observation**

Clinical observation involves opportunities for students to observe acupuncturists and senior student interns performing acupuncture and/or Oriental medicine therapies in appropriate clinical settings.

### **Oriental Medicine**

A system of medicine based on the fundamental principles, physiological concepts, theoretical foundations, and diagnostic procedures of Oriental medicine. Acupuncture and herbal therapy are the two major treatment modalities of Oriental

medicine. Other treatment modalities of Oriental medicine are manual therapy, diet counseling, and exercise/breathing therapy.

### **Prerequisite**

Prerequisites are the required courses that must be taken to qualify for advanced study or for entrance into a certain program or course. For example, the Commission requires for entry into the professional master's program that a program admit only students who have met the prerequisite requirement, which is at least two academic years of accredited, postsecondary, baccalaureate-level education that is achieved in an educational institution accredited by an accrediting agency recognized by the US Secretary of Education. The content of these two academic years of studies is not specified by the Commission, thus leaving up to the program to determine what particular prerequisite course work is appropriate to its mission, goals and objectives.

### **Preceptorship**

(See, *Externship*)

### **Professional Master's Level Acupuncture Program**

A program characterized by a programmatic emphasis in acupuncture (plus closely related specialties) leading to preparation to work independently and collaboratively with other health professionals. The professional master's level acupuncture program is defined as at least two academic years of accredited postsecondary education or its equivalent, prior to entrance, at least three academic years of professional study in acupuncture, for a total of at least five academic years of study. The program provides the foundation for students to make an independent judgment regarding the diagnosis and treatment of patients using acupuncture therapy. A professional master's degree or professional master's level certificate or diploma may be granted to designate successful completion of the program.

### **Professional Master's Level Oriental Medicine Program**

A program characterized by a programmatic emphasis in acupuncture (plus closely related specialties) and herbal therapies, as well as course work in manual therapy, exercise/breathing therapy, and diet counseling, leading to preparation to work independently and collaboratively with other health professionals. The professional master's level Oriental medicine program is defined as at least two academic years of accredited postsecondary education or its equivalent, prior to entrance, at least four academic years of professional study in acupuncture and herbal therapies, for a total of at least six academic years of study. The program provides the foundation for students to make an independent judgment regarding the diagnosis and treatment of patients using acupuncture and herbal therapies as well as other adjunctive treatment modalities of Oriental medicine. A professional

master's degree or professional master's level certificate or diploma may be granted to designate successful completion of the program.

**Professional Doctor of Acupuncture & Oriental Medicine (DAOM) Program**

A post-graduate program characterized by a programmatic emphasis on advanced graduate studies in core, clinical, and specialty areas in acupuncture and Oriental medicine. The postgraduate doctoral program in Oriental medicine typically requires graduation from an Oriental medicine program at the master's level, followed by a minimum of 1200 hours of didactic and clinical instruction at the doctoral level. The Doctor of Acupuncture and Oriental Medicine (DAOM) degree is conferred for successful completion of the professional doctoral program.

**Recognized Accrediting Agency**

A recognized accrediting agency is one whose accreditation standards, policies, procedures, and practices are reviewed and monitored by the U.S. Secretary of Education or the Council for Higher Education Accreditation (CHEA), and that is listed by these entities as a reliable authority as to the quality of education and training in a given field or profession. To achieve recognition, accrediting agencies must demonstrate that they conduct effective and responsible accreditation practices that meet established provisions and standards for recognition.

**Resident Program**

A resident programs provides a means of providing instruction that is campus or classroom-based with students in attendance.

**Selection of Appeal Panel**

As used in ACAOM appeal policies and procedures, upon the filing of an appeal, the Chair of the Commission shall select appeal panel members, each with substantial experience and participation in the education community to serve on a Hearing Panel.

**Self-Study**

An institution-wide, self-assessment, examination, and evaluation of the entire program, whether it be a program in a small specialized institution or one in a large departmentalized institution, by the entire educational community -- board, faculty, students, administration, and staff. The process culminates with the drafting of the findings and recommendations of the self-study for the program's own action. The collected findings and recommendations includes an assessment of the institution/program's educational activities and the identification of program strengths, weakness, opportunities for further development, as well as future plans for capitalizing on the strengths and addressing identified weaknesses.

**Specialized or Programmatic Accreditation Agency**

A specialized or programmatic accrediting agency is national in scope and accredits higher education programs or institutions that prepare individuals for entry into practice in a specialized discipline or defined profession or educates individuals in a concentrated area of study. Specialized accreditation assures that a program is educationally sound and relevant to current practice in the professional field.

### **Standards**

Previously referred to as Essential Requirements, these are minimum requirements for first professional master's degree level and doctoral level programs. These requirements must be met in order for an institution/program to achieve accredited or reaccredited status with the Commission. Candidate programs must demonstrate adequate progress and effective action plans for fully meeting ACAOM Standards.

### **Supervised Clinical Practice**

Clinical training conducted under the supervision of program-approved supervisors.

### **Vitae**

A faculty or staff member's resume that includes an appropriate summary of educational history and, if applicable, certification/licensure information, work history, research and publication history, professional consultation responsibilities, recent continuing education, membership and responsibilities in professional organizations and honors or achievements.