Council on Chiropractic Education (CCE)®

Proposed Standards – Summary of Revisions

Section 1: CCE Principles and Processes of Accreditation
- CCE is recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA)
- CCE staff consulted with a higher education expert/legal counsel to align Section 1 with USDE requirements and CHEA guidelines
- Throughout Section 1, the term "reaffirmation" is eliminated and replaced with "continued" accreditation to align to the language found in USDE and CHEA guidelines.
- Additionally, changes in Section 1 include clarifying language and changes in wording, recommended by our accreditation legal expert, in consideration of changes in USDE CFR 602

Section 1: II.B-C
- In these sections pertaining to *Application for Continued Accreditation* and *Processes of Accreditation*, there are numerous areas where the term '"reaffirmation" is replaced with "continued" accreditation, to align to the language found in USDE and CHEA guidelines.

Section 1: II.C: Process of Accreditation
- In this section, regarding *Process of Accreditation*, several section headers were added to describe the steps in the accreditation process; from the *Council Status Meeting* with the program, to the Council's process of reviewing a self-study, the site team's report, the program's response to the site team report, to the Council's accreditation decision, which will lead to the next comprehensive review cycle.

Section 1: II.D-F Additional Reports and Visits – Interim and Focused Site Visits
- In this section regarding *Additional Reports and Visits, Interim and Focused Site Visits,* and *Progress Review Meeting,* language was carried over from the *Comprehensive Site Visit* section with regard to providing the program with the opportunity to respond to the site team report, which is consistent across comprehensive, interim, and focused site visit processes.

Section 1: III. Accreditation Actions
- Added language regarding notifying the program of findings of noncompliance for consistency throughout the document.

Section 2: Introduction
- At the July 2022 meeting the Council recommended the removal of "*Examples of Evidence*" from Section 2 of the Standards, and to move the "Examples of Evidence" to a Guidance document
- The rationale for this change was derived from the feedback received from both programs and site team members that indicates some mis-interpretation, for example, whether the "Examples of Evidence" represent required evidence, which they do not.
- Therefore, a Guidance document will be developed in the future in lieu of having the "Examples of Evidence" in the Standards and provided on our website for program use and reference.

Section 2: Process/Overview:
- The Council Chair appointed two (2) workgroups to develop recommendations to the SRTF on areas related to 1) Student Outcomes and 2) Diversity Equity, and Inclusion.
- CCE Staff collected data from approximately 21 programmatic & institutional accreditors, those with recognition from USDE and others with only CHEA recognition, for review/analysis by each Workgroup.

- The Student Outcomes Workgroup also conducted a program survey re student and program outcomes, to include specific questions about the DCP completion rates, NBCE and CCEB success rates, licensure and employment data collections, and feedback on the meta-competency curricular objectives and outcomes.
- Survey responses were collected from program deans, chief academic officers, presidents, and accreditation liaisons. These data were reviewed by the SOW and incorporated in their recommendations to the SRTF.
- Then, the SRTF was divided into three (3) sub-committees to review each of the Standards, A-J.
- Each of the sub-committees reviewed data from approximately 21 programmatic accreditors to compare requirements for each Standard, and reviewed feedback on the Standards collected from site team members and program personnel over the last 4 years.
- The changes presented in DRAFT 1 of the Standards, are the product of the analysis of qualitative and quantitative data from multiple sources and the collective work of these workgroups and sub-committees, in addition to the Council.

Standard A.1-2: Mission & Planning
- CCE is a programmatic accreditor; and in reviewing the requirements and standards of other programmatic accreditors, the SRTF sought to remove institutional requirements and to add clarifying language that focuses on the DCP; this shift from an institutional focus to a programmatic focus, occurs throughout the Standards.
- The changes in the bold language of Standard A and under the A.2 Planning sub-component, clarifies that these requirements pertain to the *DCPs* mission, planning, and goals/objectives, not an institutional mission or institutional planning, as these areas will be reviewed by the programs' Institutional Accreditor.
- References to assessment of student learning were removed from the Planning section, since this is covered in more detail under A.3 Program Effectiveness
- Additional language was added to planning, to specify that planning processes are *informed by performance results and data analysis to identify program goals and objectives*.

Standard A.3-4: Program Effectiveness & Student Outcomes
- The changes in A.3 *Program Effectiveness* and A.4 *Student Outcomes*, were recommended by the Student Outcomes Workgroup, based on the program survey results, feedback from team members, and a review of the requirements of other programmatic accreditors.
- The changes provide more direction to programs on required Program Effectiveness (PE) metrics, especially to demonstrate data analyses and review that informs program improvement activities/program changes.
- Program effectiveness metrics provide a global/comprehensive evaluation of the DCP that includes assessment of student learning, and is not limited to NBCE performance.
- Standard A.3 broadly allows for a variety of academic and non-academic measures; however, the new language requires program effectiveness metrics to include program-level student learning outcomes and the achievement of the MCOs, as related the program's learning outcomes/objectives and the required learning outcomes in Standard H.
- This ties or links elements of A.3 program effectiveness to elements of Standard H, because program effectiveness/assessment measures and monitors the *program's* performance, and a central component of the program is student learning and the achievement of the MCOs.
- Another new addition in this section requires the programs to measure *retention or attrition rates*, in addition to the DCP completion rate and NBCE/CCEB/licensure rates.
- The changes to A.4 Student Outcomes, reiterates the requirements outlined in CCE Policy 56 re the thresholds and required publication of these outcomes; this links Policy 56 to the Standards, so this area is addressed in the program's self-study, during the site visit, and Council's review processes.

Standard B: Ethics & Integrity

- Changes to Standard B: *Ethics & Integrity*, include the removal of references to the institution or institutional-level items, such as the governing body. Again, this this focusing the CCE Standards on the program and not duplicating the requirements of the institutional accreditor.
- Additional changes, were the removal of language that didn't state a requirement or items that are difficult to evidence, such as "manifest". The changes to this Standard focus on the *policies and procedures* related to ethics and integrity, across the program.

Standard C: Administration

- Based on the review 21 other programmatic-accreditors' standards, changes were made to focus Standard C: *Governance & Administration* from institutional to programmatic requirements.
- *Governance* was wholly removed, so Standard C becomes *Administration;*
- And *Administration* is focused on the administrative structure of the DCP.
- The last paragraph was removed b/c it was redundant to the first line under *Administration,* that outlines the requirements for "*The administration and administrative structure to promote and facilitate the achievement of the DCP mission, allocate resources adequate to support and improve the program, and to assess the effectiveness of the DCP.*"

Standard D: Resources

- "Human" resources were removed from both the Bold language and as the sub-component, D.3, b/c "human resources" is already an existing component/requirement under the Standards for Administration, Faculty, and Student Services.
- References to "strategic" planning were removed b/c strategic planning may occur at the institutional level vs. program-level planning, (this is a carry-over from changes under A.2: Planning)
- Changes to the language in D1 *Financial*, focus on financial resources and fiscal responsibility of the DCP vs. the institution, including the removal of items related to the institutional-level financial audits.
- D2 *Learning Resources:* broadly captures 'learning resources' and eliminates duplicate references to student services found under Standard F.
- Changes to D4 *Physical*, seek to remove items that were specific/prescriptive examples, since many other items are not specifically listed. Broadly stating the requirements of the Standard allows the DCPs to address this based on their structure and environment.
- This section, contains one of the few instances where an *institutional* requirement is maintained, b/c in a university structure, the institution often manages or allocates the physical resources for a DCP.

Standard E: Faculty

- The Diversity Equity Inclusion (DEI) Workgroup reviewed approximately 21 other programmatic accreditors standards, along with higher education publications on the topic of Diversity, Equity & Inclusion.
- New requirements in the area of Diversity, Equity & Inclusion are incorporated in this standard
- The other changes to this Standard reflect the re-arrangement of items to better fit the sub-components of 1) Attributes; 2) Expectations; 3) Evaluation
- Duplicate requirements, such as research & scholarship and ethics were removed, b/c these are covered under Standards B (Ethics & Integrity) and I (Research & Scholarship).

Standard F: Student Support Services

- The Diversity Equity Inclusion (DEI) Workgroup added requirements to this Standard
- "Campus safety" was removed b/c institutional accreditors monitor policies and procedures related to the Clery Act and campus crime reporting
- Other changes included the removal of areas that are difficult to measure/evidence, such as "broad based commitment' and replace this with language that requires the DCP to use data from student support service metrics/measures to *inform program improvements*.

Standard G. Student Admissions

- The Bold language Standard G. *Student Admissions* includes minor word edits to improve clarity. Many of these changes were direct feedback from programs and site team members.
- The Diversity Equity Inclusion (DEI) Workgroup added requirements in section G.1: *Alignment with Program*, to address this area.

Standard H.1-2: Curriculum, Competencies and Outcomes Assessment

- Based on feedback from programs and site team members, the SRTF thoroughly reviewed Standard H to identify all the references to the "meta-competencies", and clarified if the reference was to the meta-competency curricular objectives or the meta-competency outcomes.
- Additional changes throughout Standard H were made to provide more clarity on the meta-competency curricular objectives and the meta-competency outcomes
- Under H.1 *Curricular Content and Delivery*, the DEI Workgroup recommended additional language
- The section regarding *DCP-managed clinic site, or at DCP-approved external sites,* was moved from H.1 to H.2.
- Under H.2: *Assessment of Learning Outcomes and Curricular Effectiveness*, key points are incorporated into the Standard to provide specific guidance in best practices in the assessment of clinical competency.
- The section related to utilization of the student learning assessment data, was shortened as elements related to '*utilizing aggregate student learning data and the meta-outcomes*' are now specified under A.3 Program Effectiveness where it has ties to program planning and resource allocation.

Standard H.3: Quality Patient Care

- Feedback from programs and site team members indicated a wide-range of interpretations of H.3 *Quality Patient Care*
- In comparing the Standards of other programmatic accreditors, the Council found that some standards relating to quality patient care clearly outlined the specific elements for a quality assurance system, so, these specific elements and the format were incorporated in this standard.

Meta-Competency 1-5: ASSESSMENT & DIAGNOSIS; MANAGEMENT PLAN; HEALTH PROMOTION AND DISEASE PREVENTION; COMMUNICATION AND RECORD KEEPING; PROFESSIONAL ETHICS AND JURISPRUDENCE:

- As a general overview, these Meta-Competencies were revised to eliminate overlaps/redundancies; and also clarify what needs to be measured in the MCOs

Meta-Competency 6: ~~Information & Technology Literacy~~ CULTURAL COMPETENCY

- Info & Tech Lit were reviewed and most items were folded into other MCs, paving the way for a new MC 6, *Cultural Competency,* as recommended by the DEI Workgroup
- The DEI Workgroup felt strongly that there was a need for the addition of a cultural competency meta-competency to allow for student outcomes in this area. The recommendation is made in such a way as to minimize changes in mapping for programs.
- Cultural competency includes the knowledge, skills, and core professional attributes needed to provide care to patients with diverse values, beliefs and behaviors, including the tailoring of health care delivery to meet patients' social, cultural and linguistic needs. This competency requires the acknowledgement of the importance of culture, recognizing the potential impact of cultural differences, and adapting services to meet unique needs of patients in an effort to reduce disparities in healthcare delivery.
- This new Meta=Competency includes two Curricular Objectives and two Outcomes.

Meta-Competency 7: CHIROPRACTIC ADJUSTMENT/MANIPULATION:

- No changes recommended in this area

Meta-Competency 8: INTER-PROFESSIONAL EDUCATION:
- Minor recommendations to clarify what needs to be measured in the MCOs

Meta-Competency 9: ADJUNCTIVE TREATMENT:
- Newly added MC 9, Adjunctive Treatment, to…

Standard I. Research & Scholarship
- In the Bold language of Standard I, the reference to strategic planning is removed, again, b/c strategic planning may be an institutional-level element vs. program-level terminology.
- Under the sub-components sections 1) *Scope*; 2) *Support*; and 3) *Outcomes*, many of the requirements were simply re-arranged to better fit with each of these sub-components.
- Also, "Support" was moved above "Outcomes" for a more logical sequencing.
- Additional changes, such as the removal of the definitions for *Discovery, Application, Integration,* and *Teaching* were replaced with "*research and scholarship as defined by the DCP*", to be less prescriptive in this area.

Standard J: Service
- In reviewing the standards for 21 other programmatic-accreditors, the SRTF found that none of the agencies have a stand-alone standard for *Service*; references to service requirements, if any, were included under the requirements for faculty members.
- In addition, feedback from programs and site team members indicated that the expectations for *service* were so broadly written in the CCE Standards that it was difficult to determine if a program had met specific requirements;
- Therefore, the SRTF eliminated this Standard entirely.

Standard K: Distance or Correspondence Education
- Standard K was modified in Spring of 2021 and approved by the Council in July 2021.
- The 2021 changes to the standards for *Distance or Correspondence Education* were guided by our higher education expert/legal counsel to align with recent changes to the USDE requirements in this area.
- As such, the SRTF did not make any new or additional changes to Standard K.