ACCREDITATION ACTIONS
- ANNOUNCEMENT -

February 21, 2023

Annual Council Meeting
January 13-14, 2023

The Council on Chiropractic Education (CCE) is the agency recognized by the U.S. Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of Doctor of Chiropractic degree programs. CCE is also a member of the Association of Specialized and Professional Accreditors (ASPA) and the CHEA International Quality Group (CIQG). CCE seeks to ensure the quality of chiropractic education in the United States by means of accreditation, educational improvement and public information. CCE develops accreditation criteria to assess how effectively programs or institutions plan, implement and evaluate their mission and goals, program objectives, inputs, resources and outcomes of their chiropractic programs.

The following are final accreditation actions taken by the Council at its Annual Meeting:

**Doctor of Chiropractic Degree Programs**

**Continued Accreditation** – The process for continued accreditation begins with the program providing a letter of intent to seek continued accreditation with CCE. Approximately 12 months later, the program provides the Council with their Self-Study Report (self-assessment of their program based on the current CCE Accreditation Standards). A peer review site visit is conducted at the program to verify and validate the information presented in the self-study report. Lastly, the Council reviews the self-study report, the program response to the site visit report and meets with program representatives in a status review meeting where the Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

Keiser University College of Chiropractic Medicine
2085 Vista Parkway, West Palm Beach, FL 33411
Lisa Nucci, M.B.A., Campus President
Accreditation Action: Continued w/Probation

Bases and reasons for decision: The Council reviewed all materials related to the accreditation process, to include the self-study, update report, site team report, and the program’s response regarding the CCE Accreditation Standards (and applicable policies), and determined the program meets the standards for accreditation within Sections 2.A.1, 2.A.4, 2.B-G, 2.H.1, & 2.I-K., to include mission and student achievement; ethics/integrity; governance/administration; resources; faculty; student support services; student admissions; curriculum content and delivery; research and scholarship; service and distance/correspondence education. However, the Council has initiated four (4) areas of concern for noncompliance within Sections 2.A.2, Planning; 2.A.3., Program Effectiveness; 2.H.2, Assessment of Learning Outcomes and Curricular Effectiveness; and 2.H.3, Quality Patient Care, that require further reporting. The Council determined that the DCP is in significant noncompliance with one or more accreditation standards and imposed a sanction of Probation.

Next Accreditation Activity: Progress Report, August 2023; Focused Site Visit, Fall 2023; Program Characteristics Report, Fall 2024; Interim Site Visit, Fall 2026
Next Comprehensive Site Visit: Fall 2030

**Award Initial Accreditation** - The process for initial accreditation begins with the program submitting an application, which includes; a letter of intent to seek accreditation with CCE and evidence of the requirements of eligibility (based on the respective CCE Standards). Following approval, the Council establishes timelines for the program regarding the self-study report, peer review site visit and status review meeting where the Council
determines if the program meets the Standards and subsequently makes a decision to award, defer or deny accreditation of the program.

NONE

**Initial Accreditation Application** - The process for initial accreditation begins with the program submitting an application, which includes; a letter of intent to seek accreditation with CCE and evidence of the requirements of eligibility (based on the respective CCE Standards). Following review, the Council determines if further documentation is required or establishes timelines for the program regarding the self-study report, peer review site visit and status review meeting.

NONE

**Interim Site Visits** - Interim Site Visits are conducted midway through the accreditation cycle of a program and focus on specific elements of the CCE Accreditation Standards, to include; program effectiveness, student learning outcomes and meta-competencies. This visit also provides an opportunity for dialogue and collegiality between the program and the Council. The Council reviews the program interim report, the response to the site visit report and meets with program representatives (optional) in a progress review meeting where the Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

Life Chiropractic College West
25001 Industrial Boulevard, Hayward, CA 94545
Ronald Oberstein, D.C., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the Interim Site Visit review regarding the CCE Accreditation Standards (and applicable policies) and determined that the program meets the standards for accreditation in program effectiveness (Standard 2.A.3), student achievement (Standard 2.A.4), assessment of learning outcomes and curricular effectiveness (Standard 2.H.2), and distance/correspondence education (Standard 2.K.1-2), with no further reporting required at this time.

Next Accreditation Activity: Program Characteristics Report, Spring 2024; Self-Study Report, Fall 2025
Next Comprehensive Site Visit: Spring 2026

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University of Bridgeport – School of Chiropractic
75 Linden Avenue, Bridgeport, CT 06604
Danielle Wilken, Ed.D., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the Interim Site Visit review regarding the CCE Accreditation Standards (and applicable policies) and determined that the program meets the standards for accreditation in program effectiveness (Standard 2.A.3), student achievement (Standard 2.A.4), assessment of learning outcomes and curricular effectiveness (Standard 2.H.2), and distance/correspondence education (Standard 2.K.1-2), with no further reporting required at this time.

Next Accreditation Activity: Program Characteristics Report, Fall 2024; Self-Study Report, Spring 2026
Next Comprehensive Site Visit: Fall 2026

**Program Characteristics Reports (PCRs)** - PCRs are submitted by programs every 4 years and in-between their comprehensive and interim site visit schedule. These reports are required as one of the reporting requirements the Council utilizes to continue its monitoring and reevaluation of its accredited programs, at regularly established intervals, to ensure the programs remain in compliance with the CCE Accreditation Standards in accordance with
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US Department of Education (USDOE) and Council for Higher Education Accreditation (CHEA) criteria. The Council reviews the report in a progress review meeting where the Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

Northeast College of Health Sciences
2360 State Route 89, Seneca Falls, NY 13148
Michael Mestan, D.C., Ed.D., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the Program Characteristics Report regarding the CCE accreditation standards (and applicable policies) and determined that the program meets the standards for accreditation in licensing exam success rate, program completion rate thresholds and publication requirements (Standards, Section 2.A.4 & CCE Policy 56); planning (Section 2.A.2); finances (Section 2.D.1); and research and scholarship (Section 2.I.1), with no further reporting required at this time.

Next Accreditation Activity: Self-Study Report, Spring 2024
Next Comprehensive Site Visit: Fall 2024

University of Western States
8000 NE Tillamook Street, Portland, OR 97213
Joseph Brimhall, D.C., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the Program Characteristics Report regarding the CCE accreditation standards (and applicable policies) and determined that the program meets the standards for accreditation in licensing exam success rate, program completion rate thresholds and publication requirements (Standards, Section 2.A.4 & CCE Policy 56); planning (Section 2.A.2); finances (Section 2.D.1); and research and scholarship (Section 2.I.1), with no further reporting required at this time.

Next Accreditation Activity: Interim Site Visit, Fall 2024
Next Comprehensive Site Visit: Fall 2028

Progress Reports - Progress reports are submitted as requested by the Council and may address; 1) previously identified areas of noncompliance with accreditation requirements, or, 2) areas that require monitoring. The Council reviews the report in a progress review meeting with program representatives (if necessary). The Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

Cleveland University – KC, College of Chiropractic
10850 Lowell Avenue, Overland Park, KS 66210
Carl S. Cleveland, III, D.C., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the progress review process, including the progress report, site team report, and the program’s response regarding the CCE Accreditation Standards (and applicable policies). CUKC has implemented an assessment system that ensures the achievement of each MCO by each student prior to graduation; and that utilizes mechanisms to track and analyze aggregate MCO data against the program-level performance targets established for each trimester with tracking, analysis, and utilization of aggregate MCO assessment data to inform program improvements. The Council determined the program provided the evidence requested by the Council in its February 2, 2022, letter and meets the standards for accreditation regarding the assessment of learning outcomes and curricular effectiveness (Standards, Section 2.H.2). The Council
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has removed the sanction of warning relating to the accreditation status of CUKC, with no further reporting required at this time.

Next Accreditation Activity: Program Characteristics Report, Fall 2023; Interim Site Visit, Fall 2025
Next Comprehensive Site Visit: Fall 2029

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National University of Health Sciences
200 East Roosevelt Road, Lombard, IL 60148
Joseph Stiefel, Ed.D., D.C., President
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the progress review process, including the progress report, site team report, and the program’s response regarding the CCE Accreditation Standards (and applicable policies). NUHS demonstrated it employs best practices in the assessment of student achievement of the MCOs and verifies each student intern’s achievement of the MCOs prior to graduation. The Council determined the program provided the evidence requested by the Council in its February 4, 2022 letter and meets the standards for accreditation regarding the assessment of learning outcomes and curricular effectiveness (Standards, Section 2.H.2). The Council has removed the sanction of warning relating to the accreditation status of NUHS, with no further reporting required at this time.

Next Accreditation Activity: Program Characteristics Report, Fall 2023; Self-Study Report, Spring 2025
Next Comprehensive Site Visit: Fall 2025

Substantive Change Reports – Substantive Change applications are submitted at the discretion of programs as defined within CCE Policy 1, Section A. Programs are required to describe how the program plans to continue to meet the requirements of the applicable CCE Standards while implementing the change in the areas identified within CCE Policy 1, Section B. The Council reviews the application and meets with program representatives (if necessary) where the Council determines if the program meets the Standards and subsequently makes a decision to accept the application and approve the substantive change, defer action and request additional information or deny approval of the substantive change (with no effect on the program’s current accreditation).

NONE

Chiropractic Residency Programs

Continued Accreditation – The process for continued accreditation begins with the program providing a letter of intent to seek continued accreditation with CCE. Approximately 12 months later, the program provides the Council with their Self-Study Report (self-assessment of their program based on the current CCE Residency Accreditation Standards). A peer review site visit is conducted at the program to verify and validate the information presented in the self-study report. Lastly, the Council reviews the self-study report, the program response to the site visit report and conducts a status review meeting where the Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

NONE

Award Initial Accreditation - The process for initial accreditation begins with the program submitting an application, which includes; a letter of intent to seek accreditation with CCE and evidence of the requirements of eligibility (based on the current CCE Residency Accreditation Standards). Following approval, the Council establishes timelines for the program regarding the self-study report, peer review site visit and status review
meeting where the Council determines if the program meets the Standards and subsequently makes a decision to award, defer or deny accreditation of the program.

VA Palo Alto Health Care System
3801 Miranda Avenue, Palo Alto, CA 94304
Robert Walsh, D.C., Chiropractic Residency Director
Accreditation Action: Award Initial Accreditation

Bases and reasons for decision: The Council reviewed all materials related to the accreditation process, to include the self-study, site team report and the program’s response regarding the CCE residency accreditation standards (and applicable CCE policies), and determined that the program meets all the standards for accreditation (Sections 2.A-J), to include, mission/purpose, program effectiveness, ethics/integrity, governance/administration, facilities/resources, faculty, resident support services, resident selection, curriculum, clinical training and competencies, duty hours, and completion designation, with no further reporting required.

Next Accreditation Activity: Self-Study Report, Spring 2025
Next Comprehensive Site Visit: Fall 2025

Aurora Health Care – Aurora Sinai Medical Center
1020 N 12th Street, 5120, Milwaukee, WI 53233
Eric Kirk, D.C., Chiropractic Residency Program Director
Accreditation Action: Approved

Bases and reasons for decision: Following review and in accordance with Section 1.II.A.2, Requirements for Eligibility of the CCE Residency Accreditation Standards, the Council has determined that the initial application for the residency program has met the required eligibility requirements. The AHC chiropractic residency program is required to submit a self-study report, by October 1, 2023.

Next Comprehensive Site Visit: Spring 2024

Elevate Life – Chiropractic Residency Program
1730 West Street #105, Annapolis, MD 21401
Daniel Johns, D.C., President
Accreditation Action: Deny

Bases and reasons for decision: The Council reviewed all materials related to the letter of intent and the application for initial accreditation report, including its attachments, and determined that the program does not meet the eligibility requirements in the CCE Residency Program Accreditation Standards, Section 1.II.A.2, Requirements for Eligibility, regarding items a (sponsorship), c (legal incorporation), f (mission/purpose, goals and objectives) and g (assessment). Therefore, the Council has determined that the initial application for the program has been denied.

Program Interim Reports (PIRs) - PIRs are submitted by programs midway through the program’s accreditation cycle. The interim report focuses on specific elements of the CCE Residency Accreditation Standards, to include; mission/purpose, program effectiveness, and program outcomes. These reports are required as one of the reporting requirements the Council utilizes to continue its monitoring and reevaluation of its accredited programs,
at regularly established intervals, to ensure the programs remain in compliance with the CCE Accreditation Standards in accordance with US Department of Education (USDOE) and Council for Higher Education Accreditation (CHEA) criteria. The Council reviews the report in a progress review meeting where the Council determines if the program meets the Standards and subsequently makes a decision to continue, defer or revoke accreditation of the program and/or impose sanctions, if applicable.

VA Finger Lakes Healthcare System
919 Westfall Road, Bldg B, Rochester, NY 14618
Lindsay Rae, D.C., Chiropractic Residency Director
Accreditation Action: Continued

Bases and reasons for decision: The Council reviewed all materials related to the residency program interim report regarding the CCE residency accreditation standards (and applicable policies) and determined that the program meets the standards for accreditation in mission/purpose and program effectiveness (Standards, Section 2.A), with no further reporting required at this time.

Next Accreditation Activity: Program Interim Report, Fall 2025
Next Comprehensive Site Visit: Spring 2028