

CCEC

Handbook of Accreditation for Doctor of Chiropractic Programs in Canada

February 2020 Edition

List of Amendments:

November 12, 2020

Change in wording Site Visit Team

Table of Contents

INTRODUCTION & BACKGROUND INFORMATION	5
ACCREDITATION.....	5
COUNCIL ON CHIROPRACTIC EDUCATION CANADA (CCEC).....	5
ACCREDITATION STANDARDS AND POLICIES COMMITTEE.....	5
ACCREDITATION IS IMPORTANT TO THE FOLLOWING GROUPS.....	6
<i>General Public</i>	6
<i>Institution and Program</i>	6
<i>Students</i>	6
<i>Profession</i>	6
<i>Licensing Bodies/Regulators</i>	6
COUNCIL ON CHIROPRACTIC EDUCATION CANADA.....	7
<i>Vision</i>	7
<i>Mission</i>	7
<i>Values</i>	7
<i>Guidelines for Good Practice</i>	7
COMPONENTS OF THE ACCREDITATION REVIEW	9
INITIAL ACCREDITATION APPLICATION.....	9
1. <i>Letter of Intent</i>	9
2. <i>Eligibility to Apply for Initial Accreditation Status</i>	9
3. <i>CCEC Response</i>	10
REAFFIRMATION OF ACCREDITATION.....	10
1. <i>Letter of Intent</i>	10
2. <i>Requirements for Eligibility</i>	10
3. <i>CCEC Response</i>	10
DCP SELF STUDY REPORT.....	11
<i>Contents of the Self Study Report</i>	11
<i>Format for the Self Study Report</i>	12
THE OFFSITE REVIEW.....	12
ONSITE REVIEW.....	12
<i>Site Visit Team</i>	Error! Bookmark not defined.
<i>Site Visit Team Observers</i>	Error! Bookmark not defined.
<i>Site Visit Team Appointment</i>	Error! Bookmark not defined.
<i>Timeline</i>	Error! Bookmark not defined.
<i>Institutional Responsibilities</i>	14
<i>Site Visit Team Member Responsibilities</i>	14
LEVELS OF COMPLIANCE WITH STANDARDS.....	15
CLOSING MEETING.....	15
SITE VISIT TEAM REPORT.....	15
DCP RESPONSE TO THE SITE VISIT TEAM REPORT.....	16
DECISION MAKING REGARDING ACCREDITATION STATUS	16
CORE ACCREDITATION CRITERIA.....	17
CCEC STATUS REVIEW MEETING.....	17
ACCREDITATION STATUS AWARDS.....	17
NOTIFICATION OF DECISIONS REGARDING A PROGRAM'S ACCREDITATION STATUS.....	18
REFUSAL TO REAFFIRM ACCREDITED STATUS.....	18
REACCREDITATION: REINSTATEMENT FOLLOWING REFUSAL OF REAFFIRMATION.....	19
PUBLICATION OF ACCREDITATION DECISIONS.....	19
<i>DCP</i>	19

CCEC.....	19
QUALITY ASSURANCE.....	19
REQUIREMENT FOR MAINTAINING ACCREDITATION STATUS	19
1. ANNUAL SHORT REPORT	19
2. MID-CYCLE REVIEW	20
3. SUBSTANTIVE CHANGE NOTIFICATIONS	20
4. FOCUSED SITE VISITS.....	20

INTRODUCTION & BACKGROUND INFORMATION

Accreditation

Accreditation of professional education programs is a systematic and integrated process whereby formal recognition, signifying the attainment of specified standards, is granted by a professional body.

Reference: Association of Accrediting Agencies of Canada (AAAC) <https://aaac.ca>, January 17, 2020

Council on Chiropractic Education Canada (CCEC)

The Council on Chiropractic Education Canada (CCEC), a standing committee of the Federation of Canadian Chiropractic (FCC), has sole responsibility for the accreditation function of chiropractic programs in Canada. The CCEC is responsible for the development and application of the standards and puts into effect the processes of accreditation. They certify the quality and integrity of Doctor of Chiropractic Programs (DCPs) through evaluation of their compliance by applying and following the criteria, policies and procedures set forth in the *Program Standards for the Doctor of Chiropractic Degree Program-Canada*, *Entry-to-Practice Competency Profile for Chiropractors in Canada*, and such other documents, rules and regulations as may be adopted by the CCEC. The CCEC informs the public, the chiropractic profession and the educational community regarding the nature, quality, and integrity of Chiropractic Education.

Accreditation Standards and Policies Committee

The Accreditation Standards and Policies Committee (ASPC), a sub-committee working under the direction of the CCEC, is responsible for the ongoing review and updating of the *Program Standards for the Doctor of Chiropractic Degree Program-Canada*, the *Entry-to-Practice Competency Profile for Chiropractors in Canada* and other policies and documents relevant to the doctor of chiropractic accreditation process. The ASPC is also responsible for the development, review and updating of the accreditation processes for the DCPs.

Specialty Accreditation Standards and Policies Committee (SASPC)

The Specialty Accreditation Standards and Policies Committee, a sub-committee working under the direction of the CCEC, is responsible for the ongoing review and updating of the CCEC Program Standards for the Specialty Colleges, and other policies and documents relevant to the specialty accreditation process.

Accreditation is Important to the Following Groups

General Public

- provides the public with evidence of the currency, quality and integrity of educational programs;
- assures the public that graduates have the essential skills for professional practice.

Institution and Program

- provides institutions with national standards and specific criteria that outline the entry-to-practice requirements for graduates;
- includes an internal process that requires the use of best practices in ongoing self-evaluation to assess compliance with standards which in turn provides administrators and faculty with data needed for ongoing quality improvement;
- qualifies programs for government recognition and determines that their students are eligible to receive government funding or other benefits.

Students

- provides students with assurance that the education they receive is of high standard and qualifies them to write certification exams for the Canadian Chiropractic Examining Board (CCEB) and apply for licensure with provincial and territorial regulatory boards;
- may facilitate the transfer of course credits to other accredited programs.

Profession

- serves to maintain consistent national standards;
- supports the growth and development of education and therefore the profession;
- monitors educational standards globally in order to assess trends thereby facilitating better graduate mobility.

Licensing Bodies/Regulators

- assures licensing bodies and regulators that potential future practitioners/graduates have received a consistent core and/or equivalent education;
- assures that future practitioners/graduates have met the standards for undergraduate pre-professional training and demonstrated competency at the entry-to-practice level;
- assures that practitioners who have graduated from accredited programs have knowledge on protecting the public from harm.

Council on Chiropractic Education Canada

The CCEC is a Standing Committee of the FCC with sole responsibility for the accreditation of Doctor of Chiropractic and Specialty Colleges educational programs in Canada. The CCEC shall apply and follow the criteria, policies and procedures set forth in the *CCEC Program Standards for the Doctor of Chiropractic Degree Program Canada* and related documents and regulations as adopted by the CCEC.

Vision

Promote excellence and assure quality in chiropractic education.

Mission

The CCEC will:

- assure quality in Doctor of Chiropractic Programs and Specialty College Programs in Canada;
- liaise with other Councils on Chiropractic Education.

Values

The CCEC, in fulfilling its mission is committed to the following values:

- integrity in all of its actions and decisions;
- accountability to the variety of stakeholders reliant on the CCEC;
- collaboration with all stakeholders;
- professionalism in all of its internal and external interactions.

Guidelines for Good Practice

THE CCEC is committed to Good Practice Processes for the Accreditation of Doctor of Chiropractic Programs and Speciality Chiropractic Education. The CCEC reviews and consults the Association of Accrediting Agencies of Canada (AAAC) as well as national and international accreditation bodies in establishing good practice accreditation processes in the accreditation of Doctor of Chiropractic programs and Speciality Chiropractic Education.

For Doctor of Chiropractic Programs, the CCEC commits to the following:

- A transparent, fair and objective accreditation process that respects confidentiality and employs the principles of quality assurance and continuous improvement.
- The CCEC is a separate agency that is autonomous from the educational program under review.
- The CCEC representatives are from relevant stakeholders in accordance with the FCC bylaws. Accreditation includes offsite and onsite reviews and input from relevant stakeholders.
- Qualified reviewers conduct the accreditation reviews for onsite and offsite reviews.

- Reviewers and members of CCEC receive training.
- A handbook for reviewers and for educational programs in preparing for self-study and accreditation visits is developed and reviewed every accreditation cycle.
- The accreditation cycle is an eight-year cycle.
- The accreditation cycle is reviewed and the requirements to maintain accreditation status are reviewed and documented every eight years or earlier as needed.
- The accreditation status of programs is published as per the statements put forth by the CCEC.
- Accreditation standards are grounded in principles of quality, equity, consistency and objectivity and continuous improvement is ongoing with standards reviewed every eight years or earlier as needed.
- Competency profiles are established and reviewed every eight years or earlier as needed.
- An appeals policy for accreditation decisions is available.

COMPONENTS OF THE ACCREDITATION REVIEW

The CCEC offers two types of formal, public recognition for chiropractic programs:

1. initial accreditation (an intermediate status offered to new programs prior to the graduation of their first class) and;
2. accreditation.

Initial accreditation is a formative period for a program during which the CCEC carefully monitors the program's ongoing development towards maturity; a program with initial status must achieve accreditation within six years or its status is withdrawn. While not synonymous with accreditation, initial accreditation is not considered a lesser form of recognition. Graduates of programs with either form of recognition are eligible to write certification exams for the Canadian Chiropractic Examining Board (CCEB) and apply for licensure with provincial and territorial regulatory boards. Attainment of initial accreditation does not, however, ensure eventual accreditation.

Accreditation is recognition provided to DCPs that have met the accreditation requirements of the CCEC and have graduated at least one class of students who demonstrate the required competencies.

Initial Accreditation Application

1. Letter of Intent

It is the responsibility of the individual designated responsible for the DCP (e.g.: Chief Executive Officer, Vice President Academic (VPA)) and the Chair of the Institution's Board of Governors to submit, at least twelve to eighteen months prior to the admission of its first class of the entry-level education program, a Letter of Intent (LOI) indicating that the program intends to pursue Initial Accreditation status, and to provide written evidence that it meets the eligibility requirements. The required fees must be paid at this time.

2. Eligibility to Apply for Initial Accreditation Status

The DCP must establish that it is, or has, an organizational unit to administer one or more programs of chiropractic education, and that the DCP has progressed to a level suitable for consideration for initial accreditation by the CCEC.

The DCP or institution must have:

- a. formal authority from the appropriate governmental agency of its province or territory of operations to award the Doctor of Chiropractic degree;
- b. a charter which indicates that it is incorporated under the laws of the province or territory of its residence as a non-profit, non-proprietary institution exempt from taxation due to its devotion to educational purposes;
- c. a governing board of not less than nine members which includes representation reflecting the public interest;
- d. a full-time member of staff designated as executive administrator for the chiropractic program, who is qualified for the position through education and/or experience;

- e. the facilities, equipment, faculty, internal organization, and financial base for funding commitments to conduct current operations for the program;
- f. formal governing body action that commits the DCP to comply with the CCEC requirements for accreditation;
- g. a written multi-year plan, adequate for the delivery and continuous improvement of one full iteration of the program, and a description of a functioning process of planning and evaluation that identifies and integrates future educational, physical, and financial development, and incorporates procedures for review and improvement;
- h. a plan and process for the development and assessment of abilities required by an entry to practice chiropractor as contained in the *Entry-to-Practice Competency Profile for Chiropractors in Canada*.

3. CCEC Response

Upon receipt of the application for Initial Accreditation by the DCP:

- a. the Chair of the CCEC, or delegate, reviews the letter of intent and the evidence of eligibility documentation submitted by the DCP. If the documents do not provide sufficient evidence, the Chair shall advise the DCP of what is required. If the evidence is sufficient the DCP is notified that they are eligible to apply for Initial Accreditation. Notification must take place no more than 60 business days from the receipt of the LOI, evidence of eligibility, and fee payment;
- b. as soon as possible after the DCP is notified that they are eligible to apply for Initial Accreditation, the CCEC Chair, in coordination with the individual responsible at the DCP, establishes timelines regarding the Self Study and Site Visit Team (SVT) according to CCEC policies and procedures.

Reaffirmation of Accreditation

1. Letter of Intent

At least twelve months prior to the end of the accreditation period, the individual designated responsible for the DCP (e.g.: Chief Executive Officer, VPA), must send a LOI indicating that the program intends to pursue reaffirmation of its accredited status. The required fees must be paid at this time.

2. Requirements for Eligibility

The DCP does not need to submit evidence of eligibility documents required for initial accreditation unless eligibility requirements have changed from the last reaffirmation visit. However, the DCP must maintain documentation that it complies with the eligibility requirements. This information must be available for review by appropriate representatives of CCEC.

3. CCEC Response

Upon receipt of application by the DCP for reaffirmation of accreditation:

- a. the CCEC Chair, in coordination with the individual responsible for the DCP, establishes timelines regarding the Self Study and SVT according to CCEC policies and procedures. This should be completed at no later than 30 business days after receipt of the LOI and fees.

DCP Self Study Report

The Self Study is a comprehensive process that involves all constituents of the DCP in a systematic review of the program and assessment of outcomes. Through this process, the DCP becomes aware of its strengths and weaknesses related to CCEC compliance, and its success in meeting its institutional mission.

The DCP must have in place a policy and comprehensive process regarding the Self Study.

Contents of the Self Study Report

The Self Study must include:

- a. an introduction or brief overview of the program;
- b. narrative response to each standard including:
 - i. an evaluation of how the DCP addresses each standard, criterion by criterion, with evidence, (usually in the form of an appendix) to support what is said;
 - ii. what is being done to ensure that graduates develop all abilities required to begin practice and how and where these competencies are assessed throughout the curriculum;
 - iii. evidence chosen that makes it clear to the reader why it was chosen for inclusion and how it supports the DCPs self-assessment;
 - iv. the DCPs self-assessment of their compliance with each standard and clearly identified weaknesses and possible plans to address them;
- c. a summary that documents the DCPs evaluation of their compliance with the CCEC standards, strengths, and weaknesses, and that articulates future plans to maintain accreditation.

The Self Study Report must:

- a. provide clear evidence (e.g., review of documentation, data, surveys,) that the DCP complies with CCEC requirements for accreditation; the DCP should provide only the most relevant evidence and an evaluation of how this meets the standard;
- b. document where the entry-to-practice competencies are built into the curriculum and when and how they are assessed;
- c. focus attention on the ongoing assessment of competencies to demonstrate individual student abilities and for the continuing improvement of academic quality;
- d. demonstrate that the DCP engages in critical reflection and understands both its strengths and weaknesses;
- e. provide evidence, based on information gathered, that the DCP has a process in place for evolving the program;
- f. demonstrate that the DCP has processes in place to ensure that it will continue to comply with the CCEC requirements for accreditation;

- g. be submitted to the CCEC on or before the date previously agreed to by the DCP and CCEC.

Format for the Self Study Report

The Self Study Report provides a permanent record of the program at the time of writing. It should be a single PDF document in electronic format provided to the CCEC on or prior to the due date set by the CCEC and the DCP. This will be approximately four months before the site visit. CCEC staff will provide the DCP with instructions to upload the full document to an electronic platform.

Note: Include only the most applicable evidence. The documentation should be reflective of the Self Study narrative regarding each standard and demonstrate how competencies are developed and assessed.

Repetition is fine as the document will be read and reviewed by many people and while they will each read the full document, individual reviewers will concentrate on specific sections. The narrative for each standard should stand alone.

Highlight strengths but also identify gaps found and possible plans for how these may be addressed.

The Offsite Review

Following receipt of the Self Study Report, the Chair of the CCEC appoints a team of three members of the CCEC to review the report for completeness and responsiveness. This Offsite Review Team does not evaluate the evidence provided but ensures that the report is comprehensive and includes all the necessary materials, forms, etc. This offsite review will be completed within 10 business days of the submission of the Self Study Report. If the Self Study Report is complete the institution will be notified.

If there are missing forms, or gaps in the report, the Chair of CCEC will contact the institution and request that they provide the missing information. The institution will be given a date by which the additional information must be made available. This date is normally 15 business days prior to the scheduled arrival of the SVT.

Onsite Review

Site Visit Team

The Chair of the CCEC appoints a SVT to conduct an onsite review. Team members are drawn from qualified individuals who have previously demonstrated expertise in higher education, research, clinical sciences, administrative or academic evaluation and financial/business matters, as well as a licenced Doctor of Chiropractic. SVT members should have strong oral, written, and interpersonal communication skills and the ability to make unbiased professional judgements based on data provided and observation.

The CCEC Chair will choose the SVT Chair. The CCEC looks for an individual with previous site visit experience, a strong understanding of the Standards, and leadership abilities. The SVT

Chair acts as a mentor to less experienced SVT members. The SVT Chair should demonstrate strong organization, facilitation, and coordination abilities, the capacity to lead consensus and summary processes, and the ability to coordinate the final report.

The SVT Chair must make themselves aware of details of the last accreditation visit and all subsequent reports made to the CCEC since that time. This information should be shared with the team, at their orientation, to provide context.

The CCEC will attempt to include team members who are fluent in the language of instruction at the DCP being visited.

Site Visit Team Observers

In addition to members of the SVT, the CCEC may choose to have independent observer(s) present during the site visit for training purposes. The DCP may also request that observer(s) be present for the site visit; this will be assessed by the CCEC on a case by case basis as to whether the DCP nominated observers will be permitted to participate. Observers, regardless which organization nominated them, may participate in discussions but may not vote as team members.

Site Visit Team Appointment

Once the team members have been identified, the Chair of the CCEC provides the DCP with the names of the members of the SVT. This must be done at least two months prior to the scheduled site visit.

If the DCP has an objection to any member of the potential team, based on actual or perceived conflict of interest, it has ten business days to make that objection in writing, identifying the team member(s) and the nature and basis for the objection(s). Objections will only be considered in the case of a conflict of interest, and if verified by the CCEC, the potential site visit team member would be replaced.

Once the CCEC decides on the final composition of the SVT, formal invitations will be issued to the proposed team members.

The final composition of the SVT must be sent to the DCP no later one month prior to the scheduled visit.

Timeline

The site visit typically takes place over three days, Monday to Wednesday. The full team should arrive at the location at least one day prior the visit (e.g., late Saturday or early Sunday), in order to prepare and to be ready to begin work at the institution on Monday. The SVT Chair will schedule an orientation meeting for the team prior to their arrival at the institution.

Institutional Responsibilities

The institution is responsible for all costs associated with the site visit as well as providing an honorarium to individual team members. Expenses reimbursement will be sensitive to the DCP. The program or institution does not pay SVT member expenses directly. Approximately one month prior to the SVT, the program or institution being visited is pre-billed, by the CCEC, for the estimated cost of the visit. The CCEC office must receive payment of this estimated cost at least one week prior to the visit. After all SVT expenses are paid, the balance of funds remaining from the prepayment shall be returned to the program or institution, or a further invoice for any amounts in excess of the estimate will be sent. Payment of this invoice is due on receipt.

Prior to the SVT arrival, the institution must:

- a. work with the CCEC office staff to arrange hotel accommodation for the team members;
- b. arrange transportation for the team from the hotel to the institution;
- c. develop a schedule for the site visit. This must include campus tours, interviews with administration, faculty, students, and board members, visits to clinic sites, and open time where members of the DCP can engage in free discussion with members of the SVT. This schedule must be completed at least two weeks prior to the visit;
- d. provide a workroom for SVT members that includes Wi-Fi, and access to a confidential printer and copier (or alternatively, unique access codes for same), supplies, etc. The room should be set up and the Wi-Fi thoroughly checked for proper operation in advance of the visit. Login information should be clear and prominently displayed. The SVT will also have access to computer support technician if the need arises. The SVT room will be secured and restricted to SVT members only. A list of required documents will also be provided to the DCP in advance to be available in the SVT room for review and reference;
- e. provide private and secure spaces where team members can meet with members of the DCP on a drop in or ad hoc basis;
- f. provide lunch and snacks for the site visit team. The CCEC will be made aware of dietary restrictions and allergies prior to the visit and provide this information to the DCP;
- g. advise all members of the DCP of the site-team visit, provide a summary of the Self Study Report, times and locations of meetings that they may attend, etc. This should be done at least five days prior to the arrival of the SVT.

Site Visit Team Member Responsibilities

Site Visit Team Members Must:

- a. make their own travel arrangements, using the lowest cost form of travel. If traveling by air, only the lowest economy airfare will be authorized. Team members must arrive at the location at least one day prior to the scheduled site visit;
- b. review the *Program Standards for the Doctor of Chiropractic Degree Program-Canada* and the *Entry-to-Practice Competency Profile for Chiropractors in Canada* prior to the visit;

- c. review and follow CCEC policies and procedures at all times (e.g.: Conflict of Interest, Confidentiality);
- d. sign the CCEC Confidentially Agreement;
- e. read the Self Study prior to arriving on site;
- f. verify the information provided in the Self Study;
- g. expand on the Self Study by compiling additional evidence during the site visit;
- h. determine the institutional and programmatic compliance with assigned CCEC standards;
- i. help prepare and submit a Site Visit Report to the CCEC on institutional and programmatic compliance with each standard; the team begins the report during the site visit and must complete the final version for submission within two weeks of the end of the site visit;

Note: The SVT makes decisions on whether the DCP has met each standard and all related criterion. For each standard the team will determine to what extent the DCP has met the standard. At the end of the section of the report on the standard, the Team will note the level of compliance. The SVT must also evaluate the DCPs ongoing assessment of competencies to demonstrate individual student abilities and for the continuing improvement of academic quality. The SVT does not make decisions regarding accreditation status. Only the CCEC makes the determination of accreditation status.

Levels of Compliance with Standards

Compliance Term	Descriptor of Compliance Level
Criterion Fully Met	No concerns; continued improvement is encouraged and recommendations for improvement may be included.
Criterion Partially Met	Needs improvement; the program will be required to respond with progress on identified concerns within a specified time.
Criterion Not Met	The requirements for compliance were not met; the program will be required to provide evidence of compliance within a specified timeframe.

Closing Meeting

At the end of the site visit, members of the SVT meet with members of the DCP for a brief session, to thank those who participated in the review and provide a short summary of the findings. If this discussion discloses an error in fact, the program may correct the facts at this time. This is not a forum for further discussion regarding the visit or the accreditation status of the DCP.

During this meeting the SVT Chair will provide the DCP with information on the next steps in the accreditation process. They will also advise the DCP as to when they can expect the draft report (usually within three weeks of the SVT departure).

Site Visit Team Report

Two weeks after the end of the site visit, a draft report prepared by the SVT is forwarded to the Chair of the CCEC. The report expands on the Self Study by verifying evidence provided in the Self Study and describing evidence gathered during the onsite review through interviews and

the review of documentation. In the report, the team determines if the DCP has met each Standard and that students/graduates are being evaluated on and demonstrate competency. At the end of each Standard the team will identify the level of DCP compliance.

Upon receipt of the draft report, the Chair of the CCEC forwards the report to the DCP for the correction of factual errors (spelling, grammar, errors in names, titles, or attendees at meetings) only. The DCP has two weeks to review the draft report and report factual errors to the Chair of the CCEC.

Following the response by the DCP to the correction of factual errors, the final report is completed and sent by the Chair of the CCEC to the individual designated responsible for the DCP.

DCP Response to the Site Visit Team Report

The DCP may submit a written response to the SVT Report, and it must submit a response if there are areas of concern identified in the report. This response must be submitted within 30 days of receipt by the DCP of the final version of the SVT Report.

Decision Making Regarding Accreditation Status

After receiving the DCP response to the SVT Report, the CCEC reviews the SVT Report, the DCP response and other appropriate information consistent with CCEC policies and procedures to determine if the DCP complies with the CCEC requirements for accreditation.

A program must demonstrate full compliance with the established Core Accreditation Criteria to be granted Accreditation – Fully Compliant or Accreditation – Partially Compliant.

Core Accreditation Criteria

Standard Number	Core Criteria
2.1	Demonstrate the legal characteristics, governance structure and administrative capacity necessary to design, develop and deliver the Doctor of Chiropractic program.
2.3	Demonstrate engagement of faculty and students in policy development and determination
2.4	Demonstrate the financial, physical, human, administrative and other resources to sustain the Doctor of Chiropractic program to ensure, at minimum, the opportunity for newly enrolled students to graduate.
2.7	Develop and maintain an ongoing assessment plan that demonstrates how the program determines that it is meeting its mission and that its students are achieving the entry-to-practice competencies of the Doctor of Chiropractic program.
4.5	The chiropractic program must employ sufficient faculty members who are qualified by virtue of their academic and professional training and experience and/or credentials, to develop, deliver and monitor the courses and curricula, and assess student learning and the effectiveness of the program. The employment and determination of the number of full-time and part-time faculty members must be based on sound pedagogical rationales for the classroom, laboratory, and patient care settings. The faculty must be engaged in research and scholarship, service, professional development and governance activities.

CCEC Status Review Meeting

Upon receipt and review of the final SVT Report and the written response (where applicable) from the DCP, the CCEC may request a meeting with a representative(s) of the institution to discuss the findings of the Report in accordance with CCEC policies and procedures. This meeting should be scheduled within thirty business days of the CCEC receiving the final SVT Report.

Based on deliberations regarding the reports, any subsequent response and the interview (where requested) the CCEC will make one of the following decisions:

Accreditation Status Awards

Status	Explanation
Accreditation – Fully Compliant	The DCP is in compliance with all of the core and other accreditation criteria; no criteria have been assessed as non-compliant.
Accreditation – Partially Compliant	The DCP is in compliance with all of the core criteria within the accreditation standards but has some other criteria that are non-compliant and must be addressed in a specified timeframe. If these

	areas are not addressed satisfactorily, within the timeframe the status of the institution could be changed to Accreditation – Probation.
Accreditation – Probation	The DCP is non-compliant in a core criteria or is in compliance with less than seventy percent of the accreditation criteria in more than two standards. Areas of non-compliance must be addressed in a specified timeframe. If these areas are addressed satisfactorily, within the timeframe the status of the institutions accreditation status could be changed to Accreditation Fully Compliant or Partially Compliant. The CCEC may schedule a Focused Site Visit during the specified timeframe. If these areas of non compliance are not addressed satisfactorily within the specified time frame, the status of the institution could be changed to Non-Accreditation.
Non-Accreditation	The DCP does not meet the requirements for accreditation or a program with Accreditation status has failed to resolve concerns within the specified time frame(s).

The accreditation decision should be made within two months of the CCEC receiving all of the reports and information.

Notification of Decisions Regarding a Program’s Accreditation Status

An official report and letter will be prepared by CCEC and forwarded to the DCP following any decisions made by the CCEC in relation to the program’s accreditation status. The report, in the form of an Accreditation Review and Status Report (AR&SR), will include the following information:

- name of the program, and institution;
- accreditation status;
- effective date of the accreditation status;
- explanation of the reasons for the decision about accreditation status;
- the extent to which the program is in compliance with the CCEC accreditation standards and criteria including an explanation for the findings;
- commendations;
- action required by the program.

The letter will be addressed to the individual responsible for the DCP and will include an acknowledgement form to be copied onto institutional letterhead, signed, and returned electronically to CCEC within two weeks of receipt of the AR & SR, acknowledging receipt of the accreditation decision and required action. If the decision may have an adverse effect on the DCP, the DCP will also receive detailed information on the Appeals Policy and Procedures of the CCEC.

Refusal to Reaffirm Accredited Status

If a DCP with Accreditation status does not meet the requirements for reaffirmation of accreditation and fails to resolve concerns within the specified time frame(s) their accreditation status will be revoked. This revocation will normally follow a one-year probationary period after

which it is determined that the program no longer meets the CCEC Program Standards for the Doctor of Chiropractic Degree Program-Canada and does not have accreditation status.

Reaccreditation: Reinstatement following refusal of reaffirmation

A program which has not been re-accredited is required to apply de novo for accreditation.

Publication of Accreditation Decisions

DCP

Within two weeks of receipt of the AR & SR the DCP must inform faculty, staff, and students enrolled or applying to the program, about the accreditation decision. This notification must be in writing and stakeholders must have the opportunity to discuss the findings with responsible individuals at the DCP.

Education programs are required to publish their accreditation status as per the requirements of the CCEC as part of their responsibility to maintain compliance with the accreditation standards. This information must be easily accessible for prospective and current students and other stakeholders/partners in the DCP

CCEC

The CCEC will post the results of the Accreditation Decision on their portion of the FCC website within 30 days of the DCP returning the AR and SR. The CCEC will maintain, on this website, a list of education programs that hold accredited status; this information will also be published in the Annual Report and other official CCEC documents.

Quality Assurance

DCP's who have completed the accreditation process will be given the opportunity to provide feedback to the CCEC. This feedback will be used by the CCEC for its continued improvement.

Requirement for Maintaining Accreditation Status

Once accreditation is awarded the DCP will move into an eight-year cycle during which it must meet specific requirements in order to maintain accreditation. In accordance with CCEC policies and procedures, the following reports and /or visits to a DCP may be required. Some of these requirements are mandatory and others are implemented at the discretion of the CCEC, following appropriate notification being provided to the DCP.

1. Annual Short Report

In all years of the eight-year accreditation cycle, except for those years in which there is an accreditation site visit, or, in the year in which there is a mid-cycle review, which is typically at year four, DCPs will provide to CCEC an Annual Short Report,. The Annual Short Report describes key components necessary to maintain open communication between CCEC and the DCP, and shall contain:

- annual enrollment and admission;
- student outcomes, including performance and completion rates;
- student full-time enrollment, including current and prior year;
- faculty full-time employment, including current and prior year;
- a narrative discussing how the program has responded to enrollment changes regarding planning, budgeting, resources, staff and other impacted factors;
- a financial report.

2. Mid-Cycle Review

At the mid-point of the accreditation cycle, which would typically occur in year four of the eight year accreditation cycle, the DCP will provide a Mid-Cycle Review report. This replaces the Annual Short Report in that year. In addition to components normally expected in an Annual Short Report as listed above, the Mid-Cycle Review must contain:

- detailed student headcount data for the prior four years;
- a narrative on any substantive changes;
- an update on any strategic planning initiatives implemented since the last accreditation site visit;
- an update on clinical educational facilities;
- an update on research and scholarly activities since the last accreditation site visit
- any information, noted in your accreditation letter, required for the mid-cycle report.

The CCEC will notify the DCP of the due date of the Mid-Cycle Review, six months prior to it being due.

3. Substantive Change Notifications

4. Focused Site Visits

CCEC, Focused Site Visits may be conducted, at the discretion of the CCEC, in response to:

- a. concerns identified by a SVT and/or an accreditation review report and not yet satisfactorily addressed for the DCP to be in compliance with accreditation requirements;
- b. substantive change requirements;
- c. extraordinary circumstances, in which a perceived violation of accreditation requirements may prompt action to protect the interests of the students, faculty or public.

Specific information about the requirements for the Focused Site Visit will be sent to the program in writing prior to the visit. Following the site visit, a report is prepared encompassing the selected aspect(s) of the institution/program relevant to the focused site visit. The report will be reviewed by the CCEC and a decision made regarding the adequacy of the ongoing progress, the sufficiency of evidence provided regarding progress on issues of concern, whether any other significant concerns have emerged, and what, if any, subsequent interim reporting activities are required. Based on all of this evidence, the CCEC may make a decision to change the accreditation status of the DCP.

Components of this handbook were adapted with permission from the Physiotherapy Education Accreditation Canada (PEAC) 2020.