

November 12, 2012

Arno Burnier, D.C.  
MCQI  
108 Latigo Road  
Durango, CO 81301-8668

Dear Dr. Burnier:

In response to your October 15, 2012 letter, the Council on Chiropractic Education (CCE) provides the following information. Note: To assist in review, language from your letter is italicized with CCE's response to follow.

*1. What specifically does CCE guarantee to the U.S. Department of Education regarding accredited member institutions?*

The goal of accreditation is to ensure that education provided by institutions of higher education meets acceptable levels of quality. Accrediting agencies (CCE) develop evaluation criteria and conduct peer evaluations to assess whether or not those criteria are met. Institutions and/or programs that request an agency's evaluation and that meet an agency's criteria are then "accredited" by that agency. CCE follows the requirements outlined in Title 34 of the Code of Federal Regulations Part 602 as the mechanism for the accreditation of its Doctor of Chiropractic Degree Programs.

*2. At the last Stakeholder's meeting CCE leadership stated that CCE does not accredit the drugs and surgery curriculum of Western States Chiropractic College. Who is monitoring the quality of this component of their curriculum? Is CCE concerned that their stamp of approval is on the institution as a whole when they have no oversight of the medical portion?*

Except for one chiropractic college (Life West), the CCE does not put its "stamp of approval" on any chiropractic institution. With regard to accreditation processes recognized by U. S. Department of Education (DOE), different agencies provide accreditation services to colleges, universities, and individual academic programs. All but one chiropractic college are institutionally accredited by a regional accrediting agency (WASC, HLC, SACS, etc.). The regional accrediting bodies do not accredit the Doctor of Chiropractic Program, as the chiropractic profession has its own DOE recognized accrediting body (CCE). Vocational education programs (health care, teaching, engineering, etc.) typically have their own specialized accrediting agencies to conduct programmatic reviews for quality. Regional accrediting agencies defer to the specialized accrediting agencies for program reviews.

All CCE-Accredited Doctor of Chiropractic Degree Programs are accredited based on the requirements outlined in the CCE Accreditation Standards. Specialized or programmatic accreditation applies to programs, departments, or schools that are part(s) of an institution. The accredited unit may be as large as a college or school within a university or as small as a curriculum within a discipline. Most of the specialized or programmatic accrediting agencies review units within an institution of higher education that is accredited by one of the regional accrediting agencies.

The doctor of chiropractic degree curriculum content (instruction, experiences, etc.) is the primary vehicle by which programmatic outcomes are achieved. Program faculty are responsible for, and in control of curricular content, sequencing and pedagogy. Faculty exercise control over the curriculum individually and as a collective through governance structures such as curriculum committees, faculty senate, departments and divisions. Regional and Specialty accreditors evaluate whether the stated outcomes of the program are achieved by the program and the degree to which those outcomes support the institutional mission, goals and values.

The quality of the program is ensured by reviewing evidence that all coursework is consistent with the mission of the DCP, that learning outcomes are defined for all components of the curriculum, that all required topics are included within the curriculum, that the DCP assesses the attainment of all required competencies, that learning outcomes are established and assessed for all courses, and that courses are delivered by faculty members with appropriate credentials and experience. In addition, the DCP is expected to use external measures of attainment of student learning outcomes. For subjects not included within the NBCE exams, these measures might include regional licensing exams or satisfaction of state requirements. For example, it is incumbent upon the State Licensing Board of Oregon to test those applying for state licensure in the areas not tested through NBCE licensing exams. Furthermore, the State of Oregon has the right to conduct its own program evaluation for quality, as a number of states do.

*3. Does the CCE require member institutions to provide data regarding the placement of graduates, their success rate and attrition rates of alumni? If so, does the CCE know of any such data?*

CCE follows the USDE requirements regarding accreditation standards (Reference: Title 34 CFR 602.16) in this regard and as outlined in the CCE Accreditation Standards in Section 2.F, Student Support Services and Section 2.H, Educational Program for the Doctor of Chiropractic Degree. Evaluation teams visiting the DCPs evaluate data in accordance with the Standards during the monitoring and evaluation process of accreditation. All information obtained during the accreditation processes is confidential.

*4. Why has student representation not been invited to the CCE Stakeholders meetings?*

The CCE meets regularly with groups of students during site visits, forums on college campuses and before leaders of student national trade associations. Such meetings provide rich insights into students' concerns and satisfaction. Students have also served on important committees regarding CCE's strategic planning processes.

Students have significant representation through the DCPs. Every DCP has as one of its major stakeholders the student. This representation extends far beyond the Stakeholder meetings and actually exists at every meeting of the CCE. The Colleges are also agents that gather and weigh the impact of student accreditation concerns and present them in Stakeholder meetings with full knowledge of the accreditation process. Each College has its own governance structure, including a Student Council-type group that brings forth student concerns. In the formative process of governance, many student concerns are addressed at the College level. Those accreditation concerns that transcend a College's ability to address them are brought forward to a Stakeholder's meeting.

*5. Is there anything in the CCE by-laws that prevents the video/audio recording of the CCE Stakeholder meetings as twice requested? Why does the CCE object to having full transparency in this matter?*

The CCE Bylaws do not provide that level of process and are silent in this regard. It is up to the governing body of the organization (Council) to determine the need for recording and/or any logistics of the meeting. The CCE chooses to foster a forum that provides for open and frank discussion from all parties involved and determined that recording meetings would be counterproductive to that goal.

*6. The Chairman of CCE is a West Hartford Group (WHG) member. (etc)*

Councilors are allowed to belong to any organization that is not precluded by the CCE Bylaws, CCE Policies, or USDE requirements. Specifically, practicing doctors of chiropractic currently in practice, and not employed by or otherwise officially affiliated with a DCP, institution housing a DCP, or solitary purpose chiropractic institution in any of the following ways: full or part-time employment with a DCP, institution housing a DCP, or solitary purpose chiropractic institution; membership on the institution's governing Board; as an officer of the institution's or DCP's alumni association (or equivalent); as an officer of a foundation supporting chiropractic education at a single institution, a DCP, institution housing a DCP, or solitary purpose chiropractic institution; as a paid preceptor for a DCP, institution housing a DCP, or solitary purpose chiropractic institution; or serving as a paid consultant to a DCP, institution housing a DCP, or solitary purpose chiropractic institution within the past three years. Providing unpaid services for a DCP, institution housing a DCP, or solitary purpose chiropractic institution, such as occasional (guest) lectures or presentations shall not disqualify a nominee.

CCE Councilors and Academy members follow the conflicts of interest policies and procedures as outlined in our documents and in accordance with criteria established by the USDE. Quite frankly, being on a list (let alone never voicing a viewpoint, vote or position on a list) is NOT a conflict of interest. There is absolutely no history of a Councilor holding a voting position on two separate entities where a vote at one organization could potentially harm the interests of the other organization. Conflicts of Interest as a charge are too often wrongly tossed about whenever someone listens to an opinion, philosophy, idea, thought, or motion that is contrary to their own or contrary to another.

*7. The following two quotes...(etc) will the CCE comment...?*

CCE does not speak for any organization other than itself, please contact the WHG directly for a response to your questions. The quotes are not referenced to have been made by a current CCE Councilor, Academy member, staff person or committee volunteer.

*8. Do any other councilors or site team members have conflicts of interest...?*

The CCE and its Councilors and Academy members follow the conflicts of interest policies and procedures as outlined in our documents and in accordance with criteria established by the USDE.

*9. Why has the IFCO been marginalized in communications from the CCE?*

The CCE does not agree with your statement in this regard. Moreover, the CCE is not clear as to the authority that your organization has to speak on behalf of or reference concerns of another organization. The CCE provides many processes and opportunities for all stakeholders, individuals and/or groups to submit information. Most importantly, communications are transparent and readily available at <http://cce-usa.org/> and [http://cce-usa.org/CCE\\_News.html](http://cce-usa.org/CCE_News.html).

*10. The CCE leadership condemned the action of the ICA...*

Dr. Arno Burnier  
November 12, 2012

This question grossly mischaracterizes the facts and does not warrant a response.

*11. After December 22, 2011, did any CCE councilor, employee, representative or counsel contact the Assistant Secretary of Education...?*

No

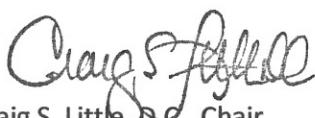
In closing, we would like to emphasize that CCE is a specialized, programmatic, accreditation agency. The purpose of The Council on Chiropractic Education is to promote academic excellence and to ensure the quality of chiropractic education.

The Council values educational freedom and institutional autonomy. The CCE does not define or support any specific philosophy regarding the principles and practice of chiropractic, nor do the CCE Standards support or accommodate any specific philosophical or political position. The Standards do not establish the scope of chiropractic practice. They specify core educational requirements but do not otherwise limit educational processes, program curricular content, or topics of study.

CCE Stakeholder meetings, standards revision processes, etc., are not designed to debate areas outside the jurisdiction of the accreditation/education arena, i.e., scope of practice, political affiliations, board examinations, international issues, philosophy, etc. It is important for the MCQI organization to understand that state jurisdictional law defines chiropractic and the scope of practice for the chiropractic profession, not the CCE; the trade organizations, schools, and individual practitioners define the philosophy of chiropractic, not the CCE; the trade organizations and the public determine the identity of the chiropractic profession, not the CCE. Lastly the CCE is NOT proscriptive—it does not prohibit or restrict education.

We hope you find this informative, useful and responsive to your questions and concerns.

Sincerely,



Craig S. Little, D.C., Chair  
Council on Chiropractic Education

cc: CCE Councilors  
CCE Administrative Office