

# ACHENA

## Policies and Procedures Manual



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Accreditation Commission for Homeopathic  
Education in North America

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## **PART I: Policies and Procedures of the Eligibility Phase of Accreditation**

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

1. Complete the ACHENA Initial Application for Accreditation officially indicating, in writing, the program's or institution's interest in pursuing the accreditation process;
2. Submit payment of the *nonrefundable* Application fee;
3. Attend an ACHENA Eligibility Workshop or phone consultation with an ACHENA representative;
4. Complete and submit the Eligibility Packet;
5. Submit a Formal Institutional Response (FIR) to the ACHENA review team's report to the full commission on the Eligibility Packet.

ACHENA will accept Initial Applications only from institutions and programs that fall within its scope. Based on information provided in the Initial Application, ACHENA may decide to not accept the application if, for any reason, ACHENA deems that the nature or scope of the applicant or its program does not comply with ACHENA's overall Eligibility Requirements and/or the Curriculum Review or Accreditation standards. If ACHENA decides to not accept the Initial Application, a written explanation outlining the reason for not accepting the Application will be provided to the institution or program. An institution or program interested in seeking candidacy must have had students enrolled in the program for at least one calendar year prior to submitting an Eligibility Packet.

Acceptance of an Initial Application for review does not ensure that ACHENA will grant Candidacy status. Only upon successful completion of the Eligibility Process, including a determination by ACHENA that a program meets the eligibility requirements for Candidacy as outlined in the appropriate section of the ACHENA Accreditation Manual, will ACHENA grant the status of Candidacy for accreditation.

### **1.1 Initial Application**

A program or institution must complete the ACHENA Initial Application and have an authorized representative from the institution's governance structure sign the attestation indicating the accuracy and completeness of its submission and its intent to abide by ACHENA's eligibility requirements, accreditation standards, and policies and procedures should candidacy or accreditation be granted.

### **1.2 The Eligibility Workshop or Phone Consultation**

Following the submission of the Initial Application, a representative of an institution or program seeking candidacy status must attend an ACHENA Eligibility Workshop or phone consultation with an ACHENA representative, the purpose of which is to provide detailed instruction in the preparation of an Eligibility Packet. Because there should be broad participation on the part of the program/institution in the preparation of an Eligibility Packet, ACHENA recommends that a team consisting of the Program Director/Dean and other key school personnel attend this workshop or consultation. Eligibility Workshops are conducted on a periodic basis by ACHENA. Information regarding the time and location of workshops and registration instructions will be provided to applicants via email and may be posted to ACHENA website at [www.achena.com](http://www.achena.com). Phone consultations with an ACHENA representative are scheduled on an as needed basis, or when the date of the next regularly scheduled Eligibility Workshop would result in a significant delay in the accreditation process.

### **1.3 Preparation of the Eligibility Packet**

The program or institution develops an Eligibility Packet that addresses and documents compliance with the Eligibility Requirements and Initial Curriculum Review Standards, and its progress and action plans for fully meeting the Accreditation Standards. Before an Eligibility Packet can be accepted for processing, it must present a factual and complete narrative application following the specified format, including documentation regarding each of the Eligibility Requirements, and demonstrate the program's or institution's capacity to conduct a self-study and achieve accreditation should the program or institution be granted Candidacy. A program may withdraw its Eligibility Packet at any time before a final decision is made by ACHENA on candidacy status. In the event that a program withdraws its Eligibility Packet, the program will be refunded half of its application fee and must wait at least six months before reapplying.

#### **1.3, a - Format for the Eligibility Packet**

The program or institution prepares one copy of its Eligibility Packet in accordance with guidelines provided in the Template for Submission of the Eligibility Packet.

#### **1.3, b - Public Comment**

Whenever the Commission plans to review a program/institution for candidacy, it invites the public to submit written comments on the program/institution in accordance with the ACHENA Policy on Public Comments.

#### **1.3, c - Timeframe for Submission of the Eligibility Packet**

Eligibility packets must be submitted within 12 months of the Initial Application. Institutions or programs may request up to two six-month extensions for submission of the eligibility packet. Requests for extension will be subject to an additional Application Fee as outlined in the ACHENA fee schedule. In no case may an applicant exceed 24 months without submitting the Eligibility Packet. Failure to submit the eligibility packet in the timeframe allowed will result in the application lapsing and forfeiture of the application fee, in which case the program will be required to submit a new application and pay the application fee in the event that it decides subsequently to reapply.

### **1.4 Review of the Eligibility Packet**

The ACHENA review of the Eligibility Packet involves three levels. The first level of review is conducted by an ACHENA staff person or designated commissioner. An ACHENA staff person or commissioner reviews the Eligibility Packet for completeness and clarity. If the reviewer has any questions or sees any deficiencies, he/she may engage the institution/program in dialogue, provide comments, or request clarification or additional documentation either verbally or via email; note that any verbal requests by ACHENA will be confirmed in writing.

After this initial review, the Eligibility Packet is formally reviewed by a review team consisting of ACHENA commissioners or an ACHENA commissioner along with 1-3 peer reviewers. The review team is responsible for (i) submitting a report to the full commission that contains its observations and find-

ings regarding the institution's/program's compliance with the Eligibility Requirements, and (ii) making a confidential recommendation to the commission regarding the candidacy application. If the review committee has any questions about the Eligibility Packet, it may also request clarification from or engage in dialogue with the program or institution before it issues its final report. Once the review team issues its final report to the institution and the full commission, the institution is required to submit a Formal Institutional Response (FIR) to the report within one month of receipt that addresses the contents of the report, including any observations or conclusions of the review team with which the institution disagrees. As noted above, in addition to the providing the final report to the full commission, the review team also provides a confidential recommendation to the commission regarding the granting of candidacy.

The third and final level of review of the Eligibility Packet—the “Eligibility Determination Phase”—is conducted by the full commission, which is responsible for making a decision regarding the candidacy application. In making its decision, the commission carefully considers (i) the review team report, (ii) the institution's/program's FIR, (iii) any public comments that were received and the institution's/program's response to the comments, and (iv) the review team's confidential recommendation. The full commission may vote to:

1. Accept the Eligibility Packet and grant Candidacy Status (see section 1.4, a below);
2. Accept the Eligibility Packet and grant Candidacy Status, with Conditions or Monitoring Actions (see section 1.4, b below);
3. Place the application on hold pending further administrative or procedural actions (see section 1.4, c below); or
4. Reject the Eligibility Packet if it fails to demonstrate that the institution or program meets the Eligibility Requirements (see section 1.4, d below).

#### **1.4, a - Granting Initial Candidacy Status**

In the event that an institution or program demonstrates to the commission's satisfaction that it meets ACHENA's Eligibility Requirements and has in place an adequate infrastructure and plans for meeting the Accreditation Standards, ACHENA shall grant candidacy without any conditions.

#### **1.4, b - Monitoring Actions**

A monitoring action indicates that while ACHENA has determined a program or institution is largely in compliance with the eligibility requirements and has the overall capacity to achieve accreditation, it has identified one or more of the eligibility requirements with which an institution or program may be out of compliance. In this case, ACHENA will grant candidacy on condition that the non-compliance issues identified be effectively addressed by the institution or program during the candidacy period, and that the steps taken to address the issues be reported on via interim reports, annual reports, biannual progress reports, supplemental information reports and/or via the Self-Study Report, as specified by the Commission.

#### **1.4, c - Administrative or Procedural Actions**

ACHENA takes an administrative or procedural action when it requires further information in order to make a decision regarding candidacy. ACHENA 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 ACHENA Eligibility Standards.

#### **1.4, c, i - Extend the Eligibility Determination Phase**

ACHENA may act to extend the eligibility determination phase for a period not to exceed one year from the time the Commission first reviews the complete eligibility packet if ACHENA determines that the delay is necessary to provide the institution/program sufficient time to submit a supplemental information report pursuant to an ACHENA request, or in the event of circumstances beyond the institution's control (e.g., natural disaster resulting in suspension of academic programs, U.S. State Department travel warnings to areas in which institution is located, etc.). Generally, the Commission extends the eligibility determination period in six-month increments.

#### **1.4, c, ii - Termination of Eligibility Application**

ACHENA may act to terminate the eligibility application if, after the eligibility determination phase has been extended for up to one year, it is still not possible to conduct an appropriate review of the institution/program and arrive at a candidacy decision due to the program failing to provide sufficient information upon which to base a decision. If within six months following the termination of the eligibility application the institution's/program's circumstances change so as to enable ACHENA to conduct a complete review, ACHENA may at its discretion allow resubmission or revision of any reports on which the review would be based.

#### **1.4, d – Rejecting the Eligibility Application for Non-Compliance**

ACHENA may reject the Eligibility Application if it determines that the institution or program is substantially out of compliance with the Eligibility Requirements and/or lacks the capacity to meet the accreditation standards within the candidacy timeframe. Whenever ACHENA rejects an Eligibility Application, it states the specific reasons for rejection in the action letter it sends to the institution or program. In the event that an Eligibility Application is rejected, the institution or program must wait at least six months before submitting a new Eligibility Application.

#### **1.5 Right to Appeal a Denial of Candidacy**

An ACHENA decision to reject an institution's/program's Eligibility Application is considered an "adverse action" of the commission. As such, the institution/program may formally appeal the decision in accordance with the ACHENA Appeals Policy. In the event of a Final rejection decision, the applicant may submit a new Eligibility Packet with the review fee after a six-month period.

#### **1.6 Terms of Candidacy**

Candidacy status is granted for a period of two years, subject to the conditions set forth in the action letter granting Candidacy and the accreditation policies and procedures. If, in the opinion of ACHENA, a program demonstrates progress in its internal development and is effectively engaged in its self-study process, ACHENA may, at its discretion and upon request of the program/institution, extend Candidacy for an additional year. No more than three one-year extensions may be granted, and in no event will the total period of Candidacy status exceed five years.



### **1.6, a - The Certificate of Candidacy**

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

### **1.6, b - Advertisement and Announcement of Candidacy Status**

When ACHENA notifies a program that it has been granted Candidacy, it also provides 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:

(Name of school) has been accepted as a candidate for accreditation by the Accreditation Commission for Homeopathic Education in North America. (Name of school) has demonstrated that it has met eligibility requirements and its curriculum is generally consistent with ACHENA educational standards. Schools that are candidates for accreditation are actively engaged in self-study and preparation for a peer review site visit. While (name of school) cannot guarantee that the school will be accredited, (name of school) is actively pursuing accreditation and believes that our program is consistent with ACHENA standards. Updates to (name of school)'s status with ACHENA can be found on the ACHENA website at: <http://achena.org/Schools.htm>.

Use of language other than the language designated by ACHENA is not permitted without prior written permission from ACHENA staff. The program must submit to ACHENA, within 30 days of its public announcement of its status, a copy of its announcement of Candidacy status. In addition to the designated language above, the announcement must also include the name, address and telephone number of ACHENA as indicated on the ACHENA website at <http://achena.org/Contact.htm>.

If the institution or program releases information that misrepresents or is misleading with respect to any action by ACHENA during the accreditation process, or the status of affiliation with ACHENA, 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, ACHENA may, at its discretion, release a public statement in such a form and content as it deems necessary to provide the correct information.

### **1.6, c - Annual and Progress Reports**

In order to monitor ongoing compliance with Eligibility Requirements, as well as progress in conducting the self-study process, ACHENA requires Candidate programs to submit an annual report using the designated ACHENA annual report form. In addition to the annual report, ACHENA may require progress reports from Candidate programs on deficiencies identified in the annual reports. ACHENA may also request progress reports to assess compliance with eligibility and accreditation standards which may have been revised and implemented during the program's application and Candidacy phase. Progress reports are due on the date specified in ACHENA's action letter and must address all the issues identified therein.

Based on its review of annual and progress reports, or such other information as ACHENA may

obtain regarding a candidate institution/program, ACHENA reserves the right to require additional reports and/or interim site visits as may be needed.

### **1.7 Notification of Institutional and Programmatic Changes**

Programs/institutions that have been granted ACHENA candidacy are required to apply to the Commission for approval to implement certain institutional and programmatic changes that the Commission categorizes as “substantive changes.” For information, refer to the Substantive Change Policy in this manual.

### **1.8 Sanctions and Adverse Accrediting Actions during the Candidacy Phase**

ACHENA may, for reasonable cause, sanction an institution/program during the Candidacy phase and once accreditation is attained. The following are the three sanctions ACHENA utilizes: “Letter of Advice,” “Contingent Accreditation/Candidacy” and “Show Cause.” Generally, but not always, sanctions are imposed in the order of their severity. These sanctions are described in the Policy on Adverse Actions and Sanctions below, along with procedures and timelines.

#### **1.8, a – Sanctioning a candidate institution or program**

The following are some of the circumstances under which ACHENA may sanction a candidate program:

1. Evidence of progress toward meeting ACHENA Accreditation Standards is lacking;
2. The circumstances under which the program was admitted to Candidacy are substantially altered so as to render the program no longer eligible for Candidacy;
3. The program appears to be in substantial non-compliance with any of ACHENA's Eligibility Requirements or Accreditation Standards;
4. The program violates or fails to observe ACHENA's policies and procedures.

Whenever ACHENA initiates a sanction, it informs the program of the grounds for the sanction, the steps the program must take to address the sanction, requirements regarding reporting and notification of students, and any other requirements imposed by the Commission such as an onsite visit.

#### **1.8, b - Withdrawal of Candidacy Status**

If a program fails to adequately address the issues upon which ACHENA sanctioned the program, the Commission may initiate an adverse action, such as withdrawing a program’s Candidacy status, after due notice. Grounds for withdrawing candidacy include:

1. Deficiencies required to be corrected within a specified period are not corrected within that period;
2. The Candidate program fails to achieve accredited status within two years of acceptance as a Candidate, or within any period of extension granted by ACHENA;
3. The program has not corrected the specific Requirements of Candidacy within the time set by ACHENA, or within any period of extension granted by ACHENA;
4. The Candidate program has engaged in illegal conduct or is misrepresenting itself or presenting false information to the faculty, staff, students, the public or ACHENA;
5. The Candidate program fails to provide fully and accurately all pertinent information and

- materials requested by ACHENA;
6. The Candidate program fails to submit an annual report, progress report, interim report or any other report required by ACHENA;
  7. The Candidate program refuses to host a required site visit;
  8. The program fails to seek and obtain advance approval by ACHENA of any new program or other institutional/programmatic change or addition for which a substantive change notification is required under ACHENA policies and procedures;
  9. The program fails to report to ACHENA the implementation of a “non-substantive” change within 30 days of the change, as required under ACHENA policies and procedures;
  10. The program fails to pay a Candidacy fee, sustaining Candidacy dues, site visit fee or any other dues or fee set by ACHENA by the date set by ACHENA; or
  11. The program ceases to exist or is no longer functional.

An institution in which the candidate program is located may request the removal of the program from Candidacy at any time. ACHENA will comply with such a request and delete the program from ACHENA list of Candidate programs.

A program whose Candidacy has been withdrawn or that withdraws from Candidacy must wait at least six months before reapplying for Candidacy. Generally, a program that wishes to reapply for Candidacy must first satisfactorily address the reasons for the previous withdrawal of Candidacy.

If Candidacy status is withdrawn by ACHENA 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 ACHENA action to withdraw or 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. Note, however, that should the program decide to appeal ACHENA's withdrawal of candidacy, its candidacy status automatically remains in effect until the expiration of the period within which the appellant program may file a letter of appeal, or until the completion of the appeals process, whichever shall later occur. Upon withdrawal of candidacy, all references and claims of Candidacy must be deleted from catalogs, advertising, and other printed promotional materials. ACHENA 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 Overview**

During the period of Candidacy, the program engages in the activities that are required in order to be eligible for accreditation. These include submitting annual and progress reports, attending a Self-Study workshop, conducting a Self-Study process, submitting a Self-Study Report, hosting an accreditation site visit, and submitting a formal institutional response (FIR) to the site visit report with other required documentation. During this period, ACHENA maintains liaison with the Candidate program.

While, ACHENA staff and Visiting Team members are unable to act as formal consultants to the candidate program, ACHENA 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 Report.

During the candidacy period, the program should focus on implementing its plans for meeting the Accreditation Standards and implementing its Self-Study process according to the guidance provided in the ACHENA Self-Study Guide. The term “self-study” is intended to convey the concepts of 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 limited 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—but no later than 3 months prior to the end of the Candidacy period—unless it is granted an extension for good cause.

A program may choose to withdraw or suspend its application for Accreditation at any time during the Candidacy period before ACHENA makes a final decision on its accreditation status. However, a program of institution which suspends candidacy is still required to achieve accreditation within the five-year candidacy period or lose its candidacy status.

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

A program that obtains candidacy status is required to submit an annual report to the ACHENA office in a form provided by ACHENA on or before the date specified by ACHENA.

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

### **2.2 Letter of Intent**

Prior to attending the mandatory Self-Study Workshop and the submission of a Self-Study Report, the program must submit a “Letter of Intent” to pursue accreditation or reaccreditation status that has been authorized by the institution’s governance structure.

### **2.3 Self-Study Workshop**

Following submission of a letter of intent, programs or institutions seeking accreditation or reaccreditation must attend a Self-Study Workshop prior to submission of its Self-Study Report to ACHENA. Workshops are conducted by ACHENA periodically and may be offered via phone consultation or viewed in archived format. Information regarding the Self-Study workshop may be obtained by contacting an ACHENA staff member. 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's Self-Study Report should address and document the degree to which the program is achieving its mission, goals, objectives, and outcomes, as well as demonstrate compliance with ACHENA Accreditation Standards. The program is required to submit an electronic copy of the Self-Study in accordance with directions provided in the ACHENA Self Study Guide.

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

ACHENA staff or a designated commissioner 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, ACHENA may require additional or clarifying information from the program, or may require the report to be substantially rewritten and resubmitted if it does not reflect an institution-wide self-study, does not meet the requirements outlined in the ACHENA Self-Study Guide, or does not adequately document compliance with ACHENA Standards and Criteria.

In the event that ACHENA defers action on accreditation or reaccreditation due to the submission of a deficient Self-Study Report and requires the report to be revised and resubmitted, it may extend candidacy or accreditation for up to one year. During the period of deferral, the program may, at ACHENA's discretion, be placed on probationary status. If the accreditation period is extended,

ACHENA will reduce the subsequent reaccreditation period by the length of the extension. Failure to submit a satisfactory Self-Study Report within the required timeframe or any extended period of time granted by the Commission may result in suspension or withdrawal of candidacy or accreditation status.

## **2.6 Initial and Re-Accreditation Site Visits**

A one-day to three-day site visit is required for initial accreditation and subsequent re-accreditation to verify the contents of the Self-Study Report and to assess compliance with ACHENA Accreditation Standards. ACHENA may notify regional, state or other accreditation agencies and other state licensing authorities of the upcoming visit and may in consultation with the institution invite other agencies to conduct a joint visit with ACHENA.

### **2.6, a - Appointment of Site Visit Teams**

ACHENA appoints an appropriately qualified site visit team to conduct the site visit.

A Site Visit Team shall, at a minimum, comprise the following individuals:

1. A homeopathic *educator* with expertise in homeopathy curricula, methods of training, program assessment and development.
2. A homeopathic *practitioner* who is currently engaged in practice and knowledgeable about homeopathic training;
3. A *management specialist* with expertise in administration and the business aspects of school operation; and
4. An *educational specialist* with expertise in instructional methods and educational processes.

(Note that it is not unusual for an individual to have expertise in more than one area.)

If ACHENA determines that an individual with expertise in areas other than those listed above is needed in order to effectively conduct the site visit, ACHENA may appoint an additional team member with the necessary expertise.

In addition to appointing individuals to site visit teams with appropriate expertise, ACHENA is careful to avoid appointing individuals who may be biased or have a conflict of interest in relation to the program/institution (see Section 3.6, Policy Statement on Conflict of Interest). ACHENA will inform the program/institution of the composition of the site visit team. Should the program/institution believe that any member of the team is unsuitable due to a conflict of interest, bias or other reasonable ground, the program/institution may object to the appointment. In the event that a program/institution objects, it shall document its reasons. If the objection is reasonable as determined by ACHENA, ACHENA shall replace the visitor.

#### **2.6, b - Site Visit Report**

During the site visit, the team prepares for ACHENA a written site visit report of their findings regarding the program's compliance with the Accreditation Standards, including the team's assessment of the degree to which the program is achieving its mission, goals, objectives and outcomes.

Prior to issuing the final version of the site visit report, the site visit team chair provides a copy of the draft report to the program for review. The program is asked to inform the team chair of any perceived errors of fact contained in the report within five business days. The site visit team chair may, at his/her discretion, revise the report to address any factual errors. A copy of the final site visit report is then provided to the program and ACHENA. Additionally, the team chair provides to the full commission the team's confidential recommendation regarding the granting of initial accreditation or re-accreditation.

#### **2.6, c - Formal Institutional Response to Site Visit Report**

The program must submit a formal institutional response (FIR) to the final site visit report within one month of receipt of the report. The FIR should address any of the findings in the site visit team report with which the program does not agree along with supporting documentation and any additional requests from ACHENA based on findings. The FIR response may not exceed 25 pages including documentation.

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

The Commission considers the accreditation or re-accreditation status of a program based upon the accreditation record, which consists of the following:

- The program's self-study report;
- The site visit team report;
- The program's formal institutional response;
- The site visit team's confidential recommendation to the commission;
- Public comments received, if any;
- The program's response to any public comments;
- Information obtained during a formal accreditation hearing, if one is held; and
- Any other generally available information (e.g., information published on the program's website).

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 (i.e., public comments) may be submitted on a program that is being reviewed for (re)accreditation, and any third party testimony received by the Commission is submitted to the program for its opportunity to respond in writing. See Section 3, Policy on Public Comments.

The Commission deliberates and takes action on the accreditation or re-accreditation of the program during a closed session of an ACHENA meeting at which only Commissioners and ACHENA staff without a conflict of interest are present. No other person may be present without the approval of the program and the Commission, except that the Commission may, at its discretion, allow any official of a state, federal or accreditation agency to observe its deliberations.

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

As noted above, the Commission considers a range of information and materials whenever it takes action to grant initial accreditation or reaccreditation to a program/institution.

The Commission may conduct a review or request a report of an accredited institution or program at any time it has information or evidence that indicates that the institution/program may no longer meet ACHENA Eligibility Requirements or Accreditation Standards, or if the institution reports significant developments and changes, or conducts activities that may significantly impact the educational effectiveness of the institution/program.

If an institution or program fails to submit a required follow-up or other report, including its annual report, fails to respond to ACHENA requests for information or scheduling a visit, or has not submitted dues or fees owed ACHENA by the required deadline, the institution will be considered to have voluntarily allowed its accreditation to lapse. The institution or program 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 ACHENA. ACHENA 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 ACHENA policy.

The following is the range of accrediting actions available to the Commission:

#### **2.8, a - Granting Accreditation/Reaccreditation without conditions**

In the event that an institution or program is in full compliance with ACHENA's Accreditation Standards, then ACHENA may act to grant accreditation or reaccreditation without any conditions.

#### **2.8, b - Monitoring Actions**

A monitoring action indicates that ACHENA has identified one or more accreditation standards with which an institution/program is not in compliance or is partially in compliance, and therefore ACHENA requires the institution/program to take remedial steps to bring itself into full compliance. ACHENA monitors the institution's/program's progress in remediating issues by means of interim reports, annual reports, supplemental information reports, monitoring reports and interim site visits; these are described below.

#### **2.8, c - Procedural Actions**

ACHENA takes a procedural action when it requires further information in order to make a decision regarding accreditation. ACHENA may postpone a decision and request a supplemental information report when it has determined that there is insufficient information to evaluate institutional/program compliance with one or more ACHENA Accreditation Standards. The Commission specifies what the required supplemental information report must address.

Whenever an institution/program allows its accreditation status to lapse due to failure to observe ACHENA requirements (e.g., payment of fees, submission of required reports), ACHENA may take procedural action to withdraw accreditation following due notice to the institution/program.

#### **2.8, d - Sanctions**

When the Commission has identified one or more areas in which the institution or program does not meet the Accreditation Standards, and the institution/program has failed to demonstrate that the non-compliance has been satisfactorily addressed within the timeframe set by the Commission, the Commission may sanction the program. As noted earlier, ACHENA utilizes the following three sanctions: "Letter of Advisement," "Contingent Accreditation/Candidacy" and "Show Cause." These sanctions are described in the Policy on Adverse Actions and Sanctions in Part III below.

#### **2.8, e - Adverse Accrediting Actions**

When an institution/program fails to respond to a sanction by remedying a non-compliance issue, the Commission may initiate an Adverse Accrediting Action, such as withdrawing or denying accreditation status (see the Policy on Adverse Actions and Sanctions in Part III below). 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 six months from the date accreditation status was denied or withdrawn. At the time that it reapplies, the program must demonstrate that it has corrected the deficiencies noted in the former accreditation process.

### **2.8, f - Administrative Actions**

In the event that ACHENA is unable to evaluate the institution/program due to circumstances which ACHENA determines to be outside of the institution's/program's or ACHENA's control, ACHENA may take an administrative action. This action does not speak to the inability of the institution or program to meet ACHENA Standards, but rather the ability of ACHENA to conduct an appropriate review and to determine compliance. The program maintains its candidacy or accreditation status with ACHENA during the time period that an administrative action is in effect. The following is an example of an administrative action available to the Commission:

#### **2.8, f, i - Extend Accreditation or Candidacy**

ACHENA may act to extend accreditation or candidacy for a period not to exceed one year if ACHENA 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 ACHENA during this period.

## **2.9 Types of Follow-Up**

ACHENA may require various follow-up actions, such as reports and site visits, to ensure their continued compliance with the requirements of accreditation.

These include:

### **2.9, a - Interim Report**

ACHENA may require an institution/program to submit an interim report that describes its progress relative to remediating findings of ACHENA on (re)accreditation at any time during the accreditation period. ACHENA also may require the institution/program to address other matters in the interim report, such as progress on planned activities to enhance institutional/program effectiveness.

### **2.9, b - Supplemental Information Report**

In the event that ACHENA has determined that there is insufficient information to verify institutional/program compliance with ACHENA standards, ACHENA will request a Supplemental Information Report, indicating in its request what the report should cover.

### **2.9, c - Monitoring Report**

ACHENA will request a monitoring report when it is concerned about the potential for future non-compliance with one or more ACHENA Accreditation Standards, 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 ACHENA (e.g., quarterly, bi-annually).

#### **2.9, d - Interim Site Visit**

ACHENA may require a program to host an interim site visit, virtual or onsite, to seek continuing evidence of compliance with ACHENA's standards, including any deficiencies identified in prior reviews, or, to verify any standards which have been revised and implemented during the program's accreditation cycle. Generally, an interim visit is conducted following the submission of a monitoring report, interim report or supplemental information report that addresses the issues in question and may be required in conjunction with a Show Cause action. A visit may be conducted by a staff member, individual evaluator, or by a team, virtual or onsite, depending on the nature and number of ACHENA concerns.

Reports submitted for follow-up actions may be accepted, acknowledged, or rejected.

- ACHENA "accepts" a report when its quality, thoroughness, and clarity are sufficient to respond to all of ACHENA's concerns, without requiring additional information in order to assess the institution/program's status.
- ACHENA "acknowledges" a report when it addresses ACHENA's concerns only partially because of incomplete content or insufficient quality. ACHENA 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 ACHENA's concerns. ACHENA requires the institution/program to resubmit the report and may, at its discretion, require a visit.

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

ACHENA specifies the time period within which the program must come into compliance with the revised standard or remediate any non-compliance issue. Generally speaking, ACHENA allows programs a maximum of two years to remediate any non-compliances. However, ACHENA has discretion to specify a shorter time period in which the program must remediate issues and may for good cause extend the time period beyond two years. If the time period is extended beyond two years, the program shall be placed on contingent accreditation/candidacy status and shall be given no more than one additional year to come into compliance (see Policy on Enforcement of Standards in Part III below). Ultimately, if a program is unable to remediate outstanding non-compliance issues within the time periods prescribed by ACHENA, the Commission will initiate an adverse action such as withdrawing accreditation.

When ACHENA finalizes revision to the Standards, it shall allow a reasonable time for schools and programs to comply. ACHENA may request a follow-up report or conduct a site visit with reasonable notice, virtual or onsite, to verify compliance with any changes to standards.

All time limits set by ACHENA are based upon the date of the ACHENA action, not the date of the team visit or report that triggered the action.

#### **2.11 Decisions of States and other accrediting agencies**

### **2.11, a – Requirement of Legal Authorization**

ACHENA will not accredit or pre-accredit institutions that lack legal authorization under applicable State/Provincial law to provide a program of education beyond the secondary level.

### **2.11, b – Respect for Actions of other Authorities**

Except as provided in paragraph (c) of this section, ACHENA will not grant candidacy, initial accreditation or re-accreditation to an institution, or a program offered by an institution, if ACHENA knows, or has reasonable cause to know, that the institution is the subject of:

- (1) A pending or final action brought by a State/Provincial agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State/Province;
- (2) A decision by a recognized agency to deny accreditation or pre-accreditation;
- (3) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or pre-accreditation; or
- (4) Contingent Accreditation/Candidacy or an equivalent status imposed by a recognized agency.

### **2.11, c – Exceptions**

Notwithstanding the above, ACHENA may grant accreditation or pre-accreditation to an institution or program described in paragraph (b) of this section if it provides to the U.S. Secretary of Education, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, why the action of the other body does not preclude the Commission's grant of accreditation or candidacy.

### **2.11, d – Awareness of Adverse Actions**

If ACHENA learns that an institution it accredits or that has candidacy status, or an institution that offers a program it accredits or to which it has granted candidacy, is the subject of an adverse action by another recognized accrediting agency or has been placed on contingent accreditation/candidacy or an equivalent status by another recognized agency, ACHENA will promptly review the accreditation or candidacy status of the institution or program to determine if it should also take adverse action or place the institution or program on contingent accreditation/candidacy or show cause.

### **2.11, e – Notification of ACHENA Actions to Other Authorities**

ACHENA will, upon request, share with other appropriate recognized accrediting agencies and recognized State/Provincial approval agencies information about the accreditation or candidacy status of an institution or program and any adverse actions it has taken against an accredited or pre-accredited institution or program.

## **2.12 Terms of Accreditation**

ACHENA grants accreditation for a period of five years. Programs wishing to remain accredited beyond the 5-year accreditation period must seek reaccreditation in accordance with ACHENA's policies and procedures.

Accredited programs should begin the reaccreditation process no later than 18 months prior to the date of expiration of the current accreditation period and must report on its progress in implementing the self-study process in its annual reports submitted to ACHENA.

ACHENA, at its discretion and upon the program's request, may grant an extension of the current accreditation period. Such an extension may be granted when ACHENA 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. Up to three extensions 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.

#### **2.12, a - The Certificate of Accreditation**

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

#### **2.12, b - Advertisement and Announcement of Accreditation**

A program achieving initial accreditation or 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 to be used shall be one of the following statements:

##### **Single-purpose homeopathic educational institutions that have been granted INSTITUTIONAL accreditation status:**

*The [name of institution] is institutionally accredited by the Accreditation Commission for Homeopathic Education in North America (ACHENA), an independent, non-profit, specialized accrediting agency whose mission is to promote excellence in the education of professional homeopaths. Contact information for ACHENA can be found at [www.achena.org](http://www.achena.org).*

##### **OR if the institution has been placed on Contingent Accreditation, the following statement will be used:**

*The [name of institution] is institutionally accredited with Contingent Accreditation by the Accreditation Commission for Homeopathic Education in North America (ACHENA), an independent, non-profit, specialized accrediting agency whose mission is to promote excellence in the education of professional homeopaths. Contingency status will be lifted upon demonstration of full compliance of Accreditation Standards [list all standards out of compliance] by [date]. Contact information for ACHENA can be found at*

[www.achena.org](http://www.achena.org)

**Educational Programs within a larger institution that have been granted PROGRAM-MATIC accreditation:**

*The [name of program] is accredited by the Accreditation Commission for Homeopathic Education in North America (ACHENA), an independent, non-profit, specialized accrediting agency whose mission is to promote excellence in the education of professional homeopaths. Contact information for ACHENA can be found at [www.achena.org](http://www.achena.org).*

**OR if the program has been placed on Contingent Accreditation, the following statement will be used:**

*The [name of program] has been given Contingent Accreditation by the Accreditation Commission for Homeopathic Education in North America (ACHENA), an independent, non-profit, specialized accrediting agency whose mission is to promote excellence in the education of professional homeopaths. Contingency status will be lifted upon demonstration of full compliance of Accreditation Standards [list all standards out of compliance] by [date]. Contact information for ACHENA can be found at [www.achena.org](http://www.achena.org)*

The announcement must also include the name, address and telephone number of ACHENA.

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

The program must submit to ACHENA, within 30 days of its public announcement of its status, a copy of the announcement of its accredited status.

The actions of ACHENA 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 accreditation action or decision by ACHENA, or the status of affiliation with ACHENA, the Chief Executive Officer of the institution will be notified and informed that corrective action must be taken. If corrective action is not promptly taken, ACHENA may release a public statement that provides the correct information.

**2.12, c - Annual and Interim Reports**

Annual reports are required of all accredited programs on a form provided by ACHENA.

ACHENA monitors continuing compliance with ACHENA Standards for accreditation; for this purpose, ACHENA may also require other reports in addition to the annual report from accredited programs and/or an onsite visit to verify that a program is addressing deficiencies identified in prior ACHENA reviews. An interim report may also be required to evaluate compliance with revised or new standards that have been implemented during the program's accreditation cycle.

**2.12, d - Annual Sustaining Accreditation Dues**

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

### **2.13 Notification of Institutional and Programmatic Changes**

Programs/institutions that have been granted ACHENA accreditation are required to apply to the Commission for approval to implement certain institutional and programmatic changes that the Commission categorize as “substantive changes.” For information, refer to the Substantive Change Policy in Part III of this manual.

### **2.14 Sanctions and Adverse Accrediting Actions**

#### **2.14, a - Sanctions**

ACHENA may, for reasonable cause, sanction a program that has been granted accreditation status. Sanctions include issuing a letter of advisement (which constitutes a warning), contingent accreditation/candidacy and show cause (see the Policy on Sanctions and Adverse Actions in Part III of this Manual for more information). The following are some of the reasons why ACHENA may sanction a program:

1. Evidence of progress toward complying with ACHENA standards and criteria to address deficiencies previously identified by ACHENA is lacking;
2. The circumstances under which the program was accredited are substantially altered so as to cause it to be out of compliance with ACHENA standards and criteria;
3. The program appears to be in substantial non-compliance with any of ACHENA's Eligibility Requirements, Standards or Criteria;
4. The program violates ACHENA's policies and procedures.

#### **2.14, b - Adverse Actions**

In the event that a program fails to respond to any sanctions and continues to be non-compliant with ACHENA standards and policies, ACHENA may after due notice initiate an adverse action, such as suspending or withdrawing Accreditation from a program directly for reasons such as:

1. The deficiencies to be corrected during a contingent accreditation/candidacy period are not corrected within that period;
2. The program has not corrected the specific requirements of accreditation within the time period specified by ACHENA and without cause satisfactory to ACHENA;
3. ACHENA 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 ACHENA;
4. The program fails to provide fully and accurately all pertinent information and materials requested by ACHENA;
5. The program does not submit its annual report, progress report, interim report, Self-Study Report or any other report required by ACHENA;
6. The program fails to pay the accreditation acceptance dues, sustaining accreditation dues, site visit fees, or any other fees set by ACHENA within the time limit set by ACHENA; or

7. The program no longer exists or is not functional.

See the Policy on Sanctions and Adverse Actions in Part III of this Manual for more information on the range of adverse actions available to ACHENA and related procedures.

## **Part III: General Policies and Procedures of the Accreditations Process**

### **3.1 Effective Dates and Publication of ACHENA Candidacy and Accreditation Actions**

ACHENA actions are effective as of the date of the meeting of ACHENA at which the decision is made. ACHENA makes every effort to notify institutions of all accrediting decisions as soon after each ACHENA meeting as possible, but in any event no later than 30 calendar days following an ACHENA meeting. ACHENA provides notification of accreditation decisions as outlined below.

#### **3.1, a - Action Letters or Electronic Communication**

ACHENA sends letters or electronic notification regarding any ACHENA action to institutions within 30 calendar days following each ACHENA meeting that specifies the basis for the action taken.

#### **3.1, b - Candidacy, Initial or Renewed Accreditation**

Within 30 calendar days of each ACHENA meeting, ACHENA forwards a letter to the U.S. Secretary of Education listing all final ACHENA candidacy and accreditation actions from that meeting. A written notice of all final ACHENA actions is also sent to national homeopathic organizations, 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 ACHENA website.

#### **3.1, c - Final Adverse Accreditation Decisions**

ACHENA provides written and/or electronic notice of final adverse accreditation actions (e.g., final decisions to deny, withdraw, or terminate candidacy or accreditation) to the institution that is the subject of the decision as well as to the U.S. Secretary of Education, national homeopathic organizations, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies no later than 30 days after it reaches the decision. ACHENA provides written notice of such decisions to the public via its website within 24 hours of informing the institution.

Within 60 days of its decision, ACHENA makes available a brief statement, called a Public Disclosure Notice, summarizing the reasons for ACHENA's decision and the official comments that the affected institution or program may wish to make with regard to that decision, or evidence that the affected institution has been offered the opportunity to provide official comment. The Public Disclosure Notice is made available to the U.S. Secretary of Education, national homeopathic organizations, the appropriate State licensing or authorizing agency, the appropriate regional or specialized accrediting agencies and the public.

In the event that an institution voluntarily withdraws from candidacy or accreditation or its candidacy or accreditation status lapses, ACHENA notifies, within 30 days of the institution's decision, the U.S. Secretary of Education, national homeopathic organizations, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies. ACHENA also notifies the public through its web site and upon request. Notification is normally conducted through the summary of accreditation actions distributed after each ACHENA meeting.

ACHENA makes public its final candidacy and accreditation actions in its official list of Accredited and Candidate programs, which is made available upon request, posted on its website, and provided through other written communications as determined by ACHENA. The official list of Accredited and Candidate programs is updated within 30 days of ACHENA meeting to reflect the latest decisions of ACHENA, except that no change in the status of a program will be reflected in the list if, after an Adverse Accrediting Action, the time in which the program may seek reconsideration or appeal has not yet passed, or the program has filed a timely request for reconsideration or for appeal, which has not yet been decided.

ACHENA reserves the right to disclose any Adverse Accrediting Action to the public or to relevant state, federal or accrediting agencies, regardless whether such action is being reconsidered or is on appeal, in those instances in which ACHENA reasonably believes it is legally required to disclose such information, or where ACHENA, upon the taking of Adverse Accrediting 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, ACHENA 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 ACHENA notify any state, federal or accreditation agency of an Adverse Accrediting Action, the Commission may make available to that agency material in its files pertinent to the action.

### **3.2 Time Provisions**

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

### **3.3 Branch Campus Policy**

A branch campus will be classified as an operationally separate unit if it:

1. is under the general control of a parent institution or central administration in a multi-unit system;
2. has a distinct core faculty, a separate student body, and resident administration; and
3. offers a program or programs comprising a totality of educational experience as defined by ACHENA (50% or more of the educational program).

ACHENA reserves the right to interpret its definition of separate units. 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. Based on the unit's substantive change application, the site visit report, and the unit's formal institutional response to that report, ACHENA will act to either grant or deny candidacy status to the new operationally separate unit.
2. If the new operationally separate unit attains candidacy status, it must achieve accreditation status pursuant to ACHENA's procedures for candidate institutions and programs seeking initial accreditation. A self-study report for accreditation will not be accepted until there are students enrolled in each year of the program.
3. 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 operationally separate as defined above. These institutions are expected to seek accreditation through the usual procedures.

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 ACHENA from the parent institution, with its applications and self-study 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 institution over the unit;
6. A comprehensive explanation of relationships with and delegation of authority between the parent institution 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 ACHENA programs offered by the parent institution.

The unit includes in its self-study 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 ACHENA are included in ACHENA's assessment of the parent institution, regardless of location.

### **3.4 Confidentiality and Retention of Records**

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 ACHENA are the exclusive property

of the institution and Commission, and accordingly will not be shared with any persons, agencies, entities or other persons, except as required or permitted by federal or state/provincial laws and regulation or relevant ACHENA policies, as determined by ACHENA, unless the institution authorizes ACHENA to share the information.

For each program's last two comprehensive reviews, the Commission maintains the following records: (1) the institution's/program's self-study reports, (2) the Commission's site team reports, and (3) the institution's/program's responses to the site team reports.

The Commission also maintains the following records on each program dating back to the Commission's second-to-last comprehensive review (1) all of the annual reports submitted by the institution/program, (2) any interim reports or progress reports submitted by the institution/program, (3) any interim or focused evaluation team reports and the institution's/program's responses, and (4) any reports or materials generated as a result of a special review.

ACHENA also maintains throughout a program's affiliation with the Commission the following records: (1) all decisions regarding accreditation and candidacy, including correspondence that is significantly related to those decisions; (2) decisions and correspondence related to substantive changes; and (3) a complete and accurate chronological record of all its decisions regarding candidacy and accreditation of a program.

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

ACHENA expects and requires institutions and programs of homeopathy to meet the highest standards of integrity in the accreditation process. ACHENA believes that the integrity of an institution and its homeopathy 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 ACHENA, the institution and its program shall, at all times, demonstrate honesty and integrity. Accordingly, the institution agrees to comply with ACHENA requirements, policies, procedures, guidelines, self-study requirements, decisions, and requests.

In the accreditation process, the institution shall be completely candid and provide all pertinent information. With due regard for the rights of individual privacy, the institution and its program shall provide ACHENA 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. The institution shall cooperate fully with ACHENA in preparation for visits and shall comply with ACHENA's requests for acceptable reports. Each chief administrative officer shall sign a statement on each report submitted to ACHENA (Eligibility Report, Self-Study Report, Annual Report, Progress or Interim Report, etc.) that states that the report complies with the principles of integrity of ACHENA.

#### **3.5, a - 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 ACHENA or its staff that

the program has violated the principles of integrity in any reports or materials submitted to ACHENA or in any other manner that requires immediate attention, ACHENA 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 result in a sanction and affect the institution's/program's status with ACHENA.

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

All ACHENA board members, staff, and site visitors must disclose immediately, verbally and in writing, to ACHENA 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 ACHENA action on an institution or its program.

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

#### **3.6, a - Visiting Team Member Conflicts of Interest**

1. The visiting team is appointed so that:
  - No member of the team will have been an employee or appointee of the program or the sponsoring institution within the last five years or have close relatives who are appointees or employees.
  - No member of the team will have been a graduate of the institution/program.
  - No member of the team will have publicly expressed opinions bearing on the accreditability of the institution/program.
  - No member of the team will have any sort of special relationship with, or any other potential conflict of interest with, the institution or its program.
2. If a potential visiting team member with a conflict of interest is asked to serve on a team, he/she should decline the invitation if he/she is aware of a conflict of interest.
3. ACHENA 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 ACHENA of any objection to the proposed visiting team members. Any member objected to for reasonable cause, as determined by ACHENA, shall be replaced.
4. A site visitor may not suggest to a program at any time that the institution/program hire him/her to serve as a consultant or in a temporary/permanent position with the institution/program visited. In the event that a site visitor makes such a suggestion, the institution/program shall report this to the ACHENA executive director/administrator.
5. A representative of an institution/program being visited may not solicit any site visitor before or during a visit, or prior to final action by ACHENA, to serve as a consultant or a permanent employee. In the event that a site visitor is so solicited, he/she shall report this to the ACHENA executive director/administrator.
6. Members of a site visit team serve in their personal and individual capacities and their service carries no implication of participation by any institution or other organization by which that person may be employed, be a member or otherwise be associated.
7. Failure on the part of any site visitor to adhere to these requirements or any of the con-

duct requirements set forth in the Site Visitor Manual is grounds for the permanent removal from ACHENA's roster of site visitors. If ACHENA receives evidence that a site visitor may have violated any of these requirements, ACHENA will submit to the site visitor written notice of the allegations and provide the site visitor an opportunity to respond in writing. Based on its review of the record, ACHENA will decide whether the site visitor will remain in the site visitor roster or be permanently removed.

### **3.6, b - ACHENA Board Member, Advisor and/or Consultant Conflicts of Interest with Reviewed Programs**

An ACHENA board member, Advisor and/or Consultant may 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 ACHENA on an institution/program, if the Board member, Advisor and/or Consultant:

1. home institution is part of the same system;
2. has been a candidate for employment in the institution under review within the past year;
3. has been employed by the institution within the past five years;
4. is a member of the institution's governing body;
5. has a personal, business, consultative, or other interest in or relationship with the institution under review, or there are other considerations that could affect his or her objectivity;
6. is affiliated with an institution that 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. has a family member who is an employee, board member, candidate for employment, or student at the institution;
8. has expressed personal opinions bearing upon the accreditability of the institution;
9. 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;
10. served on the site visit team of the institution that is being evaluated, or
11. is associated with any other circumstances that could be perceived as a conflict of interest.

### **3.6, c - ACHENA Board Members who are Consultants**

ACHENA carefully considers the participation of a person who provides consultation and other advisory services on an individual basis to homeopathic institutions/programs and implements the ACHENA Conflict of Interest Policies when applicable for these individuals.

### **3.6, d - ACHENA Paid Staff or Contractors with Conflicts**

ACHENA Paid Staff or Contractors that are also employed by a candidacy or accredited ACHENA institution/program may have a conflict of interest and therefore may not serve as a site visitor or Peer Reviewer for any institution/program, and may not participate in any review deliberations. This provision does not apply to ACHENA non-accreditation review work.

### **3.6, e - Appeal Panelist Conflicts**

In an appeal of an ACHENA decision, individuals serving on an Appeals Panel shall have no current or prior employment, governance, consultant or other direct affiliation with the Appellant. Nor shall the individuals have family members who are affiliated with the Appellant or with a homeopathic institution/program in the same geographical area as the Appellant program.

### **3.7 Procedure for the Review of Complaints**

ACHENA accepts and reviews complaints about ACHENA-accredited or candidate programs from students, faculty, staff, other institutions or programs and members of the public that allege violations of ACHENA Eligibility Requirements, accreditation standards, policies or procedures.

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

ACHENA normally requires a complainant to exhaust institutional grievance and review mechanisms available to the complainant within the institution prior to submitting a complaint to ACHENA. To be processed, a complaint must:

1. Be written and signed;
2. Identify the individual, group or legal entity making the complaint;
3. Present evidence that the complainant has exhausted internal institutional grievance and review mechanisms available to the complainant;
4. Present evidence that the subject institution/program has violated one or more of ACHENA's Eligibility Requirements, Accreditation Standards, policies or procedures within the last five years;
5. Describe the status of legal action, if any, related to the complaint;
6. Grant permission to send the complaint in its entirety to the institution.

Complaints must be addressed to ACHENA President and submitted to ACHENA in writing as listed on the ACHENA website at [www.achena.org](http://www.achena.org). 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.

ACHENA will acknowledge receipt of each complaint received against an accredited or candidate program within 15 days of receipt. Staff will review the complaint and, if it is found to be appropriate for review, will within 30 days notify the Chief Executive Officer of the institution of the complaint, and will request that a written response be received within 30 days of the notification. After receipt of the institution's written response, ACHENA staff may seek an informal resolution without formal action by ACHENA.

If a complaint requires formal ACHENA review and action, the complaint record is forwarded to an ACHENA Review Committee, appointed by the president, 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 alleging or establishing a violation of Commission Eligibility Requirements, Accreditation standards, policies or procedures.
3. Affirm that the complaint record establishes a violation of ACHENA Eligibility Requirements, accreditation standards, policies or procedures and require the institution/program to take remedial action. The Review Committee may also place the complaint on the meeting agenda for full ACHENA action for its review.

ACHENA 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. If ACHENA determines that the institution or its program is in non-compliance with any ACHENA Eligibility Requirements, accreditation standards, criteria, policies or procedures, ACHENA will instruct the institution to take remedial action and document institution/program action in response to the decision in a follow-up report or as confirmed by a site visit. Depending on the nature and seriousness of the complaint, ACHENA may take other actions in regard to the program up to and including a show cause.

All Complaints will normally be resolved within 90 calendar days.

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

ACHENA engages in a systematic and comprehensive review of its eligibility requirements and accreditation standards at least every ten years in order to ensure that its standards continue to be appropriate for evaluating the quality of education and training provided by the institutions and programs it accredits, and continue to be relevant to and supportive of the professional needs of students and graduates. If ACHENA 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 time period. All relevant ACHENA communities of interest, including accredited institutions/programs, candidates for accreditation, state, provincial and accrediting agencies, homeopathic organizations, and members of the public, are notified of any proposed changes and are given an opportunity to submit comments. ACHENA will consider all comments received before finalizing the changes and considering them for adoption.

#### **3.8, a - Procedures for Revising Standards**

Generally, suggestions and proposals for changes to the ACHENA Eligibility Requirements and Accreditation Standards come from a variety of sources, including:

- a. ACHENA board members and staff.
- b. ACHENA's communities of interest.
- c. Students, graduates, faculty, college administrators, and clinical instructors of ACHENA-accredited and candidate program.
- d. Practitioners and professional organizations.
- e. Members of the public.

Additionally, new laws and regulations that apply to accrediting agencies, such as the U.S. Department of Education criteria, may necessitate corresponding revisions to the ACHENA standards and policies.

ACHENA's Standards Committee is responsible for overseeing and conducting the comprehensive review of ACHENA Standards. The following are the procedures for conducting the standards review. Note that ACHENA may, at its discretion, adopt non-substantive changes (i.e., changes that do not alter meaning) in ACHENA Eligibility Requirements and Accreditation Standards for the purpose of clarification, adopt changes or additions to Standards that are mandated by the US Secretary of Education, or adopt changes or additions to ACHENA policies and procedures without implementing this review procedure.

- a. Suggestions for change are reviewed by ACHENA and, if appropriate, incorporated into a draft proposal for change.
- b. Draft proposals are presented to ACHENA for review and approval to circulate for public comment.
- c. ACHENA provides opportunities for public comment on all proposals for standards changes it has approved, which may include the solicitation of written comments, on-line standards surveys and public hearings.
- d. ACHENA reviews all public comments and decides whether or not to adopt the proposal either as written or with further revisions; for any standards changes that are adopted, ACHENA also specifies the implementation date. Eligibility Requirements and Accreditation Standards that are adopted by the Commission are published on the ACHENA web site and included in any addendum or revised editions of the ACHENA Accreditation Manual.

### **3.9 Policy Statement on Closure of an Institution or Program**

A decision to close an ACHENA-accredited or candidate program, branch campus, or the entire institution requires thoughtful planning and careful consultation with all affected constituencies. Every effort should be made to informing each constituency as fully as possible about the conditions compelling consideration of a decision of such importance, and all available information should be shared. As much as possible, 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, but responsibility for the final decision to close rests with the board of trustees or owners of the institution. Since the immediate interests of current students and faculty are most directly affected, their present and

future prospects require especially sensitive and timely attention and involvement. If an ACHENA accredited or candidate institution decides to close an educational program, branch campus, or the entire institution, it must consider the following options:

1. The institution teaches out currently enrolled students; no longer admits new students to the program(s); and terminates the program(s), the operations of a branch campus, or the operations of an institution after students have graduated.
2. The institution enters into a contract for another institution or organization to teach out the educational programs or program. Such a teach-out agreement requires ACHENA approval pursuant to ACHENA's substantive change policies.

### **3.9, a - Teach-Out Agreements and Teach-Out Plans**

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. In accord with federal regulation 602.24 (c), if an institution enters into a teach-out agreement with another institution, it must submit the agreement to ACHENA office for approval prior to its implementation. For approval by ACHENA, the agreement must be between institutions that offer ACHENA accredited or candidate programs, be consistent with relevant ACHENA Eligibility Requirements, Accreditation Standards, policies and procedures, and provide for the equitable treatment of students by ensuring that:

1. The teach-out institution has the necessary experience, resources, and support services to provide an educational teach out program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the closed institution; and
2. The teach-out institution must demonstrate that it can provide students access to the program and services without requiring them to move or travel substantial distances.

ACHENA requires the institution it accredits or pre-accredits (note that the term "pre-accredits" in this policy refers to ACHENA candidacy status) to submit a teach-out agreement to ACHENA for approval upon the occurrence of any of the following events:

- a) The Secretary notifies ACHENA that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA, and that a teach-out plan is required.
- b) ACHENA acts to withdraw, terminate, or suspend the accreditation or pre-accreditation of the institution.
- c) The institution notifies ACHENA that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program.
- d) A State or provincial licensing or authorizing agency notifies the agency that an institution's license or legal authorization to provide an educational program has



been or will be revoked.

ACHENA will evaluate the teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency, specifies additional charges, if any, and provides for notification to the students of any additional charges.

If ACHENA approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, it will notify that accrediting agency of its approval.

ACHENA may require an institution it accredits or pre-accredits to enter into a teach-out agreement as part of its teach-out plan.

ACHENA requires an institution it accredits or pre-accredits that enters into a teach-out agreement, either on its own or at the request of the agency, to submit that teach-out agreement for approval. ACHENA may approve the teach-out agreement only if the agreement is between institutions that are accredited or pre-accredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and provides for the equitable treatment of students by ensuring that—

- a) The teach-out institution has the necessary experience, resources, and support services to—
  - i. Provide an educational program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the institution that is ceasing operations either entirely or at one of its locations; and
  - ii. Remain stable, carry out its mission, and meet all obligations to existing students; and
- b) 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 institution the agency accredits or pre-accredits closes without a teach-out plan or agreement, ACHENA will work with the Department and the appropriate State/Provincial agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.

### **3.9, b - Closing a Program**

When the decision is made to close an ACHENA 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 should 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 should 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.

### **3.9, c - Closing a Branch Campus**

After the decision has been made to close a branch campus, all affected constituencies should be notified promptly including students, faculty, administrative and support staff. The chief executive officer/College President should notify ACHENA in writing as soon as possible. Every effort should 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.

### **3.9, d - Closing an Institution**

A decision to close requires specific plans providing in appropriate ways for the students, the faculty, and the administrative and support staff, and the disposition of the institution's assets. Many considerations bear upon closing an educational institution and each situation will be unique. Nevertheless, general guidelines will be helpful to each institution considering closing.

1. The 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/provincial 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/provincial board for higher education or another appropriate agency for filing of student records. If there is no state/provincial agency which can receive records, arrangements should be made with a state university, with the state archives, a provincial university or agency, 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 ACHENA regarding the final filing of student records.
3. Provision for Faculty and Staff: In every possible case, the institution should arrange for continuation of those faculty and staff that will be necessary for the completion of the institution's work pending the closing date. In those cases 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 genuinely good faith efforts to assist in relocation and reassignment

are essential.

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 will have been satisfactorily discharged.
6. **Disposition of Assets:** In the case of a not-for-profit institution, the legal requirements of a state/provincial and the IRS/CRS 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 providers of special funds, arrangements to accommodate their wishes. State/Provincial laws and IRS/CRS regulations regarding the disposition of funds from a non-profit institution must be meticulously followed. All pertinent federal and state/provincial 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 has the obligation to inform the Commission of its plans for closing and of its final closing date. 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. Insofar as possible, the institution should assure that its final arrangements will not be subject to later legal proceedings, which might jeopardize the records of its students or faculty.

### **3.10 Complaints Initiated Against ACHENA**

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

#### **3.10, a - Procedure**

1. All written complaints received regarding concern with ACHENA standards, procedures or in their application or with respect to other ACHENA activities shall be forwarded within 10 days of receipt to the ACHENA President. The President shall review the complaint and may request, as necessary, additional information from the complainant, ACHENA staff or ACHENA members.
2. The President 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; the special committee may include Commission members and individuals who are not members.
3. The complainant will be notified in writing within 30 days of ACHENA meeting of any action taken by ACHENA in response to the complaint.

### **3.11 Policy on Public Comments Regarding ACHENA Actions on Candidacy and Accreditation**

In accordance with U.S. Department of Education requirements, ACHENA invites public comment whenever the Commission has scheduled a hearing and plans to take action on an institution's/program's recognition status: namely, whenever the Commission reviews a program for initial candidacy, initial accreditation, or reaffirmation of accreditation. The Commission provides for a public-comment period of at least 21 days' duration before the meeting at which the Commission review is scheduled to take place. A notice is published in the monthly newsletter of the National Center for Homeopathy and posted on the ACHENA website that the Commission will consider the candidacy or accreditation status of a program and that public comment is invited. The notice is also sent at least 40 days in advance of the Commission's meeting to:

- The appropriate state post-secondary agencies;
- Recognized accreditors that have had experience with the program or its institution
- National, state and provincial homeopathic associations;

- National, state and provincial boards and agencies that license or certify professional homeopaths or have responsibilities for ensuring the high quality of health services available to the public;
- The chief administrative officers of homeopathic training programs affiliated with the Commission; and
- Any other agency, organization, or individual who has requested in writing an opportunity to offer comment on a program’s qualifications for candidacy or accreditation.

The Commission’s official public-comment notice contains the name of the institution/program, the accreditation action before the Commission, the date of the Commission meeting, and the date for the ending of the public-comment period (which is at least 15 days before the Commission’s meeting).

Additionally, an institution/program is required to publicize to its students, faculty and staff the opportunity to provide public comment to the Commission, using the Commission’s official public comment notice—a copy of which the ACHENA president (or designee) provides to the program.

An individual who wishes to submit a comment to the Commission must provide to the Commission his/her name and organizational affiliation or relationship to the program. The executive director/administrator of the Commission provides the Commission’s Board of Directors with copies and a summary report of the comments received, and the Commission considers the comments—together with all other documentation and testimony received—before taking action.

The institution/program may also request a copy of the public comments on the program by submitting a request in writing to the Commission; should the institution make such a request, the Commission will provide a copy of the comments to the institution/program as follows:

- If the commenter is not affiliated with the institution/program, the Commission will provide the commenter’s organizational affiliation and name.
- If the commenter is affiliated with the institution/program (e.g., as a student, faculty member, staff member, graduate, etc.), the Commission will indicate the commenter’s affiliation, but will not provide the name of the commenter or any other information that might allow for identification of the individual.

The institution/program may respond in writing to the public comments received by the Commission prior to the meeting at which it will be reviewed, and the Commission will consider the response in making its decision.

### **3.12 Policy on Adverse Actions and Sanctions**

#### **3.12, a - Definition of “Adverse Action”**

The following actions by the Commission regarding an institution or program are considered “adverse actions”:

- The denial, withdrawal, revocation, suspension or termination of candidacy; or

- The denial, withdrawal, revocation, suspension or termination of accreditation.

An institution/program that is the subject of an adverse action by ACHENA may appeal the action in accordance with the Policy on Appeals.

### **3.12, b – Sanctions**

The Commission may, at any time, apply a sanction to a candidate or accredited institution/program in the event of non-compliance with one or more of the eligibility requirements, accreditation standards or policies. Generally, sanctions are applied when an institution/program fails to address a non-compliance issue within a time specified by the Commission, or when the non-compliance issue is so substantial as to warrant an immediate sanction; additionally, the Commission may sanction a candidate institution/program that is failing to make satisfactory progress towards achieving accreditation. By applying a sanction, the Commission informs the program that it must bring itself into compliance within a certain specified time or risk imposition of a stronger sanction or an adverse action by ACHENA. If the institution/program is able to subsequently demonstrate to the satisfaction of the Commission that the non-compliance issues have been adequately addressed, the commission removes the sanction. The following are the three sanctions the Commission may apply; they are usually (though not always) applied sequentially, starting with a letter of advisement:

- *Letter of Advisement.* The institution/program is formally advised by letter—sent to the program’s chief administrative officer and copied to the institution’s chief executive officer and board president (if applicable)—of issues of non-compliance that could lead to a more serious sanction if not corrected expeditiously. The letter requests a focused report and (optionally) a focused site visit by a specific date, generally not to exceed six months from the date of the letter (though the Commission has discretion to specify a longer timeframe). The Commission does not make public the issuance of a letter of advisement.
- *Contingent Accreditation/Candidacy.* If an institution/program fails to respond satisfactorily to a letter of advisement or continues to be non-compliant with eligibility requirements, accreditation standards and/or policies, it may be placed on contingent accreditation/ candidacy, which is a public sanction. A formal letter is sent to the program’s chief administrative officer, with copies to the institution’s chief executive officer and board president (if applicable), setting forth the non-compliance issues upon which the contingent accreditation/candidacy is based. The letter requests submission of a focused report and (optionally) a focused site visit by a specific date, generally not to exceed six months from the date of the letter (though the Commission has discretion to specify a longer timeframe).
- *Show Cause.* If an institution/program fails to correct the non-compliance issues that resulted in contingent accreditation/candidacy, does not respond to a letter of advisement, or is found otherwise to have greatly deviated from the Commission’s eligibility requirements, accreditation standards or policies, it may be requested to show why its candidacy

or accreditation should not be suspended or withdrawn at the end of a stated period. The request to show cause is by formal letter to the program's chief administrative officer, with copies to the institution's chief executive officer and the chair of the governing board (if applicable). The burden of proof is on the program to demonstrate to the Commission why its candidacy/accreditation should be continued beyond the stated period. The letter sets forth the non-compliance issues upon which the show-cause action is based, specifies the show-cause period, and requests submission of a focused report and (optionally) a focused site visit by a specific date. The issuance of a show-cause letter is a public sanction.

The Commission judges the nature and severity of the situation in determining whether to issue a letter of advisement, impose contingent accreditation/candidacy, or issue a show-cause letter. While the three sanctions are of increasing severity, they are not necessarily applied in sequence. The Commission may apply any sanction at any time, with the requirement that the program correct the cited non-compliance issues within a stated period, not to exceed two years from the imposition of the sanction, or not to exceed two years from the imposition of the first sanction if more than one sanction is applied for the same reason. Candidacy and accreditation continue during a period of a sanction. As noted above, while a letter of advisement is not made public, the actions of contingent accreditation/candidacy and show cause are published. The program is responsible for any costs associated with a sanction, such as hosting an onsite visit.

The Commission has the authority to impose a sanction at any time, including in the context of a hearing on initial or reaffirmation of accreditation; in this case, the Commission may, but is not required to, provide notice of its intended action to the institution/program. Should the Commission consider placing an accredited or candidate institution/program on contingent accreditation/candidacy or issuing a show-cause letter outside of the context of an accreditation action, the Commission will: (i) inform the program of the sanction it intends to impose and the non-compliance issues upon which the sanction is being considered, and (ii) provide the program an opportunity to submit a written response at least 15 days prior to the date of meeting. In the event that a program's non-compliance with CNME requirements poses potential immediate serious harm to students or others, the Commission may forgo notification to the program or provide a shorter notice period. Within ten business days of imposing a sanction the Commission gives the program written reasons for its action. A program may not appeal a decision by the Commission to impose a sanction, as a sanction is not considered an adverse decision.

### **3.12, c - Consequences of Failure to Satisfactorily Address Non-Compliance Issues**

At the end of the time period stated in a show-cause letter, the Commission will suspend, withdraw or take some other adverse action regarding the candidacy/accreditation of a program that has not corrected to the satisfaction of the Commission the non-compliance issues that led to the issuance of the show cause letter. At least 30 days before the meeting date on which the

Commission will take an adverse action, the Commission will: (i) inform the program of its intended action, and (ii) provide the program an opportunity to submit a written response at least 15 days prior to date of meeting.

If a program or its institution is found by a judicial court—or a federal, state or provincial agency—to have engaged in fraudulent activity, or if the institution loses its authority to offer the homeopathic program recognized by ACHENA, the Commission will withdraw candidacy/accreditation. In such cases, the Commission’s procedures for sanctions do not apply, and the terms and conditions set forth in a prior letter of advisement, a contingent accreditation/candidacy decision, or a show-cause letter that the Commission may have issued are nullified.

A program that has its accreditation withdrawn is not entitled to a refund of any fees or dues it has paid to the Commission. A program interested in regaining accreditation must first seek candidacy status in accordance with ACHENA requirements.

### **3.13 Policy on Appeals**

ACHENA affords due process to candidate/accredited institutions and programs by allowing institutions/programs affected by certain adverse actions (see below) to appeal the Commission’s action to an independent Appeal Board. Within ten business days of such action, the Commission sends a notice by certified mail to the chief administrative officer of the affected program, with the notice copied to the institution’s chief executive officer and board president (if applicable). The notice states the adverse action and describes with particularity the basis of the action; included with the notice is a copy of this Policy on Appeals. A program that wishes to file a letter of appeal to an adverse action must do so within 30 days of having received notice of the action from the Commission.

An appellant program may be represented by legal counsel throughout the appeal process; however, an appeal is not a formal judicial process and the attendant procedures and rules of a formal judicial process do not apply.

The accreditation or candidacy status of an appellant program automatically remains in effect until the expiration of the period within which the appellant program may file a letter of appeal, or until the completion of the appeals process, whichever shall later occur.

#### **3.13, a - Appealable Adverse Actions**

A homeopathic education program may appeal any of the following adverse actions within 30 days of having received notice of the action from the executive director/administrator.

- The denial, withdrawal, revocation, suspension or termination of candidacy; or
- The denial, withdrawal, revocation, suspension or termination of accreditation.



### **3.13, b - Basis for an Appeal**

It is the responsibility of the program to substantiate one or more of the following as the basis for appeal:

1. There were errors or omissions in carrying out prescribed procedures on the part of the evaluation team or the Commission;
2. There was demonstrable bias or prejudice on the part of one or more members of the evaluation team or the Commission's Board of Directors that significantly affected the decision;
3. The evidence before the Commission at the time of the decision was materially in error; and/or
4. The decision of the Commission was not adequately supported by the facts before it at the time, or it was contrary to the substantial weight of evidence before the Commission.

In its letter of appeal, the homeopathic medicine program must set forth in detail the grounds for the appeal, stating with specificity the reasons why the program believes those grounds exist. The program must indicate whether or not it wishes to present testimony and/or evidence at the hearing and may provide documentary evidence to support its position at this time.

### **3.13, c - Appointment of the Appeal Board and Scheduling of the Hearing**

Upon receipt of an appeal letter, the ACHENA president appoints a three-person Appeal Board that includes a homeopathic educator and practitioner. No member of the Appeal Board may be a member of the Commission, be affiliated with the appellant program, have served on a site visit team to the appellant program, or otherwise have a conflict of interest. Appointments are made from the field of higher education, including academic and administrative personnel, and from the field of homeopathy.

The ACHENA president (or designee), in consultation with the appellant institution/program, establishes a date, time and place for a meeting of the Appeal Board at least 21 days in advance of the meeting, and notifies in writing the parties concerned. At least five calendar days before the meeting, the institution/program provides the ACHENA president (or designee) with all documentary evidence and with the names and positions of any witnesses it plans to have in attendance; the president (or his designee), in turn, communicates this information to the chair of the Appeal Board.

### **3.13, d - Role of the Appeal Board**

In carrying out their duties, the members of the Appeal Board:

1. Select a member to serve as chair;
2. Meet at the time and place designated by the ACHENA president (or designee) to consider the appeal.
3. Provide for a hearing if the appellant has so requested;
4. Consider the grounds for the appeal as stated by the appellant institution/program;

5. Study the evidence submitted in writing by the institution/program in support of its appeal;
6. Consider as applicable reports of site visit teams, Commission reports and decision letters, the institution's/program's responses, and any other supporting or relevant statements and documents;
7. Compare the Commission's policies and procedures with the procedures followed in arriving at the adverse action;
8. Prepare a report of the meeting of the Appeal Board, including the final decision of the Appeal Board, within ten calendar days after the meeting; and
9. Forward the record of the Appeal Board's meeting and the decision of the Appeal Board to the Commission's president (or designee), including a summary report of the Appeal Board's meeting, the appeal documents filed by the program, and other statements and documents considered by the Appeal Board.

### **3.14 Hearing Procedures**

1. If the appellant has requested an opportunity to appear, the chair of the Appeal Board presides at the hearing. The chair ensures that all participants have a reasonable opportunity to be heard and to present all relevant oral and written evidence.
2. Technical rules of evidence do not apply to the hearing, and the chair of the Appeal Board may limit the evidence to avoid undue repetition and to ensure relevance. The chair rules on all questions pertaining to the conduct of the hearing.
3. Each party—the Commission and the appellant—has the right to be represented by counsel or an authorized spokesperson, to examine the witnesses of the other party, and to present oral or written evidence.
4. The hearing is conducted in closed session with only necessary participants present. A secretary, selected by the Appeal Board from outside its ranks, records the hearing minutes; however, at the election of either party and at that party's expense, a court reporter may be hired to prepare a record of the hearing.
5. As the proceeding before the Appeal Board is appellate in nature and is therefore limited to the existing record from previous proceedings, no discovery shall be permitted for either side and no evidence not already properly in the record on appeal shall be accepted, provided that the parties may offer witnesses for the limited purpose of elucidating the meaning of evidence properly before the Appeal Board. Notwithstanding this policy, before a final adverse action based solely upon a failure to meet a standard or criterion pertaining to finances is issued, the program may on one occasion seek review of significant financial information that was unavailable to the institution/program prior to the determination of the adverse action, and that bears materially on the financial deficiencies identified by the Commission. Such information shall be considered by the Appeal Board prior to rendering a decision. Any determination by

the Commission or the Appeal Board made with respect to the newly presented financial information shall not be separately appealable by the institution or program.

### **3.14, a - Decisions of the Appeal Board**

The Appeal Board may issue a final decision that an adverse action be affirmed, reversed or modified—which decision is binding on the Commission. After arriving at its final decision, the Appeal Board shall remand the decision to the Commission for further action consistent with the decision of the Appeal Board.

Should an appellant program believe that the Commission has not correctly carried out the final decision of the Appeal Board, the appellant program may present this issue to the Appeal Board, which issue shall be appealable to the same Appeal Board; the Appeal Board in this circumstance shall retain jurisdiction for the limited purpose of determining whether its decision on remand has been correctly carried out and, if not, to provide further instruction to the Commission.

### **3.14, b - Costs of an Appeal**

A program's appeal letter to the Commission shall be accompanied by a deposit of \$5,000 (U.S. funds) to cover travel, lodging, and other necessary expenses of the Appeal Board and the Commission. The expenses of the appeals process will be handled as follows:

1. If the Appeal Board affirms the adverse action of the Commission, the appellant bears all of the expenses of the members of the Appeal Board and all of the Commission's expenses related to the appeal.
2. If the Appeal Board remands the matter to the Commission with the instruction that the adverse action be reversed or modified, the costs of the appeal are equally borne by the appellant and the Commission.
3. Following the completion of the appeals process, the Commission's president (or designee) prepares for the appellant a detailed statement of all expenses. The appellant is obligated to pay any expenses that exceed its deposit, and any unused portion of the appellant's deposit shall be refunded.

### **3.15 Policy on Enforcement of Standards**

Whenever the Commission determines that an institution/program is not in compliance with an accreditation standard or section of a standard, the Commission shall either:

- a. Immediately initiate adverse action against the institution/program (i.e., denial, withdrawal, suspension, revocation, or termination of accreditation or candidacy, or any comparable action); or
- b. Require the institution/program to take appropriate corrective action to bring itself into

compliance with the accreditation standard, or section of a standard, within a time period specified by the Commission that does not exceed two years in length from the date when the Commission made its determination.

If the institution/program does not bring itself into compliance within the time period specified by the Commission, the Commission shall either:

- a. Take immediate adverse action; or
- b. Extend for “good cause” the period of time provided for achieving compliance. To be eligible for an extension for “good cause,” the program must comply with four conditions:
  - 1) The nature of the non-compliance issue is such that it might require additional time to fully address (e.g., restoring institutional financial stability);
  - 2) The institution/program has demonstrated significant recent progress in addressing the noncompliance issue (e.g., the institution’s cumulative operating deficit has been reduced significantly);
  - 3) The institution/program provides reasonable evidence that it will remedy the non-compliance issue within the extended time period specified by the Commission; and
  - 4) The institution/program provides assurance to the Commission that it is not aware of any reasons or circumstances not known by the Commission that would prevent the program from achieving compliance if granted additional time to address the noncompliance issue.

The Commission may extend for “good cause” the time period granted to the institution/program to remedy the noncompliance issue for a maximum of six months at a time, not to exceed a total of one additional year. At the conclusion of the first six-month extension period, the program must appear before the Commission to provide further evidence if it seeks a second and final six-month extension period for good cause to remedy the noncompliance issue.

In the event that the Commission extends the time period to remedy the noncompliance issue beyond two years, the Commission may, during the extension period, (i) apply a sanction against the program/institution or continue an existing sanction (i.e., letter of advisement, contingent accreditation/candidacy, or show cause), and/or (ii) require the program to host an onsite visit.

In the event that a program fails to remedy a noncompliance issue within the extended time period specified by the Commission, the Commission shall immediately apply a show cause sanction.

The Commission shall inform the program of this policy whenever the Commission notifies a program of a Commission finding of noncompliance.

### **3.16 Substantive Change Policy**

Once a program or institution is granted ACHENA candidacy or accreditation status, it is required to apply to the Commission for approval to implement certain types of programmatic and institutional changes, referred to as “substantive changes.” Substantive changes are those changes that have the potential to significantly impact the ability of a candidate or accredited institution/program to maintain compliance with ACHENA’s accreditation standards. These changes require prior notice by the institution/program and advanced approval by ACHENA.

Plans for substantive changes are to be provided to ACHENA *at least 90 days in advance* of the change; a form for this purpose is downloadable from the ACHENA website. As noted below, ACHENA requires a site visit in connection with the review of certain substantive change requests, and it retains the right to require a site visit whenever one is deemed necessary. Where a site visit is required, ACHENA will conduct the visit either before making a decision or within 6 months of approval. ACHENA may, in extraordinary circumstances, consider a substantive change application that is not submitted to the commission in accordance with the 90-days’ notice period.

ACHENA may, for good reason, require the institution to postpone implementation of the change pending ACHENA action if, for example, insufficient information was furnished or because insufficient institutional evaluation has taken place. ACHENA may also deny the substantive change request if it determines, for example, that the program lacks the resources to implement the change without adversely impacting its compliance with ACHENA accreditation standards and policies. As noted above, substantive changes may not be initiated by the institution prior to receiving approval from ACHENA. Should the institution initiate or implement a substantive change without first obtaining approval, ACHENA may require the program to suspend implementation pending approval and/or apply a formal sanction.

If an institution is unclear whether a specific change is considered substantive, it should consult ACHENA staff.

#### **3.16, a - Examples of Substantive Changes**

The following are examples of substantive changes:

1. A change in the established mission and/or objectives.

(Note: Rephrasing a mission statement is not substantive if it does not alter the meaning and content of the original wording.)

2. A significant change in the content or method of delivery of programs since the last comprehensive commission review.

(Note: Periodic, minor modifications to course content, sequencing or delivery methods do not constitute a substantive change)

3. The addition of a degree program in homeopathy that is different from that which is included in the institution’s current accreditation.
4. A change in the method of awarding course or program credit (e.g., a change from clock

- hours to credit hours).
5. An increase of 25% or more in the number of clock or credit hours required to complete the candidate or accredited program.
  6. A change in the legal status, form of control, or ownership of the institution.
  7. Establishing a new location offering at least 50% of the educational program as an additional branch campus (see ACHENA's Branch Campus Policy for further information; this requires a site visit).
  8. If the commission's accreditation of an institution enables the institution to seek eligibility to participate in title IV, HEA programs, the entering into a contract under which an institution or organization not certified to participate in the title IV, HEA programs offers more than 25 percent of one or more of the accredited institution's educational programs.
  9. The acquisition of another institution or any program or location of another institution (requires a site visit).
  10. Consolidation or merger with another program or institution (requires a site visit).  
(Note: The commission defines a consolidation as the combination or transfer of the assets of at least two distinct programs to that of a newly formed program. A merger is defined as the acquisition by one program of another program's assets.)
  11. The addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.
  12. Moving a campus to a new location (requires a site visit).

### **3.17 Substantive Change Application**

An accredited or candidate program that wishes to implement a substantive change is responsible for submitting a substantive change application to the Commission's executive director/administrator in accordance with the timeline set forth above. The application consists of the substantive change form (downloadable from the ACHENA website) and supporting documentation. Although the content of the substantive change application depends on the nature of the proposed change, the following items are applicable in many cases:

- A clear statement on the consistency of the change with the mission and objectives of the program or, if the change is in the mission and objectives, a brief statement of the rationale for the change;
- Evidence of formal approval or authorization by the governing board or owners of the institution and, if applicable, by the appropriate outside agency (e.g., state regulatory agency, accrediting agency);
- A clear description of the educational offering(s), and evidence of approval by the appropriate academic policy body of the program or its institution;
- Plans and descriptive information showing evidence of need for the change, the clientele to be

served, the procedures followed in reaching the decision to initiate the change, the organizational arrangements needed to accommodate the change, and the timetable for implementation; and

- An analysis that thoroughly addresses the budgetary and financial implications of the change, including as may be appropriate the need for additional faculty and staff and/or an expanded facility.

### **3.18 ACHENA Review Process for Substantive Change**

The purpose of the ACHENA review process is to ensure that a proposed substantive change is well planned, will be implemented in accord with the commission's standards and policies, and will not adversely impact the ACHENA candidate or accredited program or institution.

The commission's executive director/administrator, in consultation with the commission president, appoints a substantive change committee to review the application. The substantive change committee or ACHENA executive director/administrator may at any time request additional information from the program if the substantive change application is incomplete.

Within one month of receipt of the substantive change application, the substantive change committee meets to review the application. The substantive change committee may act to:

- Approve implementation of the substantive change without any conditions;
- Approve implementation of the substantive change with conditions;
- Defer action pending receipt of additional information;
- Refer the matter to the full commission for consideration;
- Deny approval of the proposed change; or
- Require a site visit prior to the committee or commission making a decision or following implementation of the change.

A program receives written approval regarding the substantive change from the commission before implementing it. As noted above, ACHENA may sanction a program that initiates a substantive change without commission approval and/or may require the program to suspend implementation.

### **3.19 Policy on Public Announcement Non-Candidate and Non-accredited Programs**

Whenever an ACHENA candidate or accredited homeopathic institution, or an institution that offers an ACHENA candidate or accredited homeopathic program, offers another homeopathic program that does not have ACHENA candidacy or accreditation status, the institution must state in its public announcements and other published materials—including recruiting literature, catalogs, enrollment agreements, websites, and print and online advertisements—the following statement:

*The [name of the program] of the [name of the institution] is not accredited or pre-accredited (candidacy) by the Accreditation Commission for Homeopathic Education in North America (ACHENA) [include current address of ACHENA as listed on [www.achena.org](http://www.achena.org)],*

*NOTE: Graduates of this program are not considered to have graduated from an ACHENA accredited or candidate program and may not rely on ACHENA accreditation or candidacy for professional certification or other purposes.*

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

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 [include current address], and can be reached by telephone at: [include telephone number].*