

Homeopathic Education and Training in North America: Accreditation Equivalency and Approval (Pre-2015)

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Purpose

This document has been prepared by the Accreditation Commission for Homeopathic Education in North America (ACHENA), in collaboration with recognized leaders in the homeopathic profession. It provides ACHENA's approval role and responsibility regarding: AZ SB 1163 on educational accreditation for nonmedical homeopathic practitioners 5. "APPROVED TRAINING PROGRAM", FOR A PERSON WHO IS SEEKING LICENSURE PURSUANT TO SECTION 32-2912, SUBSECTION B, ...(iii) A PROGRAM THAT IS APPROVED OR ACCREDITED BY THE ACCREDITATION COMMISSION FOR HOMEOPATHIC EDUCATION IN NORTH AMERICA, OR ITS SUCCESSOR ORGANIZATION..." ACHENA will maintain and update this document to ensure current and accurate information.

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I. Accreditation History of Homeopathic Education and Training in North America (1980 - 1999) Small Schools, Seminars, Mentoring, Early Credentialing

- In the 1980s, the National Center for Homeopathy (NCH) held a "Summer School", a few weeks per year.
- In 1982, a group of senior homeopaths established the Council for Homeopathic Education (CHE) to foster quality education for homeopaths.
- Influential teachers from Europe, South America, and India helped revive homeopathy in the US. Seminars and study groups with these international homeopaths formed the early year-round training resources.
- The first schools, with a full training curriculum for professional homeopathy, grew out of these seminars and study groups. These opened in North America around 1990.

- In these early days, homeopathic training had a strong focus on methodology and therapeutics, with limited clinical exposure. Early training relied on individual mentoring for case work.
- During the 1990s, homeopathic educators developed a collaborative forum titled the North American Network of Homeopathic Educators (NANHE). NANHE began as a committee within the CHE and later separated into its own organization. Annual onsite conferences became an important discussion forum for homeopathic education, curriculum, and student evaluation. The collaboration from these conferences and teleconference meetings laid the vision and the groundwork for a later formalization of the Homeopathic Standards and Competencies for North America.
- In 1991, a group of senior naturopaths collaborated with homeopathic educators from the early schools to establish the Council for Homeopathic Certification (CHC). The goal was to create an exam and credential that demonstrated skills adequate for entry into professional homeopathic practice. A question database was created for the exam, and eligibility criteria were established. The first exams were given between 1992 and 1994.

(2000) Homeopathic Standards and Competencies established for North America

- In 2000, at a summit in Toronto, formal definitions for the homeopathic profession and necessary education were negotiated by representative stakeholders, including the CHE, NANHE, CHC, NCH, and the various membership associations from all sectors of the homeopathic profession. Review and ratification by homeopathic organizations followed.
- This agreed Standards and Competencies document was crucial for standardizing education and professional skill sets in North America. It established a baseline for schools to follow in their education programs. Some schools began to align their curricula with these standards during 2001 2005.
- It also established an entry level expectation for graduates and legacy practitioners to demonstrate competence through the CHC exam process.

(2001 - 2006) Council for Homeopathic Education (CHE) Prototype Accreditation

- The CHE board translated the agreed Standards and Competencies into school accreditation criteria.
- Curricula for theoretical and clinical training, along with requirements for school governance and procedures were published. A few schools were part of this early development and prototyping of accreditation.
- Many of the homeopathic schools were opposed to accreditation at this time. Discussion of
 educational standards and best practices continued through the homeopathic educators
 organization, the North American Network of Homeopathic Educators (NANHE).
- The CHE paused accreditation activities around 2006.

(2007 - 2014) CHE transitioned to become the Accreditation Commission for Homeopathic Education in North America (ACHENA)

- In 2007, the CHE was reformulated as ACHENA, and the mission of accreditation was revitalized. Consistent outreach occurred building awareness and consensus regarding the value of accreditation with all homeopathic schools and programs.
- In 2013, the Homeopathic Standards and Competencies document was reviewed by community

- stakeholders, with extensive public comment periods. The resulting updates were applied to accreditation and certification processes.
- During this time, the CHC attained independent accreditation for their credential through the Institute for Credentialing Excellence (ICE) / National Commission for Certifying Agencies (NCCA). Attainment of ICE / NCCA accreditation required fundamental changes to the CHC's credentialing process (eligibility, application, exam, oral interview, issued certificate).
- The CHC exam required alteration in order to establish a psychometrically validated exam. All questions were transitioned to multiple choice format. The homeopathic sample cases for analysis, and the subsequent oral interview were removed.
- The removal of these *clinical competency* components of the exam shifted the responsibility for assessment of clinical competences from the CHC to the schools. Schools were required to obtain additional clinical documentation for students, with an agreed minimum number of client cases and interactions. This change heightened the importance of accredited education, with assurance of meeting the Homeopathic Standards and Competencies.
- In 2014, ACHENA negotiated an eligibility criteria change with the CHC; beginning in 2018, applicants for the CHC exam would be required to have accredited education. The accredited schools were prepared to verify the clinical competencies that were no longer tested in the CHC credentialing process.

January 1, 2015, A valid accreditation process was implemented.

II. Indicators Used to Demonstrate Equivalency to Current ACHENA Standards - Homeopathic Education and Training Programs (Pre-2015)

With valid accreditation standards not in place until January 2015, the methodology used to best determine equivalency to current ACHENA standards was to identify demonstrable indicators for those ACHENA standards which were possible to assess. See below for the selected ACHENA standards and associated Equivalency Indicator (s) used to assess Homeopathic Education and Training Programs (Pre-2015).

ACHENA Standard 2: Legal Organization

The program shall be delivered by a legally organized institution in the United States or Canada, authorized to conduct its operation under the laws of the United States or Canada and shall be in compliance with all local, provincial, state and federal regulations applicable to it.

Equivalency Indicator

School or program operated legally (business license) as a school in the US or Canada, not informally as a series of seminars.

ACHENA Standard 4: Administration

The program has an appropriately qualified and dedicated Chief Executive Officer, Executive Director, Chief Administrator or President and an appropriately qualified chief academic administrator who is able to effectively manage and revise the program as needed as well as an administrative team with sufficient capacity and definition of roles and responsibilities and of a size and structure that is appropriate to the size and purpose of the program.

Equivalency Indicator

Dedicated Director/Administrator provided sufficient capacity to run school operations (has financial, operational, and procedural resources). If also serving in a faculty position, cannot teach a majority of the course material.

ACHENA Standard 5: Records

The program shall maintain complete record keeping systems.

Equivalency Indicator

A Certificate of Completion was issued to students.

ACHENA Standard 7: Evaluation of Student (and Programmatic Assessment, Achievement, and Satisfaction)

The program shall demonstrate a commitment to student academic and professional achievement through excellence in student and programmatic assessment processes to include and plan for assessment and systematic internal and external assessments that are communicated to stakeholders and show institutional and student progression. The institution shall demonstrate how its educational objectives and competencies are met and how this enhances the quality and satisfaction of professional education and training obtained by students.

Equivalency Indicator

See ACHENA Standard 5: Records.

ACHENA Standard 8: Program of Study

See Standard 8 Curriculum Content Areas. The minimum length of the program shall be 1,000 hours including a minimum of 500 classroom hours and a minimum of 500 hours of clinical training which includes clinical observation, supervised case-taking, case analysis and case management.

Equivalency Indicator

Curriculum was generally aligned with the early CHC criteria that demonstrated skills adequate for entry into professional homeopathic practice, and/or early iterations of homeopathic standards formulated by the CHE prior to 2000. The curriculum met the 1000 required training hours (500 didactic and 500 clinical). Evidenced through records of NANHE conferences and meetings and published works / articles in homeopathic journals from school educators / administrators.

ACHENA Standard 9: Faculty Qualifications

Institutions demonstrate that qualified individuals serve in all relevant academic roles and contribute to the academic process. The program should provide for a sufficient number of qualified faculty to support the program. Professional training opportunities are monitored and made available where possible.

Equivalency Indicator

Faculty or leadership of the school participated in NANHE for collaboration of standards and best practices. School or program instructors held a North American homeopathic credential (CCH, DHANP, ABHt), or an international equivalent. There were faculty who comprised a group of instructors (both didactic and clinical) who had broad experience, rather than a program taught individually by the school director(s).

ACHENA Standard 11: Infrastructure

The program provides facilities that are safe, accessible, functional, flexible, appropriately maintained and sufficient to house the program, to provide for effective functioning, and to accommodate the staff and the student body. The institution provides an in-person and/or virtual clinic and, if applicable, a homeopathic dispensary; appropriate media and learning equipment adequate for the educational programs offered. The program demonstrates that physical and IT resources are adequate to meet the school's mission and that adequate data recovery and business continuity planning exists.

Equivalency Indicator

Planned, organized, and consistently scheduled didactic education and clinical education/training existed including on-ground classroom experiences and in field clinical training with a homeopathic practitioner.

ACHENA Standard 14: Library and Learning Resources

The institution provides access to library and information resources, services, facilities, qualified staff and associated technologies sufficient to support its teaching and learning objectives and its research and public service mission as appropriate.

Equivalency Indicator

Provided sufficient learning resources for students (books, journals, technology) through administrative and faculty sources to ensure students achieved program completion. See Standard 4: Administration, Standard 5: Records, and Standard 9: Faculty Qualifications.

III. List of Approved Homeopathic Education and Training Programs (Pre-2015)

The following are the Homeopathic Education and Training Programs (Pre-2015) who were assessed and met the equivalency indicators to current ACHENA Standards and therefore are **APPROVED**. As much information as possible about each of the education and training programs are provided.

- Academy of Classical Homeopathy, Philadelphia, PA CLOSED. (Note: Later renamed Florida Academy of Classical Homeopathy)
- Baylight Center for Homeopathy, Portland, ME CLOSED
- Berkeley Institute of Homeopathy, Berkeley, CA CLOSED
- British Institute of Homeopathy, Egg Harbor Township, NJ (Note: Accredited Post-2015)
- **Desert Institute School of Classical Homeopathy**, Phoenix, Arizona (Note: Later renamed American Medical College of Homeopathy)
- Dynamis School with Jeremy Sherr, Boulder, CO CLOSED
- East-West Homeopathic College, Deland, FL CLOSED
- Hahnemann College of Homeopathy, Pt Richmond, CA CLOSED
- Homeopathic Academy of Southern California, San Diego, CA CLOSED
- Homeopathy School International, Boulder CO (Note: Accredited Post-2015)
- Homeopathic Master Clinician Course, Multiple US locations CLOSED
- Manitoba College of Homeopathic Medicine, Winnipeg, Manitoba, Canada CLOSED
- Pacific Academy of Homeopathic Medicine, San Francisco, CA (1990 2010) CLOSED (Note: Later renamed Pacific Academy of Homeopathy)
- Seattle School of Homeopathy, Seattle WA, CLOSED
- Texas School of Homeopathy, San Antonio, TX, CLOSED
- Vancouver Homeopathic Academy, Vancouver, British Columbia, Canada CLOSED

IV. Reference, Document Author, Assessment and External Review

• Reference: Accreditation | ACHENA

Document Author: ACHENA Standards Committee

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