CPME 130

PROCEDURES FOR ACCREDITING COLLEGES OF PODIATRIC MEDICINE

Adopted April 2026
Implementation July 1, 2026

TABLE OF CONTENTS

Page

Introduction 2
Procedural Overview 5
Eligibility, Candidate Status, Preaccreditation, and Accreditation 6
Reevaluation and Reaffirmation of Accreditation 10
Consideration by the Council on Podiatric Medical Education 14
Accreditation Categories 15
Accreditation Period 18
Notification to the Institution 20
Distribution of Final Evaluation Report 20
Statement of Accreditation Status 20
Monitoring Compliance: Follow-Up Reports, Focused Evaluations, and Substantive Modifications 21
Procedural Reconsideration/Appeal 32
Reapplication Following Loss or Denial of Accreditation 34
Teach-Out Plans and Agreements 34
Confidentiality 37
Student Privacy 38
Disclosures 38
Third-Party Comment 42
Review of Formal Complaints 42
Regard for Decisions of States and Nationally Recognized Institutional Accrediting Agencies 43
Accreditation Fees 43
Periodic Review of Institutional Publications 44
Joint Evaluation Visits with Other Accrediting Agencies 45
Training and Assessment of Team and Evaluator Effectiveness 46
Policy Statements 47
Preaccreditation–Accreditation Timeline 50

Copyright © 2026 CPME
All Rights Reserved

INTRODUCTION

Accreditation Authority

The Council on Podiatric Medical Education (CPME or Council) is designated by the American Podiatric Medical Association to act as the accrediting agency for colleges and schools that grant the first professional degree in podiatric medicine, the Doctor of Podiatric Medicine (DPM). CPME is recognized by the Council for Higher Education Accreditation (CHEA) and by the US Secretary of Education. CPME holds membership in the Association of Specialized and Professional Accreditors (ASPA) and supports and follows the principles addressed in the ASPA *Code of Good Practice*.

The Council was established in 1918 and charged with formulation of educational standards and began accrediting colleges of podiatric medicine in 1922. The Council on Podiatric Medical Education is the nationally recognized accrediting agency in the specialized field of podiatric medicine. A determination of accreditation by the Council is an indication of confidence in the educational institution to offer a college or school of quality, deserving of public approbation.

The Council is the final authority in deciding the accredited status to be accorded to a college of podiatric medicine.

The Council's evaluation/accreditation procedures described in this publication have been developed to assist institutions in preparing for initial or continuing accreditation and to guide the Accreditation Committee and the Council in their deliberations concerning initial accreditation or reaffirmation of accreditation. These procedures are subject to review and approval by CHEA and the US Department of Education.

Terms Used in This Publication

The Council serves as both the professional accrediting agency for the accreditation of academic units (i.e., colleges and schools) within educational institutions and the institutional accrediting agency for single-purpose institutions (i.e., free-standing colleges). Thus, the terms "college," "school," and "institution" are used interchangeably throughout this document. For definitions of these and other terms used in this publication, the reader is directed to review the Glossary of Terms near the end of CPME 120, *Standards and Requirements for Accrediting Colleges of Podiatric Medicine*.

CPME Mission

The mission of the Council is to promote the quality of graduate education, postgraduate education, certification, and continuing education. By confirming these programs meet established standards and requirements, the Council serves to protect the public, podiatric medical students, and doctors of podiatric medicine.

Standards and Requirements for Colleges of Podiatric Medicine

The Council formulates and adopts its own accreditation standards and requirements. The standards and requirements for accreditation are stated in CPME 120. This publication is available on the Council's website or may be obtained by contacting the Council office.

Accreditation Guide

The Council has developed and makes available CPME 125, *Accreditation Guide*. This publication includes information about conducting the process of self-study and offers questions that assist colleges of podiatric medicine, on-site evaluators, and others in understanding the standards and requirements for accreditation. This publication is available on the Council's website or may be obtained by contacting the Council office.

Accreditation Committee

The Accreditation Committee is a standing committee of the Council. The Committee is responsible for recommending to the Council candidacy of new colleges and accreditation of new and existing colleges. The Committee meets twice a year, usually in the spring and fall.

The composition of the Committee includes at least two representatives from CPME-accredited colleges of podiatric medicine (at least one representative shall be a podiatric educator and one shall be an administrator), one representative from the podiatric practice community, and at least two Council members (at least one shall be either a public member or postsecondary educator member of the Council).

Document Reviews

Comprehensive Reviews

The Council's college accreditation standards, requirements, and procedures documents are subject to a comprehensive review six years following completion of the last comprehensive review. The comprehensive review is completed by a CPME-appointed Ad Hoc Advisory Committee comprised of at least two Council members and representatives from the community of interest. Committee members representing organizations within the community of interest (e.g., the American Association of Colleges of Podiatric Medicine, Council of Teaching Hospitals, state boards of podiatric medicine, and American Podiatric Medical Students' Association) are appointed by the respective organizations. The chair of the Accreditation Committee is an ex-officio member of the Advisory Committee. Other members of the Committee, as determined by the Council, may be appointed by the Council chair and confirmed by the Council.

The comprehensive review of the standards incorporates the following three major features:

1. Notification about the opportunity for CPME constituents and other interested parties to validate the current standards and provide input about any problems in the interpretation or application of the standards or any gaps that might exist.

2. Broad-based surveys about the standards that solicit input by relevant constituencies to include academic representatives (faculty and administrators), practicing podiatric physicians, students, leaders of podiatric medical organizations, and representatives of licensing and certifying agencies.

   In the fifth year of the six-year standards review cycle, CPME solicits information through a web-based questionnaire designed to probe participants' understanding and interpretation of the standards, as well as to evaluate each standard for its validity and relevance to the quality

of a college of podiatric medicine. Each standard and requirement, as well as the standards as a whole, are reviewed through this surveying process.

The Council additionally solicits input about the standards from on-site evaluators and colleges of podiatric medicine following each on-site evaluation. This review process allows for valuable input from individuals who recently experienced the on-site evaluation and are thus familiar with the accreditation process.

3. Periodic review of the standards in a practical, manageable, and consistent way to facilitate sound decision-making that results in the validation of the standards. The first aspect of the systematic review of the standards ensures the opportunity for any interested party to provide input about the standards at any time. Information regarding how to submit comments to CPME is sent to constituents and posted on the CPME website.

   All comments must be submitted to CPME in writing; the name, affiliation, and contact information of the individual submitting the comments must be identified.

   This feature formalizes the systematic review and analysis of the information collected. If CPME determines at any point during the review process that it needs to make changes to the standards, the Council will initiate action within 12 months to address the relevant issues, with final action taken by the Council within 18 months. Such action may include convening the Ad Hoc Advisory Committee for the purpose of reviewing the standards and recommending changes to the Council.

The results of the comprehensive review are transmitted to the Council. Before any substantive changes become final, the Council disseminates proposed revisions in accreditation policies, standards, requirements, and procedures for comment to the community of interest including accredited, preaccredited, and candidate status institutions and programs, faculty, students, residency and fellowship programs, and profession leaders. The Council affords the community of interest 60 calendar days to comment on the proposed changes and takes into account any comments received on the proposed changes. If the Council determines that additional document revisions are needed based on review of the comments received, the additional revisions will be forwarded to the community of interest for another period of 60 calendar days.

The results of the Ad Hoc Advisory Committee's review, including recommendations for revisions to standards, requirements, and procedures, are reported to and used by the Council to determine that the standards are, in fact, valid and reliable indicators of quality and are accepted commonly by the educational and practice communities. The standards, requirements, and procedures are subsequently revised by the Council based on the Committee's recommendations. Essential components of this process include, but are not limited to, the following:

- Continual emphasis on the development of well-defined, outcome-specific standards, focusing on multiple measures

- Frequent objective evaluations of institutional compliance, based upon information gathered and verified during routine on-site evaluations and administrative reports

- Comprehensive analysis of individual and group data to identify patterns of performance.

Systematic reviews of institutional compliance aids in determining their significance and make recommendations for appropriate action. During this review process, consideration also is given to the consequences of these activities on the profession. Such measures evaluate the relevance and clarity of existing standards, profession trends, necessity for follow-up visits, progress reports, and other similar activities. The ultimate objective is to establish a productive cycle of activities that ensures current and meaningful requirements, increased compliance, and improved process integrity and product quality on a continual basis.

Interim Reviews

Along with the comprehensive review, an interim review of the standards and procedures documents occurs three years after the last comprehensive review. The interim review is completed by the Accreditation Committee, a standing committee of the Council. The purpose of the interim review is to "fine-tune" any areas of the documents that may not be functioning appropriately, rather than to propose major changes in direction or philosophy, which would be within the purview of the Ad Hoc Advisory Committee and the Council during the next scheduled comprehensive review.

The results of the interim review are transmitted to the Council. Before any substantive changes become final, the Council disseminates the proposed revisions to the community of interest including accredited, preaccredited, and candidate status institutions and programs, faculty, students, residency and fellowship programs, and profession leaders. The Council affords the community of interest 60 calendar days to comment on the proposed changes and takes into account any comments received on the proposed changes. If the Council determines that additional document revisions are needed based on review of the comments received, the additional revisions will be forwarded to the community of interest for another period of 60 calendar days.

Timelines

Mandatory changes due to the publication of regulatory changes by the US Secretary of Education (Secretary) or the standards of the Council for Higher Education Accreditation (CHEA) will be adopted by the CPME within the prescribed timeline, and the community of interest will be notified.

The next scheduled reviews for CPME publications 120 and 130 are:

- Next Scheduled Comprehensive Review – 2032
- Next Scheduled Interim Review – 2029

PROCEDURAL OVERVIEW

The accreditation process related to podiatric medical education consists of the following five steps:

1. The institution completes a self-study (self-assessment), which generates a document that addresses both the extent to which the institution is in compliance with the standards for accreditation and the institution's strengths and areas for improvement.

2. An evaluation team of peers is appointed by the Council chair to visit the institution in order to validate the findings of the self-study and to assess compliance with the standards and

requirements for accreditation. Acting as a fact-finding body, the team prepares a report for the institution and Council.

3. After the institution is provided opportunity to respond to the team report, the Accreditation Committee reviews the report along with the self-study and any other information that the institution wishes to provide following the on-site evaluation.

4. The Council, based upon a recommendation from the Accreditation Committee, decides whether to grant, withhold, withdraw, or reaffirm accreditation. If accreditation is withheld or withdrawn, the institution is accorded opportunities to seek review of the decision.

5. The Council periodically reviews the institution between accreditation visits through annual reports and progress reports to determine continued compliance with CPME standards and requirements as well as progress in improving the quality of the educational program.

This five-step process is reinitiated every eight years or sooner depending upon the success of the institution in demonstrating continuing compliance and improvements in the quality of the educational program.

ELIGIBILITY, CANDIDATE STATUS, PREACCREDITATION, AND ACCREDITATION

Institutions seeking accreditation of new colleges of podiatric medicine, and institutions that have had accreditation withdrawn and desire to regain accreditation must follow the procedures described in this section. These institutions progress through the accreditation process by first satisfying 10 eligibility requirements, next obtaining candidate status, then preaccreditation, and finally achieving accreditation. (See the last page of this document for a timeline of the preaccreditation-accreditation process for new colleges of podiatric medicine.)

If an institution does not participate in title IV, HEA programs through CPME, CPME's granting of accreditation or preaccreditation will specify that the grant, by request of the institution, does not include participation by the institution in title IV, HEA programs.

Institutions are prohibited from contacting Accreditation Committee, Council, or on-site team members concerning consultation, employment, or contractor positions to avoid potential conflicts of interest.

Eligibility

As the first step in the accreditation process, a new or formerly accredited college of podiatric medicine submits an application demonstrating compliance with the eligibility requirements for accreditation as specified in CPME 109 and CPME120 and all applicable fees. The Council will not consider an applicant's request for candidate status unless all eligibility requirements have been addressed to the satisfaction of the Accreditation Committee. In addressing the eligibility requirements, the application must respond to each eligibility requirement and include any supplementary documentation that the institution believes is necessary to support its responses. The Council encourages applicant institutions to contact CPME staff early in the developmental stages of the college in order that full assistance in understanding the Council's eligibility requirements may

be provided.

Completeness of the institution's application is reviewed by CPME staff prior to transmittal to the Accreditation Committee. The Committee determines acceptability of the institution's application based upon a demonstration by the institution that it has established or has the potential for establishing a viable educational program that, when fully implemented, provides reasonable assurance of meeting the expectations for accreditation. In obtaining this reasonable assurance, the institution may proceed to the candidate status process. Institutions that are not viewed to be eligible for accreditation are so informed and are provided the reasons and conclusions of the Accreditation Committee.

Candidate Status

Candidate status is the category that must be obtained by new and formerly accredited colleges that seek CPME accreditation. Candidate status is determined by the Council based upon review of a candidate status application and on-site evaluation(s) of the institution and its educational program. An on-site evaluation for candidate status is conducted before the new college begins any and all steps in the process of recruiting students. Candidate status may extend for no longer than three years.

An institution that has achieved candidate status is viewed by the Council to have the potential for meeting CPME accreditation standards and requirements once the DPM program is fully activated with students enrolled in all academic years. The Council may elect to withdraw candidate status if the institution fails to continue to meet the CPME eligibility requirements or demonstrates inadequate progress in satisfying CPME standards and requirements. The achievement of candidate status does not guarantee eventual preaccreditation or accreditation. If the institution fails to be preaccredited by the end of the candidate status period, the institution will be provided full opportunity to request procedural reconsideration and appeal the decision of the Council in accordance with the procedures described in this publication. (See Procedural Reconsideration/ Appeal Procedures.)

The institution may withdraw voluntarily from the candidate status process at any time.

The application for candidate status submitted by the institution must include a self-study report describing the institution's development and plans for complying with CPME accreditation standards and requirements and payment of applicable fees.

The application is reviewed by CPME staff in consultation with the chairs of the Accreditation Committee and Council in order to determine completeness of the application and readiness of the institution for initial on-site evaluation. Based upon the results of the review of the application, an evaluation team is appointed, and an on-site visit is conducted for candidate status.

An on-site evaluation is conducted to assess the institution's progress in demonstrating compliance with the standards and requirements set forth by the Council in CPME 120. The evaluation team assigned to visit the institution gathers data and information that is used by the Accreditation Committee and CPME to assess whether the educational program is developing in a manner leading toward satisfactory achievement of each accreditation requirement and ultimately each accreditation standard. The Council may elect to conduct subsequent on-site evaluations throughout the candidate status period.

The report of the on-site evaluation team is transmitted to the Accreditation Committee. The recommendation of the Accreditation Committee is transmitted to the Council. The Accreditation Committee and the Council may either make a decision regarding candidate status (i.e., grant or deny candidate status) or elect to defer action at any time during the candidate status process in order to afford the institution opportunity to provide additional information and/or for the Committee or Council to convene a meeting with representatives of the institution to address any concerns of the Committee or Council.

Upon the granting of candidate status, the new college has the right and privilege to solicit applications from and admit students, offer medical instruction within the approved podiatric medical curriculum, and announce its candidate status. Candidate status may not be designated as "accreditation" until the new college is accredited.

The Council requires that all institutions/colleges for which it has granted candidate status to have a teach-out plan, which ensures students completing the teach-out would meet curricular requirements for professional licensure or certification and which includes a list of academic programs offered by the institution/college and the names of other colleges of podiatric medicine that offer similar programs that could potentially enter into a teach-out agreement with the institution/college. The teach-out plan is to be submitted as a separate document once an institution/college receives candidacy. (See Teach-Out Plans and Agreements.)

Preaccreditation

When an institution that has obtained candidate status has enrolled students in the first academic year, the Council will conduct an on-site evaluation for the purpose of determining preaccreditation. Preaccreditation is the category that may be granted a new college that has achieved candidate status and for which the Council has determined that the college is likely to succeed in obtaining accreditation. In order for the Council to grant preaccreditation to a new college holding candidate status, the new college must demonstrate that it meets, or has in place plans to meet, the accreditation standards and requirements by submitting an updated self-study to the Council along with all applicable fees. The Council will schedule an on-site evaluation to take place before the midpoint of the second year of the curriculum to review progress in the implementation of the educational program and the status of planning for later stages of the program. The chairs of the Accreditation Committee and Council will determine when this on-site visit should be conducted relative to the granting of preaccreditation. The institution will be consulted regarding dates and arrangements.

If, upon review of the team report, the Council determines the college is in compliance with all accreditation standards, it will grant the college preaccreditation. If minor noncompliance issues are noted, the Council may still grant the college preaccreditation, but the Council may request a written progress report addressing the noncompliance issue(s).

If the Council determines there are substantial noncompliance issues that could be resolved within a relatively limited period of time, it may continue the program's candidate status for an additional year. If continuation of candidate status is granted, the college may be required to cease admitting new students and focus its resources on students already enrolled. The Council may request a written progress report or conduct a focused on-site evaluation within the one-year continuation period to assess progress in achieving compliance. If the college demonstrates satisfactory compliance, it may then be granted preaccreditation and may again enroll new students. If the Council determines there are substantial noncompliance issues that cannot be resolved within a relatively limited period of time, or that a college whose candidate status has been continued has failed to remedy problems identified

previously, it will give notice that it intends to withdraw candidate status. A decision to withdraw candidate status is subject to appeal. If the Council makes a final decision to withdraw candidate status, it will make every effort to help enrolled students transfer to other accredited programs. If candidate status is withdrawn, the program may not reapply for CPME accreditation for a period of one year from the time the final decision to withdraw was communicated in writing to the institution. The Council requires all institutions/colleges for which it has granted preaccreditation to have a teach-out plan, which ensures students completing the teach-out would meet curricular requirements for professional licensure or certification and which includes a list of academic programs offered by the institution/college and the names of other colleges of podiatric medicine that offer similar programs that could potentially enter into a teach-out agreement with the institution/college. (See Teach-Out Plans and Agreements.)

Accreditation

After the institution receives preaccreditation status, the Council schedules an accreditation evaluation to occur late in the third year or early in the fourth year of the curriculum. In preparation for this on-site evaluation, the college again updates its self-study.

If, upon review of the on-site evaluation team report, the Council determines the college complies with all accreditation standards, initial accreditation may be granted for a time period extending for four years from the date the initial accreditation was granted. If minor issues are found, the Council may grant accreditation but require additional progress reports.

If the Council determines there are substantial noncompliance issues that could be resolved within a relatively limited period of time, it may continue the program's preaccreditation status for an additional year. If continuation of preaccreditation is granted, the program may be required to cease admitting new students and focus its resources on students already enrolled. The Council may request a written progress report or conduct a focused on-site evaluation within the one-year continuation period to assess progress in achieving compliance. If the college demonstrates satisfactory compliance, it may then be granted accreditation, and it may again enroll new students if it had been required to suspend new admissions.

If the Council determines there are substantial noncompliance issues that cannot be resolved within a relatively limited period of time, or that a college whose preaccreditation has been continued has failed to remedy the problems identified at the time preaccreditation was continued, it will give notice that it intends to withdraw preaccreditation. A decision to withdraw preaccreditation is subject to appeal. If the Council makes a final decision to withdraw preaccreditation, it will make every effort to help enrolled students transfer to other accredited programs. If preaccreditation is withdrawn, the college may not reapply for CPME accreditation for a period of one year from the time the final decision to withdraw was communicated in writing to the institution.

CPME may maintain the program's preaccreditation status for currently enrolled students until the program has had a reasonable time to complete the activities in its teach-out plan to assist students in transferring or completing their programs, but for no more than 120 calendar days unless approved by CPME for good cause.

CPME will not move an accredited institution or program from accredited to preaccredited status unless, following the loss of accreditation, the institution or program applies for initial accreditation and is awarded preaccreditation status under the new application. Institutions that participated in the

title IV, HEA programs before the loss of accreditation are subject to the requirements of 34 CFR 600.11(c).

The procedures for conducting on-site evaluations to determine candidate status, preaccreditation, and accreditation are the same as those used in the reevaluation of accredited colleges. (See Reevaluation and Reaffirmation of Accreditation.)

REEVALUATION AND REAFFIRMATION OF ACCREDITATION

Initiating the Reevaluation Process/Letter of Intent

In order for accreditation to be reaffirmed, the Council conducts reevaluation of the institution on a periodic basis. Approximately 12–18 months prior to the time the reevaluation visit is to be scheduled, CPME staff advises the chief executive officer of the institution or the chief academic officer of the college of podiatric medicine (for university affiliated/academic health centers only) that arrangements should be made for the college to prepare for reevaluation. The institution at that time determines whether it wishes to pursue continuing accreditation and, if so, a letter of intent from the chief executive officer or chief academic officer is sent to the Council, requesting reevaluation.

The college selects and confirms preferred dates for the on-site evaluation based on options presented by CPME staff. Team appointments are determined by the Council chair based upon recommendations and advice offered by the chair of the Accreditation Committee and Council staff. The college is invited to declare a conflict of interest for any proposed team member appointment.

Self-Study

An institution seeking continued accreditation is required to conduct a self-study related to its educational programs, administration, governance, resources, and student outcomes. The self-study results in the preparation of an analytical document that addresses compliance with each accreditation standard and requirement. The self-study document must include data and other information about the institution and must demonstrate that this information is analyzed and used in program improvement efforts. The self-study process affords the college opportunity to identify its strengths, its performance with respect to student achievement, and areas for improvement, as well as its plans to address continuous improvement. The program solicits input from its community of interest, including, but not limited to, students, faculty, and professional staff—in developing its self-study document.

The report should be no longer than 100 pages of general text, excluding any pertinent supplementary information. The Council publishes an *Accreditation Guide* (CPME 125) to assist institutions in completing the self-study process. Also, Council staff is available to provide advice to the institution about the self-study process.

As a general guide, the self-study document should be organized to facilitate assessment of each accreditation standard by the evaluation team. Guidelines for preparing the self-study document are included in CPME 125 and may be obtained at www.cpme.org or by contacting the Council office.

At least six weeks prior to the visit, the institution must forward the self-study report electronically to the Council office.

Comprehensive On-Site Evaluation

A comprehensive on-site evaluation is conducted to accomplish the following three objectives:

1. To validate the findings and conclusions of the self-study document

2. To collect information to be used by the Accreditation Committee and Council to assess compliance with CPME accreditation standards and requirements

3. To gain insight into the plans of the institution to engage in continued self-improvement.

The evaluation team appointed to conduct the visit gathers information that supplements and validates information provided in the institution's self-study report. The team forms judgments about the institution and educational program based upon observations and impressions as well as upon information presented in the self-study report. These judgments appear in a written report prepared by the team. The team is expected to provide information concerning all aspects of institutional performance related to the accreditation standards and requirements and identify in its report the strengths and weaknesses of the institution, including recognition of any potential areas of noncompliance with CPME accreditation requirements. Additionally, the team may offer verbal or written recommendations related to matters in which possible improvements can be realized. The team provides a summary of its findings verbally to representatives of the institution during the summation conference—the final session of the visit.

Evaluation Team, Advisors, and Observers

The composition of a comprehensive evaluation team must include at least one member from each of the following categories:

- **Practitioner** - someone directly engaged in a significant manner in the practice of podiatric medicine

- **Educator** - someone currently or recently directly engaged in a significant manner in an academic capacity at an accredited college of podiatric medicine who may not be an academic dean

- **Academic** - someone currently or recently directly engaged in a significant manner in postsecondary education and/or research

- **Administrator** - someone currently or recently directly engaged in a significant manner in a postsecondary podiatric medical program or institutional administration.

A comprehensive team may not include more than one member of the Council and one member of the Accreditation Committee. Except under unusual circumstances, the size of the evaluation team will not exceed six members.

The Council chair appoints the evaluation team and team chair based upon recommendations and advice offered by the chair of the Accreditation Committee and Council staff. The institution is consulted in developing the team appointments. In determining the composition of the team, the institution may be asked to suggest the qualifications of individuals who may serve on the team.

For example, the institution may request that team members have particular expertise in finance, strategic planning, curriculum, clinical programming, or other areas in which the institution has a special need or interest. To preclude conflicts of interest, the institution is provided opportunity to reject, for cause, any member of the proposed evaluation team.

A member of CPME staff may be available to the evaluation team to ensure that CPME procedures are followed and to provide advice regarding CPME standards and requirements. Council staff members do not participate as evaluators in the on-site reviews of colleges of podiatric medicine.

With the consent of the Council, the college may invite observers from interested agencies to participate in the visit at no expense to the Council. Observers may be included in all evaluation activities conducted on-campus or at affiliated training sites. The observers do not participate in executive session conferences of the team.

Schedule for the On-Site Evaluation

A comprehensive on-site visit occurs typically over a four-day period. Although the agenda differs based on the demands of the on-site evaluation, each of the following elements is included, to some degree, in the agenda:

- A team planning and document review session prior to the initiation of the on-site visit. Topics discussed at this meeting include the agenda, the schedule of the visit, review of protocol for team members, identification of areas needing clarification with the chief executive officer or chief academic officer, and the materials provided as they relate to the accreditation standards.

- A conference with the chief executive officer of the institution for the purpose of discussing the procedures for the visit, the agenda, and a review of the administrative areas of the evaluation.

- A tour of the physical facilities on campus.

- Facility tours and interviews at significant external clinical sites.

- Confidential meetings with representatives of the governing board of the institution and the chief executive officer, chief academic officer, senior administrators, financial officer, student personnel director, registrar, director of clinics, division and department heads, selected standing committee members, and others.

- Executive session conferences of the evaluation team to discuss and agree upon findings and recommendations.

- An open meeting with students (no faculty or administrators present).

- An open meeting with faculty (no administrators present).

- An open meeting with professional staff (no administrators or faculty present).

- An open meeting with support staff (no administrators or faculty present).

- Additional meetings with individual faculty, students, and administrators at the discretion of the team chair.

- A team meeting at the end of each full day of the on-site evaluation to review findings and questions noted by the team, and to facilitate the report-writing process.

- A final team meeting the morning of the last day of the on-site evaluation to provide an opportunity for the team to further discuss its findings and to review the written report.

- A summation conference with the chief executive officer and chief academic officer (and others whom the chief executive officer may invite) to discuss the general findings of the team and to provide information about the sequence of events pertaining to the CPME review that will follow the visit.

Materials to be Made Available for the Team

In addition to the documentation identified in CPME 120, the following materials should be made available on-campus in electronic format for the use of the evaluation team. In general, the materials should include any items referenced in the self-study document that were not included in the appendices, and any other information that provides evidence of compliance with the accreditation standards and their requirements.

- Progress reports submitted to, and evaluation team reports received from, CPME and the applicable nationally recognized institutional accrediting agency and/or state agency since the last comprehensive evaluation visit

- Correspondence about accreditation received from CPME and the applicable nationally recognized institutional accrediting agency and/or state agency since the last comprehensive evaluation visit

- Summary data regarding faculty teaching loads

- Summary data regarding the number and size of classes

- Collective bargaining agreement, if applicable

- Institutional advertising directed toward prospective students

- Peer evaluations (if applicable)

- Student assessments of faculty/courses/experiences

- Volume of clinical patients at each site utilized for educational purposes and patient surveys completed

- Other materials as necessary to be determined by the team leader.

Preparation of the Report

The team report represents the findings of the team based upon its study of institutional documents, other materials provided by the institution, and information garnered during confidential interviews with college constituents. All statements, findings, and recommendations included in the report are made in good faith with a view toward enhancing the quality of the educational program. The report reflects only that information obtained as part of the educational evaluation process conducted in accordance with CPME procedures. The team does not formulate an accreditation recommendation about the college, but it does identify areas of potential noncompliance. In all cases, the report must address the college's performance with respect to student achievement.

Each member of the evaluation team is assigned specific areas to review during the evaluation visit. These areas correspond to each team member's responsibilities in completing the report. The team chair coordinates the development of the report and ensures that the first draft of the report is finished shortly after the site visit. The draft is provided to CPME staff for final editing. Staff circulates a copy of the report to all members of the evaluation team. After receipt of comments and revisions from members of the evaluation team, the report is sent to the chief executive officer and the chief academic officer.

Institutional Response

The institution is provided at least four weeks to respond to the report of the evaluation team. The institution may respond to the report in the following ways:

- Offer corrections of errors as they relate to names, positions, data, and other documentable facts
- Offer comments that agree or disagree with the opinions and conclusions stated in the report
- Provide documentation demonstrating progress toward addressing areas of potential noncompliance.

At the discretion of the team chair, the information received from the institution may be incorporated into the report that is forwarded to the Accreditation Committee. If the report is modified by the team chair, a copy of the revised report is sent to the institution.

The responses of the institution will only be considered if the additional information submitted pertains to facts that can be verified without the need for a further on-site visit.

CONSIDERATION BY THE COUNCIL ON PODIATRIC MEDICAL EDUCATION

Review by the Accreditation Committee

The Accreditation Committee is provided copies of the report of the evaluation team, the institution's self-study report, and the response to the evaluation report submitted by the institution. If deemed appropriate, the Committee may add a statement to the report that additional facts, not available at the time of the evaluation visit, were considered as part of the review of the report and had a direct bearing on the Committee's accreditation recommendation. The extent to which the additional

information will affect the recommendation of the Accreditation Committee is a matter of judgment within the discretion of the Committee.

A representative(s) of the institution is invited to provide a verbal statement to the Accreditation Committee regarding the findings identified in the evaluation team report. The Committee reserves the right to limit the time of the institution's verbal presentation.

The team leader attends the Accreditation Committee's review to, among other things, provide a verbal summary of the team's findings as stated in the team report or elaborate further on those findings, clarify the team report, and/or answer any questions from the Committee. Under extenuating circumstances and subject to approval by the Accreditation Committee chair, a video conference with the team leader may be considered. The college representative(s) is given an opportunity to respond to the team leader's comments.

The Accreditation Committee reviews all materials carefully and formulates a recommendation regarding a proposed action to be taken by the Council. Neither the college representative(s) nor the team leader may be present during the Committee's deliberations. The proposed accreditation action includes the following:

1. Accreditation status and period of accreditation

2. Maximum number of enrolled students authorized

3. Identification of areas in noncompliance with CPME requirements

4. A schedule for progress or special reports to be submitted and for the conduct of subsequent comprehensive or focused evaluation visits.

Action of the Council

At a meeting of the Council that occurs following the meeting of the Accreditation Committee, the Council considers the proposed accreditation action recommended by the Committee. The chair of the Accreditation Committee provides a written and oral report of the recommendation of the Committee. The Council may accept the recommendation of the Accreditation Committee, or it may choose to take an alternative action that it believes is appropriate. Areas of noncompliance determined by the Council may include, but are not limited to, those indicated by the evaluation team and the Accreditation Committee.

ACCREDITATION CATEGORIES

Accreditation

Accreditation is determined by the Council based upon an on-site evaluation of the college, leading to a judgment made by the Council that the college is in reasonable compliance with standards and requirements for accreditation. However, initial accreditation may only be granted to colleges in compliance with all accreditation standards. Accreditation is an indication of the Council's confidence in the overall integrity of the college, the demonstrated success of the institution to engage in continuous self-improvement, and the ability and wherewithal to continue to be successful

as an institution of higher and professional education for the foreseeable future. Initial accreditation may be granted for a time period extending for four years from the date the action is taken by the Council followed by a re-evaluation to determine reaffirmation of accreditation. Accreditation may be reaffirmed for up to eight years. (See Accreditation Period.) An on-site re-evaluation serves as the basis for determining continued accreditation status.

Accreditation with Monitoring

For colleges seeking continued accreditation, or during any review of compliance, the Council will grant accreditation with monitoring if a college is cited with one or more areas of noncompliance with the CPME standards and requirements. All areas of noncompliance must be corrected within the two-year timeframe unless an extension for good cause is requested and granted. (See Enforcement of Standards.)

The institution is not required by the Council to inform its students and applicants to its program of this accreditation status. The Council will notify the US Department of Education that the college has been placed on monitoring status and publish this information on the CPME webpage. (See Disclosures.)

When the Council determines that an institution is in noncompliance with one or more of its standards and requirements, the Council must immediately initiate adverse action against the college or require that the college take appropriate action to bring itself into compliance with the Council's requirements within two years. The Council will provide a written timeline for coming into compliance based on the nature of the finding, the stated mission, and educational objectives of the college. Failure to bring into compliance the area(s) of noncompliance will result in withdrawing of accreditation.

The extent to which the institution is in compliance with the area(s) of noncompliance will be based on a review of one or more progress or special reports and/or a focused or comprehensive on-site evaluation. (See Enforcement of Standards.)

Probationary Accreditation

Probationary accreditation is determined by the Council when an accredited college of podiatric medicine is viewed to be in noncompliance with CPME standards and requirements to the extent that the quality and effectiveness of the educational program of the institution is considered to be in jeopardy. This category serves as a warning to the institution and the public that serious problems exist that could cause the institution or its educational program to fail at any time. Although the college continues to be accredited while recognized in this category, continued accreditation beyond the probationary period is considered highly unlikely if deficiencies are not addressed. Except under unusual circumstances, probationary accreditation may not extend for more than two years.

The institution is required by the Council to inform its students and applicants to its program of this accreditation status. This disclosure must also be placed in a prominent position on the college's website to ensure that access to this information is readily available. This public disclosure must include information for CPME (i.e., website URL and email address) so that the information can be verified. The Council also issues a public statement concerning final actions to grant probationary accreditation. (See Disclosures.)

The Council requires an accredited college of podiatric medicine for which it is the institutional or programmatic accreditor to submit a teach-out plan to the Council if the Council acts to place the college of podiatric medicine on probation. (See Teach-Out Plans and Agreements.)

Accreditation Withheld

The Council withholds accreditation when a new college fails to demonstrate during the candidate and preaccreditation status period its ability to satisfy the Council's standards and requirements. When the Council considers an action to withhold accreditation of a new college, factors that have a significant impact on the effectiveness of the educational program are identified as the basis for the action. The institution has an ethical obligation to inform its students and applicants to the program of this status once final. This disclosure must also be placed in a prominent position on the college's website to ensure that access to this information is readily available. This public disclosure must include information for CPME (i.e., website URL and email address) so that the information can be verified. The Council also issues a public statement concerning final actions to withhold accreditation. (See Disclosures.) Before an action of the Council to withhold accreditation may be made public, the institution must be afforded the opportunity to seek and fully exhaust the procedural reconsideration and appeal processes. (See Procedural Reconsideration/Appeal.)

The Council requires a college of podiatric medicine for which it is the institutional or programmatic accreditor and has granted candidacy or preaccreditation to submit a teach-out plan to the Council if the Council acts to withdraw or terminate the candidacy or preaccreditation of the college of podiatric medicine. (See Teach-Out Plans and Agreements.)

Accreditation Withdrawn

Accreditation is withdrawn by the Council when, after a period of probationary accreditation, the college continues to demonstrate noncompliance with the Council's standards and requirements. When the Council considers an action to withdraw accreditation, factors that have a significant impact on the effectiveness of the educational program are identified as the basis for the action. The institution has an ethical obligation to inform its students and applicants to the program of this status once final. This disclosure must also be placed in a prominent position on the college's website to ensure that access to this information is readily available. This public disclosure must include information for CPME (i.e., website URL and email address) so that the information can be verified. The Council also issues a public statement concerning final actions to withdraw accreditation. (See Disclosures.) Before an action of the Council to withdraw accreditation may be made public, the institution must be afforded the opportunity to seek and fully exhaust the procedural reconsideration and appeal processes. (See Procedural Reconsideration/Appeal.)

The Council requires an accredited college of podiatric medicine for which it is the institutional or programmatic accreditor to submit a teach-out plan to the Council if the Council acts to withdraw or terminate the accreditation of the college of podiatric medicine. (See Teach-Out Plans and Agreements.)

Following implementation of the procedural reconsideration and appeal processes, if the action to withdraw accreditation is sustained by the Council, the effective date of the withdrawal of accreditation will be the date on which the action is sustained.

Voluntary Termination of Accreditation

Accreditation does not extend to nonexistent colleges of podiatric medicine. The Council will withdraw candidate status or withdraw accreditation immediately of any college of podiatric medicine that is closed or otherwise terminated voluntarily. Actions to withdraw candidate status or withdraw accreditation voluntarily are not subject to further review under the procedural reconsideration and appeal processes. Upon learning of the closing of a college of podiatric medicine or its financial insolvency, the Council will notify the US Secretary of Education, each state board of podiatric medicine, the nationally recognized institutional accrediting agency (if the institution holds membership in a nationally recognized institutional accrediting association), and the public of said action no later than 30 calendar days after a decision is made.

The Council requires a college of podiatric medicine for which it is the institutional or programmatic accreditor and has granted candidacy, preaccreditation, or accreditation to submit a teach-out plan to the Council if the college notifies the Council that it intends to cease operations entirely or close a location that provides 100 percent of at least one program. (See Teach-Out Plans and Agreements.)

Withdrawal from Accreditation

The pursuit of accreditation and the pursuit of reaffirmation of accreditation are considered to be voluntary processes. An institution that seeks candidate status, initial accreditation, or continuing accreditation is permitted to withdraw from these processes at any time. Upon receiving notification from an institution of its intent to withdraw from the preaccreditation or accreditation processes, the Council will notify the US Secretary of Education, each state board of podiatric medicine, the nationally recognized institutional accrediting agency (if the institution holds membership in a nationally recognized institutional accrediting association), and the public of said action no later than 30 calendar days after a decision is made.

The Council requires a college of podiatric medicine for which it is the institutional or programmatic accreditor and has granted candidacy, preaccreditation, or accreditation to submit a teach-out plan to the Council if the college notifies the Council that it intends to cease operations entirely or close a location that provides 100 percent of at least one program. (See Teach-Out Plans and Agreements.)

Adverse Actions

Adverse actions include decisions of the Council to deny or withdraw candidate status, withdraw preaccreditation, withhold accreditation, and withdraw accreditation. Adverse actions are subject to review within the procedural reconsideration and appeal processes. Procedural reconsideration and appeal processes may be initiated by the institution at the invitation of the Council under the obligations specified in this document. (See Procedural Reconsideration/Appeal.)

ACCREDITATION PERIOD

In granting extended periods of accreditation, the Council shows its confidence in the institution's abilities to continue to demonstrate compliance with CPME standards and requirements and make ongoing improvements in the educational program.

Accreditation by the Council may extend for previously accredited colleges for a maximum period of

eight years based upon the on-site visit and demonstration by the institution of continued compliance with CPME standards and requirements and improvement of the educational program. Alternatively, should the institution and/or its educational program show no progress or be determined to be in a state of deterioration, the Council would exercise one of the following options:

1. Conduct a focused evaluation visit to follow-up on specific concerns

2. Place the institution on probationary accreditation status and inform the institution to begin self-study in anticipation of a comprehensive on-site evaluation.

If either of these options is pursued, continuation of accreditation would be based upon the findings of the on-site evaluation.

The eight-year accreditation cycle applies to colleges of podiatric medicine seeking reaffirmation of accreditation. Initial accreditation of new colleges of podiatric medicine or of colleges that have had accreditation withdrawn may extend for a maximum period of four years from the time of the Council action.

The Council may elect to deviate from the eight-year accreditation cycle when a college has undergone a substantial change, when major deterioration in its educational program has occurred, when the institution requests an earlier evaluation, and when a formal appeal or complaint against an accredited college requires an on-site evaluation of the issues surrounding the complaint. In any event, the Council reserves the right to conduct an evaluation of the college whenever circumstances require such review. This evaluation may have an impact on a previously granted accreditation period.

Enforcement of Standards

When the Council determines that an institution is in noncompliance with one or more of its standards and requirements, the Council must immediately initiate adverse action against the college or require that the college take appropriate action to bring itself into compliance with the Council's requirements within two years. The Council will provide a written timeline for the college to come into compliance based on the nature of the finding, the stated mission, and educational objectives of the college. Failure to bring into compliance the area(s) of noncompliance will result in withdrawing or withholding of accreditation.

The Council's determination of the extent to which the institution is in compliance with the area(s) of noncompliance will be based on a review of one or more progress or special reports and/or a focused or comprehensive on-site evaluation.

The Council may elect to extend the two-year period for coming into compliance for the following good causes:

- Change in chief executive officer
- Change in chief academic officer
- Change in dean
- Demonstration of progress on a plan whose fulfillment would require an extension in time
- A natural disaster or other catastrophic event significantly impacting an institution's or program's operations

- Accepting students from another institution that is implementing a teach-out or closing
- Other substantive financial or administrative changes that affect the operation of the college.

This period of extension is to be determined by the Council but is usually limited to a maximum of two additional years. Failure to meet the requirements as stated by the Council during the two-year period, including any extension for good cause, will result in withdrawal or withholding of accreditation.

The Council may maintain the college's accreditation status until the college has had reasonable time to complete the activities in its teach-out plan or to fulfill the obligations of any teach-out agreement to assist students in transferring or completing their programs. (See Teach-Out Plans and Agreements.)

NOTIFICATION TO THE INSTITUTION

The Council notifies institutions of preaccreditation and accreditation decisions in writing. The Council advises the institution of the action within 30 calendar days of the date on which the Council completes its accreditation deliberations. Accreditation decisions of the Council are transmitted in writing to the institution's chief executive officer and the dean.

For adverse actions, the written communication to the affected institution contains the following information:

1. The specific reasons for taking the adverse action

2. The date the action becomes effective

3. Invitation to the institution to initiate procedural reconsideration and appeal processes and the date by which such a request must be received by the Council

4. A reminder to the institution regarding its obligation to inform students and applicants to the program about the adverse action if no request for procedural reconsideration or appeal is made.

Notifications of adverse accreditation actions are confidential and transmitted by electronic notice.

DISTRIBUTION OF FINAL EVALUATION REPORT

Included with the correspondence that transmits the accreditation action is a copy of the final evaluation report. The institution may distribute only the final report as provided by the Council.

STATEMENT OF ACCREDITATION STATUS

A college of podiatric medicine accredited by the Council must use the following statement in its reference to accreditation in college publications:

> The (name of institution) is accredited by the Council on Podiatric Medical Education. Accreditation is an indication of public approbation, attesting to the quality of the podiatric medical education program and the continued commitment of the institution to support the

educational program. The Council is recognized as the professional institutional accrediting agency for podiatric medical education by the US Department of Education and by the Council for Higher Education Accreditation. For further information, please contact the Council on Podiatric Medical Education at the following address:

Council on Podiatric Medical Education
11400 Rockville Pike, Suite 220
Rockville, MD 20852
(301) 581-9220
www.cpme.org

In addition, to increase uniformity of the accreditation information presented on the webpages of all accredited colleges, the following language should be added regarding accreditation:

The (insert college name) is accredited by the Council on Podiatric Medical Education (www.cpme.org) and the current accreditation status is (accreditation/probation).

The hyperlink to CPME.org must be active.

No other statements regarding accreditation by the Council on Podiatric Medical Education may be used without the permission of the Council.

Institutions that obtain candidate or preaccreditation status should contact the Council office to determine the appropriate statement to be released about the status.

MONITORING COMPLIANCE: FOLLOW-UP REPORTS, FOCUSED EVALUATIONS, AND SUBSTANTIVE MODIFICATIONS

Annual Reports

Each accredited college of podiatric medicine is required to submit a report to the Council each year, providing information about the institution, its faculty, and its students. The information submitted in the annual report is used by the Council in the continuing evaluation of the college of podiatric medicine. A portion of the information is used to tabulate aggregate data about the colleges and is published on the Council's website.

The report consists of a detailed description of any new strengths, limitations, and/or objectives identified by the college during the past year, and the institution's efforts toward improving the college as based upon ongoing self-study and continued compliance with the Council's requirements. The report contains documentation and statistical data about any changes in the educational program and changes in the college as a whole. The Accreditation Committee reviews the annual report. The Committee may request additional information if particular concerns are identified, or if clarification is required.

Progress Reports or Special Reports

The Council may request that the institution submit progress or special reports on matters of particular interest. These reports enable the Council to review matters considered to be of significant

and urgent importance. In particular, progress reports assess the educational program's progress in achieving compliance with the accreditation standards and requirements.

Focused On-Site Evaluation

The Council may conduct focused evaluations to review specific issues between comprehensive visits. The purposes of focused visits are the following:

1. To follow up on unresolved matters from the most recent comprehensive on-site evaluation

2. To evaluate new concerns or issues that come to light during the review of annual reports, interim progress reports, or special reports

3. To assess a request for approval of substantive modifications

4. To assess complaints or appeals in further detail.

Continued accreditation may be contingent upon the results of a focused on-site evaluation. Focused evaluation teams comprised of two to three team members are appointed and configured in accordance with the scope and special purpose associated with each visit and are usually conducted over a one- or two-day period. The schedule for the focused visit includes opportunities for the team to meet with the appropriate personnel and review materials relative to the special purpose of the visit. The rights, privileges, and responsibilities of institutions during a focused evaluation are the same as those accorded an institution for a comprehensive evaluation. The team report based on focused evaluation is considered by the Accreditation Committee and the Council.

Substantive Modifications

If a college of podiatric medicine wishes to implement a substantive change, the college must receive prior approval from the Council before implementing the substantive change. The effective date of the substantive change approval is the date of the CPME meeting at which the approval was determined unless the approval letter specifies a different effective date. Regardless, the effective date may not be retroactive. Colleges are encouraged to contact CPME to confirm the need for submitting a request for approval of a substantive change.

The Council will consider the following substantive changes:

1. Substantial change in the established educational mission or objectives of the college

2. Change in the location of the institution

3. Change in the legal status or form of control, or ownership, of the institution

4. Addition of instruction which represents a significant departure, in terms of curriculum content or method of delivery, from the curriculum as offered at the last on-site evaluation of the college of podiatric medicine

5. Change in the way student progress is measured, including whether progress is measured in clock hours or credit hours, semesters, trimesters, or quarters, or uses time-based or non-

time-based methods

6. An increase or decrease in the length of the curriculum

7. Contracting with a non-Title IV certified institution for greater than 25 and up to 50 percent of a college's educational program

8. Acquisition of any other institution or any program or location of another institution

9. Addition of a permanent location at which a teach-out is being conducted for students of another institution that has ceased operations before all students have completed their program of study

10. Addition of a new location or branch campus/additional location

The college's request and supporting documentation serve as the basis for the Council's decision to approve or deny a substantive modification request. To assist the college in preparing its request, the documentation required for the substantive change submission is listed under each substantive change category below.

The Council will not consider the addition of programs of study at a degree or credential level different from that which is included in the institution's accreditation or preaccreditation.

Substantive Changes Requiring Comprehensive Evaluation

The Council may require that the requests for substantive change be evaluated with a comprehensive on-site evaluation, in addition to the evaluation requirements that exist for that type of substantive change, whenever the college meets one or more of the following conditions:

- Had its last comprehensive visit four or more years ago
- Has received a probationary accreditation status within the last five years
- Had an approved authorization to increase enrollment within the last five years
- Had an approved unauthorized increase in enrollment within the last three years
- Had an approved substantive change related to a branch campus/additional location within the last five years
- Had an approved substantive change related to an additional location within the last five years.

The Council may grant a new eight-year cycle of accreditation to a college that undergoes a comprehensive on-site visit for the purpose of evaluating a request for a substantive change.

NOTE: Throughout CPME 130, including the substantive change section, a comprehensive on-site evaluation requires another full accreditation process, including submission of a self-study and the conduct of an on-site visit.

1. Substantial change in the established educational mission or objectives of the college.

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted

at least 30 calendar days prior to the Council meeting during which the change will be reviewed:

- The rationale for the change
- The effect this change will have on learning outcome assessments, facilities, faculty admission policies and procedures, and the curriculum
- Governing body review and approval
- Announcement of the proposed change to students, faculty, professional staff, alumni, and the public.

Monitoring

The Council will require a progress report in years two and four of the change in the educational mission. The progress report must address the following:

- The linkage of the college's outcome assessments to its new mission plans
- Any changes to facilities as a result of changes in the mission
- Any changes to faculty as a result of changes in the educational mission
- Any changes to the admission policies and procedures as a result of changes in the educational mission
- Any curricular changes as a result of changes in the educational mission.

2. Change in the location of the institution.

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change will be reviewed:

- Appropriate charters, licenses, or approvals required to function if location is moved to a new jurisdiction
- The new facilities including a building and/or remodeling plans, project budget, and completion timelines
- Budget for move and other related expenses
- Governing body discussion and approval.

Monitoring

The Council will schedule a focused on-site visit within one year of the move to review the following:

- Adequate college financial resources
- Adequate college facilities
- Adequacy of faculty.

3. Change in legal status or form of control or ownership of the institution.

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change

will be reviewed:

- Proposed terms of the affiliation, including the date on which the affiliation is to become effective
- Impact the affiliation will have on the college and its resources (i.e., administration, governance, finances, faculty, physical plant, curriculum, and student services)
- Plans of the institution to alleviate any negative effects on the college and its resources
- Plans of the institution to reallocate resources to accommodate the affiliation
- Benefits to the college of podiatric medicine
- Announcement of the proposed changes to students, faculty, professional staff, alumni, the public.

Monitoring

The Council will schedule either a comprehensive or a focused visit as soon as practicable, but within six months. The on-site visit will review the following:

- Governing body bylaws and/or policies and procedures
- Organization of the governing body and its relationship to college administration and academic officers
- Impact the affiliation will have on the college and its resources (i.e., administration, governance, finances, faculty, physical plant, curriculum, and student services).

4. *Addition of instruction which represents a significant departure, in terms of curriculum content or method of delivery, from the curriculum as offered at the last on-site evaluation of the college of podiatric medicine.*

Concerning distance education delivery, the interpretation of "significant departure" is defined as 50 percent or more of the credit hours delivered throughout the program. CPME accreditation does not allow for the inclusion of correspondence courses or direct assessment education.

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change will be reviewed:

- The curriculum change
- Analysis of additional resources—financial, facilities, and faculty—needed for the change
- Curriculum committee discussion and approval
- Faculty governance discussion and approval
- Governing body discussion and approval.

Monitoring

The Council will require a progress report for four years, beginning in the year after the first year of the curriculum change. The progress report must address the following:

- Analysis of changes—positive and/or negative—that resulted from the curriculum change

- Analysis of additional resources—financial, facilities, and faculty—needed for this change
- Student achievement data relating to the curriculum change.

5. *Change in the way student progress is measured, including whether progress is measured in clock hours, credit hours, semesters, trimesters, or quarters, or uses time-based or non-time-based methods.*

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change will be reviewed:

- A detailed description explaining why the college is making the change.

Monitoring

If the Council approves the substantive change, no further monitoring is required.

6. *An increase or decrease in the length of the curriculum.*

The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the substantive change to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change will be reviewed:

- How the curriculum will be increased or decreased
- Analysis of additional financial, facilities, and faculty resources needed for increasing or decreasing the curriculum length
- Curriculum committee discussion and approval
- Faculty governance discussion and approval
- Governing body discussion and approval.

Monitoring

The Council will require a progress report for four years after the curriculum change, beginning in the year after the first year of the curriculum increase or decrease. The progress report must address the following:

- Analysis of changes—positive and/or negative—that resulted from the increase or decrease in curriculum length
- Analysis of additional financial, facilities, and faculty resources needed for this change
- Student achievement data related to the increase or decrease in curriculum length.

7. *Contracting with a non-Title IV certified institution to provide greater than 25 and up to 50 percent of a college's educational program.*

A college that seeks to enter into a contract under which an institution not certified to participate in Title IV, Higher Education Act (HEA) programs offers more than 25 and up to 50 percent of the

college's program must submit written notification to the Council of its intention to establish such a partnership at least 18 months prior to the desired date of offering instruction at the partner's facilities. The criteria for evaluation and monitoring are those established for substantive changes related to curriculum and additional location, depending on the nature of the agreement.

- If the instruction will occur at the college of podiatric medicine, then this modification will be reviewed as a substantive change related to curriculum.
- If the instruction will occur at a geographic location separate from the college, and represents 25–49 percent of the program offering, then this modification will be reviewed as a substantive change related to curriculum.
- If the instruction will occur at a geographic location separate from the college, and represents 50 percent or more of the program offering, then this modification will be reviewed as a substantive change related to an additional location.

The Council will make a final decision within 90 calendar days of receipt of a materially complete request, unless the Council or its staff determine significant circumstances related to the substantive change require a review by the Council's decision-making body within 180 calendar days.

8. Acquisition of any other institution or any program or location of another institution.

A college of podiatric medicine that seeks to acquire another college of podiatric medicine or merge with another college of podiatric medicine must submit written notification to the Council of its intention to establish such an acquisition at least 18 months prior to the desired date of offering instruction at the acquired program.

The criteria for evaluation and monitoring are those established for substantive changes related to governance, additional location/branch campus depending on the Council's accreditation role and the nature of the agreement.

- If two colleges of podiatric medicine intend to merge and create a new legal entity, then this modification will be reviewed as a governance substantive change. Depending on the nature of the new legal entity, the Council may schedule a comprehensive on-site evaluation including all accreditation standards or some portion thereof in addition to those normally reviewed in a governance substantive change.
- If two colleges of podiatric medicine intend to merge in a manner that one of the colleges remains the surviving entity, and has institutional accreditation from the Council, then this modification will be reviewed as a branch campus or additional location substantive change, depending on how the surviving college intends to operate the acquired college.
- If two colleges of podiatric medicine intend to merge in a manner that one of the colleges remains the surviving entity, and has programmatic accreditation from the Council, then this modification will be reviewed as an additional location substantive change.

9. Addition of a permanent location at which a teach-out is being conducted for students of another institution that has ceased operations before all students have completed their program of study.

A college that seeks to add a permanent location at a site at which the institution is conducting a teach-out for students of another college that has ceased operations before all its students have completed their program of study must submit written notification to the Council of its intention to

establish such an acquisition at least 18 months prior to the desired date of adding the permanent location.

NOTE: The criteria for reviewing a teach-out agreement *per se*, are found in the section on review of teach-out agreements. (See Teach-Out Plans and Agreements.)

The criteria for evaluation and monitoring are those established for governance and branch campus/additional location substantive changes depending on the Council's accreditation role and the nature of the agreement.

- If the college that remains the surviving entity has institutional accreditation from the Council, then this modification will be reviewed as a branch campus/additional location substantive change depending on how the surviving college intends to operate the acquired college.
- If the college that remains the surviving entity has programmatic accreditation from the Council, then this modification will be reviewed as an additional location substantive change.

10. Establishment of a new location or branch campus/additional location.

A college must submit written notification to the Council of its intention to establish a new location or branch campus/additional location at least 18 months prior to the desired date of offering instruction. The college also must address the feasibility of establishing the branch campus/additional location including the college's fiscal and administrative capability to operate the location or branch campus/additional location and long-range planning for expansion. This feasibility study must be received 90 calendar days in advance of the Council meeting at which it will be considered and address at least the following items:

- Clearly identified academic control.
- Adequate faculty, facilities, resources, and academic and student support systems in place.
- Financial stability of the college.
- Evidence that the college has engaged in long-range planning for execution.
- If the institution is accredited by a nationally recognized institutional accrediting agency recognized for that purpose by the US Secretary of Education, then a letter indicating approval of the branch campus/additional location from the nationally recognized institutional accreditor must accompany the change request. If the institution is placed on probation by the nationally recognized institutional accreditor, the college must provide a rationale for why the Council should approve the branch campus/additional location in light of the institution having been placed on probation.
- Documentation from the appropriate state agency, a charter, or evidence of support for approval to grant the Doctor of Podiatric Medicine degree.
- Demonstration and documentation with written verification that the branch campus/additional location has the availability of adequate clinical training sites. Documentation must include an assessment of the impact of the proposed clinical training programs of the branch campus upon any podiatric medical training programs already in existence at the clinical sites under discussion.
- The curriculum to be offered at the branch campus/additional location.
- The faculty who will provide instruction.
- Projected revenues, expenditures, and cash flows at the branch campus/additional location.
- Physical resources at the branch campus.

- Administrative structure of the branch campus/additional location including identification of the individual who will be the on-site chief academic officer
- Organizational structure between the parent and the branch campus/additional location described and documented in an organizational chart.
- Educational planning and noted progress in generating residency clinical training opportunities.

Monitoring

The branch campus/additional location offering a program in podiatric medicine must have that program conform to the same standards for faculty, professional staff, facilities, student services, curriculum, and research as the parent institution in order to meet the Council's accreditation standards for a college of podiatric medicine.

- The Council will conduct a comprehensive on-site visit to a branch campus/additional location at least six months prior to the initiation of instruction and acceptance of students at the branch campus/additional location to ensure compliance with all accreditation standards.
- The Council will include the branch campus/additional location in the parent institution's accreditation only after verifying that the college meets all accreditation standards.
- Focused or comprehensive site visits may be conducted as needed and as determined by the Council. Thereafter, on-site evaluations of the branch campus/additional location will be scheduled in conjunction with the on-site visit of the parent campus.

The branch campus/additional location may recruit, but not accept students or offer instruction, after the first review and approval of its application. Operations at the branch campus/additional location, including enrolling students and offering instruction, may begin after Council review of the initial site visit report and granting of such approval.

Additional Information Related to Additional Locations

A college must obtain CPME approval before establishing an additional location that is not a branch campus and at which 50 percent or more of the podiatric medical education program is offered. If CPME's accreditation of the college enables the institution to seek eligibility to participate in Title IV, HEA programs, CPME will conduct a visit within six months to each additional location established by an institution that has three or fewer additional locations, has not demonstrated that the additional location meets all CPME standards that apply to the additional location, or is on monitoring status, probation, or is subject to a limitation by CPME on its accreditation or preaccreditation status. For institutions with more than three additional locations, CPME will conduct a site visit at reasonable intervals to a representative sample of locations. CPME may require a site visit or other monitoring when an institution experiences rapid growth in additional locations to ensure the educational quality of the program. The purpose of these site visits is to verify that the additional location has the personnel, facilities, and resources the institution claimed it had in its application to CPME for approval of the additional location.

CPME will determine whether a proposed or approved substantive change, including the establishment or expansion of an additional location, is sufficiently extensive to require a new comprehensive evaluation. CPME may require a new comprehensive evaluation when the change, alone or in combination with other changes, materially alters the scope, structure, delivery, resources, governance, location, or educational capacity of the podiatric medical education program, or

otherwise raises questions about the college's continued compliance with CPME standards.

Affiliation with Another Institution

An institution must obtain prior approval from the Council before it affiliates with or otherwise becomes integrated into another institution (i.e., mergers of equals, acquisitions, mergers of collateral health education programs, or affiliations) to the extent that the affiliation or integration changes the control or ownership of the college of podiatric medicine or has the potential of significantly affecting the college's continuing compliance with CPME standards and requirements. In its request for CPME approval, the institution is required to submit a comprehensive report describing the following:

- Proposed terms of the affiliation, including the date on which the affiliation is to become effective
- Impact the affiliation will have on the college and its resources (i.e., administration, governance, finances, faculty, physical plant, curriculum, and student services)
- Plans of the institution to alleviate any negative effects on the college and its resources
- Plans of the institution to reallocate resources to accommodate the affiliation
- Benefits to the college of podiatric medicine.

The institution also is expected to provide copies of signed or proposed affiliation agreements. An on-site evaluation may be conducted to assess the affiliation prior to the Council granting approval. If an on-site evaluation is necessary, it will be scheduled no later than six months after receipt of the request for approval of the affiliation. In the case of affiliations that have not become fully operational, the Council may elect to review the institution's request for approval of the substantive modification and grant preliminary approval until such a time that an on-site evaluation can be conducted when the affiliation is operational.

Authorization to Increase Enrollment

Among the matters for which the Council requires prior approval is the increase in student enrollment for a college of podiatric medicine. Based upon the on-site evaluation process, the accreditation action taken by the Council includes authorization of a maximum number of students (defined as the total headcount) to be matriculated in the first-year class by the college. This number takes into consideration the institution's current or proposed enrollment at the time of the visit in relation to current compliance with CPME standards and requirements and demonstrated achievement of stated student learning outcomes and programmatic outcomes.

The institution must seek prior authorization from the Council before increasing the maximum number of students to be matriculated in the first-year class in a given year. The college must notify the Council 60 calendar days prior to the scheduled Council meeting that the college wants the increase in enrollment to be reviewed. The following documentation must be submitted at least 30 calendar days prior to the scheduled Council meeting during which the change will be reviewed.

Obligation to Students

- Demonstration that the college has resources sufficient for the effective operation of the college and the discharge of its obligations to students, specifically including, but not

limited to, ensuring that students have access to an adequate number of residency positions
- Evidence that the college can attract a larger volume of students who are qualified and capable of successfully completing and benefiting from the education and training offered by the institution

Educational Program

- The clinical facilities and patient volume available for the increased class size
- The college's formal plan to develop clinical sites and experiences that provide a variety of supervised patient care experiences in a number of settings

Faculty

- Faculty available for required courses, clinical experiences, and clerkships for the increased class size

Resources

- A summary of the space and educational facilities available to accommodate the increased class size for the pre-clinical curriculum (such as data on seating capacity of lecture halls and small-group meeting rooms, dissection facilities, wet lab space, etc.)
- Assessment of the sufficiency of library resources and space, clinical skills assessment centers, information technology, general study space, or any other relevant facilities for the larger class size
- Capacity of student services (such as student affairs, financial aid, academic and career counseling, student health, confidential counseling, etc.) to handle the larger volume
- Demonstration that students have (or will have) access to an adequate number of residency positions through the development of residency positions equal to the number of the requested increase in class size

The Council will review the information provided by the college and decide if additional documentation or action is necessary. The decision will be based on whether continuing compliance with the accreditation standards can be assured. If continued compliance with the accreditation standards is evident, authorization will be granted, and no further action will be needed. The Council also may request additional information or may schedule a focused on-site evaluation if continued compliance is not evident. If the Council is not assured that there will be continuing compliance with accreditation standards, the college will be notified that the acceptance of a larger class under the plans submitted could result in probationary status or withdrawal of accreditation.

The Council will not consider an application for an increase submitted by a college on probation. If a college on probation exceeds its established maximum enrollment without authorization, the Council will withdraw accreditation of the college at its next scheduled meeting.

If an accredited college exceeds its established maximum enrollment without prior authorization, the Council may mandate, by placing the college on probation, a reinstatement of the enrollment level that would not exceed the maximum number identified by the Council, effective at the beginning of the next academic year. If placed on probation, the college would become a candidate for withdrawal of accreditation.

Federally Initiated Reviews

The Council will evaluate a college of podiatric medicine to determine the college's compliance with CPME standards and requirements if data provided by the US Secretary of Education indicates the student loan default rate for the college equals or exceeds federally prescribed limits or if the Council receives information that a college has failed to comply with its program responsibilities under Title IV of the HEA or Title VII of the US Public Health Service Act.

Title IV Responsibilities

A college of podiatric medicine that participates in a federal student aid program must take all of the following actions:

- Inform CPME of its status as a participant in the federal program and immediately inform CPME of any change in that status.

- Report to CPME annually its federal student loan default rates as defined by the US Department of Education. If the report identifies any rates defined by the Department as too high, develop and submit a corrective action plan to address such rates.

- Inform CPME promptly of any audit, program review, or any other inquiry by a federal agency such as the US Department of Education regarding the institution's participation in federal financial aid programs and promptly update the Council regarding all communications with the Department until resolution or conclusion.

- Inform CPME promptly of any findings or actions by the US Department of Education relative to the institution's participation in the Title IV program.

The Council will evaluate the failure of an institution to maintain compliance with its requirements under the Title IV program to determine potential noncompliance with accreditation requirements. The Council will direct the institution to provide whatever evidence it deems necessary to resolve the question and may conduct an on-site evaluation.

PROCEDURAL RECONSIDERATION/APPEAL

If an adverse action is taken by the Council, the institution is provided an opportunity to request procedural reconsideration of the adverse action and may appeal the decision to an Ad Hoc Committee for Appeals. A request to initiate the processes for procedural reconsideration or appeal will be accepted for cause and will not be accepted solely on the basis of dissatisfaction with the adverse decision, nor will it be accepted on the basis of modifications made subsequent to the determination of the adverse action. The institution receives formal written notification of the adverse action following the Council meeting. The basis for the adverse action and the institution's right to request procedural reconsideration and appeal are clearly stated in the notification letter.

When the Council considers an adverse action, the action does not become final, nor is it published, until the college has been afforded opportunity to complete the processes related to procedural reconsideration and/or appeal. If the institution does not initiate the procedural reconsideration or appeal processes, the institution's rights to due process through the Council will be viewed to be

exhausted.

During the due process period, the candidacy or accreditation status of the college reverts to the status prior to the adverse action. Following implementation of the procedural reconsideration and appeal processes, if the Council sustains the adverse action, the effective date of the action will be the date on which the action is sustained with final actions to withdraw accreditation to become effective at the conclusion of the academic year in which the action is sustained.

Procedural Reconsideration

Procedural reconsideration is the process that allows the institution the opportunity to request that the Council review its decision for the purpose of determining whether the Council, the Accreditation Committee, or the evaluation team failed to follow CPME procedures described in this publication. Because procedural reconsideration is designed for the review of errors in the application of Council procedures, matters of disagreement related to issues of substance will not be reviewed within the procedural reconsideration process. Such matters, however, may be identified as the basis for an appeal.

A request for procedural reconsideration must be submitted within 15 calendar days following receipt of the notification letter. If such a request is not submitted and postmarked within this 15-day period, all rights to procedural reconsideration will be considered to be waived by the institution. The written request must be submitted to the Council office electronically and by certified mail, return receipt requested.

The request for procedural reconsideration must identify the procedure(s) in question and describe in detail the institution's claim that the procedure(s) was not followed, including any documentary evidence to support the claim. Following review by CPME staff, the request for procedural reconsideration is considered by the CPME Executive Committee by video/conference call or meeting. The Council acknowledges in writing the receipt of all procedural reconsideration materials.

Based on a recommendation of the Executive Committee, a decision may be made by the Council, either by video/conference call or meeting, to: (1) sustain the previous action; (2) rescind the previous action and refer the matter for additional review by the Accreditation Committee; or (3) defer action and seek an invitation from the institution to conduct a focused on-site evaluation. The institution's chief executive officer and the dean are notified of the action taken with respect to the procedural reconsideration no later than 30 calendar days following the next scheduled meeting of the Council following the original determination of the action that led to the request for procedural reconsideration.

Appeal

Following completion of the procedural reconsideration process or in lieu of the procedural reconsideration process, the institution may appeal the decision to a hearing committee. The appeal process followed by the Council is articulated in CPME 935a, *Guidelines for the Conduct of Appeal Hearings by Colleges of Podiatric Medicine.* The institution is free to pursue either a substantive or procedural claim as part of the appeal process.

REAPPLICATION FOLLOWING LOSS OR DENIAL OF ACCREDITATION

An institution seeking accreditation that has had accreditation withdrawn or withheld is expected to follow the procedures outlined earlier in this document. (See Eligibility, Candidate Status, Preaccreditation, and Accreditation.) The Council will not consider a new application from an institution that has lost or been denied accreditation for a period of six months from the time the Council determines a final decision. With respect to reevaluation of a college of podiatric medicine that has lost accreditation, the Council will focus principal attention on those areas that were of greatest concern in the original decision to withdraw accreditation.

TEACH-OUT PLANS AND AGREEMENTS

The Council is concerned about the equitable treatment of students who may become disenfranchised due to the closing of a college of podiatric medicine. Other accredited colleges may elect to accept by transfer these disenfranchised students in order to enable the students to complete their degree requirements. Colleges electing to accept the transfer of these students are precluded from assessing any fees for instruction already paid for but not received. Arrangements made by an institution or college to transfer its students to other accredited colleges of podiatric medicine are subject to the approval of the Council.

Conditions That Require Approval of a Teach-Out Plan

The Council requires that all institutions/colleges for which it has granted candidacy or preaccreditation to have a teach-out plan, which ensures students completing the teach-out would meet curricular requirements for professional licensure or certification and which includes a list of academic programs offered by the institution/college and the names of other colleges of podiatric medicine that offer similar programs that could potentially enter into a teach-out agreement with the institution/college.

The Council requires a college of podiatric medicine for which it is the institutional or programmatic accreditor and has granted candidacy, preaccreditation, or accreditation to submit a teach-out plan to the Council for approval upon the occurrence of any of the following events:

- For a non-profit institution, the Secretary notifies the Council of a determination by the institution's independent auditor expressing doubt regarding the institution's ability to operate as a going concern or indicating an adverse opinion or a finding of material weakness related to financial stability

- The Council acts to place the institution/college on probation or equivalent status

- The Secretary notifies the Council that the institution is participating in Title IV, HEA programs under a provisional program participation agreement and the Secretary has required a teach-out plan as a condition of participation.

The Council requires an institution/college it accredits or has granted candidacy or preaccreditation to submit a teach-out plan and, if practicable, teach-out agreement(s) as defined in 34 CFR 600.2 to the Council for approval upon the occurrence of any of the following events:

- The Secretary notifies the Council that it has placed the institution on the reimbursement payment method under 34 CFR 668.162(c) or the heightened cash monitoring payment method requiring the Secretary's review of the institution's supporting documentation under 34 CFR 668.162(d)(2)

- The Secretary notifies the Council 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

- The Council acts to withdraw or terminate the candidacy, preaccreditation, or accreditation of the college of podiatric medicine

- The college notifies the Council that it intends to cease operations entirely or close a location that provides 100 percent of at least one program including if the location is being moved and is considered by the Secretary to be a closed school

- A state licensing or authorizing agency notifies the Council that an institution's license or legal authorization to provide an educational program has been or will be revoked.

Evaluation of a Teach-Out Plan

For colleges receiving candidacy and submitting a teach-out plan prior to being granted preaccreditation, the teach-out plan must ensure students completing the teach-out would meet curricular requirements for professional licensure or certification, if any, and which must include a list of academic programs offered by the institution and the names of other institutions that offer similar programs and that could potentially enter into a teach-out agreement with the institution.

The Council will evaluate the teach-out plan to ensure that it includes a list of currently enrolled students under the criteria listed below for teach-out agreements and the names of other colleges of podiatric medicine that offer similar programs and that could potentially enter into a teach-out agreement with the institution. The plan must specify what additional charges, if any, will need to be paid by the students, and will provide notification to the students of those charges. If the Council approves a teach-out plan that includes a program or institution that also is accredited by another recognized accrediting agency, then the Council must notify that accrediting agency of its approval. The Council may require a college to which it has granted candidacy, preaccreditation, or accreditation to enter into a teach-out agreement as part of its teach-out plan.

Evaluation of Teach-Out Agreements

The Council will only approve teach-out agreements that are between CPME-accredited colleges. A college of podiatric medicine may enter into a teach-out agreement with another institution provided the following conditions are met:

- The agreement is submitted to the Council for its review and approval at least 120 calendar days prior to the beginning of transfer of students under the agreement

- The agreement is consistent with the Council's accreditation standards and procedures

- The agreement provides that students will receive all of the instruction promised by the closed institution/college but not provided because of the closure.

The Council will review the teach-out plan to ensure that it provides for equitable treatment of all students. In assessing whether the plan provides for such equitable treatment, the Council will consider the following factors:

- All correspondence to students regarding the closing of the college will be given to all students at the same time

- All students from the closed program will be notified of all potential receiving colleges of podiatric medicine

- The closed institution/college will strive to provide for student placement in geographic proximity to the closed institution/college

- In general, teach-out instruction will be provided without additional costs and tuition charges to the student. If the recipient program determines that additional charges are needed, the plan will specify those charges and the basis for them, and such additional charges will be directly related to the cost of instruction.

- All students are specifically notified, in writing, of any additional costs and tuition charges for each of the potential receiving colleges of podiatric medicine

- Any additional costs and tuition charges for a receiving college will be the same for all students who transfer to that college

- The recipient teach-out institution/college will demonstrate that it has the necessary experience, resources, and support services to provide an educational program that is of acceptable quality and is reasonably similar in its content, delivery modality, and scheduling to that of the institution/college that is ceasing operations either entirely or at one of its locations

- The recipient teach-out institution/college will demonstrate that, during the period of the teach-out agreement, it has the capacity to carry out its mission and meet all obligations to its existing students

- The recipient colleges, in order to take additional students from the closed institution/college, must request an increase in class size through the substantive change process.

The Council requires the closing institution/college to include all of the following information in its teach-out agreement:

- A complete list of students currently enrolled and the program requirements each student has completed

- A plan to provide all potentially eligible students with information about how to obtain a closed school discharge and, if applicable, information on state refund policies

- A record retention plan to be provided to all enrolled students that delineates the final

disposition of teach-out records (e.g., student transcripts, billing, financial aid records) Information on the number and types of credits the teach-out institution/college is willing to accept prior to the student's enrollment

- A clear statement to students of the tuition and fees of the educational program and the number and types of credits that will be accepted by the teach-out institution/college.

Irrespective of any teach-out plan or signed teach-out agreement, the Council will not permit an institution/college to serve as a teach-out institution/college under at least one of the following conditions:

- The institution is subject to the conditions in paragraphs (c)(1) or (c)(2) of 34 CFR 602.24

- The institution is under investigation, action, or being prosecuted for an issue related to academic quality, misrepresentation, fraud, or other severe matters by a law enforcement agency.

The Council may waive requirements regarding the percentage of credits that must be earned by a student at the institution/college awarding the educational credential if the student is completing his or her program through a written teach-out agreement.

The Council requires the institution/college to provide copies of all notifications from the institution/college related to the institution's/college's closure or to teach-out options to ensure the information accurately represents students' ability to transfer credits and may require corrections.

Preaccredited Institutions or Colleges

If the Council denies accreditation to an institution/college after it has granted preaccreditation, the Council may maintain the institution's/college's preaccreditation status for currently enrolled students until the closing institution/college has had a reasonable time to complete the activities in its teach-out plan to assist students in transferring or completing their programs, but for no more than 120 calendar days unless approved by the Council for good cause.

All credits and degrees earned and issued by an institution or program holding preaccreditation from a nationally recognized agency are considered by the Secretary of Education to be from an accredited institution or program.

Closed Institutions Without Plan or Agreement

In the event that a college of podiatric medicine having any accreditation status from the Council closes without a teach-out plan or agreement, the Council will work with the US Department of Education and the appropriate state agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without financial penalty.

CONFIDENTIALITY

The Council maintains the confidentiality of written and orally presented information received or produced as a result of the accreditation process, including, but not limited to, materials, reports,

letters, and other documents prepared by the institution, the Council, or other individuals and agencies relative to the evaluation, accreditation, or follow-up and ongoing review of a college of podiatric medicine. The public disclosure of certain information, including the results of final accreditation actions, is noted in the Disclosures section. (See Disclosures.)

All proceedings of the Accreditation Committee and the Council with respect to determining candidate status, preaccreditation status, or accreditation of a college of podiatric medicine are held in executive session.

STUDENT PRIVACY

Institutions must use processes that protect student privacy and notify students of any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

DISCLOSURES

The Council may share all documents associated with the accreditation processes (e.g., self-studies, progress reports, CPME action/decision letters, etc.) to comply with reporting requirements of the US Department of Education, which may be open to Freedom of Information Act (FOIA) orders, and CHEA.

The current published accreditation status of a college of podiatric medicine is available on the Council's website and also upon request to any interested party.

The office of the US Secretary of Education, each state board of podiatric medicine where each college is located, the nationally recognized institutional accrediting agency (if the institution holds membership in a nationally recognized institutional accrediting association), and the public will be notified in writing of any accreditation decision determined by the Council or an appeal committee. The Council will notify all appropriate entities at the same time it notifies the institution.

General Disclosures

The Council will notify the US Secretary of Education, each state board of podiatric medicine, and the nationally recognized institutional accrediting agency, of accreditation decisions. The public notification will appear on the CPME website and in publications distributed by the Council and APMA. This disclosure must also be placed in a prominent position on the college's website to ensure that access to this information is readily available. This public disclosure must include information for CPME (i.e., URL and email address) so that the information can be verified.

All final accreditation decisions determined within the most recent calendar year are announced in the Council's annual report. Actions requiring prompt public notification are announced in APMA publications, which may include *APMA News* or *APMA Weekly Focus,* and on the Council's website. The Council also publishes CPME 100, *Accredited Colleges of Podiatric Medicine*, which is a list of accredited colleges revised bi-annually following the meetings of the Council. Copies of the Council's annual report and list of accredited colleges are furnished to the US Secretary of Education. The Council also is obliged to provide any other information requested by the US Secretary of

Education in accordance with the Secretary's *Procedures and Criteria for Recognition of Accrediting Agencies.* Such information shall include, but is not limited to, the name of any accredited program or institution that the Council believes is failing to meet its Title IV program responsibilities or is engaged in fraud or abuse, along with the reasons for the Council's concern, and any proposed change in the CPME standards, requirements, or procedures for accreditation.

The Council maintains and makes available to the public, upon request, written materials describing the following information:

- Each type of accreditation and preaccreditation it grants
- The procedures that institutions must follow in applying for accreditation or preaccreditation
- The standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to each type of accreditation and preaccreditation that the Council grants
- The institutions that the Council currently accredits or preaccredits and, for each institution, the year the Council will next review or reconsider it for accreditation or preaccreditation
- A list of the names, and academic and professional qualifications of the members of the Accreditation Committee, the Council, and the Council's principal administrative staff.

Related to Initial and Continuing Accreditation Decisions

The Council will identify all accreditation decisions on its website and provide written notification regarding its accreditation decisions to the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public within 30 calendar days after a decision to

- grant candidate status;
- grant preaccreditation; or
- grant initial or continuing accreditation.

For continuing accreditation, the online and written notifications include identification of areas of noncompliance (if any) and a description of the actions that a college is to take to address the areas of noncompliance.

Related to Accreditation History

The Council will post on its website (www.cpme.org) the accreditation history and actions taken related to each college since the last on-site evaluation to ensure the public has access to such information.

Related to Accreditation with Monitoring Status

The Council will identify a college with an accreditation with monitoring decision on its website and provide written notification regarding its accreditation decisions to the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public within 30 calendar days after the decision.

The online and written notifications include identification of areas of noncompliance and a description of the actions that a college is to take to address the areas of noncompliance.

Related to Probation or Adverse Decisions

The Council will provide written notification regarding its accreditation decisions to the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public at the same time as the decision is provided to the college, and within 30 calendar days after it makes either of the following decisions:

- Final decision of probation or equivalent status of a college
- Final decisions to deny, withdraw, suspend, revoke, or terminate candidate status, preaccreditation, or accreditation of a college.

Written notice to the public, including posting to the Council's website, regarding the above decisions must be made within one business day of the notice to the college. The college must disclose such an action within seven (7) business days of receipt to all current and prospective students. This disclosure must also be placed in a prominent position on the college's website to ensure that access to this information is readily available. This public disclosure must include information for CPME (i.e., website URL and email address) so that the information can be verified. For adverse actions, a brief statement summarizing the reasons for the Council's decision, describing the evidence that the college was given the opportunity to provide comments, and the comments, if any, that the college may have made with regard to the decision, will be provided the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public, no later than 60 calendar days after the final decision.

Withdrawal or Lapses of Accreditation

The Council will notify the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public within 10 business days of receiving notification from the college if it has decided to withdraw voluntarily from candidate status, preaccreditation, or accreditation.

The Council will notify the US Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public within 10 business days of the date on which preaccreditation or accreditation lapses if the college notifies the Council that it will not request renewal of its preaccreditation or accreditation status.

Consideration of Other Accreditors' Actions

As a condition of being recognized as an accrediting agency by the US Secretary of Education, the

Council is expected to not grant candidate status, preaccreditation, or accreditation of a college during a period in which the parent educational institution of a college or the college itself:

- is the subject of an interim action by a recognized institutional accrediting agency potentially leading to the suspension, revocation, or termination of any recognition status;

- is the subject of an interim action by a state agency potentially leading to the suspension, revocation, or termination of the institution's legal authority to provide postsecondary education;

- has been notified of public probation or a threatened loss of accreditation by a recognized institutional accrediting agency, and the due process procedures required by the action have not been completed; or

- has been notified of a threatened suspension, revocation, or termination by the state of the institution's legal authority to provide postsecondary education, and the due process procedures required by the action have not been completed.

The Council will provide the US Secretary of Education, within 30 calendar days of action by the Council, a thorough explanation, consistent with its accreditation standards, of why it may have elected to grant candidate status, preaccreditation, or accreditation of a college during a period in which the parent educational institution of a college:

- has had its recognition status placed on probation or an equivalent by a recognized institutional accrediting agency;

- has had its recognition status denied or revoked by a recognized institutional accrediting agency; or

- has had its legal authority to provide postsecondary education suspended, revoked, or terminated.

The Council will promptly review the candidate status, preaccreditation, or accreditation of a college when a recognized institutional agency takes an adverse action with respect to the parent body for a college, or places that institution on public probation. The Council may review the candidate status, preaccreditation, or accreditation of a college when a recognized programmatic accrediting agency takes an adverse action for reasons associated with the overall institution, rather than the specific program.

Public Information on Program Outcomes

The college of podiatric medicine is responsible for maintaining current and accurate program outcomes on its website reflecting student achievement and program performance. The outcomes made public must include the three measures required by the Council (graduation, American Podiatric Medical Licensure Examination [APMLE] passage, and residency placement rates), as well as outcomes developed by the college (e.g., surveys of residency directors and graduates, and senior clinical examinations). The Council has adopted the following guidelines for implementation of this policy:

- Colleges of podiatric medicine will publicize outcomes by making them easily accessible on their websites to the public and prospective students

- Annually, the four-year graduation rate, averaged over the most recent three years, must be posted (See CPME 120 for the graduation rate requirement.)

- Annually, the APMLE licensure examination pass rate, averaged over the most recent three years, must be posted (See CPME 120 for the licensure pass rate requirement.)

- Annually, the residency placement rate, averaged over the most recent three years, must be posted (See CPME 120 for the residency placement rate requirement.)

A college may elect to expand its graduation outcome to include five-year and dual degree programs. The Accreditation Committee will review the updated outcomes each year during review of the annual reports.

THIRD-PARTY COMMENT

The Council provides opportunity for the community of interest to submit, in writing, comments concerning an institution's qualifications for preaccreditation or accreditation status. The Council publishes a notice in APMA publications, which may include *APMA News* or *APMA Weekly Focus,* and on its website regarding its plans to conduct a comprehensive (or focused) evaluation of an institution that seeks candidate status, preaccreditation status, initial accreditation, or reaffirmation of accreditation. The notice will indicate the deadline for receipt of comments.

Comments must address an institution's compliance with CPME standards and requirements. Signed comments received by the Council will be shared with the institution and members of the evaluation team prior to the visit. The institution will be notified of third-party comments so it can have an opportunity to respond. The Council will exercise its best efforts to keep confidential the identity of an individual or entity who submits a comment, **unless** the person or entity has specified in writing that it is permissible to reveal his/her/its identity. If confidentiality is appropriate, all correspondence with the institution will maintain this confidentiality. During its review of the college, the evaluation team considers third-party comments, if any, that relate to the accreditation standards.

REVIEW OF FORMAL COMPLAINTS

A mechanism exists for reviewing formal complaints against accredited institutions. The Council will review only those complaints related to the alleged noncompliance of a college with the Council's standards and requirements. The mechanism for reviewing formal complaints is specified in CPME 925a, *Complaint Procedures.* This publication is available on the Council's website along with a fillable complaint form or may be obtained by contacting the CPME office. CPME 925a also describes the mechanism for reviewing formal complaints against the Council.

REGARD FOR DECISIONS OF STATES AND NATIONALLY RECOGNIZED INSTITUTIONAL ACCREDITING AGENCIES

The Council will postpone a decision to extend candidate status, preaccreditation, or accreditation of a college of podiatric medicine if any of the following conditions are present:

1. The preaccreditation or accreditation status of the institution is subject of an interim action by a nationally recognized institutional accrediting agency potentially leading to the suspension, revocation, or termination of the institution's preaccreditation or accreditation status

2. The institution is the subject of an interim action by a state agency potentially leading to the suspension, revocation, or termination of the institution's legal authority to provide postsecondary education or to offer the DPM degree

3. The institution has been notified by the nationally recognized institutional accrediting agency of a threatened loss of accreditation, and the due process procedures have not been completed

4. The institution has been notified by a state agency of a threatened suspension, revocation, or termination of the institution's legal authority to provide postsecondary education or to offer the DPM degree, and the due process procedures have not been completed.

For conditions (1) and (3), the Council would not be precluded from proceeding on a course of action comparable to and concurrent with that of the nationally recognized institutional accrediting agency.

The Council will take into consideration the following conditions in granting candidate status, preaccreditation, or initial accreditation of a college of podiatric medicine:

1. A nationally recognized institutional accrediting agency has denied or withdrawn preaccreditation or accreditation status of the institution or has placed the institution on public probationary status

2. A state agency has suspended, revoked, or terminated the institution's legal authority to provide postsecondary education.

The Council will promptly review the preaccreditation or accreditation status of a college of podiatric medicine if a nationally recognized institutional accrediting agency or state agency takes an adverse action with respect to the institution or places the institution on public probationary status. Based on the results of this review, if the Council elects to not take a similar adverse action with respect to the preaccreditation or accreditation status of a college of podiatric medicine, the Council shall provide the office of the US Secretary of Education a thorough explanation for its decision.

ACCREDITATION FEES

CPME reserves the right to develop and adjust fees for accreditation as necessary. The Council is committed to conducting an evaluation and accreditation process that is efficient, cost-effective, and cost-accountable. The fee schedule is posted on the CPME website, and modifications in the fee schedule are posted to the website at least six months in advance of the effective date for

implementation. The Council may cancel the on-site evaluation of a college that is delinquent in paying fees to CPME. The Council reserves the right to deny accreditation to or withdraw accreditation from any college that, after due notice, fails to pay its fees. Fees paid to CPME are nonrefundable.

Application Fee

Institutions seeking initial accreditation of either a new college of podiatric medicine or a college that has had accreditation withdrawn and is seeking to regain accreditation are required to pay an application fee.

Candidate Status Application Fee

An institution seeking candidate status of a new college of podiatric medicine is assessed an application fee.

Preaccreditation Fee

An institution seeking preaccreditation of a new college of podiatric medicine is assessed a fee.

Fees Related to On-Site Evaluations

The institution to be evaluated by the Council is responsible for paying the full cost associated with all on-site evaluation visits, including team travel and meal expenses, team hotel and hotel meeting space, travel expenses for CPME staff, costs related to any planning meeting in preparation for the visit, and costs related to the attendance of the team chair at the meeting of the Accreditation Committee.

Institutions are asked to submit payment for a pre-assessment fee approximately 90 calendar days prior to the evaluation visit. This pre-assessment fee is an estimate calculated according to the number of CPME evaluators included on the evaluation team. The institution is sent a final assessment after the evaluation visit based upon any costs above the pre-assessed fee related to the visit.

Visits Resulting from Formal Complaints

When the Council conducts an evaluation visit to ascertain the status of a complaint against an accredited institution, the institution will be responsible for paying the full and actual costs associated with the visit.

Annual Continuation Assessment

Each accredited institution is assessed an annual continuation fee. The purpose of this assessment is to partially offset the Council's costs related to monitoring compliance of the college of podiatric medicine with the Council's standards and requirements for accreditation.

PERIODIC REVIEW OF INSTITUTIONAL PUBLICATIONS

The Council periodically reviews the publications of accredited institutions. Should inaccurate or misleading information appear in a publication of the institution, the Council will request the immediate correction of this information. Failure of the institution to correct inaccurate or

misleading information in a timely fashion will result in a review of the accreditation status of the college. In the case of the institution failing to correct inaccurate or misleading information, the Council will take the necessary steps to publish and disseminate correct information.

JOINT EVALUATION VISITS WITH OTHER ACCREDITING AGENCIES

Whenever possible, and at the request of the institution, the Council may conduct joint evaluations in cooperation with other accrediting agencies. Because each accrediting agency may specify different standards, requirements, and procedures, the Council will arrange joint visits on an individual basis. Generally, in order for a joint visit to be accomplished, the sponsoring institution will be asked to satisfy each agency's standards, requirements, and procedures in a manner that is acceptable to the Council and the other accrediting agency. The Council expects the institution to take full responsibility in assuring coordination of the joint evaluation visit.

Self-Study Report

Although the Council will not require that separate self-study reports be written to satisfy both agencies, the institution will be expected to prepare one self-study report that addresses the standards and requirements of the Council as well as the educational standards, requirements, or other essentials set forth by the other accrediting agency. The institution should submit a proposed outline for the format of its self-study report to CPME staff prior to preparation. Council staff will assist the institution in developing a format for the report that will satisfy the needs of the Council.

On-Site Visit

The arrangements for the on-site visit should be coordinated by one staff person, representing either of the cooperating accrediting agencies. The Council prefers that its staff be the principal coordinator for joint accreditation visits to colleges of podiatric medicine.

The composition of the team for joint visits with a nationally recognized institutional accrediting agency usually includes two representatives of the nationally recognized institutional accrediting agency with the remaining balance of the team comprised of individuals selected by the Council. Team leadership may be shared between representatives of the nationally recognized institutional accrediting agency and the Council. If the nationally recognized institutional accrediting agency has no preference in this matter, an evaluator representing the Council will serve as team chair.

Composition of joint teams involving the Council and accrediting agencies other than nationally recognized institutional accrediting agencies will be determined on a case-by-case basis.

The on-site evaluation will follow the procedures outlined in this publication. Modifications to accommodate the other agency representatives may be instituted if approved by the individual serving as team chair/co-chair representing the Council. The members of the joint team will be expected to work together in collecting information, interviewing personnel, and reviewing the facilities. Team members representing each agency will be assigned areas of review that best correlate with their agency's interests. An agenda and a schedule for the visit will be arranged in an effort to be responsive to the needs of both agencies.

Exit summations should include discussion of the findings of the entire team. If the other accrediting agency has within its policies a disclosure procedure, allowing its representatives to inform the

institution of the recommendation for accreditation, the representatives of the other agency will clearly indicate that their recommendation only pertains to their agency's accreditation. Each accrediting agency acts independently of one another in determining final accreditation actions.

Report Preparation

The joint team will develop a first draft of the report prior to its departure from the site. The report provides information about the institution and program in a manner that generally meets the needs of both agencies. Recommendations for institutional and programmatic improvement should be jointly agreed upon and included in the report. The representatives of each agency may file separate addenda to the joint report in order to provide information that may be specific to the needs of their respective agencies.

TRAINING AND ASSESSMENT OF TEAM AND EVALUATOR EFFECTIVENESS

Training of On-Site Evaluators

The Council conducts a training program before each focused and comprehensive on-site evaluation for evaluators participating in their first on-site evaluation for the Council. Experienced evaluation team members and staff collaborate to conduct this formal training session. The objective of these training sessions is to ensure that evaluators are knowledgeable about Council accreditation standards, policies, and procedures, and are clear about their roles as agency representatives. Each training session emphasizes Standard 8 in CPME 120, Educational Program Effectiveness, related to student achievement (i.e., assessment of the college's students with regard to institutionally developed standards as well to the Council's student achievement standards).

The Council has developed materials for orientation and training purposes, including an accreditation guide offering guidance to evaluation team members. Guidance also is provided during the executive session of the team meeting conducted before the visit, at which time procedures and processes are discussed and roles and assignments clarified.

Staff orients new Council and Accreditation Committee members during an orientation session prior to their first meeting. The Committee member orientation is tailored to the individual depending on the extent to which the individual has participated in CPME activities. Each new Council and Committee member is provided with all Council documents and publications describing the agency's history, procedures, guidelines, policies, standards, and recent activities. Approximately every other year, the Council schedules a formal training session for Council members who have yet to serve as a member of a college on-site evaluation team. These sessions occur in conjunction with regular Council meetings.

Assessment of Team and Evaluator Effectiveness

The effectiveness of the on-site evaluation process is routinely reviewed by the Council based upon an assessment of evaluator performance. Following the on-site evaluation, the chief executive officer or chief academic officer of the institution is asked to complete a post-evaluation questionnaire that is designed to obtain pertinent information about the performance of the members of the evaluation team. Also, post-evaluation questionnaires are completed by the team members regarding the effectiveness of each member of the team, and each member of the team completes a post-evaluation

questionnaire to assess the effectiveness of the team chair. These post-evaluation questionnaires are submitted to CPME staff.

At the next scheduled regular meeting of the Council that follows the meeting at which the results of the on-site evaluation are considered, the Executive Committee of the Council reviews the questionnaires, and appropriate action is determined to commend effective evaluators and/or provide remediation for ineffective evaluators. The Executive Committee may suggest that evaluators who demonstrate repeated ineffectiveness be removed from the list of college evaluators.

POLICY STATEMENTS

Headcount Definition

Related to first-year headcount, the Council and the Accreditation Committee use the following definition in determining whether colleges of podiatric medicine are within their respective maximum enrollments:

> Headcount is defined as all students enrolled on October 1 of the fall semester in courses included in the first year of the curriculum at the college of podiatric medicine, without regard to identification of the graduating class of the students. This enrollment number includes new students, graduates of summer remedial programs, and students returning from leaves of absence.

The Council will consider waiving the headcount definition for non-routine, extenuating circumstances on a case-by-case basis. Each request is first reviewed by the CPME director and the Accreditation Committee chair with a recommendation to either approve or deny the request, which is forwarded to the Accreditation Committee for consideration. All requests must be received by July 1 of the academic year for which the request is being made. The Accreditation Committee's decision will be made in a timely manner and is final.

Monitoring of Headcount Enrollment and Significant Growth

CPME annually collects and reviews headcount enrollment data from each college of podiatric medicine to monitor overall program growth and to determine whether the college remains within its CPME-approved maximum enrollment. For purposes of routine monitoring, a college may exceed its CPME-approved maximum enrollment by no more than 10 percent, calculated as a three-year average, without being automatically deemed out of compliance with the maximum enrollment limitation. This allowance does not constitute approval to permanently increase maximum enrollment. A college seeking to increase its CPME-approved maximum enrollment must obtain CPME approval before implementing the increase.

For purposes of this section, significant growth means enrollment growth that may affect a college's ability to comply with CPME standards. CPME may determine that significant growth has occurred when a college's three-year average headcount enrollment exceeds 110 percent of its CPME-approved maximum enrollment or total program headcount enrollment increases by 25 percent or more in one academic year; growth is associated with a new or expanded campus, location, instructional site, cohort, or substantive change; or CPME otherwise determines that enrollment growth may affect the college's resources or compliance with CPME standards.

If CPME identifies significant growth or enrollment above a CPME-approved maximum, CPME may require additional information and may take action authorized by CPME policies and procedures, including requiring a report, focused evaluation site visit, corrective action, monitoring, or revision of maximum enrollment.

A college must provide timely, accurate, and complete enrollment information to CPME. Failure to do so may be considered noncompliance with CPME reporting requirements.

Credit Hours

Each college of podiatric medicine must establish written policies and procedures and employ them in a systematic review of the assignment of credit hours for its curriculum, using the definition of a credit hour as provided in the glossary of CPME 120, *Standards and Requirements for Accrediting Colleges of Podiatric Medicine*. The college of podiatric medicine bears the responsibility of assigning the amount of credit awarded for student work and demonstrating that its assignment criteria conform to commonly accepted practices in postsecondary education. The college of podiatric medicine must maintain records of this activity in a format that will permit sampling by a CPME on-site evaluation team. The Council expects that a college will include a discussion of the application of these policies and procedures for reviewing the credit hours given for each course in its curriculum in the self-study.

Diploma Mills

Accreditation is not always well understood by the public it is intended to serve. CPME accreditation assures the student, as a consumer, that the college of podiatric medicine is stable, professionally and financially.

Prospective students are advised to be wary of diploma and accreditation mills. Diploma mills or degree mills award academic degrees with substandard, limited, or no academic study. Often these degrees are awarded based on "life experience." While such degrees may sound promising to prospective students, the motivation is profit on the part of the degree mill.

An accreditation mill claims it awards accreditation to a higher education institution, but it has no authority or recognition to do so, and there are either subpar or no standards involved. These types of organizations do not have recognition as legitimate accreditors through any sort of organization that awards such recognition, such as the Council for Higher Education Accreditation (CHEA) or the US Department of Education.

For more information on accreditation and/or degree mills, CPME encourages prospective podiatric medical students to review CHEA's website. Participating in a diploma mill can have significant and unfortunate implications for a student's ability to obtain licensure as a podiatric physician or continue on for residency training.

Integrity

The provision of false or misleading information or the failure to provide material information may affect accreditation of a college of podiatric medicine. If CPME determines a college has supplied false or misleading information or has failed to supply relevant material information to CPME, to the Accreditation Committee, or to an evaluation team, CPME will determine an appropriate action,

which may include but not be limited to a change in accreditation status and term. Similar action may be taken if a college knowingly makes misleading or incorrect public statements or disclosures regarding CPME, the Accreditation Committee, or an evaluation team, or its accreditation status.

Transfer Credits

Each college of podiatric medicine must have transfer-of-credit policies that are publicly disclosed in accordance with 34 CFR§668.43(a) (11) of the HEA and include a statement of the criteria established by the institution regarding transfer of credit earned at another institution of higher education.

> 34 CFR 668.43 (a)(11): A description of the transfer of credit policies established by the institution which must include a statement of the institution's current transfer of credit policies that includes, at a minimum – (i) Any established criteria the institution uses regarding the transfer of credit earned at another institution; (ii) A list of institutions with which the institution has established an articulation agreement; and (iii) Written criteria used to evaluate and award credit for prior learning experience including, but not limited to, service in the armed forces, paid or unpaid employment, or other demonstrated competency or learning.

The Department of Education requires an accrediting agency to confirm that an institution's teach-out policies are in conformance with 34 CFR 668.43 (a)(11).

PREACCREDITATION – ACCREDITATION TIMELINE

PREACCREDITATION PROCESS			ACCREDITATION PROCESS		
YEAR 1	**YEAR 2**	**YEARS 3 and 4**	**YEARS 5 and 6**	**YEAR 7**	**YEAR 8**
• Applicant submits Eligibility Application	• Applicant submits candidate status application, including a self-study	• Students enrolled in the first of the four academic years (year 3 of process)	• College submits an updated self-study	• College submits progress report, if requested	• College submits progress report, if requested
• Application is reviewed by CPME staff	• Application is reviewed by CPME staff in consultation with chairs of Accreditation Committee and Council	• College submits an updated self-study	• On-site evaluation conducted late in the third academic year (year 5) of process or early in the fourth academic year (year 6 of process)	• College submits annual report	• College submits annual report
• CPME staff requests additional information, if needed	• CPME staff requests additional information, if needed	• On-site evaluation conducted by mid-point of second academic year (year 4 of process)	• College provides a response to the team report (optional)		
• When completed, the application is reviewed by the Accreditation Committee	• When the application is completed, an on-site evaluation is scheduled and conducted	• College provides a response to the team report (optional)	• Accreditation Committee considers the report and recommends that the Council either grant accreditation, or continue or withdraw preaccreditation		
• Accreditation Committee either requests additional information or accepts the application	• College provides a response to the team report (optional)	• Accreditation Committee considers the report and recommends that the Council either grant preaccreditation, or continue or withdraw candidate status	• If accreditation is granted, the Council may request a progress report		
	• Accreditation Committee considers the report and recommends that the Council either grant or deny candidate status	• If preaccreditation is granted, the Council may request a progress report	• First graduating class		
	• If candidate status is granted, college may solicit applications from and admit students	• If preaccreditation is granted the granted, the college becomes eligible for accreditation			