TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Procedural Overview</td>
<td>3</td>
</tr>
<tr>
<td>Eligibility and Preaccreditation</td>
<td>3</td>
</tr>
<tr>
<td>Re-evaluation and Reaffirmation of Accreditation</td>
<td>6</td>
</tr>
<tr>
<td>Consideration by the Council on Podiatric Medical Education</td>
<td>10</td>
</tr>
<tr>
<td>Accreditation Categories</td>
<td>11</td>
</tr>
<tr>
<td>Accreditation Period</td>
<td>14</td>
</tr>
<tr>
<td>Notification to the Institution</td>
<td>15</td>
</tr>
<tr>
<td>Distribution of Final Evaluation Report</td>
<td>15</td>
</tr>
<tr>
<td>Statement of Accreditation Status</td>
<td>16</td>
</tr>
<tr>
<td>Monitoring Compliance: Follow-up Reports, Focused Evaluations, and Substantive Modifications</td>
<td>16</td>
</tr>
<tr>
<td>Procedural Reconsideration/Appeal</td>
<td>21</td>
</tr>
<tr>
<td>Reapplication Following Loss or Denial of Accreditation</td>
<td>23</td>
</tr>
<tr>
<td>Closing a College of Podiatric Medicine/Transfer of Disenfranchised Students</td>
<td>23</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>23</td>
</tr>
<tr>
<td>Disclosure</td>
<td>23</td>
</tr>
<tr>
<td>Third-Party Comment</td>
<td>25</td>
</tr>
<tr>
<td>Review of Formal Complaints</td>
<td>25</td>
</tr>
<tr>
<td>Regard for Decisions of States and Regional Accrediting Agencies</td>
<td>25</td>
</tr>
<tr>
<td>Assessment of Team and Evaluator Effectiveness</td>
<td>26</td>
</tr>
<tr>
<td>Accreditation Fees</td>
<td>26</td>
</tr>
<tr>
<td>Periodic Review of Institutional Publications</td>
<td>27</td>
</tr>
<tr>
<td>Joint Evaluation Visits with Other Accrediting Agencies</td>
<td>27</td>
</tr>
<tr>
<td>Policy Statements</td>
<td>29</td>
</tr>
</tbody>
</table>
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, schools, and educational programs that grant the first professional degree in podiatric medicine, the Doctor of Podiatric Medicine (DPM). The CPME is recognized by the Council for Higher Education Accreditation (CHEA) and by the U. S. Department of Education. The CPME also 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 the 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 program 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.

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, Standards and Requirements for Accrediting Colleges of Podiatric Medicine. This publication may be obtained by contacting the Council on Podiatric Medical Education.

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 may be obtained by contacting the Council on Podiatric Medical Education.

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 composition of the Committee includes two representatives from CPME-accredited colleges of podiatric medicine, one representative from the podiatric practice community, and at least two Council members. At least one representative from the CPME-accredited colleges of podiatric medicine must be a podiatric educator.

The Committee meets twice a year, usually in the spring and fall.
Document Reviews

This document is subject to a comprehensive review six years following completion of its 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 including at least one podiatric college faculty member, one podiatric college administrator, one podiatric college student, and one public or healthcare community member. The chair of the Accreditation Committee is an ex-officio member of the advisory committee. The members of the Committee are appointed by the Council chair and confirmed by the Council.

The results of the comprehensive review are transmitted to the Council. Before any changes become final, the Council disseminates proposed revisions in accreditation policies, standards, requirements, and procedures to the community of interest for comment. Changes recommended by the advisory committee and/or the community of interest that are adopted by the Council will become effective within 12 months once they are adopted by the Council. Along with the comprehensive review, an interim review of this document occurs three years after the last comprehensive review. The interim review is completed by the Accreditation Committee.

The next scheduled reviews for CPME 130 are:

Next Scheduled Comprehensive Review - 2005

Next Scheduled Interim Review - 2008

Terms Used in This Publication

The Council serves as both the professional accrediting agency for the accreditation of academic units (i.e., colleges, schools, and programs) within educational institutions and the institutional accrediting agency for single-purpose institutions (i.e., free-standing colleges). Thus, the terms, “college,” “school,” “program,” 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 included at the end of the document.
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 report on the strengths and weaknesses of the institution and the educational program. The institution compares its findings to the standards and requirements for accreditation.

2. An evaluation team of peers is appointed by the Council to visit the institution in order to validate the findings of the self-study and to assess compliance with 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 report of the team, the team’s report along with the self-study report and any other information that the institution wishes to provide following the on-site evaluation are reviewed by the Accreditation Committee.

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 in order 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.

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 U. S. Department of Education.

ELIGIBILITY AND PREACCREDITATION

Institutions seeking initial accreditation of new colleges of podiatric medicine, and institutions that have had accreditation withdrawn and desire regaining accreditation, must follow the procedures described in this section. These institutions progress through the accreditation process by first satisfying six eligibility requirements, next obtaining candidate status, and finally achieving accreditation.
Eligibility

As the first step in the accreditation process, an application is submitted by a new or formerly accredited college of podiatric medicine, demonstrating compliance with the eligibility requirements for accreditation as specified in CPME 120. The Council will not consider an applicant’s request for candidate status unless all six eligibility requirements have been addressed to the satisfaction of the Accreditation Committee. In addressing the eligibility requirements, the applicant institution is expected to prepare a concise written report of no more than 35 pages. The report 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 educational program in order that full assistance in understanding the Council’s eligibility requirements may be provided and to ensure initiation of the accreditation process well before the institution graduates its first class.

Completeness of the institution’s report is reviewed by CPME staff prior to transmittal to the Accreditation Committee. The Committee determines acceptability of the institution’s report 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 preaccreditation category that must be obtained by new and formerly accredited colleges that seek CPME accreditation. Candidate status is determined by the Council based upon an on-site evaluation or successive on-site evaluations of the institution and its educational program. An on-site evaluation for candidate status will be scheduled only after at least one class of students is enrolled. Candidate status may extend for no longer than three years.

An institution that has achieved candidate status is viewed by the Council to have satisfied the eligibility requirements and to have the potential for meeting CPME accreditation standards and requirements once the DPM program is fully activated with students enrolled in all four 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 accreditation. If the institution fails to be accredited 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.
Application for Candidate Status

The application for candidate status submitted by the institution must include: (1) a letter of intent, (2) a report describing the institution’s development and plans for complying with CPME accreditation standards and requirements, and (3) payment of applicable fees.

Although an institution with a newly established college of podiatric medicine is not required to engage in self-study during its formative years, the Council suggests that the institution begin to assess its strengths and weaknesses in light of CPME standards and requirements as early in the development of the college as is possible. As part of the institution’s application materials, attention should be focused on the strengths and limitations of the institution and the plans made to ameliorate any weaknesses. The materials submitted are expected to include, but not be limited to, information regarding the educational setting, governing body of the institution, curriculum, financial support, staffing plans, and the relevance of the program to the mission of the institution. The institution’s application should strive to describe its plans and efforts to satisfy CPME accreditation standards and requirements in a concise narrative report of no more than 100 pages of general text, excluding any pertinent supplementary information.

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.

On-Site Evaluation

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.

When an institution that has obtained candidate status has enrolled students in at least three of the four academic years, an on-site evaluation will be conducted for the purpose of determining initial accreditation. The chairs of the Accreditation Committee and Council will determine when this on-site visit relative to the granting of initial accreditation should be conducted. The institution will be consulted regarding dates and arrangements.

The procedures for conducting evaluations to determine candidate status and initial accreditation are the same as those used in the re-evaluation of accredited colleges. (See Re-evaluation and Reaffirmation of Accreditation.)
**Review and Action**

The report of the 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 the opportunity to provide additional information and/or to convene a meeting with representatives of the institution to address any concerns of the Committee or Council.

**RE-EVALUATION AND REAFFIRMATION OF ACCREDITATION**

**Initiating the Re-evaluation Process/Letter of Intent**

In order for accreditation to be reaffirmed, the Council conducts re-evaluation of the institution on a periodic basis. Approximately 12-18 months prior to the time the re-evaluation 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 re-evaluation. The institution should at that time determine whether it wishes to pursue continuing accreditation and a letter of intent from the chief executive officer or chief academic officer should be sent to the Council, requesting re-evaluation. When the request is received, arrangements for the visit are made by CPME staff.

**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 a detailed report that describes the strengths and limitations of the college and the plans of the institution to remedy any weaknesses. The self-study report also assesses its compliance with CPME standards and requirements. The report should be no longer than 100 pages of general text, excluding any pertinent supplementary information. The Council publishes an *Accreditation Guide* to assist institutions in completing the self-study process. Also, the Council staff is available to provide advice to the institution about the self-study process.

At least six weeks prior to the visit, the institution must distribute copies of the self-study report in the following manner: one copy to each member of the evaluation team and eight copies sent to the Council office.

**Planning for the On-Site Visit**

At least six weeks prior to the on-site evaluation, CPME staff will contact the institution to plan for the visit, discuss the agenda and schedule for the on-site visit, and finalize arrangements for the team. The institution may request a meeting in which the evaluation team chair and a member of the CPME staff meet with representatives of the institution to discuss the agenda and
schedule for the on-site evaluation and to address questions that the institution may have about CPME policies and procedures. If a meeting is to be scheduled, it should be held at least four weeks before the on-site visit.

**Comprehensive On-site Evaluation**

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

1. To validate the findings and conclusions of the self-study.
2. To collect information to be used by the Accreditation Committee and Council to assess compliance with CPME accreditation standards and requirements.
3. To determine the overall quality of institutional resources, educational program(s), and program and student outcomes.
4. To gain insight into the plans of the institution to engage in continued self-improvement.

The evaluation team appointed to conduct the visit will gather 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 identifies 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 areas of improvement can be realized. The team provides a summary of its findings verbally to representatives of the institution at the conclusion of the on-site visit.

The Accreditation Committee and/or the Council may make modifications to the draft report including, but not limited to, adding and/or deleting areas of noncompliance and/or recommendations. Modifications to the report by the Committee and/or the Council are explicitly identified.

**Evaluation Team, Advisors, and Observers**

The composition of a comprehensive evaluation team includes a combination of podiatric practitioners, podiatric educators, and generalist educators. A podiatric educator must have significant experience in the didactic/clinical/research training of podiatric students. 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 also is consulted in developing the team appointments. In determining the composition of the evaluation 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. In order to preclude conflicts of interest, the institution is provided the 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. Members of the Council staff 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 over a three- or four-day period. The evaluation schedule should include the following:

- 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.

- Confidential meetings with the chief academic officer, vice-presidents, financial officer, student personnel director, registrar, director of clinics, division and department heads, faculty, students, and others.

- A confidential meeting with representatives of the governing board of the institution.

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

- 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 CPME review that will follow the visit.

**Materials to be Made Available for the Team**
The following materials should be made available on-campus for the use of the evaluation team. Recognizing that some of the following information is expected to be included with the self-study provided to team members prior to the on-site evaluation visit, the availability of these materials on-site at the institution is of added assistance to the team.

- Charter and/or formal authority from an appropriate government agency in each jurisdiction in which the institution operates authorizing it to award a certificate, diploma or degree at the level at which accreditation (or candidacy) is sought.

- Information about the institution’s governing board, including a roster of members, minutes of Board meetings, etc.

- Bylaws or statutes of the institution.

- Budget (revenues by source and expenditures by type) for the current and previous two fiscal years, and certified audits for the previous two fiscal years.

- Current affiliation agreements with other facilities and institutions at which student instruction occurs.

- Major institutional reports and records, such as minutes of faculty meetings, the chief executive officer’s annual reports, long-range plan, and so forth.

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

- Correspondence about accreditation received from CPME and the applicable regional 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.

- Institutional advertising directed at prospective students.

- One complete copy of the self-study report.

- Peer evaluation (if applicable).

- Student assessment of faculty/courses/experiences.

- Volume of clinical patients at each site utilized for educational purposes and patient surveys completed.
Any other education assessment documents.

**Preparation of the Report**

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 on the last day of the visit and ensures that a first draft of the report is finished before leaving the site. The draft is provided to CPME staff for final editing. The 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 two weeks to respond to the report of the evaluation team. The institution may respond to the report in the following two ways:

1. Offer corrections of errors as they relate to names, positions, data, and other documentable facts.

2. Offer comments that agree or disagree with the opinions and conclusions stated in the report.

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 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 Accreditation Committee**

The Accreditation Committee is provided copies of the report of the evaluation team, the institution’s self-study report, and the responses to the evaluation report that were 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’s report. Any information that is presented verbally to the Accreditation Committee also must be provided to the
Committee in writing in advance of the meeting. The Committee reserves the right to limit the
time of the institution’s verbal presentation.

The team chair also attends the meeting of the Accreditation Committee in order to provide a
verbal summary of findings and to answer any questions of the Committee. The Committee also
may ask the team chair for the team’s suggestions about the proposed accreditation action.

The Accreditation Committee reviews all materials carefully and formulates a recommendation
regarding a proposed action to be taken by the Council. The proposed accreditation action
includes:

1. Accreditation status and period of accreditation.
2. Maximum number of enrolled students authorized.
3. Identification of areas that are in noncompliance with CPME standards and requirements.
4. A schedule for progress or special reports to be submitted by the institution 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.

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 the
standards and requirements for accreditation. 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 four years followed by up to an
additional four years based upon demonstrated compliance with the standards and requirements
for accreditation and the continuing advancement of the institution. (See Accreditation Period.)
An on-site re-evaluation serves as the basis for determining continued accreditation status.
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 which 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 to be 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. The Council also issues a public statement concerning final actions to grant probationary accreditation. (See Disclosure.)

Administrative Probation

Administrative probation may be accorded automatically when an accredited institution fails to submit proper documentation or submit payment of required fees when requested by the Council. Council staff may activate the category of administrative probation without vote of the Council based upon an institution’s failure to submit a progress or special report, Annual Summary Data Report, self-study report and/or other materials related to the pursuit of reaffirmation of accreditation, or payment of accreditation related fees. The institution will be notified in writing that materials and/or fees are past due and that consideration is being given to placing the podiatric medical college on administrative probation. If no response is received within 30 days, administrative probation will become effective and the institution is notified accordingly. The Accreditation Committee and the Council are advised of the administrative probation status of the institution. The institution is required by the Council to inform its students and applicants to its program of this accreditation status.

The 30-day notice serves as both a reminder and to provide the institution fair warning that administrative probation may be activated if no response is received to the requests for materials and/or fees. Consequently, a decision to activate the administrative probation category is not subject to further review within the procedural reconsideration or appeal processes. Council staff may consider removing administrative probation if all requested materials are received prior to the next scheduled CPME meeting. If the institution does not provide the requested materials and/or fees, the Council will consider withdrawing accreditation of the program at the meeting. Withdrawal of accreditation will be based upon the perception that the institution no longer desires to be recognized by the Council and voluntarily withdraws from accredited status. Because the action will be viewed as a voluntary decision of the institution, it will not be subject to further review within the procedural reconsideration or appeal processes.

Accreditation Withheld

The Council withholds accreditation when a new college fails to demonstrate during the candidate 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. The Council also issues a public statement concerning final actions to withhold accreditation. (See Disclosure.) 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.)

**Accreditation With 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. The Council also issues a public statement concerning final actions to withdraw accreditation. (See Disclosure.) 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.) 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.

Accreditation also may be withdrawn by the Council at the meeting that immediately follows the activation of administrative probation. If accreditation is withdrawn as a result of the institution’s administrative probation status, the action to withdraw accreditation has specific procedural limitations as discussed earlier. (See Administrative Probation.)

**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. This policy applies to new colleges as well as existing colleges. 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 U. S. Secretary of Education, each state board of podiatric medicine, the regional accrediting agency (if the institution holds membership in a regional accrediting association), and the public of said action no later than 30 days after a decision is made.

**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 U. S. Secretary of Education, each state board of podiatric medicine, the regional accrediting agency (if the institution holds membership in a regional accrediting association), and the public of said action no later than 30 days after a decision is made.

**Adverse Actions**

Adverse actions include decisions of the Council to deny or withdraw candidate status, 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 (divided into two segments of four years), including four years of accreditation based upon the on-site visit and followed by an extension of four years contingent upon actions demonstrated by the institution to comply with CPME standards and requirements and improve the educational program. Colleges that are in reasonable compliance with CPME standards and requirements can be assured of a minimum of four years accreditation with the possibility of an additional four years of accreditation based upon appropriate progress demonstrated as part of requested interim progress reports and special reports. 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 complaint against an accredited college requires 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.

**NOTIFICATION TO THE INSTITUTION**

Notification to institutions of preaccreditation and accreditation decisions of the Council is made in writing only. The Council advises the institution of the action within 30 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, chair of the governing board, and chief academic officer. The chief executive officer is asked to disseminate the action of the Council to each member of the governing board of the institution. The chief executive officer also is asked to provide copies of the Council’s correspondence to the regional accrediting agency if the institution holds membership in a regional association.

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.

Notification of adverse accreditation actions and administrative probation is confidential and is transmitted by certified mail.

**DISTRIBUTION OF FINAL EVALUATION REPORT**

Included with the correspondence that transmits the accreditation action is a copy of the final evaluation report. The institution is encouraged to distribute the final evaluation report to the governing board and make the report readily available for review by faculty, students, administrative personnel, and other constituents of the institution. The institution may distribute the report as it wishes provided only copies printed by the Council are distributed. In the letter informing the institution of the Council’s accreditation decision, the institution is asked to notify CPME staff regarding the total number of copies of the report needed for distribution purposes.
The institution should provide a copy of the evaluation report to the regional accrediting agency if the institution holds membership in a regional association or make available the report to the regional accrediting agency team at the time of the next scheduled on-site evaluation.

**STATEMENT OF ACCREDITATION STATUS**

A college of podiatric medicine that has been accredited by the Council on Podiatric Medical Education 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 U. S. Department of Education and by the Council on Higher Education Accreditation. For further information, please contact the Council on Podiatric Medical Education at the following address:

Council on Podiatric Medical Education  
9312 Old Georgetown Road  
Bethesda, MD 20814  
(301) 571-9200

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 status should contact the Council office in order to determine the appropriate statement to be released about its preaccreditation status.

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

**Annual Summary Data Reports**

Each accredited college of podiatric medicine is required to submit by December 1 of each year a statistical data report to the Council, providing information about the institution, its faculty, and its students. To be submitted with the Annual Summary Data Report is a copy of a certified audit of the institution’s financial status and, in the case of programs conducted within universities or academic health centers, a financial statement for the college of podiatric medicine. A portion of the information submitted in the Annual Summary Data Report is utilized by the Council in the continuing evaluation of the college of podiatric medicine. A portion of the information is utilized to tabulate aggregate data about the colleges and is included in the Council’s annual report which is published in the March issue of the *Journal of the American Podiatric Medical Association*. The Council’s Annual Summary Data Report form attempts to be congruent with the annual report form utilized by the American Association of Colleges of Podiatric Medicine (AACPM) in order to minimize the work of college personnel.
Interim Progress Report

The interim progress report is submitted approximately three and one-half years after the on-site evaluation, to assist the Council’s decision to extend accreditation for up to an additional four years (see Accreditation Period). The report consists of a detailed description of any new strengths, limitations, and/or objectives identified by the college since the last Council evaluation visit, and the institution’s efforts toward improving the program as based upon ongoing self-study. The report contains documentation and statistical data about any changes in the educational program and changes in the institution as a whole such as, but not limited to the following:

- Actions taken by the institution to revise policies in college catalogues, handbooks, and other such publications.
- New or revised planning documents.
- Decisions emanating from faculty senate meetings.
- Significant increase or decrease in the volume and/or diversity of clinical teaching material available.
- Additions or deletions to clinical affiliations.

The interim progress report is reviewed by the Accreditation Committee. At the request of the Accreditation Committee, a representative of the institution may be asked to meet with the Committee. Based upon the information provided in the report, the Council, upon the recommendation of the Accreditation Committee, may elect to extend accreditation for up to an additional four years (for previously accredited colleges only).

Special Reports

Along with the interim progress reports, the Council may request that the institution submit special reports on matters of particular concern. These reports enable the Council’s to review matters that are considered to be of significant and urgent importance.

Focused On-site Evaluation

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

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
Summary Data Reports, interim progress reports, or special reports.

3. To assess a request for approval of substantive modifications that may be subject to such on-site review.

Continued accreditation may be contingent upon the results of a focused on-site evaluation.

Focused evaluation teams are appointed and configured in accordance with the scope and special purpose associated with each visit. Focused evaluations 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 and privileges accorded to institutions during a focused evaluation are the same as those accorded an institution for a comprehensive evaluation.

Substantive Modifications

In compliance with the criteria set forth by the U. S. Secretary of Education, the Council must give prior approval and may elect to conduct a special evaluation of the following substantive modifications proposed by a college of podiatric medicine.

- Change in legal status, control, or ownership of the institution. (See also Affiliation with Another Institution.)
- Change in the focus of the institution’s mission or objectives.
- Administrative restructuring.
- Significant change in faculty composition and size.
- Significant change in teaching affiliations. (See also Branch Campus.)
- Change in student enrollment. (See also Authorization to Increase Enrollment.)
- Additions or deletions of courses or programs that would change the length of time necessary to obtain the degree.

All requests for approval of substantive modifications are reviewed by staff in consultation with the chair of the Accreditation Committee in order to determine if the matter is an issue for consideration by the Accreditation Committee. The Accreditation Committee determines the necessity of an on-site review prior to approving the substantive modification. Circumstances surrounding the modifications and the extent to which the Council has recently evaluated the college will be taken into consideration in determining the nature and scope of the on-site evaluation. 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 substantive modification. In the case of an institution that has undergone a change of ownership that resulted in a change of control, the Council will conduct a site visit as soon as practicable, but no later than six months after the
change of ownership.

A rapid expansion of any segment of an institution's operations, such as in the number of additional locations, may not occur without prior approval from the Council. Continued accreditation of the college is contingent upon the college apprising the Council of substantive modifications and upon the Council's evaluation of such modifications. The Council may elect to visit the additional location(s) to determine the extent to which the institution maintains educational quality.

The institution is advised to contact CPME staff to determine whether a particular change constitutes a substantive modification for the purpose of obtaining prior approval from the Council.

**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 matters:

- Proposed terms of the affiliation, including the date on which the affiliation is to become effective.
- Impact the affiliation will have on the college of podiatric medicine and its resources (i.e., administration, governance, finances, faculty, physical plant, educational program, 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 any 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.


Branch Campus

The criteria set forth by the U. S. Secretary of Education articulate specific expectations for accrediting agencies related to the establishment of branch campuses by accredited institutions. The definitions of “branch campus” identified within the Secretary’s criteria are included in the Glossary of Terms. The Council’s responsibilities for reviewing and approving an institution’s request to establish a branch campus are described in this section.

With respect to a branch campus site at which the parent institution plans to offer at least 50 percent of the educational program, the parent institution must formally request CPME approval of the additional site prior to the initiation of any instruction at the site. In the case of expansion of an existing off-campus site, resulting in 50 percent or more of the educational program being offered at that site, the institution must request CPME approval prior to implementation of the expanded program. In its request for CPME approval, the institution is required to submit a comprehensive business plan concerning the additional location. The plan must describe the educational program to be offered; projected revenues, expenditures and cash flow; operation; management; and physical resources. An on-site evaluation may be conducted to assess the establishment of the branch campus 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 branch campus. In the case of branch campus arrangements that have not become fully operational, the Council may elect to review the institution’s business plan and grant preliminary approval until such a time that an on-site evaluation can be conducted when the branch campus becomes operational.

Under no circumstances will the Council consider expanding the institution’s existing accreditation to include a separate branch campus site that has the following characteristics:

- The site is geographically apart from the main campus and has its own separate administrative structure, services, and facilities.
- The parent institution plans to offer a complete educational program at the branch site.
The development of a separate and complete educational program at another site by an accredited college of podiatric medicine will be viewed as a new college of podiatric medicine and must be evaluated as such.

**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 to be matriculated in the first-year class by the college of podiatric medicine. This number takes into consideration the institution’s current or proposed enrollment at the time of the on-site evaluation in relation to current teaching capabilities. 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. Annual fluctuations that result in a 10 percent or less cumulative increase in the maximum number of students matriculated in the first-year class do not need prior authorization from the Council.

**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 U. S. Secretary of Education indicate 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 Higher Education Act or Title VII of the U. S. Public Health Service Act.

**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 a hearing committee. 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 meeting of the Council. 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 shall not become final, nor shall it be published, until the college affected thereby has been afforded an opportunity to request procedural reconsideration and file a written 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 shall revert 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 CPME 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 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 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 conference call or actual meeting.

Based on a recommendation of the Executive Committee, a decision may be made by the Council, either by conference call or actual 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 new on-site evaluation. If a new evaluation is conducted, the cost of the evaluation will be shared equally by the institution and the Council. The institution’s chief executive officer and the chief academic officer (university affiliated/academic health centers only) are notified of the action taken with respect to the procedural reconsideration no later than 30 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 935, *Guidelines for the Conduct of Appeal Hearings*. The institution is free to pursue either a substantive or procedural claim as part of the appeal process.

22
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 and Preaccreditation.) 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 re-evaluation 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.

CLOSING A COLLEGE OF PODIATRIC MEDICINE/TRANSFER OF DISENFRANCHISED STUDENTS

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 to transfer its students to other accredited colleges of podiatric medicine are subject to the approval of the Council. The Council works with the Department of Education and the appropriate state agency to ensure that the student transfers occur without financial penalty to the students.

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, are noted in the following section.

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

DISCLOSURE

The current published accreditation status of a college of podiatric medicine is available upon request to any interested party.
The office of the U. S. Secretary of Education, each state board of podiatric medicine, the regional accrediting agency (if the institution holds membership in a regional accrediting association), and the public will be notified in writing within 30 days of any accreditation decision determined by the Council. The Council will notify all of the appropriate entities at the same time it notifies the institution, and will notify the public within 24 hours of withholding or withdrawing accreditation of any accreditation.

The Council will notify the U. S. Secretary of Education, each state board of podiatric medicine, and the regional accrediting agency of these decisions by providing a copy of the letter sent to the institution. The public notification will appear in publications distributed by the Council and the American Podiatric Medical Association. Within 60 days following a final adverse accreditation action, the Council will release to the U. S. Secretary of Education, each state board of podiatric medicine, and the public upon request a brief summary of the reasons for the action. Any comments received from the institution regarding the final action will be included with the release of the CPME summary.

All final accreditation decisions determined within the most recent calendar year are announced in the Council’s annual report, which is published in the March issue of the *Journal of the American Podiatric Medical Association*. Actions requiring prompt public notification will be announced in the *APMA News*. The Council also publishes a list of accredited colleges of podiatric medicine in CPME 100, *Accredited Colleges of Podiatric Medicine*. The list of accredited colleges is 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 U. S. Secretary of Education. The Council also is obliged to provide any other information requested by the U. S. Secretary of Education in accordance with the Secretary’s *Procedures and Criteria for Recognition of Accrediting Agencies*. Such information shall include, but not be 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:

1. Each type of accreditation and preaccreditation it grants;
2. The procedures that institutions must follow in applying for accreditation or preaccreditation;
3. 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;
4. The institutions that the Council currently accredits or preaccredits and, for each institution the year the agency will next review or reconsider it for accreditation or preaccreditation; and
5. The names, academic and professional qualifications, and relevant employment and organizational affiliations of--
   a. The members of the Council’s policy and decision-making bodies; and
b. The Council’s principal administrative staff.

THIRD-PARTY COMMENT

The Council provides opportunity for concerned parties to submit, in writing, comments concerning an institution’s qualifications for preaccreditation or accreditation status. The Council will publish a notice in the APMA News regarding its plans to conduct a comprehensive evaluation of an institution that seeks candidate status, initial accreditation, or reaffirmation of accreditation. The notice will indicate the deadline for receipt of third-party comments. Comments must address an institution’s compliance with CPME standards and requirements.

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 925, Complaint Procedures. This publication may be obtained by contacting the Council on Podiatric Medical Education.

A mechanism exists for reviewing formal complaints against accredited institutions and the Council. 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 925. This publication is available at the Council’s website (www.apma.org/CPME) or may be obtained by contacting the Council on Podiatric Medical Education.

 REGARD FOR DECISIONS OF STATES AND REGIONAL ACCREDITING AGENCIES

The Council will postpone a decision to extend candidate status 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 regional accrediting agency potentially leading to the suspension, revocation, or termination of the institution’s preaccreditation or accreditation status;

2. The institution is 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 regional accrediting agency of a threatened loss of accreditation, and the due process procedures have not been completed; or

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 regional accrediting agency.]

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

1. A regional accrediting agency has denied or withdrawn preaccreditation or accreditation status of the institution or has placed the institution on public probationary status; and

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 regional accrediting agency or state agency takes an adverse action with respect to the institution or places the institution on public probationary status. After 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 U. S. Secretary of Education a thorough explanation for its decision.

**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 chair 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 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.

**ACCREDITATION FEES**

**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. The fee is to be paid when the institution submits its application for candidate
status.

**Fees Related to On-Site Evaluations**

The institution to be evaluated by the Council is responsible for paying the full and actual costs associated with the on-site evaluation visit, including team travel and meal expenses, team hotel and hotel meeting space, honoraria paid to generalist educators who serve on evaluation teams, 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 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 the combined actual costs of all fees related to the visit. Alternatively, a refund is provided to the institution of any amount that is overpaid as part of the pre-assessment fee.

**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 to be submitted with the institution’s Annual Summary Data Report. The purpose of this assessment is to partially offset the Council’s costs related to monitoring compliance of the college of podiatric medicine.

**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
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. The 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 regional accrediting agency usually includes two representatives of the regional agency with the remaining balance of the team comprised of individuals selected by the Council. The leadership of the team may be shared between representatives of the regional accrediting agency and the Council. If the regional 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 regional agencies will be determined on a case-by-case basis.

The on-site evaluation will follow the procedures which are 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.

POLICY STATEMENTS

Enforcement of Standards

When the Council on Podiatric Medical Education determines that an institution is in noncompliance with one or more of its requirements, the institution has a maximum of two years, or less as defined by the Council, to bring the area(s) into compliance. The Council may extend the two-year limit only for clear progress that the institution is coming into compliance with the requirement(s) and good cause. Failure to bring into compliance the area(s) of noncompliance will result in withdrawing or withholding accreditation. The extent to which the institution is in compliance with the area(s) of noncompliance will be based on review of one or more special reports and/or a focused or comprehensive on-site evaluation.

Training of On-site Evaluators

The Council on Podiatric Medical Education conducts a training program the day before each focused and comprehensive on-site evaluation for evaluators participating in their first on-site evaluation for the Council. 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. Experienced evaluation team members and staff collaborate to conduct the formal training sessions, which are provided during the afternoon before the visit. Materials are developed 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 the evening before the visit, at which time procedures and processes are discussed and roles and assignments clarified.

Staff orients new Council members during a full-day meeting at APMA headquarters and new Accreditation Committee members during a two to four hour orientation the afternoon before their first meeting. The Committee member orientation is tailored to the individual depending on the extent to which he/she has participated in CPME activities. Each new Council and Committee member is provided 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 an evaluation team. These sessions occur in conjunction with regular Council meetings.

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 chair 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 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.