

ACAHM Accreditation Commission for Acupuncture and Herbal Medicine

Policy Title: Policy Governing Complaints

Approved By: ACAHM Commission

Document History: Implementation Date: 2011
Last Updated: 23 January 2024

Related Commission Forms: [ACAHM Complaint Form](#)

Related Commission Policies: [Comprehensive Accreditation Standards and Criteria](#); [Commission Actions Policy](#); [Document Management Policy](#);

References: 34 CFR Part 602; 20 U.S. Code § 1099(b)

Responsible Official: ACAHM Director of Regulatory Affairs

Policy Summary: This guidance outlines the Accreditation Commission for Acupuncture and Herbal Medicine’s (ACAHM or Commission) policy for accepting and reviewing complaints.

INTRODUCTION

The Accreditation Commission for Acupuncture and Herbal Medicine (ACAHM or Commission) is interested in the quality of educational services offered by institutions and programs it accredits. Complaints¹ that reasonably allege instances of non-compliance with ACAHM’s *Eligibility Requirements, Standards and Criteria for Accreditation*, required accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics* are investigated in a fair and timely manner.

For purposes of this policy, a *complaint* is defined as notification to ACAHM by any individual (emphasis added) person or entity (including, but not limited to, any individual student, faculty member, or staff member of an ACAHM-accredited institution or program; any individual member of the general public; any representative of a state, federal, or local government; and any individual member of any institution or organization) that sets forth reasonable and credible information that (a) an ACAHM-accredited or pre-accredited institution or program; or (b) an applicant program/institution seeking ACAHM accreditation is not in compliance with ACAHM’s *Eligibility Requirements, Standards and Criteria for Accreditation*, required accreditation policies/procedures, and or its *Code of Conduct and Professional Ethics*.

When ACAHM receives a complaint, it maintains an investigative role in which the burden of proof rests with the ACAHM-accredited institution or program to demonstrate that all ACAHM’s requirements are being met. ACAHM does not serve as a mediator, engage in dispute resolution, or act as a court of appeals. Similarly, ACAHM does not adjudicate or intervene in disputes between individuals and programs, or cases involving personnel action, nor will it review an institution or program’s decision in such matters as admissions, academic dishonesty, assignment of grades, graduation, dismissal, and similar matters unless the context suggests

¹ For purposes of this policy, ACAHM regards the terms “complaints” and “grievances” as synonymous.

unethical or unprofessional actions that seriously impair or disrupt the educational services of an ACAHM-accredited or pre-accredited program or institution. ACAHM's accreditation standards require institutions and programs it accredits to have their own internal procedures for effectively and promptly resolving complaints.

COMPLAINT REQUIREMENTS

To be processed by ACAHM, complaints must:

1. Be submitted in writing on [ACAHM's Complaint Form](#).
2. Signed by the complainant.
3. Identify the relationship of the complainant to the ACAHM-accredited institution or program at issue.
4. Describe the action(s) forming the basis of the complaint that directly relates to ACAHM's *Eligibility Requirements, Standards and Criteria for Accreditation*, required accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics* and include supporting documentation.
5. Describe and provide evidence of the efforts by the complainant to resolve the complaint through the institution or program's internal due process and grievance procedures or explain the reasons that such efforts would not be productive.
6. It must be submitted to ACAHM within 180 calendar days² of the last event that is material to the complaint to ensure that the facts and circumstances giving rise to the complaint can be ascertained through ACAHM's investigative process. However, as a practical matter, complainants may want to consider filing a complaint sooner, so they remain familiar with the facts and relevant school/program policies.
7. It must include a release authorizing ACAHM to forward a copy of the complaint to the institution or program at issue respecting any request by the complainant for confidentiality.

Generally, ACAHM will not investigate anonymous complaints (i.e., complaints in which the identity of the complainant is not known). ACAHM, in its sole discretion, may require an institution or program to respond to such a complaint if the identity of the complainant is not necessary to determine whether the allegations constitute non-compliance with ACAHM's *Eligibility Requirements, Standards and Criteria for Accreditation*, required accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics*.

Complainants may request that ACAHM withhold their identity from an institution or program named in the complaint. Under these circumstances, ACAHM will review the complaint, but in its discretion may determine that the complaint will not be investigated where the identity of the complainant is a material fact necessary to determine whether non-compliance has occurred or is needed for the program to have a fair opportunity to respond. Additionally, while ACAHM will take every reasonable precaution to prevent the identity of the complainant from being revealed to the program, ACAHM **cannot** guarantee the confidentiality of the complainant.

² Students have up to 12 months after leaving a school/program to file a complaint with ACAHM.

NON-RETALIATION

ACAHM and its accredited or pre-accredited Institutions/Programs are explicitly prohibited from retaliating against individuals or entities filing complaints with the Commission. Such retaliation constitutes grounds for the Commission to take appropriate action including adverse action against the institution or program.

COMPLAINT PROCEDURES

1. Inquiries

When an inquiry about filing a complaint is received by ACAHM, the inquirer will be directed to the on-line location of ACAHM's *Policy Governing Complaint*, its associated [Complaint Form](#) and ACAHM's [Frequently Asked Questions: Complaints](#).

2. Written Complaints

When a written complaint against an ACAHM-accredited or pre-accredited Institution or Program is received, the following procedures are followed:

- a) ACAHM will acknowledge receipt of a complaint about an ACAHM-accredited or pre-accredited Institution or Program in writing to the complainant generally within fifteen (15) calendar days of receipt.
- b) The complaint and supporting materials submitted are initially reviewed by ACAHM's Office of Regulatory Affairs. This initial review includes verifying that the complaint was received on a completed ACAHM *Complaint Form*, was signed, timely submitted and includes sufficient documentation to support allegations of non-compliance with relevant ACAHM *Eligibility Requirements, Standards and Criteria for Accreditation*, required accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics*.
- c) A complaint meeting these requirements is forwarded to ACAHM's *Accreditation Process Committee* Chair for further dissemination within the Group,³ review and action as defined herein.
- d) If additional information or documentation is needed from the Complainant, , the *Accreditation Process Committee* will so request. If the Complainant's supplemental response to a request for additional information is not received within fourteen (14) calendar days, the complaint will be closed with notification to the Complainant that their complaint may be refiled with the requested information at a later time for *de novo* review.

3. Complaint Investigation Procedures

- a) The *Accreditation Process Committee* will provide a copy of the complaint (respecting any requests for confidentiality) to the President/CEO of the ACAHM-accredited institution or to the Chief Academic Officer of the relevant ACAHM-accredited program with a summary of the allegations and the corresponding ACAHM's *Eligibility Requirements, Standards and Criteria for Accreditation*, accreditation policies, procedures, and/or *Code of Conduct and Professional Ethics* implicated. A response to the allegations, including a written narrative and evidence supporting the Institution/Program's position is required to be submitted to ACAHM within thirty (30) calendar days of receipt.
- b) ACAHM will acknowledge receipt of the Institutions or Program's written response to the complaint.

³ The members of the *Working Group* must not have a conflict of interest.

- c) *Accreditation Process Committee* members will review the Complainant's allegations and the institution/program's written response to the complaint (Complaint Record) and forward its review and recommendations to the full Commission for final review and action.

4. Decisions Available to the Commission

- a) If the Commission determines that there is insufficient evidence to support the complaint allegations, then the complaint is closed.
- b) If the Commission determines the Institution or Program has successfully refuted all the complaint's allegations and demonstrates full compliance with ACAHM's *Eligibility Requirements, Standards and Criteria for Accreditation*, policies, procedures, and/or *Code of Conduct and Professional Ethics* at issue, the complaint will be closed.
- c) If the Commission determines there are outstanding concerns about compliance with ACAHM's *Eligibility Requirements, Standards and Criteria for Accreditation*, policies, procedures and/or *Code of Conduct and Professional Ethics*, the Commission may:
 - 1) Require an on-site review to more fully investigate the complaint allegations in a special review or as part of an on-going accreditation review.
 - 2) Require the institution or program to take corrective action to be documented in a written report to ACAHM within a timeframe to be determined by the Commission considering the scope and seriousness of the complaint and required response;
 - 3) Place the program on warning, probation or show cause, and/or,
 - 4) Take such actions on the complaint permitted under ACAHM's policies and procedures.

5. Decision Notification

Within thirty (30) calendar days of its final action, the Commission will notify the institution or program and the complainant of the status of its investigation.

6. Decision Retention

A record of the complaint, all documenting materials, and the Commission's corresponding Action Letter(s) will be kept in accordance with ACAHM's [Document Management Policy](#) and its associated *Records Retention Schedule*.

COMPLAINTS AGAINST ACAHM

The Commission will evaluate complaints made against it, including those that relate to its monitoring of institution/program's compliance with ACAHM's *Eligibility Requirements*, its *Standards and Criteria for Accreditation*, and the Commission's adherence to its *accreditation policies and procedures*, and its *Code of Conduct and Professional Ethics Guide*.

1. All written complaints received regarding ACAHM or the Commission's adherence to its *Eligibility Requirements, Standards and Criteria for Accreditation*, accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics* shall be forwarded within ten (10) calendar days of receipt to the Commission's Executive Committee (EC) and Executive Director.

2. The Executive Committee shall review the complaint allegations and determine whether relevant laws and/or *Eligibility Requirements, Standards and Criteria for Accreditation*, accreditation policies/procedures, and/or its *Code of Conduct and Professional Ethics* are implicated, and that supporting documents have been included. The Executive Committee may request, as necessary, additional information from the Complainant, ACAHM staff, or Commissioners.
3. When the EC determines a complaint is relevant, the Chair will appoint a *Special Committee* of at least three (3) members to study the allegation(s) and summarize its findings for recommendation to and action by the full Commission. The members of the *Special Committee* must not have a conflict of interest and may include individuals other than Commissioners.
4. ACAHM’s Executive Director and the Commission’s Chair will conduct a training session with the *Special Committee* to orient them to their role and responsibilities.
5. The Commission will consider the recommendation of the *Special Committee* as substantive and will take actions consistent with its recommendation(s) or provide specific rationale for variance from the recommendation(s).
6. The Complainant will be notified in writing generally within thirty (30) calendar days of any action taken by the Commission in response to the complaint.

Revision History

Date Revised	Summary of Revisions	Approved By
161030	Refreshed and Reformatted	ACAOM Executive Director
170830	Revisions were made to the “Acknowledgment and Resolution” section to clarify timelines and actions available to complaint Review Committees and the full Commission	ACAOM Executive Director
171114	Revised to clarify “calendar” days where relevant	ACAOM Executive Director
181127	Comprehensive Revision and Commission Ratification	Commission
210806	Structural Revision and Commission Ratification	Commission
220204	Adjusted terminology throughout for ACAHM name change and removal of “Oriental” term; no material revisions made	ACAHM Executive Director
230225	Revisions to complaint requirements	Commission
240123	Reviewed; no revisions	ACAHM Executive Director