

Comprehensive Standards and Criteria Reference Copy – February 2024

ACAHM makes available a combined reference copy of the Comprehensive Standards and Criteria for Accreditation (“Comprehensive Standards”) for the reading convenience of the general public. The individual Introduction, Standards and Revision History documents posted at the ACAHM website represent the official publication of the Comprehensive Standards. While the Commission makes suitable effort to assure that the reference copy reflects the contents of the official publication, the reference copy is not warranted as such.

Always be sure that you are working from a current version of the Comprehensive Standards.

INTRODUCTION TO THE ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

The Comprehensive Standards and Criteria of the Accreditation Commission for Acupuncture and Herbal Medicine (ACAHM or Commission) are the written benchmarks, conditions, and thresholds adopted by the Commission to: (1) assess whether the quality of an institution/program merits pre-accreditation/accreditation status, and (2) maintain a culture of continuous improvement of academic quality at the institutions/programs.

There are ten (10) standards that serve as broad classifications used to categorize related accreditation criteria. Many criteria contain sub-components relating to the institution or each ACAHM-accreditable program.

All revisions to the comprehensive standards and criteria and their chronology are recorded in the [Revision History](#).

ACAHM makes available a combined [reference copy](#) of the Comprehensive Standards and Criteria for Accreditation (“Comprehensive Standards”) for the reading convenience of the general public. The individual Introduction, Standards and Revision History documents posted at the ACAHM website represent the official publication of the Comprehensive Standards. While the Commission makes suitable effort to assure that the reference copy reflects the contents of the official publication, the reference copy is not warranted as such.

ACAHM-ACCREDITABLE PROGRAMS (see [Glossary](#))

Only programs for which ACAHM has established accreditation standards and criteria are accreditable. These Comprehensive Standards and Criteria apply to the following programs for which ACAHM currently awards accredited or pre-accredited status:

- **Master’s-level degree and diploma programs**
- **Graduate certificate programs**
- **Professional entry-level doctoral degree programs**
- **Advanced practice doctoral degree programs**

DISTANCE EDUCATION (see [Glossary](#) and [Distance Education Policy](#))

All distance education must comply with ACAHM’s Comprehensive Standards and Criteria for Accreditation.

ELIGIBILITY REQUIREMENTS (see [Glossary](#))

Eligibility Requirements are select accreditation criteria further classified by the Commission as ACAHM's basic threshold requirements for institutions, master's-level programs, and doctoral programs to achieve and maintain ACAHM pre-accreditation and accreditation status. An institution/program seeking pre-accreditation must demonstrate that it complies with these select accreditation criteria further classified by the Commission as *Eligibility Requirements*. While all accreditation standards and criteria are assessed during the eligibility phase, compliance with the following criteria designated as *Eligibility Requirements* is a requirement for achieving pre-accreditation status:

<i>Standard</i>	<i>Criterion</i>	<i>Title</i>
1	1.01	Integrity
1	1.02	Mission and Statement of Purpose
1	1.03	Program Goals
1	1.04	Program Learning Outcomes
2	2.01	Legal Organization and Authorization
2	2.02	Accreditation Status of Parent Institution
2	2.03	Degree-Granting Authority
2	2.05	Compliance with Federal Law
2	2.06	Compliance with State Law
2	2.07	Compliance with Local and Municipal Laws, Ordinances and Codes
3	3.01	Governance Structure
3	3.05	Administrative & Academic Leadership
5	5.01	Recruitment and Policy Publication
5	5.02	Admissions
5	5.05	Student Services
6	6.01	Systematic Evaluation
6	6.02	Assessment of Student Learning
7	7.01	Program Level
7	7.02	Minimum Program Length, Credits, and Hours
8	8.01	Core Faculty
9	9.02	General Sufficiency and Stability of Resources
9	9.04	Financial Planning and Control
9	9.08	Campus and Program Facilities
9	9.09	Learning Resource System (Library)
10	10.02	Catalog

INSTITUTIONAL vs. PROGRAMMATIC CRITERIA/COMPONENTS

ACAHM is recognized by the United States Department of Education as both an institutional accreditor and as a programmatic accreditor. Components of the accreditation criteria are differentiated into two types, institutional and programmatic. Criteria may include one or both types of components.

- **Institutional Components:** These components are defined as those relevant only to entities that are institutionally accredited by ACAHM. These institutional components are not relevant or pertinent to the schools that rely on ACAHM for programmatic accreditation only.
- **Programmatic Components:** These components are defined as those that are relevant to ACAHM programs, regardless of the institutional accreditation. Programmatic components may be further differentiated as applicable to all programs (i.e., master's, professional doctoral, advanced practice doctoral) or applicable to only one program.

PUBLICATION AND FORMATTING

The ACAHM Comprehensive Standards and Criteria consist of twelve (12) documents:

- Introduction to the Comprehensive Standards and Criteria
- Ten (10) Standards documents
- Comprehensive Standards and Criteria Revision History

A unified document containing all twelve (12) documents is available for user convenience but does not constitute the official published Comprehensive Standards and Criteria.

Within individual Standards and Criteria, the following section and sub-section format is employed:

- A. ____
 - 1. ____
 - a) ____

The letters I, O and Q are intentionally omitted from the format, due to their close visual similarity to the numbers 1 and 0.

PUBLICATIONS, RECORDS, AND MISCELLANEOUS DOCUMENTATION

When a criterion for accreditation requires published material, the institution/program must retain a copy of said material in English, regardless of the language intended for distribution.

For the purposes of accreditation procedures, the institution/program must be able to produce copies of all published material in English, regardless of the language intended for distribution.

Published materials cited in the accreditation standards and criteria include, but are not limited to, promotional advertisements, website, catalog, clinic manual, student handbook, enrollment agreements, syllabi, academic records, and required regulatory disclosures.

RELATED POLICIES/RESOURCES

Programs and institutions seeking or holding accreditation status with the Accreditation Commission for Acupuncture and Herbal Medicine (ACAHM or Commission) are subject to the Commission's *Standards, Criteria, Policies and Procedures* and all associated *Applications, Checklists, Glossaries, Guides, Handbooks, Manuals* and *Position Papers* published by the Commission on its website. Specific policies/resources may be hyperlinked within the published Standards documents.

SITE VISIT MANUAL

Programs and institutions demonstrate their compliance with the Comprehensive Standards and Criteria through the self-study process, which includes preparation of a self-study report, peer review of the report, and a site visit by peer evaluators. Consult the [ACAHM Site Visit Manual](#) for examples of the kinds of questions that programs and institutions should seek to answer through the self-study process, and the types of exhibits and resources that help to demonstrate compliance with the Comprehensive Standards and Criteria.

TRANSITIONS TO NEW/REVISED STANDARDS/CRITERIA

When ACAHM implements new or revised accreditation standards/criteria, institutions/programs are encouraged to move toward compliance with the most current accreditation standards. However, for decision-making purposes, ACAHM will hold institutions/programs accountable to meeting the standards under which the most recent accreditation application was submitted. Institutions/programs may request accountability to meet more current standards subject to Commission approval.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 1: PURPOSE

Criterion 1.01: INTEGRITY	1
Criterion 1.02: MISSION AND STATEMENT OF PURPOSE.....	1
Criterion 1.03: PROGRAM GOALS	2
Criterion 1.04: PROGRAM LEARNING OUTCOMES.....	3
Criterion 1.05: RESOURCE ALLOCATION	3
Criterion 1.06: REVIEW	4

Criterion 1.01: INTEGRITY	
Related Policies:	Integrity in the Accreditation Process Policy
References:	

INSTITUTIONAL COMPONENTS

The institution must conduct its operations with honesty and integrity.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must conduct its operations with honesty and integrity.

Criterion 1.02: MISSION AND STATEMENT OF PURPOSE	
Related Policies:	
References:	

INSTITUTIONAL COMPONENTS

The institution must develop and maintain a formally adopted mission statement and strategic plan that provides clear direction and vision for the institution and its programs.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. In accordance with the institution’s mission, the program must develop and maintain a formally adopted educational statement of purpose.

- B. The statement of purpose must provide clear direction for the program.
- C. The statement of purpose for the program must include reference to the training of acupuncture professionals with the ability to practice as independent health care providers in a variety of settings.

Criterion 1.03: PROGRAM GOALS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must enumerate a set of broadly defined goals. Each goal must support the professional development of students as future health care practitioners.

PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- B. The entry-level doctoral program's goals must address the following general principles:
 1. Providing the student with an advanced education in core didactic and core clinical areas, with an emphasis on clinical assessment, diagnosis, and intervention (broadly defined to include treatment and treatment planning).
 2. Developing the student's knowledge and understanding of how to engage in collaborative interactions involving acupuncture practitioners and other health care practitioners.
 3. Developing the student's ability to think critically, synthesize knowledge, and use research findings along with scientific and scholarly literature to support their professional practice.

ADVANCED PRACTICE DOCTORAL PROGRAMS

- C. The advanced practice doctoral program's goals must address the following general principles:
 1. Providing the student with an advanced, in-depth education in core didactic, core clinical, specialty didactic, and specialty clinical areas, with an emphasis on clinical assessment, diagnosis, and intervention (broadly defined to include treatment and treatment planning).
 2. Advancing the student's ability to apply East Asian Medicine (EAM)-related modalities.
 3. Advancing the student's ability to effectively engage in collaborative interactions involving acupuncture practitioners and other health care practitioners.
 4. Advancing the student's ability to think critically, synthesize knowledge, and use research findings along with scientific and scholarly literature to support their professional

practice.

5. Cultivating the student's ability to contribute to EAM-related scholarly literature.
6. Providing the student with an opportunity for advanced discourse between faculty and students which results in the development of an academic community that will enrich and advance the profession by contributing to the development of future generations of practitioners, faculty, researchers, clinical supervisors, and leaders of the profession.

Criterion 1.04: PROGRAM LEARNING OUTCOMES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must establish and maintain a set of program learning outcomes.
- B. Program learning outcomes must be consistent with the program's statement of purpose and its goals.
- C. Each program learning outcome must be clearly specified and measurable.
- D. The program learning outcomes must lead to the development of the relevant professional competencies described in *Criterion 7.04*.

Criterion 1.05: RESOURCE ALLOCATION	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution's current or projected academic programs, services, activities, resources, and resource allocation decisions must be consistent with its mission statement.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's resources, and its current or projected services and activities, must be consistent with its statement of purpose, goals, and learning outcomes.

Criterion 1.06: REVIEW	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution's mission statement must be reviewed periodically by the institution's stakeholders and communities of interest. The mission statement must be revised when necessary to ensure its continued relevance and accuracy.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's statement of purpose, goals, and learning outcomes must be reviewed periodically by stakeholders and communities of interest. The program's statement of purpose, goals, and learning outcomes must be revised when necessary to ensure their continued relevance and accuracy.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 2: LEGAL AND REGULATORY REQUIREMENTS

Criterion 2.01: LEGAL ORGANIZATION AND AUTHORIZATION 1
Criterion 2.02: ACCREDITATION STATUS OF PARENT INSTITUTION 2
Criterion 2.03: DEGREE-GRANTING AUTHORITY 2
Criterion 2.04: OFF-CAMPUS CONTROL..... 2
Criterion 2.05: COMPLIANCE WITH FEDERAL LAW 3
Criterion 2.06: COMPLIANCE WITH STATE LAW 3
Criterion 2.07: COMPLIANCE WITH LOCAL AND MUNICIPAL LAWS, ORDINANCES, AND CODES 4

Criterion 2.01: LEGAL ORGANIZATION AND AUTHORIZATION	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

- A. The institution must be a legally organized entity whose primary purpose is to provide graduate education in acupuncture.
- B. The institution must be authorized to conduct its operations by recognized state approval agencies, and it must comply with applicable state laws in each state in which it operates.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program’s parent institution must be authorized to conduct its operations by recognized state approval agencies and applicable state laws in each state in which it operates.
- B. The institution and its ACAHM-accreditable programs must be authorized by all jurisdictions in which it operates to engage in distance education to the extent such authorization is required.

Criterion 2.02: ACCREDITATION STATUS OF PARENT INSTITUTION	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

If the program's parent institution is not institutionally accredited by ACAHM, the parent institution must be accredited or pre-accredited by an agency recognized by the U.S. Secretary of Education.

Criterion 2.03: DEGREE-GRANTING AUTHORITY	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

The institution must comply with recognized state approval agencies and relevant state law with respect to the awarding of degrees, diplomas, and certificates.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's parent institution must comply with recognized state approval agencies and relevant state law with respect to the awarding of degrees, diplomas, and certificates.

Criterion 2.04: OFF-CAMPUS CONTROL	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

The institution must assume responsibility for all off-campus educational and co-curricular activities and programs, including activities arranged through agreements with other organizations or individuals.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's parent institution must assume responsibility for all programmatic, off-campus, educational, and co-curricular activities, including activities arranged through agreements with other organizations or individuals.

Criterion 2.05: COMPLIANCE WITH FEDERAL LAW	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

The institution must continuously comply with all relevant federal laws and regulations.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must continuously comply with all relevant federal laws and regulations.

Criterion 2.06: COMPLIANCE WITH STATE LAW	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

The institution must continuously comply with all recognized state approval agencies, and relevant state laws and regulatory requirements, for operation within the state(s) in which it conducts its operations.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's parent institution must continuously comply with all recognized state approval agencies, and relevant state laws and regulatory requirements, for operation within the state(s) in which it conducts its operations.

Criterion 2.07: COMPLIANCE WITH LOCAL AND MUNICIPAL LAWS, ORDINANCES, AND CODES	
<i>Related Policies:</i>	
<i>References:</i>	ACAHM Legal and Regulatory Compliance Checklist

INSTITUTIONAL COMPONENTS

The institution must continuously comply with all relevant local and municipal laws, ordinances, codes, and regulatory requirements for operation within the jurisdiction(s) in which it conducts its operations.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's parent institution must continuously comply with all relevant local and municipal laws, ordinances, codes, and regulatory requirements for operation within the jurisdiction(s) in which it conducts its operations.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 3: GOVERNANCE AND ADMINISTRATION

Criterion 3.01: GOVERNANCE STRUCTURE	1
Criterion 3.02: ROLES OF THE GOVERNING BODY	2
Criterion 3.03: STAKEHOLDER INPUT	3
Criterion 3.04: ORGANIZATION OF ADMINISTRATIVE STAFF	3
Criterion 3.05: ADMINISTRATIVE AND ACADEMIC LEADERSHIP	4

Criterion 3.01: GOVERNANCE STRUCTURE	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must have a clearly delineated governance structure with a governing body that exercises ultimate and general control over the institution's affairs.
- B. The membership of the governing body must effectively represent the needs of the institution's stakeholder groups.
- C. There must be adequate and effective representation of the public in the governing body.
- D. Governing body members must have primary responsibility to the institution and must not allow political or other influences to interfere with their governing duties.
- E. The governing body of the institution must develop and maintain a set of bylaws, which must include:
 1. descriptions of the powers, duties, terms of office, and responsibilities of members of the governing body.
 2. a description of meetings, including frequency and format.
 3. a code of ethics, including provisions for addressing conflicts of interest and the appearance of such conflicts.
 4. proprietary institutions must clearly describe the authority and limitations of the owner(s), the governing body, and the advisory committee, if applicable.
- F. The meetings of the governing body must:
 1. be held at regularly stated times.

2. be of sufficient length for the governing body to competently fulfill its responsibilities to the institution and its programs.
3. include prepared agendas.
4. document institutional decision-making in accurate meeting minutes kept on file at the institution.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's parent institution must have a governance structure that is appropriate to an institution of post-secondary education offering a graduate level education in acupuncture.

Criterion 3.02: ROLES OF THE GOVERNING BODY	
<i>Related Policies:</i>	Glossary
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The governing body of the institution must be responsible for:

- A. establishing broad policy and long-range planning.
- B. appointing and evaluating the institution's president/CEO.
- C. ensuring financial stability.
- D. reviewing and approving the annual budget.
- E. participating in the development of external relations and resources.
- F. developing and ensuring processes to review and improve the governing body's own effectiveness.
- G. ensuring achievement of the mission.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The governing body of the institution must be responsible for approving significant changes to the program, as defined in the *ACAHM Glossary*.

Criterion 3.03: STAKEHOLDER INPUT	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

Decisions of the governing body must be made based on legal and regulatory requirements and input from the institution’s stakeholders and communities of interest.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Governance-related decisions that affect the program must consider input from relevant program stakeholders.
- B. Consistent with recognized principles of shared governance, the program must demonstrate an effective process for input from students and faculty into institutional decision-making.

Criterion 3.04: ORGANIZATION OF ADMINISTRATIVE STAFF	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution's administrative staff must:

- A. be of a size and structure that is appropriate to the mission and scope of the institution and its programs.
- B. be well-qualified and organized to serve the institution’s needs.
- C. have clearly defined roles and responsibilities that support the mission of the institution.
- D. be knowledgeable of their duties and aware of those of the other principal positions in the institution's administrative structure.
- E. be stable regarding employee turnover.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program's administrative staff must:

- A. be of a size and structure that is appropriate to the purpose and scope of the program.

- B. be well-qualified and organized to serve the program’s needs.
- C. have clearly defined roles and responsibilities that support the program's purpose, goals, and learning outcomes.
- D. be knowledgeable of their duties and aware of those of the other principal positions in the institution's administrative structure that relate to the program.
- E. be stable regarding employee turnover.

Criterion 3.05: ADMINISTRATIVE AND ACADEMIC LEADERSHIP	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must employ a president/chief executive officer (CEO) responsible for the entire operation of the institution.
- B. The president/CEO must serve as the liaison between the governing body and institutional staff.
- C. The president/CEO must be appropriately qualified as documented by education, training, and professional experience.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must have a clearly defined and effective structure for administrative leadership.
- B. The program must have a clearly defined and effective structure for academic leadership.
- C. Individuals serving in leadership roles in the program must be qualified for their positions, as documented by education, training, professional experience and, where relevant, professional licensure.
- D. The program must produce job descriptions that clearly outline expectations and time commitments for all programmatic leadership positions.
- E. The program must employ a qualified and competent individual whose principal employment and responsibilities are to direct the program. The director of the program must be responsible for:
 - 1. providing effective supervision and oversight for the program, including curriculum development and review, faculty recruitment, faculty professional development, and faculty and staff evaluation.

2. the overall assessment of the effectiveness of the program.
- F. The program must employ a qualified and competent individual responsible for direction of the program's clinical education. The director of clinical education for the program must maintain an active current license and/or certification in good standing in the state in which the program operates and be responsible for:
1. providing effective supervision, oversight, coordination, and assessment of all programmatic clinical training activities.
 2. the collection, organization, and review of the variety of effectiveness data obtained during clinical training.
 3. the overall tracking of students in the clinical training.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 4: RECORDS

Criterion 4.01: RECORDKEEPING SYSTEMS.....	1
Criterion 4.02: ACCESS AND STORAGE OF RECORDS.....	2
Criterion 4.03: PERMANENT ACADEMIC RECORDS	2
Criterion 4.04: CLINICAL RECORDS.....	3
Criterion 4.05: DISCONTINUATION OR CLOSURE	4

Criterion 4.01: RECORDKEEPING SYSTEMS	
Related Policies:	
References:	

INSTITUTIONAL COMPONENTS

- A. The institution must develop and maintain accurate, complete, and secure recordkeeping systems appropriate for institutions offering graduate level healthcare education.
- B. Systems must include student records (i.e., admission applications, enrollment agreements, academic progress and permanent transcripts, financial aid, financial transactions, grievances, etc.), patient health care activities and incident reports, governance-related decision making, faculty evaluation, and personnel/HR.
- C. Systems must collect, compile, and maintain data that will facilitate the improvement of institutional outcomes and the assembly of meaningful records and statistics.
- D. Systems must be regularly monitored and assessed.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program's parent institution must develop and maintain accurate, complete, and secure record keeping systems appropriate for institutions offering graduate level healthcare education.
- B. The program must maintain accurate, complete, and secure programmatic record keeping systems that document student academic progress and that track patient health care activities, including treatment records and incident reports.
- C. Systems must collect, compile, and maintain data that will facilitate the enhancement of program learning outcomes and the achievement of professional competencies.
- D. Systems must be regularly monitored and assessed.

Criterion 4.02: ACCESS AND STORAGE OF RECORDS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

Institutional records in all formats, now known and later developed, shall be securely and accurately maintained and timely recoverable with appropriate access control.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

Program records in all formats, now known and later developed, shall be securely and accurately maintained and timely recoverable with appropriate access control.

Criterion 4.03: PERMANENT ACADEMIC RECORDS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must maintain accurate and secure permanent academic records.
- B. The institution must safeguard all permanent records, and must provide for appropriate backup, storage, and accurate recovery regardless the record format.
- C. In its recordkeeping activities, the institution must observe right-to-privacy laws and regulations.
 - 1. Non-Title IV financial aid eligible institutions must maintain policies and procedures that protect the privacy rights of students' educational records. At a minimum, these policies must afford students the rights to: access their education records, seek amendments to their educational records and, subject to any legal or regulatory requirements, control to whom their educational records may be disclosed.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Working with its parent institution, the program must assist in the maintenance of accurate permanent program academic records that document the achievement of program requirements.
- B. Working with its parent institution, the program must assist in safeguarding all permanent academic records that document the achievement of program requirements, and must provide for appropriate backup, storage, and accurate recovery regardless the record format.

- C. In its programmatic recordkeeping activities, the program must observe right-to-privacy laws and regulations.

Criterion 4.04: CLINICAL RECORDS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

All institutional health records, regardless of format, must be maintained and accessed in accordance with applicable federal and state privacy regulations, and appropriate institutional policies.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Regardless of format, the program must maintain accurate, secure, and complete clinical records of all patients involved in any part of the educational process.
- B. The program must record and maintain all clinical records in English.
- C. The confidentiality of program clinical records must be maintained according to applicable statutory requirements and relevant professional standards.
 - 1. If an institution is not a HIPAA covered entity, the institution must maintain policies and procedures that protect the privacy of patients’ personal health information (medical records). At a minimum, these policies and procedures must permit patients to: examine and obtain copies of their medical records, request corrections to their medical records and, subject to any legal or regulatory requirements, control to whom medical records may be disclosed.
- D. The program must ensure appropriate access to patient records considering relevant legal concerns and the requirements of external regulatory agencies.
- E. The program must implement an appropriate written policy, that meets all applicable statutory requirements and relevant professional standards, addressing clinical record storage, retention, and recovery.
- F. Charts must meet or exceed all appropriate state regulations regarding chart identification, dating, signatures, and completion timelines.
- G. Charts must be signed by clinical supervisor(s) and student intern(s).

Criterion 4.05: DISCONTINUATION OR CLOSURE	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must have a written plan that is compliant with relevant state regulations for the disposition, storage, and accurate recovery of permanent academic records and clinical records, regardless of the records format, if the institution or any of its programs or locations closes.

- B. The records disposition, storage, and data recovery plan must specify the nature, location, and accessibility of all permanent academic records and clinical records.

PROGRAMMATIC COMPONENTS

There are no programmatic components for this criterion.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 5: ADMISSIONS AND STUDENT SERVICES

Criterion 5.01: RECRUITMENT AND POLICY PUBLICATION	1
Criterion 5.02: ADMISSIONS	2
Criterion 5.03: TRANSFER CREDITS/TRANSFER STUDENTS	5
Criterion 5.04: NON-MATRICULATED STUDENTS	6
Criterion 5.05: STUDENT SERVICES	7
Criterion 5.06: STUDENT POLICIES	7
Criterion 5.07: STUDENT COMPLAINTS AND GRIEVANCES	8
Criterion 5.08: DOCTORAL DEGREE COMPLETION STUDENTS	9

Criterion 5.01: RECRUITMENT AND POLICY PUBLICATION	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must observe honest, ethical, and legal recruiting practices.
- B. The institution must publish its admissions policies, procedures, and practices, including any applicable policies related to:
 - 1. standard admissions,
 - 2. special admissions,
 - 3. advanced placement,
 - 4. credit for prior learning.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must observe honest, ethical, and legal recruiting practices.
- B. The program must have admissions policies, procedures, and practices that are appropriate for graduate-level professional education and training.
- C. The program must publish its admissions policies, procedures, and practices, including any applicable policies related to:
 - 1. standard admissions,
 - 2. special admissions,
 - 3. advanced placement,
 - 4. credit for prior learning.

Criterion 5.02: ADMISSIONS	
<i>Related Policies:</i>	
<i>References:</i>	<i>20 U.S. Code § 4351. Definitions</i>

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must have admissions policies, procedures, and practices that include explicit English language proficiency requirements, and are consistent with students achieving the statement of purpose and goals of the program.
- B. Admissions policies, procedures, and practices must result in matriculated students who meet the program's admissions criteria and are capable of achieving the professional competencies expected from the program.
- C. The program's admissions policies, procedures, and practices must be regularly and systematically assessed to determine their effectiveness and revised as necessary.
- D. Prospective students must meet the programmatic admissions requirements in effect at the time of their official matriculation.
- E. International applicants whose native language is not English are required to provide proof of English proficiency for admission to degree, certificate, and non-degree graduate programs. This must be demonstrated by one of the following means:
 1. The applicant must have completed one of the following:
 - a) four years at a U.S. high school demonstrably delivered in English;
 - b) at least two-years (60 semester credits or 90 quarter credits) of undergraduate- or graduate-level education in an institution accredited by an agency recognized by the U.S. Secretary of Education;
 - c) at least two-years (60 semester credits or 90 quarter credits) of undergraduate- or graduate-level education demonstrably delivered in English;
 - d) high school or two-years (60 semester credits or 90 quarter credits) of undergraduate- or graduate-level education in an institution in one of the following countries or territories: American Samoa; Anguilla; Antigua & Barbuda; Australia; Bahamas; Barbados; Belize; Bermuda; Botswana; British Virgin Islands; Cameroon; Canada (except Quebec); Cayman Islands; Christmas Island; Cook Islands; Dominica; Federated States of Micronesia; Fiji; The Gambia; Ghana; Gibraltar; Grenada; Guam; Guyana; Ireland; Isle of Man; Jamaica; Kenya; Lesotho; Liberia; Malawi; Montserrat; Namibia; New Zealand; Nigeria; Norfolk Island; Papua New Guinea; Philippines; Pitcairn Islands; Sierra Leone; Singapore; South Africa; South Sudan; St. Helena; St. Kitts & Nevis; St. Lucia; St. Vincent & the Grenadines; Swaziland; Tanzania; Trinidad and Tobago; Turks and Caicos Islands; United Kingdom; U.S. Virgin Islands; Uganda; Zambia; Zimbabwe.

- i. In all cases, English must have been both the language of instruction and the language of the curriculum used.

OR

- 2. The applicant must have completed one of the following assessments at the required level:

ASSESSMENT TOOL	ACCEPTABLE SCORE
Test of English as a Foreign Language Internet-Based Test (TOEFL® iBT)	Total: 61
International English Language Testing System (IELTS), Academic Format	Overall band: 6
Duolingo English Test	90
China Standard of English Language (CSE)	CSE 6
Cambridge First Certificate in English (FCE)	C
Cambridge English Advanced (CAE)	C
Common European Framework Reference (CEFR)	B2
Occupational English Test (OET)	250, C
Pearson Test of English (PTE), Academic	Overall: 45

MASTER’S-LEVEL AND GRADUATE CERTIFICATE PROGRAMS

- F. The admissions criteria for the master’s program must include the satisfactory completion of at least two (2) years of undergraduate-level education (defined as 60 semester credits or 90 quarter credits) from an institution accredited or pre-accredited by an agency recognized by the U.S. Secretary of Education. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized educational credentials evaluation service.
- G. A maximum of 30 semester credits (or 50%) of the prerequisite two-year education requirement may be earned through prior learning assessment using either, or a combination, of the following assessment techniques: (1) credit by examination using recognized, independently administered, and validated standardized tests and/or (2) assignment of credit for military and corporate training based on recommendations established by the American Council on Education.
- H. Pre-requisite and co-requisite credits must not be counted towards degree completion credits.
- J. The admissions criteria for the master’s-level **certificate program in Chinese herbal medicine** must include current enrollment in, or the satisfactory completion of, an ACAHM-accredited/pre-accredited entry-level (i.e., master’s-level or professional doctoral) program in acupuncture or in acupuncture with a Chinese herbal medicine specialization. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized educational credentials evaluation service.

PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- K. The admissions criteria for the entry-level doctoral program must include the satisfactory completion of at least three (3) years of undergraduate-level education (defined as 90 semester credits or 135 quarter credits) from an institution accredited or pre-accredited by an agency recognized by the U.S. Secretary of Education. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized educational credentials evaluation service.
- L. A maximum of 30 semester credits of the prerequisite three-year education requirement may be earned through prior learning assessment using either, or a combination, of the following assessment techniques: (1) credit by examination using recognized, independently administered, and validated standardized tests and/or (2) assignment of credit for military and corporate training based on recommendations established by the American Council on Education
- M. Prerequisite undergraduate-level education required for admission to the entry-level doctoral program must include chemistry, biology, and psychology. Institutions may offer professional-level programmatic courses in chemistry, biology, and psychology in lieu of program admission prerequisites.
- N. Institutions/programs that confer a master's degree as part of the entry-level doctoral program must ensure that separate enrollment agreements for each degree program are simultaneously executed at the date of initial enrollment; and clearly outline if/when it is possible for a student to be awarded a master's degree without completing the full entry-level doctoral program.

ADVANCED PRACTICE DOCTORAL PROGRAMS

- P. The admissions criteria for the advanced practice doctoral program must include the satisfactory completion of an ACAHM-accredited/pre-accredited entry-level program (i.e., master's or professional doctorate). In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized educational credentials evaluation service.
 - 1. For advanced practice doctoral programs that include advanced study or specialty concentrations in herbal medicine, the admissions criteria must include the satisfactory completion of the minimum credits and clock hours of instruction stipulated under *criterion 7.02 – Chinese herbal medicine certificate programs*.
 - 2. For advanced practice doctoral programs that do not include advanced study or specialty concentrations in herbal medicine, the admissions criteria must include the satisfactory completion of a minimum of three (3) semester credits (45 clock hours of instruction) of introductory coursework in the fundamentals of Chinese herbal medicine either as a prerequisite or as a co-requisite.
- R. Applications may be accepted for admission into the advanced practice doctoral program from licensed acupuncturists who have not completed an ACAHM-accredited/pre-accredited entry-level program (i.e., master's or professional doctorate) provided the program:

1. Demonstrates and documents an acceptable process for validating that the applicant has achieved professional competencies equivalent to an ACAHM-accredited/pre-accredited master's-level program.
2. Provides opportunities from the institution's master's-level program to rectify any deficiencies identified through the program's entrance evaluation and admission standards. Completion of the identified curriculum can be accomplished through the successful completion of specified courses, or by demonstrating achievement of the specific course objectives through successful completion of challenge examinations.
3. Does not count prerequisite and co-requisite credits toward degree completion credits.

Criterion 5.03: TRANSFER CREDITS/TRANSFER STUDENTS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must publish its policies on awarding of credit by transfer and said policy must comply with all applicable state authorizing and licensing agencies' regulations.
- B. Credits accepted for transfer by the institution must have been earned at a post-secondary institution accredited or pre-accredited by an agency recognized by the U.S. Secretary of Education.
- C. Credits accepted for transfer by the institution must be based on an official transcript received by the institution.
- D. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized education credentials evaluation service.
- E. Transfer students must meet the admissions requirements in effect at the time of their official matriculation.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Programs must demonstrate that credits accepted for transfer to meet program graduation requirements are equivalent to published program degree requirements in content, rigor, and credit hour requirements.
- B. Credits accepted for transfer into the program must have been earned at a post-secondary institution accredited or pre-accredited by an agency recognized by the U.S. Secretary of Education.
- C. Credits accepted for transfer into the program must be based on an official transcript received by the institution.

- D. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated by a recognized educational credentials evaluation service.
- E. Transfer students must meet the program admissions requirements in effect at the time of their official matriculation.
- F. The program must demonstrate and document an acceptable process for assuring equivalent competencies for credit accepted via transfer. Credits earned more than five (5) years prior to admission may only be accepted for transfer after validating and documenting that the student has retained the content knowledge and competencies of the respective course(s) for which transfer credits are being assessed.

MASTER’S-LEVEL, GRADUATE CERTIFICATE, AND PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- G. Subject to relevant state regulations and licensing agency rules, applicants may receive transfer credit for up to 50% of the total program credit requirements. Of that 50%, no more than 25% of the program clinical training requirements may be accepted as transfer credit.

ADVANCED PRACTICE DOCTORAL PROGRAMS

- H. Subject to relevant state regulations and licensing agency rules, applicants may receive transfer credit for up to 33% of the total program credit requirements. Transfer credit may only be awarded for course work at the doctoral level that supports the program's objectives and meets the standards for completion of the program.

Criterion 5.04: NON-MATRICULATED STUDENTS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Non-matriculated students who are enrolled in courses must meet all of the corresponding program’s admission requirements and course prerequisites, or they must demonstrate sufficient prior education and experience to successfully complete those courses.
- B. The program must ensure that participation by non-matriculated students in program courses does not adversely affect the quality of instruction.

MASTER’S-LEVEL, GRADUATE CERTIFICATE, AND PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- C. Credits from ACAHM-accredited/pre-accredited entry-level programs that are earned as a non-matriculated student may not be used to fulfill the corresponding program’s admissions requirements stipulated under *criterion 5.02: Admissions*.

Criterion 5.05: STUDENT SERVICES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. Student services and co-curricular activities must support the fulfillment of the institutional mission.
- B. The institution must ensure that all students have access to well-developed and effective orientation, counseling, academic advising, and career development programs.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The parent institution must ensure that all students have access to well-developed and effective orientation, counseling, academic advising, and career development programs.
- B. The program must develop and maintain program-specific student services and other student development and co-curricular activities that reflect the nature of the student body being served and support the accomplishment of the program's goals.
- C. Program-specific services and co-curricular activities must be organized to ensure that student needs are met and that the program's learning outcomes are achieved.
- D. The program must ensure that all students enrolled in the program have access to program-specific services.

Criterion 5.06: STUDENT POLICIES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must develop and maintain a statement of the rights, privileges, and responsibilities of students.
- B. The institution must develop and maintain policies and procedures relating to student disciplinary proceedings.
- C. The institution's policies and procedures regarding student discipline, academic progress, grading and refunds must be fair, consistent, published, and made available to students.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must utilize policies that meet or exceed institutional policies that:

- A. describe the rights, privileges, and responsibilities of program students.
- B. describe program student disciplinary proceedings, academic progress, grading, and refunds.
- C. are fair, consistent, published, and made available to program students.

Criterion 5.07: STUDENT COMPLAINTS AND GRIEVANCES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must maintain fair and efficient policies and procedures for reviewing and responding to student complaints and grievances.
- B. The institution must provide appropriate training to faculty, staff, and students regarding procedures for reviewing and responding to student complaints and grievances.
- C. The institution must maintain a record of all student complaints and grievances during the preceding three-year period.
- D. The institution must be able to demonstrate that any student complaints or grievances were handled in a fair and equitable manner.
- E. The institution must disclose ACAHM's address and telephone number in its published policy on student complaints.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must consistently apply institutional policies and procedures for reviewing and responding to student complaints and grievances.
- B. The program must provide appropriate training to faculty, staff, and students regarding procedures for reviewing and responding to student complaints and grievances.
- C. The program must maintain a record of all student complaints and grievances during the preceding three-year period.
- D. The program must be able to demonstrate that any student complaints or grievances were handled in a fair and equitable manner.

- E. The program must disclose ACAHM's address and telephone number in its published policy on student complaints.

Criterion 5.08: DOCTORAL DEGREE COMPLETION STUDENTS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

Solely applicable to PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- A. Prospective students must meet all of the programmatic standard admissions requirements outlined in *Criterion 5.02: Admissions*.
- B. The admissions criteria for the doctoral degree completion track must also include the satisfactory completion of a master's-level program in acupuncture or acupuncture with a Chinese herbal medicine specialization from an ACAHM accredited/pre-accredited program or institution. In considering the acceptance of education and training obtained in foreign countries, credits earned at a foreign educational institution must be validated to be equivalent to a master's degree by a recognized educational credentials evaluation service.
- C. The program must complete a comprehensive admissions assessment, including transcript analysis, that demonstrates that all applicable master's-level coursework completed is equivalent to published entry-level doctoral program degree requirements in terms of content, rigor, and the attainment of master's-level professional competencies.
- D. Credits earned more than five (5) years prior to admission may only be accepted for transfer credit by an institution after validating that the student has retained the content knowledge and competencies of the respective course(s) for which transfer credits are being assessed.
- E. Acceptance to an entry-level doctoral degree completion track that includes advanced study or specialty concentrations in herbal medicine is furthered conditioned upon satisfactory completion of ACAHM's masters' core curriculum requirements for herbal training typically evidenced by official transcripts issued by an ACAHM accredited/pre-accredited program or institution.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 6: ASSESSMENT AND EVALUATION

Criterion 6.01: SYSTEMATIC EVALUATION	1
Criterion 6.02: ASSESSMENT OF STUDENT LEARNING	2
Criterion 6.03: PROGRAMMATIC REVIEW	3
Criterion 6.04: EVALUATION OF GRADUATE SUCCESS	3
Criterion 6.05: ASSESSMENT METHODS	4
Criterion 6.06: DISSEMINATION OF INFORMATION.....	4

Criterion 6.01: SYSTEMATIC EVALUATION	
Related Policies:	
References:	

INSTITUTIONAL COMPONENTS

- A. The institution must demonstrate a commitment to ongoing improvement by implementing and documenting systematic institutional evaluation.
- B. The institution must use the results of institutional evaluation activities to determine the extent to which it is fulfilling its mission and achieving its goals (e.g., using regular student assessments to document achievement of all program learning outcomes).

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must demonstrate a commitment to ongoing improvement by implementing systematic evaluation practices that provide evidence of achieving programmatic goals, learning outcomes, and contributing to the fulfillment of its institution's mission.
- B. The program evaluation and review process must include faculty involvement and evaluation of the effectiveness of teaching and learning.
- C. The results of the evaluation, assessment and review process must be used to improve the program.

Criterion 6.02: ASSESSMENT OF STUDENT LEARNING	
<i>Related Policies:</i>	
<i>References:</i>	Federal Student Aid Handbook

INSTITUTIONAL COMPONENTS

- A. As part of its overall assessment plan, the institution must develop and implement systematic and effective methods designed to assess student learning.
- B. An institution must enforce a satisfactory academic progress (SAP) policy applicable to all students (whether or not they receive federal student aid funds) that meets the U.S. Department of Education's reasonableness test (See *Federal Student Aid Handbook, Volume 1 – Student Eligibility, Chapter 1, school-determined requirements*, specifically referenced and incorporated herein).
- C. Institutions that offer distance education must have processes in place through which the institution establishes that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must develop and implement systematic methods designed to assess student learning.
- B. Programs that offer distance education must have processes in place through which the program establishes that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.
- C. A variety of measures must be systematically assessed at each stage of the program to ensure that students acquire the competencies outlined in *Criterion 7.04*.
- D. Assessments of student learning must measure the extent to which the students meet course learning outcomes.
- E. Assessments of student learning must be a component used to evaluate whether program learning outcomes are achieved.

Criterion 6.03: PROGRAMMATIC REVIEW	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must engage in regular, ongoing self-evaluations, with appropriate involvement of all stakeholders.
- B. The program must document its effectiveness in achieving program goals and learning outcomes, the processes leading to those outcomes, and changes resulting from the self-evaluations.
- C. The program must periodically and systematically review its goals and learning outcomes, training model, and curriculum.
- D. Evaluation of program faculty performance must be carried out periodically as part of the program evaluation process.

Criterion 6.04: EVALUATION OF GRADUATE SUCCESS	
<i>Related Policies:</i>	Access to School Data Policy
<i>References:</i>	Program Performance Data Thresholds

INSTITUTIONAL COMPONENTS

- A. The institution must use systematic methods to track and evaluate the career development of its graduates.
- B. Graduate career development data must be used to evaluate the extent to which the institution is fulfilling its mission.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must use systematic methods to gather and evaluate data related to the professional career development of its graduates, such as job placement rates and earnings.
- B. Graduate career development data must be used to evaluate the extent to which the program is achieving its goals and learning outcomes.

- C. Program performance data must be used to evaluate the extent to which the program is achieving its goals and learning outcomes. Programs shall provide to ACAHM, or ACAHM shall receive performance data as applicable, to include:
1. Graduation rate,
 2. NCCAOM certification exam pass rates for first-time test takers,
 3. State licensure exam pass rates.
- D. If a program falls below published [performance data thresholds](#), ACAHM shall review program performance to determine if the program remains compliant with this criterion.

Criterion 6.05: ASSESSMENT METHODS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must assess students at all approved locations, including all clinical training sites, using equivalent methods.

Criterion 6.06: DISSEMINATION OF INFORMATION	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution's evaluation and assessment system must allow for the accurate and timely dissemination of results to stakeholders.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program evaluation and assessment system must allow for the accurate and timely dissemination of information to stakeholders regarding the students' educational progress in achieving:

- A. the programmatic competencies delineated in *Criterion 7.04*, and
- B. the program's learning outcomes.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 7: PROGRAM OF STUDY

Criterion 7.01: PROGRAM LEVEL	1
Criterion 7.02: MINIMUM PROGRAM LENGTH, CREDITS AND HOURS	2
Criterion 7.03: MAXIMUM PROGRAM LENGTH, CREDITS AND HOURS	6
Criterion 7.04: PROFESSIONAL COMPETENCIES	6
ENTRY-LEVEL PROGRAM COMPETENCIES	9
PATIENT CARE COMPETENCIES.....	9
SYSTEMS-BASED MEDICINE COMPETENCIES	14
PROFESSIONAL DEVELOPMENT COMPETENCIES	16
ADVANCED PRACTICE DOCTORAL PROGRAM COMPETENCIES	17
PATIENT CARE COMPETENCIES.....	17
SYSTEMS-BASED MEDICINE COMPETENCIES	19
PROFESSIONAL DEVELOPMENT COMPETENCIES.....	20
ASIAN MEDICAL BODYWORK CERTIFICATE PROGRAM COMPETENCIES	21
PATIENT CARE COMPETENCIES.....	21
PROFESSIONAL DEVELOPMENT COMPETENCIES	24
Criterion 7.05: CLINICAL TRAINING	24
Criterion 7.06: SYLLABI	26
Criterion 7.07: CONTINUING EDUCATION	27
Criterion 7.08: CAPSTONE PROJECTS	27

Criterion 7.01: PROGRAM LEVEL	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must:

- A. be appropriate to an institution of higher education offering a graduate-level professional degree in acupuncture.

- B. be sufficiently rigorous in breadth and depth, and appropriate to graduate professional education and training for practitioners in the acupuncture profession.
- C. employ policies and procedures that ensure reliable and accurate assignment of credit hours and conform to commonly accepted practice in higher education.
- D. ensure that the sequencing, duration, nature, and content of all didactic, practical, and clinical training courses are appropriately integrated and consistent with program purpose, goals, and expected student learning outcomes.
- E. show evidence that it has developed appropriate course prerequisites and that students have completed all prerequisites prior to enrollment in a course.
- F. demonstrate that institutional commitment, the level of instruction, supervision, oversight, and opportunities for graduates, are comparable for:
 - 1. each language track of programs taught in multiple languages.
 - 2. each location for programs taught at multiple locations.
 - 3. all methods of educational delivery (i.e., distance education).

Criterion 7.02: MINIMUM PROGRAM LENGTH, CREDITS AND HOURS	
<i>Related Policies:</i>	Glossary ;
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

MASTER’S-LEVEL PROGRAMS

These credit requirements are over and above the 60 semester credits required for admission to the professional master's-level program and must meet ACAHM credit-related definitions.

- A. Professional master’s programs in **acupuncture** must:
 - 1. be at least three (3) academic years in length.
 - 2. be equivalent to a minimum of 105 semester credits of instruction, including at least:
 - a) 705 clock (contact) hours of instruction in East Asian medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
 - b) 660 clock hours of instruction in clinical training, comprised of at least 150 hours in clinical observation and 500 clock hours of instruction in clinical internship.

- c) 450 clock hours of instruction in biomedical clinical sciences.
 - d) 90 clock hours of instruction in counseling, communication, ethics, and practice management.
- B. Professional master's programs in **acupuncture with a Chinese herbal medicine specialization** must:
- 1. be at least four (4) academic years in length.
 - 2. be equivalent to a minimum of 146 semester credits of instruction, including at least:
 - a) 705 clock hours of instruction in East Asian medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
 - b) 450 clock hours of instruction in didactic East Asian Medicine (EAM)-related herbal studies.
 - c) 870 clock hours of instruction in integrated acupuncture and herbal clinical training, comprised of at least 150 hours in clinical observation and 700 clock hours of instruction in clinical internship.
 - d) 510 clock hours of instruction in biomedical clinical sciences.
 - e) 90 clock hours of instruction in counseling, communication, ethics, and practice management.

PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

These credit requirements are over and above the 90 semester credits required for admission to the professional doctoral program and must meet ACAHM credit-related definitions.

- C. Professional entry-level doctoral programs in **acupuncture** must:
- 1. be at least four (4) academic years in length.
 - 2. be equivalent to a minimum of 121 semester credits of instruction and include at least:
 - a) 705 clock (contact) hours of instruction in East Asian medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
 - b) 790 clock hours of instruction in clinical training, comprised of at least 150 hours in clinical observation and 500 clock hours of instruction in clinical internship.
 - c) 450 clock hours of instruction in biomedical clinical sciences.
 - d) 90 clock hours of instruction in counseling, communication, ethics, and practice management.

3. meet or exceed all existing ACAHM standards and criteria required for master's-level acupuncture programs, in addition to meeting the professional entry-level doctoral standards, criteria, and professional competencies defined in this document.
- D. Professional entry-level doctoral programs in **acupuncture with a Chinese herbal medicine specialization** must:
1. be at least four (4) academic years in length.
 2. be equivalent to a minimum of 162 semester credits of instruction and include at least:
 - a) 705 clock hours of instruction in East Asian medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
 - b) 450 clock hours of instruction in didactic EAM-related herbal studies.
 - c) 1,000 clock hours of instruction in integrated acupuncture and herbal clinical training, comprised of at least 150 hours in clinical observation and 700 clock hours of instruction in clinical internship.
 - d) 510 clock hours of instruction in biomedical clinical sciences.
 - e) 90 clock hours of instruction in counseling, communication, ethics, and practice management.
 3. meet or exceed all existing ACAHM standards and criteria required for master's-level acupuncture programs with a Chinese herbal medicine specialization, in addition to meeting the professional entry-level doctoral program standards, criteria, and professional competencies defined in this document.
- E. **Professional entry-level doctoral degree completion tracks** must:
1. be equivalent to a minimum of 16 semester credits of instruction (accounting for a minimum of 300 clock hours of instruction) and include a minimum of 130 clock hours of instruction of demonstrated clinical experience that leads to the development of professional competencies in the systems-based medicine domain outlined in *Criterion 7.04: Professional Competencies*.
 2. meet or exceed all existing ACAHM standards and criteria for accreditation required for master's-level acupuncture programs, in addition to meeting the professional entry-level doctoral program standards, criteria, and professional competencies defined in this document.

ADVANCED PRACTICE DOCTORAL PROGRAMS

These hour requirements are over and above the requirements for admission to the advanced practice doctoral program.

F. **Advanced practice doctoral programs** must:

1. be a minimum of 1,200 clock hours of instruction and include a minimum of 200 clock hours of instruction in clinical training, as defined in [ACAHM's Glossary](#).
2. provide opportunities for students to assume in-depth professional responsibilities and demonstrate professional role modeling in supervised activities such as teaching assignments, participation in administration of services, quality assurance activities, clinical research activities, and clinical supervision responsibilities.

GRADUATE CERTIFICATE PROGRAMS

These credit requirements are over and above the 60 semester credits required for admission to the professional graduate certificate program and must meet ACAHM credit-related definitions.

G. Professional **Chinese herbal medicine certificate programs** must be equivalent to a minimum of 41 semester credits of instruction, including at least:

1. 450 clock hours of instruction in didactic EAM-related herbal studies.
2. 210 clock hours of instruction in clinical training, comprised of at least 200 clock hours of instruction in herbal clinical internship training.
3. 60 clock hours of instruction in related biomedical clinical sciences.

H. Professional **Asian medical bodywork certificate programs** must:

1. be at least one (1) academic year in length.
2. be equivalent to a minimum of 18 semester credits of instruction, including at least:
 - a) 100 clock hours of instruction in East Asian medical theory, diagnosis, and related studies.
 - b) 150 clock hours of instruction in Asian medical bodywork techniques and related treatment modalities.
 - c) 90 clock hours of instruction in clinical training (see *criterion 7.05*).
 - d) 150 clock hours of instruction in biomedical clinical sciences, including musculoskeletal anatomy.
 - e) 60 clock hours of instruction in communication, ethics, and practice management.

Criterion 7.03: MAXIMUM PROGRAM LENGTH, CREDITS AND HOURS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must implement a written policy establishing a maximum time frame in which a student must complete the program, which must be a period that is no longer than 200 percent of the published length of the educational program.

Criterion 7.04: PROFESSIONAL COMPETENCIES	
<i>Related Policies:</i>	
<i>References:</i>	CCAHM Clean Needle Technique Manual

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program must adopt and implement a curriculum that reflects the attainment of the program learning outcomes and the achievement of all relevant required professional competencies, as outlined by this criterion.

MASTER’S-LEVEL PROGRAMS

Master’s program learning outcomes must address and lead to the development of all professional competencies designated for master’s programs, as outlined by this criterion.

PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

Professional entry-level doctoral program learning outcomes must address and lead to the development of all professional competencies designated for master’s programs by this criterion; and all professional competencies designated as professional entry-level doctoral program professional competencies, as outlined by this criterion.

Professional entry-level doctoral degree completion tracks must address each of the domains and related professional competencies identified for professional entry-level doctoral programs:

- Patient Care Domain 8: Advanced Diagnostic Studies
- Systems-Based Medicine Domain 2: Patient Care Systems
- Systems-Based Medicine Domain 3: Collaborative Care
- Professional Development Domain 2: Formulating and Implementing Plans for Individual Professional Development
- Professional Development Domain 3: Incorporating Scholarship, Research and Evidence-Based Medicine/Evidence-Informed Practice into Patient Care

ADVANCED PRACTICE DOCTORAL PROGRAMS

Advanced practice doctoral program learning outcomes must address and lead to the development of all professional competencies designated as advanced practice doctoral program professional competencies, as outlined by this criterion under the following domains:

- Patient Care Domain 1: Foundational Knowledge (*applied with qualitatively advanced competence beyond entry-level*)
- Patient Care Domain 4: East Asian Medicine-Based Diagnosis (*applied with qualitatively advanced competence beyond entry-level*)
- Patient Care Domain 6: East Asian Medicine-Based Treatment (*applied with qualitatively advanced competence beyond entry-level*)
- Patient Care Domain 8: Advanced Diagnostic Studies
- Systems-Based Medicine Domain 3: Collaborative Care
- Professional Development Domain 3: Incorporating Scholarship, Research and Evidence-Based Medicine/Evidence-Informed Practice into Patient Care

GRADUATE CERTIFICATE PROGRAMS

Learning outcomes for **Chinese herbal medicine certificate programs** must address and lead to the development of all professional competencies designated for master's programs as outlined by this criterion, except for specified components of Patient Care Domain 6.

**Note that many of the competencies may be addressed via education completed in master's-level programs prior to or concurrent with enrollment in the Chinese herbal medicine certificate program, and not within the program curriculum itself.*

Learning outcomes for **Asian medical bodywork certificate programs** must address and lead to the development of all professional competencies designated for the certificate program, as outlined by this criterion.

**Note that many of the competencies may be addressed via education completed in entry-level programs prior to or concurrent with enrollment in the Asian medical bodywork certificate program, and not within the program curriculum itself.*

PATIENT CARE COMPETENCIES - Definitions and Rationale

Case management is a process of managing the patient's care, including treatment, follow-up, referral, and collaboration.

Clinical reasoning is a complex cognitive process that is essential to evaluate and manage a patient's medical problem. It includes the diagnosis of the patient problem, making a therapeutic decision and estimating the prognosis for the patient¹.

Critical thinking is the cognitive process of objectively analyzing and evaluating propositions that have been offered as true. It includes reflecting upon the specific meaning of statements, examining evidence, and reasoning to form a judgment. Acupuncture practitioners use critical thinking to improve the likelihood of desirable patient outcomes. Critical thinking also involves evaluating the decision-making process, including the reasoning that went into conclusions and the factors considered in making a decision concerning patient care. The development of critical thinking skills is an essential precursor of professional judgment.

Diagnostic studies consist of comprehensive evaluations for formulating an East Asian Medicine-Based diagnosis. Acupuncture practitioners are expected to be able to review, understand, and communicate about diagnostic studies pursuant to East Asian Medicine (EAM) principles and theory.

East Asian Medicine-Based Diagnosis is the act of collecting and analyzing relevant clinical information to inform East Asian medical treatment, and the decision reached by such analysis.

East Asian Medicine-Based Treatment may include, but is not limited to: the use of EAM clinical procedures to stimulate specific locations via mechanical, electrical, magnetic, thermal, laser, photon, or wave-generating means; needle insertion (e.g., acupuncture, dry-needling); moxibustion and localized heat therapy; therapeutic blood withdrawal; cupping; scraping/gua sha; manual therapy (e.g., bodywork, tui na, shiatsu); therapeutic exercise (e.g., taiji, qigong); nutritional counseling; lifestyle recommendations; and internal and/or external herbal therapy.

Emergency Management is employing inpatient and outpatient services to prevent the death or serious health impairment of the recipient.

Professional judgment involves the application of professional knowledge and experience to define objectives, solve problems, establish guidelines, evaluate the work of others, interpret results, provide advice or recommendations, assess recommendations of others, and other matters which have an element of latitude in decision-making.

SYSTEMS-BASED MEDICINE COMPETENCIES - Definitions and Rationale

Systems-based medicine is the description of the organization, practice, and components of medicine in terms of the whole medical system, including medical theories, standards of care, regulatory requirements, business practices, and policy. Medical systems are described in terms of the relationship between individuals and whole systems. Individual and collective systems may be expressed in terms of: self-and-other, self-and-collective, and between collectives.

¹ Yazdani S, Hoseini Abardeh M. Five decades of research and theorization on clinical reasoning: a critical review. *Adv Med Educ Pract.* 2019 Aug 27;10:703-716. doi: 10.2147/AMEP.S213492. PMID: 31695548; PMCID: PMC6717718.

More specifically, the systems view may be seen in terms of medical theories, but also in the areas of business practices and policy development. Acupuncture practitioners must be able to deliver and coordinate care within healthcare systems, provide collaborative care such as that found in team-based and multi-disciplinary health care settings, and engage other health care professionals regarding the appropriate use of East Asian medicine. Note that a critical component of East Asian medical practice in integrative practice settings includes the competencies necessary to educate other health care professionals regarding the appropriate use of East Asian medicine. This requires practitioners to possess the attitudes, knowledge, and skills to communicate with other health care providers in appropriate, readily understandable terms.

PROFESSIONAL DEVELOPMENT COMPETENCIES - Definitions and Rationale

Evidence-based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients². Evidence-based medicine includes sophisticated methods of evidence collection, analysis, and integration. Evidence-informed practice is based on the principle that the development and implementation of interventions is informed by the most current, relevant, and reliable evidence about the effectiveness. Acupuncture practitioners should understand the purpose and process of evidence-based medicine and evidence-informed practice, and be able to appraise and apply the evidence, then reflect on their practice. Scholarly research in source and contemporary works in the field of East Asian medicine constitutes an important evidentiary resource in support of clinical practice.

Acupuncture practitioners must have a comprehensive knowledge of ethics and practice management to succeed in professional practice.

Professional development is a process for continued development of individual practitioners that enables them to expand their knowledge base and fulfill their potential to better meet the needs of patients. Scholarship is a systematic pursuit of a topic in the form of an objective, rational inquiry that involves critical analysis.

ENTRY-LEVEL PROGRAM COMPETENCIES

[master's, herb certificate, and professional entry-level doctoral]

PATIENT CARE COMPETENCIES

Patient Care Domain 1: FOUNDATIONAL KNOWLEDGE

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to acquire and utilize the knowledge of basic principles of East Asian medicine (EAM), modes of diagnosis, and treatment strategies in the care of patients.

² Sackett DL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. BMJ. 1996 Jan 13; 312 (7023): 71-72. PubMed PMID: 8555924

Patient Care Domain 2: CRITICAL THINKING/PROFESSIONAL JUDGMENT

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. engage in good judgment that relies on knowledge and experience, is sensitive to context, and is self-correcting.
- B. apply critical thinking skills, professional judgment, and cultural sensitivity to patient health care concerns.
- C. document and support treatment choices.
- D. identify, locate, and assess appropriate sources of information to support professional judgment and the analysis of clinical courses of action.

Patient Care Domain 3: HISTORY TAKING AND PHYSICAL EXAMINATION

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. provide a comfortable, safe environment for history taking and the patient examination.
- B. conduct and appropriately document a health history and a relevant physical examination.
- C. recognize clinical signs and symptoms that warrant referral to, or collaborative care with, other health professionals.

Patient Care Domain 4: EAST ASIAN MEDICINE-BASED DIAGNOSIS

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. collect and organize relevant data to facilitate the development of an East Asian medicine-based diagnosis.
- B. access relevant resources such as classical and modern literature, research literature, and clinical experience in arriving at an East Asian medicine-based diagnosis.
- C. formulate an East Asian medicine-based diagnosis pursuant to EAM principles and theory.
- D. describe the biomedical pathophysiological process responsible for the patient's clinical presentation.

- E. interpret relevant findings from laboratory tests, diagnostic imaging tests, and objective and subjective data from the assessment of the patient to formulate a diagnosis and treatment plan pursuant to East Asian medicine principles and theory.
- F. explain the subjective and objective findings that warrant consultation with or referral to other health care providers.

Patient Care Domain 5: CASE MANAGEMENT

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. describe the role of the patient in successful treatment outcomes.
- B. demonstrate awareness of and familiarity with cultural competency, and how cultural issues influence an East Asian medical treatment and case management.
- C. employ a comprehensive process for the care of patients.
- D. collaborate with the patient to develop short, medium, and long-term treatment plans.
- E. modify plans consistent with changes in the patient's condition.
- F. assess patient outcomes.
- G. communicate with other health care providers to determine an appropriate plan of care.
- H. manage inappropriate patient behavior.
- J. educate patients about behaviors and lifestyle choices that create a balanced life and promote health and wellness.
- K. provide a report of findings and health care plan to the patient.
- L. create reports and professional correspondence relevant to the care of patients.
- M. identify a range of referral resources and the modalities they employ.
- N. use information systems in case management.

Patient Care Domain 6: EAST ASIAN MEDICINE-BASED TREATMENT

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. explain the fundamental theory underlying the application of East Asian medicine-based treatment.

- B. describe the principles and methods of East Asian medicine-based treatment and its related clinical procedures.
- C. accurately and appropriately locate acupuncture points. (not relevant to Chinese herbal medicine certificate programs)
- D. articulate acupuncture point functions and the decision-making process for point selection. (not relevant to Chinese herbal medicine certificate programs)
- E. administer East Asian medicine-based treatment and use treatment equipment consistent with relevant recognized safety guidelines, including the best practices for acupuncture needle safety and related procedures described in the *Clean Needle Technique (CNT) Manual* (see *CAAHM Clean Needle Technique Manual* specifically referenced and incorporated herein), and OSHA protocols.
- F. recognize potential adverse events for each clinical procedure, including, but not limited to, healthcare associated infections.
- G. describe safety considerations and guidelines to prevent adverse events for each clinical procedure.
- H. describe state and federal regulations relevant to the practice of acupuncture and herbal medicine, if applicable, including scope of practice, vendor compliance with manufacturing standards, and appropriate mechanisms for the reporting of serious adverse events.
- J. describe and demonstrate appropriate patient draping and positioning to optimize treatment and maintain the patient's dignity.
- K. employ health, cleanliness, and safety practices to reduce transmission of diseases through hygienic methods.
- L. describe and employ appropriate cleaning and pathogen reduction techniques in healthcare and professional practice locations.
- M. recognize ethical issues and evaluate appropriate actions when administering treatment.
- N. For programs with **Chinese herbal medicine specialization and Chinese herbal medicine certificate programs**, in addition to the above competencies, the student must:
 1. describe the fundamental theory underlying the use of herbs, natural products, and formulations.
 2. accurately articulate properties and functions of herbs and natural products in the materia medica.
 3. recognize obsolete or restricted herbs and natural products (i.e., endangered species, restricted or toxic substances) and identify appropriate alternatives for said substances.

4. accurately articulate properties, functions, principles, dosages, and ingredients of traditional formulations.
5. compose and revise formulations of appropriately dosed herbs and natural products based on traditional practice and patient assessment.
6. safely and effectively administer herbs and natural products, formulations, and prepared products (i.e., dietary supplements).
7. evaluate the efficacy of appropriately administered herbs, natural products, and formulations through the identification and review of current research.
8. recall elementary concepts of botany and common chemical constituents of herbs and natural products.
9. appraise potential toxicity, side effects, contraindications, and pharmaceutical interactions for herbs and natural products, formulas, and prepared products.
10. describe state and federal regulations relevant to the practice of East Asian medicine, including scope of practice, vendor compliance with manufacturing standards, and appropriate mechanisms for the reporting of serious adverse events.
11. describe the various forms of formulation preparation.
12. describe dispensary practices that provide quality assurance, including product storage, facility management, preparation practices, product tracking, and record-keeping.
13. recognize ethical issues and evaluate appropriate actions when administering herbs and natural products.

Patient Care Domain 7: EMERGENCY MANAGEMENT

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. identify subjective and objective findings that indicate urgent referral.
- B. identify risk factors and findings that suggest medical conditions requiring referral.
- C. implement key emergency first-aid procedures, including CPR.
- D. describe the legal implications of inappropriate emergency management.
- E. describe correct emergency management documentation and follow-up procedures.
- F. develop an emergency management plan for private office and multi-disciplinary settings.

Patient Care Domain 8: ADVANCED DIAGNOSTIC STUDIES

Professional Entry-Level Doctoral Program Competencies

The student must demonstrate the ability to:

- A. describe the relevant laws and regulations, including scope of practice, that may govern or limit conducting diagnostic studies.
- B. explain the clinical indications, risks, and benefits for diagnostic procedures.
- C. outline the principles and applications of equipment utilized for diagnostic imaging, laboratory, and other relevant diagnostic tools.
- D. assess written diagnostic reports, including the range of values that distinguish normal from abnormal findings, as relevant to patient care and communication with other health care providers.
- E. review findings from relevant diagnostic studies with objective and subjective findings from the assessment of the patient.
- F. communicate effectively with other health care providers regarding the results of diagnostic studies.

SYSTEMS-BASED MEDICINE COMPETENCIES

Systems-Based Medicine Domain 1: EDUCATION AND COMMUNICATION

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. summarize the applicability of East Asian medicine to diseases and syndromes in the biomedical model.
- B. communicate with other health care professionals in their own terms.
- C. demonstrate knowledge of other health care disciplines.
- D. discuss East Asian medicine in terms of relevant scientific theories.
- E. articulate expected clinical outcomes of East Asian medicine from a biomedical perspective.
- F. translate, explain, and discuss East Asian medical terminology for effective communication.
- G. demonstrate East Asian medical techniques and discuss their relevance in multi-disciplinary settings.
- H. access relevant and appropriate information from a wide variety of sources to support the education of colleagues.

- J. describe and discuss the clinical scope of East Asian medicine in an informed, authoritative, and appropriate manner.

Systems-Based Medicine Domain 2: PATIENT CARE SYSTEMS

Professional Entry-Level Doctoral Program Competencies

The student must demonstrate the ability to:

- A. guide a patient into health care systems, e.g., homeless care, elder care, and family services.
- B. identify, describe, and assess possible solutions to healthcare disparities due to socioeconomic factors.
- C. describe the role of acupuncture professionals within current health care systems and the impact of that role on patient care.
- D. employ patient care in the context of relevant health care systems.
- E. differentiate between models of care and treatment modalities.

Systems-Based Medicine Domain 3: COLLABORATIVE CARE

Professional Entry-Level Doctoral Program Competencies

The student must demonstrate the ability to:

- A. recognize the impact that organizational culture and established systems have on patient care.
- B. interact appropriately and skillfully with other members of the health care team and within that health care system.
- C. describe the prevailing and emerging organization, structure, and responsibilities of the health care team.
- D. discuss, in the appropriate context, the patient's condition using vocabulary and concepts common to other members of the health care team.
- E. articulate the importance of supporting and participating in professional activities and organizations.
- F. compare and contrast common medical models.

PROFESSIONAL DEVELOPMENT COMPETENCIES

Professional Development Domain 1: ETHICS AND PRACTICE MANAGEMENT

Master's Program and Chinese Herbal Medicine Certificate Competencies

The student must demonstrate the ability to:

- A. apply data and information concerning confidentiality and HIPAA, informed consent, scope of practice, professional conduct, malpractice and liability insurance, requirements of third-party payers, OSHA, professional development, other applicable legal standards to improve practice management and records management systems.
- B. develop risk management and quality assurance programs.
- C. practice ethically and behave with integrity in professional settings.
- D. articulate the strengths and weaknesses of multiple practice and business models, and create and implement:
 - 1. practice/office policies and procedures.
 - 2. business/professional plans designed to support success in professional practice.
 - 3. marketing/outreach plans designed to support success in professional practice.
- E. describe and apply a variety of billing and collection systems.
- F. demonstrate use of electronic health records and electronic medical records systems.

Professional Development Domain 2: FORMULATING AND IMPLEMENTING PLANS FOR INDIVIDUAL PROFESSIONAL DEVELOPMENT

Professional Entry-Level Doctoral Program Competencies

The student must demonstrate the ability to:

- A. identify and remediate areas of professional weakness.
- B. propose improvement methods in the analysis of practice for the purpose of developing a program of learning on a lifelong basis.
- C. identify sources of ongoing professional development, education, and research, both classical and contemporary.
- D. describe emerging technology systems for information access and management.

- E. assess professional development needs and use available professional development resources to respond to changes in the local, state, regional, and national health care environment.

Professional Development Domain 3: INCORPORATING SCHOLARSHIP, RESEARCH AND EVIDENCE-BASED MEDICINE/EVIDENCE-INFORMED PRACTICE INTO PATIENT CARE

Professional Entry-Level Doctoral Program Competencies

The student must demonstrate the ability to:

- A. describe evidence-based medicine and evidence-informed practice; and differentiate between the two.
- B. describe data collection methods to facilitate information dissemination in the field.
- C. assess research, including hypothesis, design, and methods, both qualitative and quantitative.
- D. describe the role and purposes of outcomes research.
- E. modify treatment plans and protocols using new information from current quantitative and qualitative research.
- F. use evidence-based medicine and/or evidence-informed practice to improve the patient care process.

ADVANCED PRACTICE DOCTORAL PROGRAM COMPETENCIES

PATIENT CARE COMPETENCIES

Patient Care Domain 1: FOUNDATIONAL KNOWLEDGE

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. formulate and justify clinical reasoning utilizing comprehensive, in-depth knowledge of EAM principles, modes of diagnosis, and treatment strategies in the care of patients.
- B. interpret historical cultural perspectives and use them to clarify essential concepts represented in the classical texts of EAM.
- C. demonstrate relevant language terminology skills in the source language (i.e., Mandarin Chinese, classical Chinese, Korean, etc.) sufficient to clarify essential concepts represented in the classical texts of EAM.

Patient Care Domain 4: EAST ASIAN MEDICINE-BASED DIAGNOSIS AND CLINICAL REASONING

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. formulate clinical reasoning through qualitatively advanced application of the master's program professional competencies of *Patient Care Domain 4: East Asian Medicine-Based Diagnosis* (listed below) to evaluate and manage patients with complex conditions in core and specialty concentration areas.
 - 1. prioritize relevant data to develop an EAM-based diagnosis.
 - 2. appraise relevant resources, such as classical and modern literature, research literature, and clinical experience, to generate and validate an EAM-based diagnosis.
 - 3. appraise and apply in-depth knowledge of EAM principles and theory to formulate a comprehensive EAM-based diagnosis.
 - 4. analyze the biomedical pathophysiological process responsible for the patient's clinical presentation.
 - 5. interpret relevant findings from laboratory tests, diagnostic imaging tests, and objective and subjective data from the assessment of the patient to formulate a diagnosis and treatment plan pursuant to EAM principles and theory.
 - 6. determine the subjective and objective findings that warrant consultation with or referral to other health care providers.
- B. employ clinical reasoning, including EAM-based diagnosis development and pattern differentiation, to make therapeutic decisions to manage patients with complex conditions.
- C. estimate the prognosis for a patient based on clinical reasoning.

Patient Care Domain 6: EAST ASIAN MEDICINE-BASED TREATMENT

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to administer East Asian medicine-based treatment, including Chinese herbal medicine as applicable, in core and concentration areas with competence that is qualitatively advanced beyond entry-level.

Patient Care Domain 8: ADVANCED DIAGNOSTIC STUDIES

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. describe the relevant laws and regulations, including scope of practice, that may govern or limit conducting diagnostic studies.
- B. explain the clinical indications, risks, and benefits for diagnostic procedures.
- C. outline the principles and applications of equipment utilized for diagnostic imaging, laboratory, and other relevant diagnostic tools.
- D. assess written diagnostic reports, including the range of values that distinguish normal from abnormal findings, as relevant to patient care and communication with other health care providers.
- E. review findings from relevant diagnostic studies with objective and subjective findings from the assessment of the patient.
- F. communicate effectively with other health care providers regarding the results of diagnostic studies.

SYSTEMS-BASED MEDICINE COMPETENCIES³

Systems-Based Medicine Domain 3: COLLABORATIVE CARE

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. recognize the impact that organizational culture and established systems have on patient care.
- B. engage diverse professionals as well as associated resources, to develop strategies to meet specific health and healthcare needs of patients and populations.
- C. explain the roles and responsibilities of other providers and how a team of diverse healthcare professionals can work together to provide care, promote health, and prevent disease.
- D. communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible.
- E. express one's knowledge and opinions to team members involved in patient care and population health improvement with confidence, clarity, and respect, working to ensure common understanding of information, treatment, care decisions, and population health programs and policies.
- F. demonstrate respect for the cultural diversity and individual differences that characterize patients, populations, and the health team to reduce health disparities through culturally sensitive and unbiased quality care.

³ Several competencies under the Systems-Based Medicine and Professional Development domains have been adapted with permission from "Competencies for Optimal Practice in Integrated Environments," Academic Collaborative for Integrative Health, 2018 and "Core competencies for interprofessional collaborative practice: 2016 update," Interprofessional Education Collaborative, 2016.

PROFESSIONAL DEVELOPMENT COMPETENCIES³

Professional Development Domain 3: INCORPORATING SCHOLARSHIP, RESEARCH AND EVIDENCE-BASED MEDICINE/EVIDENCE-INFORMED PRACTICE INTO PATIENT CARE

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. analyze the research base within East Asian medicine and demonstrate how the evidence informs clinical decision making.
- B. describe data collection methods to facilitate information dissemination in the field.
- C. describe and apply critical evaluation of common research methodologies within the context of clinical and mechanistic research.
- D. propose a viable research project including formulating a research question, hypothesis, and design.
- E. analyze and evaluate findings from classical and modern literature, research literature, and clinical experience to develop meaningful contributions to the field.
- F. effectively disseminate research evidence from the field of East Asian medicine to patients, families, community members, the public, and healthcare professionals.

Professional Development Domain 4: PROFESSIONAL LEADERSHIP

Advanced Practice Doctoral Program Competencies

The student must demonstrate the ability to:

- A. develop and employ communication skills and techniques to facilitate effective discussions with team members, patients, and the community.
- B. integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient and community values and priorities/preferences for care.
- C. forge interdependent relationships with other professions within and outside of the health system to improve care and advance learning.
- D. apply leadership practices that support effective communication, collaborative practice, professional advocacy, and teamwork.
- E. articulate the importance of supporting and participating in professional activities and organizations.

ASIAN MEDICAL BODYWORK CERTIFICATE PROGRAM COMPETENCIES

PATIENT CARE COMPETENCIES

Patient Care Domain 1: FOUNDATIONAL KNOWLEDGE

The student must demonstrate the ability to acquire and utilize the knowledge of basic principles of East Asian medicine, modes of diagnosis, and treatment strategies in the care of patients.

Patient Care Domain 2: CRITICAL THINKING/PROFESSIONAL JUDGMENT

The student must demonstrate the ability to:

- A. engage in good judgment that relies on knowledge and experience, is sensitive to context, and is self-correcting.
- B. apply critical thinking skills, professional judgment, and cultural sensitivity to patient health care concerns.
- C. document and support treatment choices.
- D. identify, locate, and assess appropriate sources of information to support professional judgment and the analysis of clinical courses of action.

Patient Care Domain 3: HISTORY TAKING AND PHYSICAL EXAMINATION

The student must demonstrate the ability to:

- A. provide a comfortable, safe environment for history taking and the patient examination.
- B. conduct and appropriately document a health history and a relevant physical examination.
- C. recognize clinical signs and symptoms that warrant referral to, or collaborative care with, other health professionals.

Patient Care Domain 4: EAST ASIAN MEDICINE-BASED DIAGNOSIS AND TREATMENT PLANNING

The student must demonstrate the ability to:

- A. collect and organize relevant data to facilitate the development of an East Asian medicine-based diagnosis.
- B. describe the biomedical pathophysiological process responsible for the patient's clinical presentation.

- C. describe common diagnostic imaging tests such as medical radiology (X-rays), magnetic resonance imaging tests (MRI), computed tomography scans (CT), and ultrasound.
- D. interpret relevant reported findings of laboratory or diagnostic imaging tests from medical healthcare providers (e.g., physician, pathologist, radiologist, etc.) and objective and subjective data from the assessment of the patient to formulate a diagnosis and treatment plan pursuant to East Asian medicine principles and theory.
- E. explain the subjective and objective findings that warrant consultation with or referral to other health care providers.

Patient Care Domain 5: CASE MANAGEMENT

The student must demonstrate the ability to:

- A. describe the role of the patient in successful treatment outcomes.
- B. demonstrate awareness of and familiarity with cultural competency, and how cultural issues influence a bodywork session and case management.
- C. collaborate with the patient to develop short, medium, and long-term treatment plans.
- D. modify plans consistent with changes in the patient's condition.
- E. assess patient outcomes.
- F. manage inappropriate patient behavior.
- G. educate patients about behaviors and lifestyle choices that create a balanced life and promote health and wellness.
- H. provide a report of findings and health care plan to the patient.
- J. create reports and professional correspondence relevant to the care of patients.

Patient Care Domain 6: EAST ASIAN MEDICINE-BASED TREATMENT

The student must demonstrate the ability to:

- A. explain the fundamental theory underlying the application of Asian medical bodywork.
- B. utilize Asian medical bodywork techniques and theory to treat conditions such as acute pain, chronic pain, musculoskeletal conditions, and internal conditions.
- C. integrate Asian medical bodywork techniques and principles into an East Asian medicine-based treatment plan.

- D. administer Asian medicine-based bodywork treatment and use treatment equipment consistent with relevant recognized safety guidelines, including the best practices for safety and related procedures described in the *Clean Needle Technique (CNT) Manual* (see *CCAHM Clean Needle Technique Manual* specifically referenced and incorporated herein), and OSHA protocols.
- E. recognize potential adverse events for each clinical procedure, including, but not limited to, healthcare associated infections.
- F. describe safety considerations and guidelines to prevent adverse events for each clinical procedure.
- G. describe contraindications for the application of Asian medical bodywork.
- H. describe state and federal regulations relevant to the practice of bodywork, if applicable, including scope of practice and appropriate mechanisms for the reporting of serious adverse events.
- J. describe and demonstrate appropriate patient draping and positioning to optimize treatment and maintain the patient's dignity.
- K. employ health, cleanliness, and safety practices to reduce transmission of diseases through hygienic methods.
- L. describe and employ appropriate cleaning and pathogen reduction techniques in healthcare and professional practice locations.
- M. recognize ethical issues and evaluate appropriate actions when administering treatment.
- N. safely and effectively administer topical/externally applied East Asian herbal formulations that are complementary to Asian medical bodywork.

Patient Care Domain 7: EMERGENCY MANAGEMENT

The student must demonstrate the ability to:

- A. identify subjective and objective findings that indicate urgent referral.
- B. identify risk factors and findings that suggest medical conditions requiring referral.
- C. implement key emergency first-aid procedures, including CPR.
- D. describe the legal implications of inappropriate emergency management.
- E. describe correct emergency management documentation and follow-up procedures.
- F. develop an emergency management plan for private office and multi-disciplinary settings.

Patient Care Domain 9: SELF-CULTIVATION

The student must demonstrate the ability to:

- A. describe and demonstrate self-cultivation exercises that support the development of hand techniques and body mechanics, including balance, stability, and leverage.
- B. employ a self-cultivation practice, such as Qi Gong, to develop personal structural integrity and apply that understanding to the patient treatment.

PROFESSIONAL DEVELOPMENT COMPETENCIES

Professional Development Domain 1: ETHICS AND PRACTICE MANAGEMENT

The student must demonstrate the ability to:

- A. apply data and information concerning confidentiality and HIPAA, informed consent, scope of practice, professional conduct, malpractice and liability insurance, requirements of third-party payers, OSHA, professional development, other applicable legal standards to improve practice management and records management systems.
- B. practice ethically and behave with integrity in professional settings.

Criterion 7.05: CLINICAL TRAINING	
<i>Related Policies:</i>	Glossary ;
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

MASTER’S-LEVEL, GRADUATE CERTIFICATE, AND PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS

- A. The clinical internship must be conducted in a clinical internship location (see “Clinical Settings” in [Glossary](#)).
- B. The clinical training must provide sufficient patient contacts to fulfill the professional competencies expected of program graduates.
 - 1. An **acupuncture program** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 250 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, perform appropriate acupuncture and/or related treatments, and follow-up on patients' responses to treatment.

2. An **acupuncture program with a Chinese herbal medicine specialization** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 350 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, perform appropriate acupuncture and/or herbal medicine treatments, and follow-up on patients' responses to treatment.
 3. A **Chinese herbal medicine certificate program** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 100 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, administer appropriate herbal medicine treatments, and follow-up on patients' responses to treatment.
 4. An **Asian medical bodywork certificate program** must ensure that the clinical training, conducted under the supervision of program approved supervisors, consists of at least 60 treatments of student-delivered patient care, at least 30 minutes in duration, where student interns conduct patient interviews, perform diagnosis and treatment planning, perform appropriate medical bodywork treatments, and follow-up on patients' responses to treatment. The clinical training must be separate and distinct from clinical training in other ACAHM-accredited/pre-accredited programs.
- C. Clinical training must place students in internship settings with an adequate number and variety of supervisors; and must provide a wide range of educational experiences.
- D. The program must incorporate two or more stages or levels of clinical training, which must be associated with clearly defined outcomes that describe the achievement of competency.

MASTER'S-LEVEL AND PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS ONLY

- E. The program must ensure that each student fulfills at least 150 hours observing acupuncturists and senior student interns performing East Asian medical therapies in a clinical setting. At least 60 clock of hours clinical observation must include patient diagnosis and treatment performed exclusively by experienced practitioners that have all necessary state authority to perform the East Asian medical therapies and associated faculty duties.

PROFESSIONAL ENTRY-LEVEL DOCTORAL PROGRAMS ONLY

- F. As part of its clinical training, the entry-level doctoral program must provide opportunities for interns to engage in collaborative interactions with other medical providers in appropriate clinical settings.

ADVANCED PRACTICE DOCTORAL PROGRAMS ONLY

- G. The program must offer a concentration in at least one clinical specialty area and/or East Asian medicine-related (see [Glossary](#)) modality.
- H. The program must provide in-depth, advanced clinical training in the defined concentration(s) that leads to development of clinical expertise beyond entry-level.

- J. The program must provide in-depth didactic and practical training in the area(s) of concentration sufficient to support the clinical experience.
- K. As part of its clinical training, the program must provide opportunities for interns to engage in collaborative interactions with other medical providers in appropriate clinical settings.
- L. The clinical program must promote the integration of practice and scholarly inquiry.

Criterion 7.06: SYLLABI	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. A syllabus must be prepared for each program course or major unit of instruction including clinical instruction.
- B. Syllabi must be:
 - 1. maintained in the program's curriculum files;
 - 2. distributed to each student in the course/clinical experience; and
 - 3. available to all faculty.
- C. Syllabi must contain all required information needed for a student to successfully complete the requirements of the course, including at minimum:
 - 1. the course description;
 - 2. learning outcomes described in measurable terms;
 - 3. prerequisites for enrolling in the course;
 - 4. an outline of the content of the course and didactic and clinical instruction in enough detail to permit the student to see its full scope;
 - 5. schedule of deadlines for course requirements (e.g., papers, projects, examinations);
 - 6. method(s) of instruction;
 - 7. assessment and grading methods;
 - 8. type of grading system used;
 - 9. attendance policy;
 - 10. procedure for accommodations request;
 - 11. required and recommended reading; and
 - 12. credit hours granted, including expected out of class study time and specific out of class requirements.

Criterion 7.07: CONTINUING EDUCATION	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

For institutional offerings of continuing education and/or special instructional activities, provision for such activities must include an adequate administrative structure, a sound financial base, and appropriate facilities.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

Continuing education activities or hours must be non-credit bearing and cannot be converted into academic credits for any purpose.

Criterion 7.08: CAPSTONE PROJECTS	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

There are no institutional components for this criterion.

PROGRAMMATIC COMPONENTS

ADVANCED PRACTICE DOCTORAL PROGRAMS ONLY

- A. The doctoral program must require students to demonstrate the achievement of professional competencies under the *Professional Development Domain* as outlined in *criterion 7.04* by completing an acceptable clinically oriented capstone project. The project must demonstrate the necessary knowledge and skills for designing and critiquing approaches to systematic inquiry and the use of qualitative and/or quantitative methods. Capstone projects may include, but are not limited to:
 - 1. Theoretical analyses and review
 - 2. Surveys or analyses of archival data
 - 3. Systematic, qualitative investigations
 - 4. Public policy issues
 - 5. Evaluative research
 - 6. Interpretive translation research
 - 7. Educational research (i.e., professional classroom/clinical pedagogy, patient education)
 - 8. Case-based research (i.e., Case reports, Case series, Cohort studies, etc.)
 - 9. Outcomes research/Clinical trials

- B. The products from capstone projects must meet academic form and style standards suitable for peer-reviewed professional publications.

- C. The program must utilize a faculty-based committee to review the capstone projects that includes individuals with demonstrable relevant experience in research, scholarly writing, peer review, publication, and/or clinical practice.
- D. The program must utilize a comprehensive, committee-based review process for the capstone projects that includes, at a minimum, evaluation of:
 - 1. the research interest, ethical issues, and methods of addressing such in the research,
 - 2. data gathering methods,
 - 3. progress toward completion, and
 - 4. final project content, format, and delivery.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 8: FACULTY AND GUEST LECTURERS

Criterion 8.01: CORE FACULTY 1
Criterion 8.02: CREDENTIALS 2
Criterion 8.03: POLICIES AND PROCEDURES..... 3
Criterion 8.04: CONDITIONS OF SERVICE..... 3
Criterion 8.05: FACULTY COMMUNICATION 4

Criterion 8.01: CORE FACULTY	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution must have written position descriptions for its faculty, stating at a minimum the responsibilities of the position and the required qualifications.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program must employ an identifiable core group of qualified full- and/or part-time didactic and clinical faculty members who have regular and ongoing responsibility for the design, delivery, and assessment of the program, and are involved in program development, review, and governance.
- B. The program's core faculty must:
 - 1. be sufficient in numbers for their academic and professional responsibilities to the program;
 - 2. function as an integral part of the program, including engaging in curriculum planning and development, and program assessment;
 - 3. have theoretical perspectives, as well as academic and applied experience, appropriate to the program's goals and expected student learning outcomes;
 - 4. demonstrate substantial competence and have recognized credentials and experience in those areas which are at the core of program goals and expected student learning outcomes;

5. be available to function as appropriate role models for students in their learning, socialization into the discipline and profession, acquisition of knowledge, and competencies consistent with the program's training goals; and
6. be accessible to students to provide them with a level of guidance and supervision that actively encourages timely completion of the program.

Criterion 8.02: CREDENTIALS	
<i>Related Policies:</i>	Glossary
<i>References:</i>	

INSTITUTIONAL COMPONENTS

The institution's faculty and guest lecturers must possess recognized credentials and demonstrate competence in those areas they are assigned to teach.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Program faculty and guest lecturers must:
 1. possess appropriate recognized credentials,
 2. have relevant professional experience,
 3. demonstrate substantial competence in the areas they are assigned to teach.

MASTER'S-LEVEL AND GRADUATE CERTIFICATE PROGRAMS

- B. For each faculty member who does not possess at least a master's level degree, certificate or diploma, the program must document the method(s) by which it determined the instructor's competence, including relevant education and training and significant experience and leadership in their areas of instruction, to teach at the master's level.

PROFESSIONAL ENTRY-LEVEL DOCTORAL AND ADVANCED PRACTICE DOCTORAL PROGRAMS

- C. The doctoral program must employ didactic and clinical faculty who are credentialed at the doctoral level. Within seven (7) years from the date of approval to begin a doctoral program, the program or institution must demonstrate that a majority of faculty teaching in the program have achieved doctoral-level degrees or the terminal degree in the field in which they are currently teaching.

Criterion 8.03: POLICIES AND PROCEDURES	
<i>Related Policies:</i>	
<i>References:</i>	Fair Labor Standards Act

INSTITUTIONAL COMPONENTS

- A. The recruitment, hiring, appointment, promotion, and retention of faculty members and guest lecturers must be described in institutional policy documents, job descriptions, and procedures.
- B. Policies and procedures relating to the recruitment, hiring, appointment, promotion and retention of faculty members and guest lecturers must address pertinent legal requirements in areas of Fair Labor Standards Act, non-discrimination, equal opportunity, and affirmative action employment practices.
- C. Each faculty member and guest lecturer must have a letter of appointment and/or contract that specifies the terms and duties of employment including expected time commitment for each identified duty.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Policies and procedures pertaining to faculty and guest lecturer work must be described in published documents that are made available to program faculty and guest lecturers.
- B. Program policies pertaining to teaching loads must be reasonable and justified by factors such as the type and method of instruction; the size of classes; the level of instruction; the qualifications of the instructor; the academic advising, committee membership, and guidance and student organizations assigned; and the other administrative, research, publication, and community relations responsibilities of the instructor.
- C. Programs must utilize a systematic faculty evaluation process.

Criterion 8.04: CONDITIONS OF SERVICE	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. Terms and conditions of service for faculty at the institution must be adequate, equitable, and administered ethically.
- B. The institution's faculty members must be accorded academic freedom in their work.
- C. Meaningful opportunities for professional growth and development must be made available to the institution's faculty.

- D. Institutional policies and employment contracts must address preparation time if faculty members are involved in instructional work.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Terms and conditions of service for program faculty must be adequate, equitable, and administered ethically.
- B. The program's faculty members must be accorded academic freedom in their work.
- C. Meaningful opportunities for professional growth and development must be made available to the program's faculty.
- D. Program policies and employment contracts must address preparation time if faculty members are involved in instructional work.

Criterion 8.05: FACULTY COMMUNICATION	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. Provision must be made for regular and open communication among members of the faculty, and between the faculty and administrative officers of the institution.
- B. The institution's faculty must meet at minimum once per academic term to consider curriculum and educational policies and issues.
- C. Complete and accurate minutes of institutional faculty meetings must be maintained and kept in permanent files at the institution.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Provision must be made for regular and open communication among members of the program faculty, and between program faculty and members of the program administration.
- B. Program faculty must meet at minimum once per academic term to consider curriculum and educational policies and issues.
- C. Program faculty must have appropriate input into the curriculum development process.
- D. Complete and accurate minutes and attendance of program faculty meetings must be maintained and kept in permanent files.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 9: INSTITUTIONAL AND PROGRAM RESOURCES

Criterion 9.01: FINANCIAL MANAGEMENT..... 1
Criterion 9.02: GENERAL SUFFICIENCY AND STABILITY OF RESOURCES..... 2
Criterion 9.03: FINANCIAL RESPONSIBILITY..... 2
Criterion 9.04: FINANCIAL PLANNING AND CONTROL 3
Criterion 9.05: FINANCIAL AID OPERATION 4
Criterion 9.06: COHORT DEFAULT RATE 4
Criterion 9.07: REFUND POLICY 4
Criterion 9.08: CAMPUS AND PROGRAM FACILITIES 5
Criterion 9.09: LEARNING RESOURCES SYSTEM (LIBRARY)..... 5
Criterion 9.10: TECHNOLOGICAL RESOURCES 6

Criterion 9.01: FINANCIAL MANAGEMENT	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institutional financial management system must support full audits and review by an independent certified public accountant.
- B. Each year, at minimum, a reviewed institutional financial statement must be prepared that describes the current state of institutional finances.
- C. The institution must utilize an accrual basis of accounting.
- D. Institutions organized as sole proprietorships must have and maintain financial records, management systems, and bank accounts separate and distinct from any other enterprise owned by the proprietor.

PROGRAMMATIC COMPONENTS

There are no programmatic components for this criterion.

Criterion 9.02: GENERAL SUFFICIENCY AND STABILITY OF RESOURCES	
<i>Related Policies:</i>	
<i>References:</i>	Federal Student Aid Handbook

INSTITUTIONAL COMPONENTS

The institution must be financially stable with resources sufficient to: ensure long-term viability; support its mission; fund its programs, commitments and priorities; and, respond to financial emergencies as evidenced by:

- A. a full independent institutional audit with management letter by a licensed CPA for the most recent year. The audit must provide a detailed, accurate picture of the institution's financial status, and must include a classified balance sheet statement, the statement of revenue and expenditures, changes in fund balance and/or financial position, and a Financial Responsibility Composite Score (see *critterion 9.03*). Audit must confirm financial viability with evidence of follow-up on any concerns cited in management letter;
- B. at minimum, a financial review for all other years during the last accreditation cycle;
- C. a reviewed and approved annual budget which must include assumptions and three-year projections;
- D. adequate financial resources to meet debt-service requirements of short-term and long-term indebtedness without adversely impacting the institution; and
- E. a detailed explanation and a realistic plan for eliminating any accumulated deficit.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The program’s resources must be aligned with, and sufficient to support, its educational purpose, goals, and learning outcomes, as evidenced by:

- A. an approved, annual program budget that includes a realistic projection of program revenue and expenditures;
- B. documentation of revenues and expenditures for the immediate prior and current years; and
- C. projected revenues and expenditures for the next fiscal year.

Criterion 9.03: FINANCIAL RESPONSIBILITY	
<i>Related Policies:</i>	
<i>References:</i>	Federal Student Aid Handbook

INSTITUTIONAL COMPONENTS

The institution’s financial systems, ratios, outcomes, indicators, policies, and procedures must maintain standards of financial responsibility as demonstrated by the Financial Responsibility

Composite Score utilized by the US Department of Education (See *Federal Student Aid Handbook, Volume 2 – School Eligibility and Operations, Chapter 11 – Financial Standards*, specifically referenced and incorporated herein) or other ACAHM-approved metric.

PROGRAMMATIC COMPONENTS

There are no programmatic components for this criterion.

Criterion 9.04: FINANCIAL PLANNING AND CONTROL	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must demonstrate resource planning and development that includes realistic budgeting, enrollment management, and diversification of revenue sources. Resource planning must be integrated with all other institutional planning.
- B. The process by which the institution's annual budget is established, and resources allocated, must be clearly defined and consistently implemented.
- C. The budget must be reviewed and approved by the institution's governing body.
- D. The institution's annual budget must provide a realistic projection of the institution's annual revenue and expenditures.
- E. The institution must project its anticipated expenditures and revenues for at least a three (3) year period.
- F. The institution's budget must include notes, when necessary, that explain the assumptions on which the projected figures are based.
- G. The institution must have control of its financial resources and budgetary process and be free of undue influence or pressure from owners, shareholders, external funding sources or agencies.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The program budget must be developed based on resource planning and development that includes realistic budgeting, enrollment management, and diversification of revenue sources.
- B. The process by which the program's annual budget is established and approved, and resources allocated, must be clearly defined and consistently implemented.
- C. Program leadership must have input into the annual programmatic budgeting process.
- D. Program leadership must have sufficient control of the program budget.

Criterion 9.05: FINANCIAL AID OPERATION	
<i>Related Policies:</i>	
<i>References:</i>	Federal Student Aid Handbook ; Legal and Regulatory Checklist

INSTITUTIONAL COMPONENTS

The financial aid operation must meet all federal aid requirements and be capably administered, as documented by the appropriate Department’s compliance audit, financial statement audit, and/or the Office of the Inspector General (OIG) when there is concern over an institution’s administration of federal student aid programs.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The parent institution's financial aid operation must meet all federal aid requirements and be capably administered, as documented by the appropriate Department’s compliance audit, financial statement audit, and/or the Office of the Inspector General (OIG) when there is concern over an institution’s administration of federal student aid programs.

Criterion 9.06: COHORT DEFAULT RATE	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

Institutions must closely monitor student borrowing and implement effective default prevention programs as soon as possible so as not to face Department sanctions for high cohort default rates and lack of administrative capability.

PROGRAMMATIC COMPONENTS

There are no programmatic components for this criterion.

Criterion 9.07: REFUND POLICY	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

Institutions must clearly define, publish, and follow a fair and equitable refund policy for unearned tuition that complies with applicable state and federal laws and regulations.

PROGRAMMATIC COMPONENTS

There are no programmatic components for this criterion.

Criterion 9.08: CAMPUS AND PROGRAM FACILITIES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. Campus facilities must be sufficient to meet the institutional mission, and to support its academic programs, faculty, students, internal and external commitments, and priorities.
- B. General provisions must be made for the cleaning, repair, and maintenance of the institution's buildings and grounds.
- C. Responsibilities for care of grounds, security, fire protection, utilities, and facilities upkeep must be appropriately assigned.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. Program facilities must be sufficient to meet the program’s statement of purpose, and to support its faculty, students, goals and learning outcomes.
 - 1. Clinical facilities must have adequate space and equipment to provide for safe patient care, appropriate maintenance of equipment, storage of supplies and records, intern work areas, and waste management.
- B. The program must ensure provision for cleaning, repair, safety, and maintenance of facilities used by the program.

Criterion 9.09: LEARNING RESOURCES SYSTEM (LIBRARY)	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. An institution’s learning resource system must be sufficient to meet the institution’s mission and support its instructional programs and degree level(s) offered.
- B. The learning resource system must include appropriate materials in sufficient quantity and scope to meet the purpose, goals, and expected student learning outcomes of each program, with particular emphasis on information literacy, and include such elements as: relevant and current texts and periodicals; research journals and databases; standard works of reference; multi-media and/or electronic resources; electronic library resource technologies; and other resource materials necessary to adequately serve the student body.
- C. The learning resource system must be managed by dedicated, qualified personnel with sufficient experience to provide oversight and sufficient availability to support faculty and student access to learning resources.

- D. An institution must have written policies and procedures for the ongoing development of its learning resource system as part of its institutional improvement program.
- E. An institution must demonstrate sufficient support and budgetary allocations for the learning resource system.
- F. The learning resource system must have adequate space and access time, appropriate to the number of potential users.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

- A. The parent institution’s learning resource system must be sufficient to support the program’s purpose, goals, and learning outcomes for the degree level(s) offered.
- B. The learning resource system must include appropriate materials in sufficient quantity and scope to meet the purpose, goals, and expected student learning outcomes of the program, with particular emphasis on information literacy, and include such elements as: relevant and current texts and periodicals; research journals and databases; standard works of reference; multi-media and/or electronic resources; electronic library resource technologies; and other resource materials necessary to adequately serve the student body.
- C. The learning resource system must be managed by dedicated, qualified personnel with sufficient experience to provide oversight and sufficient availability to support faculty and student access to learning resources.
- D. The parent institution must demonstrate sufficient support and budgetary allocations for program-specific resources within the learning resource system.
- E. The learning resource system must have adequate space and access time, appropriate to the number of potential users.

Criterion 9.10: TECHNOLOGICAL RESOURCES	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

Information technology resources must be sufficient to meet the institution’s mission, to support its academic programs, commitments, and priorities.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

Information technology resources must be sufficient to support program delivery, program goals, and expected student learning outcomes.

ACAHM COMPREHENSIVE STANDARDS AND CRITERIA

STANDARD 10: PUBLICATIONS AND ADVERTISING

Criterion 10.01: ACCURACY, HONESTY AND CLARITY OF INFORMATION	1
Criterion 10.02: CATALOG	2

Criterion 10.01: ACCURACY, HONESTY AND CLARITY OF INFORMATION	
Related Policies:	Public Disclosure Policy
References:	

INSTITUTIONAL COMPONENTS

All institutional published materials and electronic media must:

- A. be honest, complete, accurate, and clear.
- B. be readily available to relevant stakeholders.
- C. accurately identify current programs and services where applicable.
- D. accurately list the professional education and credentials of current faculty, guest lecturers, and leadership where applicable.
- E. clearly and accurately differentiate core faculty, faculty, and guest lecturers.
- F. accurately describe employment, career, and licensure opportunities for graduates where applicable.
- G. report the institutional accreditation status and relationship with the Commission using only the language provided by the Commission where applicable.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

All programmatic published materials and electronic media must:

- A. be honest, complete, accurate, and clear.
- B. be readily available to relevant stakeholders.
- C. accurately identify current programs, services, courses, and faculty where applicable.
- D. accurately list the professional education and credentials of current faculty, guest lecturers, and leadership where applicable.

- E. clearly and accurately differentiate core faculty, faculty, and guest lecturers.
- F. accurately describe employment, career, and licensure opportunities for graduates where applicable.
- G. report the institutional accreditation status and relationship with the Commission using only the language provided by the Commission where applicable.

Criterion 10.02: CATALOG	
<i>Related Policies:</i>	
<i>References:</i>	

INSTITUTIONAL COMPONENTS

- A. The institution must publish a catalog or comparable official publication(s).
- B. The institution's catalog or comparable official publication(s) must be made available to current students, prospective students, and the public.
- C. The institution's official publication(s) must honestly and accurately describe the institution's programs.
- D. The institution's official publication(s) must include, but is not limited to, current:
 - 1. mission statement;
 - 2. description of all programmatic offerings;
 - 3. governance structure, including membership of the governing board and, if appropriate, the advisory committee;
 - 4. administrative leadership;
 - 5. opportunities and requirements for financial aid, if applicable;
 - 6. procedures for discipline and/or dismissal for academic or other reasons;
 - 7. grievance procedures for students;
 - 8. non-discrimination policy;
 - 9. available learning and other physical resources.

PROGRAMMATIC COMPONENTS

ALL PROGRAMS

The institutional catalog or official publication(s) that refer to the program must include the program's:

1. statement of purpose and goals;
2. learning outcomes;
3. admissions requirements and procedures;
4. admissions and transfer credit policies;
5. rules and regulations for student conduct;
6. attendance policy;
7. grading policy;
8. satisfactory performance requirements;
9. completion requirements;
10. tuition and fee structures;
11. equitable refund policies;
12. administrative staff and academic leadership;
13. academic calendar;
14. curriculum, including credits and descriptions of each course;
15. schedule of course offerings by academic term;
16. professional education and credentials of program faculty, guest lecturers, and leadership;
 - a) for listed doctoral degrees, designation of the country of origin, other than the U.S., in which the degree is conferred must be listed, e.g., Ph.D. (China), M.D. (China);
 - b) publications and advertising must clearly and accurately differentiate core faculty, faculty, and guest lecturers.
17. information regarding whether completion of the program would be sufficient to meet the requirements for professional licensure or certification, including:
 - a) a list of all states for which the institution has determined that its curriculum meets the state educational requirements for licensure or certification;
 - b) a list of all states for which the institution has determined that its curriculum does not meet the state educational requirements for licensure or certification; and
 - c) a list of all states for which the institution has not made a determination that its curriculum meets the state educational requirements for licensure or certification.

ACAHM Comprehensive Standards – REVISION HISTORY

Date	Criterion	Nature of Revision	Responsible Official/ Approved By
2/20/2024	1.03	Revised and expanded goals for adv. pract. doctoral programs	Commission
2/20/2024	7.02	Changed adv. pract. doctoral program requirement from 650 hours of clinical “experience” to 200 hours of clinical “training”; item F.2 moved from 7.05 to 7.02	Commission
2/20/2024	7.04	Clarified competencies are designated by program not by level of instruction; full revision of adv. pract. doctoral competencies	Commission
2/20/2024	7.05	Adv. pract. doct. program requirement for professional role-modeling deleted and relocated to 7.02.F.2	Commission
2/20/2024	7.08	Changed criterion name from “Clinical Research Projects” to “Capstone Projects”; revised capstone requirements	Commission
2/20/2024	8.02	Changed doctoral program requirement from 10 years to 7 years post approval for majority of faculty (change from “core faculty”)	Commission
2/20/2024	Throughout	Removed DAOM and DAc acronyms for all references to doctoral programs	Executive Director
8/5/2022	3.01	Changed “advisory board” to “advisory committee”	Executive Director
8/5/2022	Throughout	Added “entry-level” to references to professional doctoral programs	Executive Director
7/22/2022	7.02	Added certificate in Asian medical bodywork program requirements	Commission
7/22/2022	7.04	Added certificate in Asian medical bodywork program professional competencies; separated advanced practice doctoral program competencies from entry-level program competencies	Commission
7/22/2022	7.05	Added certificate in Asian medical bodywork program requirements	Commission
1/21/2022	5.02	Added English language proficiency requirements for international applicants for all programs. Removed program-specific language proficiency requirements. Added subcomponent regarding allowance of credits earned through prior learning assessment under DAC program admission requirements.	Commission
11/5/2021	3.05	Removed “ <i>whose principal employment</i> ” from Institutional Component regarding president/CEO	Commission
11/5/2021	5.04	Added “ <i>Credits ... that are earned as a non-matriculated student may not be used to fulfill the corresponding program’s admissions requirements...</i> ”	Commission
11/5/2021	Throughout	Replaced “ACAOM” with “ACAHM.” Replaced terms “Oriental” and “AOM” with “East Asian medicine” and “EAM” where appropriate.	Commission
9/17/2020	7.02	minor, nonsubstantive text edits	Executive Director
9/17/2020	10.02	Updated disclosure requirements for programs leading to professional licensure or certification	Executive Director
5/27/2020	Throughout	Replaced terms “Oriental” and “AOM” with “acupuncture,” “Chinese herbal medicine,” “ACAOM-accreditable,” “with a specialization in Chinese herbal medicine” where appropriate; clarified that “Master’s Level” programmatic components are relevant to certificates; replaced “post-professional” with “advanced practice” for DAOM; replaced “PD” abbreviation with “DAc”	Executive Director
5/27/2020	Introduction	Removed history of standard adoptions (directed to Revision History document); added certificate to master’s-level ACAOM-Accreditable Programs section; added that all distance education must comply with standards	Commission

5/27/2020	2.03	Added "certificates"	Executive Director
5/27/2020	3.04	Added " <i>be stable regarding employee turnover</i> "	Commission
5/27/2020	4.04	Added " <i>Charts must be signed by clinical supervisor(s) and student intern(s).</i> "	Commission
5/27/2020	5.02	Relocated certificate requirements to master's-level; removed outdated English proficiency requirements; revised master's-level program English proficiency requirements	Commission
5/27/2020	5.08	Changed "transcript analysis" to "admissions assessment," changed "credit hour requirements" to "the attainment of master's-level professional competencies"; changed criterion title from "doctorate" to "doctoral"	Commission
5/27/2020	6.02	Added institution/program requirement for distance education to validate student identity	Commission
5/27/2020	6.05	Removed " <i>Methods of assessment must document accomplishment of specified program competencies and course and program learning outcomes for a given educational experience.</i> "	Commission
5/27/2020	7.01	Added components related to credit hour policies and " <i>... comparable for all methods of educational delivery (i.e., distance education).</i> "	Commission
5/27/2020	7.02	certificate in CHM requires 210 hrs clinical training with 200 hrs of herbal internship	Commission
5/27/2020	7.05	Modified clinic observation requirements	Commission
5/27/2020	7.06	Added " <i>credit hours granted</i> "	Commission
5/27/2020	9.10	Added program component reference to " <i>program delivery</i> "	Commission
5/27/2020	10.02	Removed " <i>for listed degrees, the degree granting institution must be listed</i> "	Executive Director
11/13/2019	5.02	Removed speaking score requirements from " <i>PHASED CHANGE TO ENGLISH LANGUAGE PROFICIENCY REQUIREMENTS</i> "	Commission
1/4/2019	1.03	Added DAOM programmatic components	Commission
1/4/2019	5.02	Added DAOM programmatic components	Commission
1/4/2019	5.02	Added native-English countries to education option for language proficiency	Executive Director
1/4/2019	5.03	Added DAOM programmatic components	Commission
1/4/2019	7.02	Added DAOM programmatic components	Commission
1/4/2019	7.04	Added DAOM programmatic components	Commission
1/4/2019	7.05	Added DAOM programmatic components	Commission
1/4/2019	7.08	New criterion added to Comprehensive Standards and Criteria	Commission
1/4/2019	8.02	Added DAOM programmatic components	Commission
12/17/2018	7.02	Added add'l detail re: clinical training hours allocation for PD programs	Executive Director
12/7/2018	9.05	Added Legal and Reg Checklist as a linked reference	Executive Director
12/6/2018	Stand. 6 criteria	Adjusted use of "assessment" and "evaluation" to align with ACAOM Glossary definitions	Executive Director
10/20/2018	5.08	Added corrective language re: foreign training evaluation	Executive Director
10/20/2018	6.04	Specified applicability to master's and PD programs	Executive Director
10/20/2018	Stand. 8 criteria	Updated to incorporate Guest Lecturers	Commission
10/20/2018	10.01	Updated to incorporate Guest Lecturers; clarify published materials to include electronic media	Commission

10/20/2018	10.02	Updated to incorporate Guest Lecturers, clarify published materials to include electronic media	Commission
8/11/2018	4.03	Added privacy requirements for non-Title IV institutions	Commission
8/11/2018	4.04	Added patient privacy requirements for non-Title IV institutions	Commission
8/11/2018	5.02	Added Chinese herbology cert. programmatic components	Commission
8/11/2018	7.02	Added Chinese herbology cert. programmatic components	Commission
8/11/2018	7.04	Added Chinese herbology cert. programmatic components	Commission
8/11/2018	7.05	Added Chinese herbology cert. programmatic components	Commission
8/11/2018	Legal & Reg Checklist	Added info re: human subjects research	Commission
6/11/2018	6.04	Added links to performance data thresholds	Executive Director
5/7/2018	Legal & Reg Checklist	Initial public posting date	Executive Director
5/7/2018	All Criteria	Initial public posting date	Executive Director