

Debate Over Doctoral Proposal Continues

AAOM, ACCREDITATION COMMISSION RESPOND TO CCAOM STATEMENT; ACAOM EXTENDS FEEDBACK DEADLINE

Editorial Staff

Few items have generated as much discussion among members of the acupuncture and Oriental medicine profession as the Accreditation Commission for Acupuncture and Oriental Medicine's (ACAOM) recent proposal regarding the institution of a 4,000-hour doctoral degree as the professional, entry-level standard for licensure and entry into the field of practice. Many of the proposal's details, along with a copy of the commission's doctoral survey, were included in the February 2003 issue of *Acupuncture Today* (*editor's note*: see www.acupuncturetoday.com/archives2003/feb/02acaom.html).

Since the publication of that article, several acupuncture and Oriental medicine organizations have raised issue with the comments made in that article, particularly those of the executive committee of the Council of Colleges of Acupuncture and Oriental Medicine (CCAOM). The following replies were sent by ACAOM and the American Association of Oriental Medicine (AAOM) to *Acupuncture Today* in response to CCAOM's statements in the February issue and are reprinted here for review.

Response to CCAOM's Executive Committee from the American Association of Oriental Medicine January 9, 2003

Dear CCAOM Executive Committee Members:

Your letter to ACAOM dated January 3, 2003, was CC'd: to the AAOM vice-president, Dave Molony, and he forwarded it to me. The letter included a brief cover letter by CCAOM President Lixin Huang, followed by what is titled "Response of CCAOM to *Acupuncture Today* re: ACAOM Doctoral Survey." David M. Sale, JD, LLM, executive director, signed this response. The AAOM has prepared the following response to the executive committee's letter. In the first sentence of your letter, your statement that "The Council of Colleges of Acupuncture and Oriental Medicine believes..." gives the impression that you were speaking unanimously for the Council. In the second sentence of your statement, where you speak of "input from members," there again is the implication of full knowledge by the Council. Later the letter mentions that the executive committee is acting for the full Board, but the overall and final picture is that the entire Council is aware of the letter. For example, in the last paragraph, the words are, "The Council respectfully requests...," rather than "The executive committee, acting as interim Board, requests..."

Several of the member colleges of the CCAOM are also institutional members of the AAOM and, as such, look to us to represent their interests relative to the professional acupuncturists who are their faculty and for which profession they educate their students. A number of these members have called us to complain that a discussion concerning sending this letter was never held with the Council at large, or with the member colleges. The colleges that communicated with us felt very strongly that a poll of their opinions should have been made prior to the publication of such a statement, and that they had been disenfranchised by this unilateral decision of the executive committee of CCAOM. The AAOM Board of Directors feels it is unfortunate that your executive committee letter was released without the consent of the full Council gained after input from all the college members. As the largest professional organization representing the interests of providers of acupuncture and Oriental medicine in this country, the American Association of Oriental Medicine would ask the executive board of CCAOM to clearly respect the independence of the Accreditation Commission. ACAOM cannot be limited by the opinion or position of any other organization as they attempt to gather information from their communities of interest, which they are required to do by the U.S. Department of Education. This is a part of their mandate which must be respected. In fact, we should applaud this demonstration of independence by the ACAOM, as it is what we would expect of an accreditation agency. Indeed, the AAOM as well as the CCAOM are members of the communities of interest who support ACAOM, and we should all provide input constructively within the framework of ACAOM's legitimate attempt to gather information needed to examine current educational standards. It is the strong concern of the current board of the AAOM that any other attempt to forestall such legitimate activity of ACAOM would, at the very least, seem to violate the integrity and independence of ACAOM.

The AAOM hopes that the executive committee of the Council of Colleges will withdraw its letter to *Acupuncture Today* and will take the time to encourage all of the member colleges to respond to ACAOM's survey through the survey process as requested by ACAOM and provide comments and input, representing whatever position each of these members wishes to take, in a manner which permits the data to be analyzed in an intelligent and useful manner.

The Board of Directors of the American Association of Oriental Medicine

Response to CCAOM from the Accreditation Commission for Acupuncture and Oriental Medicine January 14, 2003 $\,$

Based on the Commission's review of the CCAOM executive committee's response to ACAOM's doctoral survey, it is clear that there are a number of inaccuracies contained in that response.

The Commission does not have a current position on the issues raised in its statement and survey. ACAOM's sole intent is to seek feedback and data on the doctoral questions -- questions which have been raised in many venues which are directly relevant to the Commission's functions and responsibilities as an accrediting agency. The ACAOM survey is an initial first step in what will be a lengthy and thoughtful process in evaluating the future role of doctoral education for the profession, and this process will necessarily include the educational, practitioner and other relevant communities of interest. As part of the process, the Commission will be considering followup surveys, focus groups, public hearings, and other means to ensure that the views of all relevant stakeholders in the profession are fully and fairly considered, and will be making public the data from these efforts to ensure that the process is fully transparent. ACAOM is fully committed to the "careful reflection" and "collective planning" urged in the CCAOM executive committee's response to ACAOM's survey. No conclusions will be reached on these issues until all pertinent information has been fully considered, and collaboration with other relevant stakeholders takes place.

The survey is not "premature." The issue of the doctorate as the entry-level standard for practice has come to a head nationally, with a number of states that have been considering regulatory and legislative proposals to increase curriculum requirements for licensure to justify the doctor licensing title. The debate has also been consistently reflected in the newsletters, web sites, and other public statements of national and state associations, as well as in other venues. These developments, along with the U.S. Department of Education requirements that accrediting agencies must be responsive to, and seek feedback from, all of its communities of interest (including educators and practitioners), led the Commission to the conclusion that the time was right for ACAOM to seek preliminary feedback on the future role of doctoral education for the profession. The Commission believes that the timing of this survey is appropriate and justified given the current nature and tenor of the national debates over doctoral training. If any of the stakeholders in the profession need additional time to respond to the survey, that time will be given.

The Visioning Search Task Force (VSTF) process may not prohibit ACAOM from surveying or seeking feedback from the profession. The U.S. Department of Education requires that accrediting agencies be solely responsible for policy decisions that might impact accreditation standards or processes, and may not, consistent with those requirements, abdicate or delegate those responsibilities to other organizations or groups, such as a Visioning Search Task Force. Although ACAOM can and will participate in the Visioning Search Task Force deliberations, as a USDE-recognized accrediting agency, ACAOM cannot be subject to direct or indirect control relative to its policy making decisions by related professional/educational organizations/groups, or even Task Forces. The work of the VSTF and ACAOM must thus remain as entirely separate endeavors, although there can be parallel processes.

The survey is not "misleading or biased." The quotations in CCAOM's response that were excerpted from ACAOM's survey cover letter and doctoral statement were clearly taken out of context. The Commission's statement on ACAOM's willingness to "embrace" a transition to doctoral training was clearly and unambiguously stated in terms of embracing a transition to doctoral education only if there is sufficient support/consensus. Secondly, the Commission's statement clearly indicated that the Commission has not taken a position on the issue of an entry-level doctorate, but rather is merely seeking feedback from the profession on this issue. Thirdly, the survey cover letter which referenced ACAOM's "taking the initiative" and playing a "leadership role" was clearly stated in terms of the Commission's intent to explore (without taking a position) the issue of the future role of doctoral education for the profession. Finally, the CCAOM comment that ACAOM's failure to frame the issue in terms of whether the "masters or the doctorate should be the entry-level standard" constitutes bias is also in error. Educators, practitioners, licensure boards, students, professional organizations, and all other stakeholders in the profession fully understand that Master's-level education is the current entry level standard for practice and licensure. If they didn't understand this prior to reading the ACAOM statement, they would have after reading the statement, which clearly makes this point. Thus, the conclusion in the CCAOM executive committee's response that these comments reflect bias, is clearly in error. Although the CCAOM executive committee's response asserts that the ACAOM's "proposed 10-year transitional period[®] for colleges to offer doctoral training is unrealistic, the Commission has not, in fact, proposed a 10-year transition period. The reference to 10 years in the Commission statement was prefaced by "e.g." ("for example") and thus the length of an actual transition period has not been articulated or proposed by the Commission. The Commission is proposing that a reasonable transition period be established, whether that be 10 years, 15 years, or some other period to allow colleges to restructure their programs without undue disruption.

Contrary to the CCAOM executive committee's response, the Commission fully intends to review the issue with "calm reflection" and "careful collective planning," and there will be no "rush to judgment." As previously noted, the Commission will be conducting a full deliberative process on this issue, will be seeking other data and information, and will take a collaborative approach with other relevant stakeholders in the field in assessing the issues.

Finally, in the absence of any evidence that there are design flaws in the survey, the Commission sees no compelling reasons to withdraw its survey as is urged by the CCAOM's executive committee, and is not inclined to do so. Such action would be inconsistent with U.S. Department of Education requirements that specify that recognized accrediting agencies must not be subject to control or undue influence by other organizations or groups. If the Commission felt that there were serious design flaws that compromised data collection, then the appropriate steps would be taken in terms of survey retrieval.

The Commission believes that rather than challenging ACAOM's right to seek feedback from the profession on questions that have been repeatedly asked relative to the future role of doctoral education for the profession, CCAOM, state and national organizations, and all other stakeholders in the field should join ACAOM in helping to review and assess these critical issues.

Sincerely,

ACAOM Executive Committee

Deadline to Submit Feedback Extended

In related news, the Accreditation Commission has extended the deadline for people to submit their feedback on the Doctoral Survey to April 30, 2003. To access the survey online, visit www.acupuncturetoday.com/news/acaomsurvey.php. Readers may submit their feedback to the commission at the following address:

ACAOM Maryland Trade Center #3 7501 Greenway Center Drive, Suite 820 Greenbelt, MD 20770

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