

New Colleges of Osteopathic Medicine: Steps in Achieving Accreditation

Konrad C. Miskowicz-Retz, PhD
Andrea Williams, MA

The authors outline the process that an educational institution undergoes to obtain accreditation status from the American Osteopathic Association's Commission on Osteopathic College Accreditation (COCA), the body responsible for accrediting the nation's osteopathic medical schools. Progress toward accreditation status is described for the six newest colleges of osteopathic medicine (COMs). In addition, the authors describe how the expansion of a COM's approved class size—whether as a result of planned growth or methodologic changes in educational programming—is considered by US federal administrative regulations a “substantive change” to the institution's mission and programs. Such changes require the review and approval of COCA. Class-size increases for the past decade are detailed.

J Am Osteopath Assoc. 2008;108:121-125

The preparation of an article on predoctoral osteopathic education for *JAOA—The Journal of the American Osteopathic Association* is now in its 20th year.¹ This year marks the beginning of a new approach, however. As of the present issue of the *JAOA*, the Department of Accreditation will use the occasion provided by the *THE JOURNAL*'s annual osteopathic medical education theme issue to address one topic of interest to the profession, to explain key changes in the accreditation process for colleges of osteopathic medicine (COMs) in the United States, and to document approved class sizes during the previous 10 academic years. In the current article, we will focus on the recent growth of new COMs.²⁻⁴

However, we would first like to thank the American Association of Colleges of Osteopathic Medicine (AACOM) for their 12-year collaboration to reduce the administrative burden on COMs through the use of a single annual report instrument.⁵ Likewise, we are pleased that we now have the opportunity to jointly present data from AACOM's much-cited

*Annual Statistical Report on Osteopathic Medicine Education*⁶ in Appendix 2 on pages 170-174.

Establishing a COM: A Multistep Process

Because so many COMs have been established in recent years, some in the osteopathic medical profession may be under the misimpression that it is relatively “easy” to start one.^{2,4} Nothing could be further from the truth.

When an educational institution seeks accreditation from the American Osteopathic Association's Commission on Osteopathic College Accreditation (AOA COCA), the first step required is to submit a request to the Association for **applicant status**. Prospective COMs with applicant status do not have the rights and privileges of accreditation. In addition, this status does not guarantee recognition by AOA COCA at any time in the future.

Applicant status is established when a formal request for evaluation is submitted to COCA by the chief executive officer of the prospective COM. When such a request is received, COCA's assistant secretary sends an application packet to the applicant institution. This packet includes forms, instructions, a schedule of application fees, and a checklist for reference when preparing the official application. To minimize confusion for the general public and the osteopathic medical community, the Commission does not publicly announce entities that have sought applicant status.

The estimated start-up costs for a new COM will vary. Based on recent experiences, typical start-up costs are outlined in *Figure 1*. Start-up costs are dependent on the number of students expected to enroll and the facilities used, including any necessary modifications or new equipment purchases. Other factors that will have an impact on start-up costs include location (urban vs rural), size of faculty and staff, and any legal and consulting fees.

The next step in the accreditation process is **preaccreditation status**. At this point, the applicant COM requests evaluation for preaccreditation from COCA. To obtain preaccreditation status, the institution's chief executive must submit a feasibility study to COCA. This report must include a variety of supporting materials. The feasibility study is reviewed by COCA's chairman, vice-chair, secretary, and assistant secretary.⁷ After this formal review, a team of COCA evaluators conducts an on-site visit to verify the accuracy of the feasibility study. In addition, the applicant COM must be in compliance

From the American Osteopathic Association's Department of Accreditation.

Address correspondence to Konrad C. Miskowicz-Retz, PhD, CAE, Department of Accreditation, American Osteopathic Association, 142 E Ontario St, Chicago, IL 60611-2864.

E-mail: kretz@ostopathic.org

Submitted December 12, 2007; revision received January 4, 2008; accepted January 14, 2008.

Expenditure Category	Estimated Cost (US\$, millions)
<ul style="list-style-type: none"> ■ Escrowed Reserve 150 students per year × 4 years × tuition of \$35,000 per year 	21.000
<ul style="list-style-type: none"> ■ Operating Reserve one quarter of the escrowed reserve 	5.250
<ul style="list-style-type: none"> ■ 1.5 to 2 Years of Operating Expenses \$750,000—\$2,000,000 	2.750
<ul style="list-style-type: none"> ■ Land Purchase 20 acres × \$500,000 per acre 	10.000
<ul style="list-style-type: none"> ■ Building Costs 100,000 square feet × \$200 per square foot 	20.000
Total	59.000

Figure 1. Estimated start-up costs for a new college of osteopathic medicine (COM). All amounts are shown in US dollars (\$). This prototype is neither an average nor a model used by a new COM in the past 10 years. Rather, it has been constructed to approximate costs based on the assumptions for each of the components required to establish a new stand-alone institution for osteopathic medical education.

with requirements and procedures for preaccreditation status during this site visit. In addition to the feasibility study elements, the following standards must be met:

- Standard One: Mission, Goals, and Objectives
- Standard Two: Governance, Administration, and Finance
- Standard Five: Students
- Standard Eight: Prerequisites for Accreditation⁷

With regard to the fifth standard, students, on-site evaluators are especially concerned with the new institution's adherence to standard 5.7:

The applicant COM, and/or its parent institution, must publish policies and procedures regarding student complaints related to accreditation standards and procedures, and must maintain records of the receipt, adjudication, and resolution of such complaints.⁷

This standard is intended to assist institutions in developing their ongoing performance-improvement processes.

After the site visit, the on-site evaluation team produces a report that is then included with the institution's application for preaccreditation status. The complete application is composed of the following three documents:

- feasibility study and supporting materials
- COCA staff review
- COCA on-site evaluation team report

Once the application is complete and forwarded to COCA for review, the Commission makes a decision whether to grant or deny preaccreditation status to the applicant COM. Preaccreditation status is valid for up to 5 years but an annual assessment is prescribed and reviewed by the Commission. During this time, allowable COM activities are circumscribed.⁷ For example, student recruitment and admission is prohibited. Also, applications for admission cannot be accepted from potential students when a COM has preaccreditation status. Activities that are specifically forbidden include:

- advertising to recruit students
- collecting personal information from potential applicants
- scheduling interviews with potential applicants
- initiating the admissions-review process
- soliciting student admission application fees
- offering financial aid advice
- issuing admissions letters⁷

At this time, the COM begins to pursue **provisional accreditation status**. An institution with preaccreditation status has 5 years to attain provisional accreditation status. After 5 years, COCA will terminate the institution's preaccreditation status. Should an institution lose preaccreditation status, it will be permitted to reapply.

Provisional accreditation status is granted by COCA when the applicant COM demonstrates that it meets—or will meet at the time it is scheduled to begin its educational program—all COM accreditation standards that have been established by the Commission.⁷ After provisional accreditation status is granted, the new COM has the full right and privilege of announcing that it has achieved provisional accreditation status, recruiting students, soliciting and accepting student admissions applications, matriculating new students, and offering a program of medical instruction with an approved osteopathic curriculum—while also taking care to note during all these steps that the institution is not yet fully accredited.

To continue provisional accreditation status, the new COM must demonstrate continued compliance with *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*.⁷ In addition, the institution must submit an updated feasibility study no later than 14 months before its intended opening date (Figure 2). The updated feasibility study should provide COCA with information concerning the administration and operation of the COM's intended educational program through the graduation of its first matriculating class. In addition, future development plans, written agreements with clinical sites verifying a sufficient number of clinical positions to accommodate the new COM's

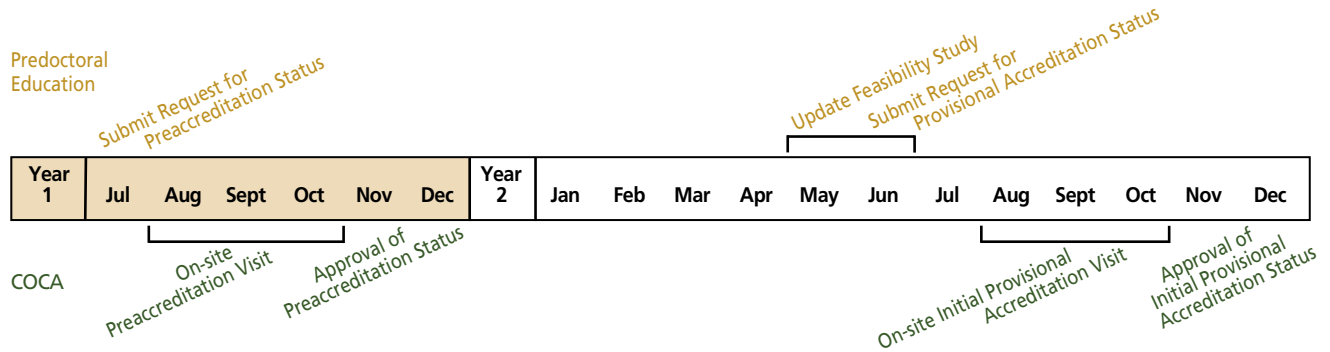


Figure 2. Hypothetical 18-month timetable for evaluation of a new college of osteopathic medicine (COM) from applicant status to preaccreditation status.⁷ This sequence assumes that a COM will begin student recruitment—under provisional accreditation status—in January of year 3 and instruction in August of that year. Accreditation status will be requested during the first entering class’ graduation year (ie, year 6). **Abbreviations:** COCA, Commission on Osteopathic College Accreditation; Predoctoral Education, Department of Education, Division of Predoctoral Education.

entire first class of graduates, and formal affiliation agreements substantiating an adequate number of training positions required by the COM curriculum must be included.

After COCA receives the updated feasibility study and supporting documentation from the new COM, the first provisional on-site visit is scheduled. The team of evaluators then conducts its second visit to this new COM. Their report is presented at a regularly scheduled COCA meeting at least 7 months prior to the school’s opening.

A new COM’s provisional accreditation status is reviewed annually by COCA through on-site visits that are scheduled to parallel the matriculation and academic progress of the COM’s first three graduating classes. The report of the on-site evaluation team is submitted to COCA for review, at which time the Commission determines whether to continue the COM’s provisional accreditation status.

During the inaugural class’ graduation year, an on-site visit is conducted by COCA evaluators to determine whether **accreditation status** can be granted to the new COM. If a COM fails to achieve full accreditation status at this point, COCA will terminate the COM’s provisional accreditation status and this information will be published online at <http://www.osteopathic.org> within 30 days of final action.

Accreditation status—also known as “full” accreditation—is the highest level of accreditation awarded by COCA. Accreditation status grants the institution all of the rights and privileges of accreditation, including establishing an additional location or branch campus.⁷

Once granted, accreditation status is reviewed and renewed on a 7-year survey cycle.⁷ After the results of each on-site visit are reported to the Commission by the COCA evaluation team, the Commission determines if the educational institution has continued to meet all of the standards of accreditation status. After full accreditation status is achieved, the

COM’s status remains (ie, does not expire)—unless it is withdrawn by COCA for lack of compliance.

New COM Development

During the past 10 years, seven institutions have applied for (and received) applicant status from the Division of Predoctoral Education in the AOA’s Department of Accreditation. Subsequently, COCA granted preaccreditation status to each of them.

At publication, six of these institutions have continued in the accreditation pathway and have been granted provisional accreditation status. The full names of the COMs and branch campuses appear with their abbreviations, locations, and dates established in Appendix 1 on pages 167-169 of this issue of the *JAOA*.

In 2001, VCOM was established. This new COM was granted accreditation status by COCA at its April 21-22, 2007, meeting in Chicago, Ill—the location of all meetings noted below. The first matriculating class (n=150) entered VCOM in fall 2003 and graduated last spring.

Three new COMs were established in 2005 with provisional accreditation status granted at COCA meetings in the following calendar year. Each of the following COMs matriculated their first class last fall and looks forward to holding its first graduation ceremony in spring 2011: ATSU-SOMA (n=100), LMU-DCOM (n=150), and TOUROCOM (n=125). Provisional accreditation status was established for ATSU-SOMA and LMU-DCOM on September 9-10, 2006; TOUROCOM on December 9-10, 2006.

Finally, there are two new COMs that are currently preparing to welcome their first entering class this fall, with graduation expected in 2012: PNWU-COM (n=150) and RVUCOM (n=70). Both institutions are operating with provisional accreditation status granted by COCA at their August 25-26, 2007, meeting.

In addition to the six new schools mentioned above, COCA has received communications from several other institutions that are considering establishing a new COM.

Approved Class Sizes

All COMs have an approved class size. Expansions to approved class sizes are considered a “substantive change” under federal regulations⁸ and *Accreditation of Colleges of Osteopathic Medicine*.⁷ As such, any change to a COM’s approved class size requires the review and approval of COCA.⁷

While COMs with accreditation status may request an increase in their approved class sizes, they may also request class size increases to accommodate a specific track or program of instruction (eg, problem-based learning, independent study). In addition, COMs may request COCA’s approval to add new locations and branch campuses.⁷

The Commission grants approved class sizes with the understanding that these institutions do not have complete control over the number of accepted students who will matriculate, as any given individual may be accepted to several COMs but obviously can attend only one.⁹ For this reason, COCA allows a positive 8% variance in the number of new matriculants for a COM’s entering class.⁷

Recent Changes to Approved Class Sizes

A list of COCA-approved class sizes demonstrates that the past 10 academic years have seen an increase in COM approved class sizes from 2743 entering students in 17 COMs to a total of 4207 students in 23 COMs, three of which have a branch campus (*Table*). As was noted earlier, 745 students (51%) of the 1461-student increase were accounted for by the addition of six new COMs. Approval for the remaining 716 students (49%) was the result of class size increases for 11 COMs, including the development of new program tracks and three branch campuses.

Conclusion

There is no escaping the fact that growth of COMs, by several mechanisms, has greatly changed the enterprise of osteopathic medical education in the past decade. The magnitude of this change has evoked sometimes impassioned responses²⁻⁴ to the question: “Is this a good thing for the profession?”

As important as the answer to this question may be to the profession, its resolution currently lies outside the structure of the formal accrediting function, which is charged with making accreditation decisions based on only two questions:

- Are the standards for accreditation being met?
- Are the standards and procedures appropriate for quality osteopathic medical education in the first decade of the 21st century?

References

1. Reich M. Undergraduate osteopathic medical education. *J Am Osteopath Assoc*. 1988;88:1377-1380.
2. Pandeya NK. Colleges of osteopathic medicine [letter]? *J Am Osteopath Assoc*. 2008;108:89-90. Available at: <http://www.jaoa.org/cgi/content/full/108/2/89>. Accessed February 22, 2008.
3. Ajluni PB. Nonprofit and for-profit COMs: investing in the future of osteopathic medicine [letter]. *J Am Osteopath Assoc*. 2007;107:425-426. Available at: <http://www.jaoa.org/cgi/content/full/107/10/425>. Accessed February 22, 2008.
4. Mychaskiw G. COM accreditation: the Flexner Report revisited [letter]. *J Am Osteopath Assoc*. 2007;107:246-247,277. Available at: <http://www.jaoa.org/cgi/content/full/107/7/246-b>. Accessed February 22, 2008.
5. Rayman C. Undergraduate osteopathic medical education. *J Am Osteopath Assoc*. 1996;96:655-660.
6. American Association of Colleges of Osteopathic Medicine. *2007 Annual Statistical Report on Osteopathic Medicine Education*. Chevy Chase, Md: American Association of Colleges of Osteopathic Medicine. In Press.
7. American Osteopathic Association. *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*. Chicago, Ill: American Osteopathic Association; 2007. Available at: https://www.donline.org/pdf/acc_predocomstds.pdf. Accessed March 17, 2008.
8. Substantive change. *Fed Regist*. 1999;64(122):34465-34485. To be codified at 34 CFR §602.22.
9. Levitan T. AACOM projections for growth through 2012: results of a 2007 survey of US colleges of osteopathic medicine. *J Am Osteopath Assoc*. 2008;108:116. Available at: <http://www.jaoa.org/cgi/content/full/108/3/116>.

Table
American Osteopathic Association Commission on Osteopathic College Accreditation:
Approved Class Sizes for US Colleges of Osteopathic Medicine, Academic Years 1998-1999 Through 2007-2008

Medical School/Alternative Learning Programs*	Academic Year†										Current Total
	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	
■ ATSU-SOMA	NA	NA	NA	NA	NA	NA	NA	NA	NA	100	100
■ DMU-COM	205	205	205	205	205	205	205	205	205	205	205
■ KCOM-ATSU	140	140	140	160	160	160	160	160	160	160	160
■ KCUMB-COM	220	220	220	220	220	220	220	250	250	250	250
■ LECOM	...	...	...	...	...	...	...	...	...	...	400
– Lecture-Discussion Pathway	144	144	144	144	144	144	144	144	144	180	...
– Problem-Based Learning Pathway	NA	NA	NA	40	40	40	40	40	40	40	...
– Independent Study Pathway	NA	NA	NA	30	30	30	30	30	30	30	...
□ LECOM-Bradenton	...	...	...	...	...	...	...	...	...	...	...
– Problem-Based Learning Pathway	NA	NA	NA	NA	NA	NA	150	150	150	150	...
■ LMU-DCOM	NA	NA	NA	NA	NA	NA	NA	NA	NA	150	150
■ MSUCOM	185	185	185	185	185	200	200	200	200	200	200
■ MWU/AZCOM	125	125	125	125	140	140	140	140	140	140	140
■ MWU/CCOM	160	160	160	160	160	160	160	160	160	160	160
■ NSU-COM	180	180	180	180	180	200	200	230	230	230	230
■ NYCOM	260	260	260	260	260	260	260	260	260	260	295
– Accelerated Program for Émigré Physicians	40	40	40	40	40	35	35	35	35	35	...
■ OSU-COM	88	88	88	88	88	88	88	88	88	88	88
■ OU-COM	100	100	100	100	100	100	100	100	100	100	100
■ PCOM	250	250	250	250	250	250	250	250	250	250	330
□ GA-PCOM	NA	NA	NA	NA	NA	NA	NA	80	80	80	...
■ PCSOM	60	60	60	60	60	75	75	75	75	75	75
■ PNWU-COM	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
■ RVUCOM	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
■ TouroCOM	NA	NA	NA	NA	NA	NA	NA	NA	NA	125	125
■ TUCOM-CA	60	100	100	125	125	125	125	125	125	125	250
□ TUNCOM	NA	NA	NA	NA	NA	NA	125	125	125	125	...
■ UMDNJ-SOM	75	75	75	100	100	100	100	100	100	100	100
■ UNECOM	115	115	115	115	115	115	115	115	115	115	115
■ UNTHSC/TCOM	115	115	115	115	115	125	125	125	175	175	175
■ VCOM	NA	NA	NA	NA	NA	150	150	150	150	150	150
■ WesternU/COMP	176	176	176	176	176	176	176	176	176	176	206
– COMP Northwest Track	NA	NA	NA	NA	NA	NA	30	30	30	30	...
■ WVSOM	75	75	75	75	75	96	96	96	200	200	200
Total	2773	2813	2813	2953	2968	3194	3499	3639	3793	4204	4204

Summary Statistics

Net Change	NA	70	0	140	15	226	305	140	154	411	...
Percent Change	NA	2.6	0	5.0	0.5	7.6	9.5	4.0	4.2	10.8	...

Max, 400
 Min, 75
 Median, 160
 Mean (SD), 183 (82)

* The full names of the colleges of osteopathic medicine and branch campuses appear with their abbreviations, locations, and dates established in Appendix 1 on pages 167-169 of this issue of *JAOA—The Journal of the American Osteopathic Association*. Alternative learning programs (ie, tracks, pathways) are presented where osteopathic medical schools requested class size increases to accommodate a specific program of instruction (eg, problem-based learning, independent study). Method of study is considered “traditional” where not otherwise specified.

† Year indicates first term of academic year (eg, 1988 indicates 1988-1989 academic year). Current total is the total approved class size for the school's current academic year.

Abbreviation: NA, not applicable.