

COUNCIL ON CHIROPRACTIC EDUCATION®

Consensus Committee Meeting Phoenix, Arizona November 29, 2012

The ad hoc Consensus Committee met at the Double Tree Hotel Airport, Phoenix, AZ from 8:00am-12:00pm on Thursday, November 29, 2012. The following members were present:

Dr. Joseph Brimhall, President, University of Western States
Dr. William Meeker, President, Palmer College of Chiropractic
Dr. Lawrence O'Connor, President, Federation of Chiropractic Licensing Boards
Dr. Keith Overland, President, American Chiropractic Association
Dr. Guy Riekeman, President, Life University
Dr. Stephen Welsh, Secretary-Treasurer, International Chiropractors Association
Dr. Craig Little, Council Chair, Council on Chiropractic Education (Ex-officio)
Dr. Tom Benberg, President, Council on Chiropractic Education (Ex-officio)

Dr. Kate Rufolo, President, Congress of Chiropractic State Associations was unable to attend the meeting but participated remotely and supported the final consensus of the committee.

The charge to the committee was to develop mutually agreeable language for incorporation into the Foreword (Preface) to the CCE accreditation standards that acknowledges the scope of practice and identity of the chiropractic profession.

The committee unanimously agreed to recommend the following draft language be incorporated into the Preface to the CCE Accreditation Standards:

From: Practice primary health care as a portal-of-entry provider for patients of all ages and genders.

To: Practice primary health care as a portal-of-entry provider for patients of all ages and genders focusing on the inherent ability of the body to heal and enhance function without unnecessary drugs or surgery.

Addition of: Focus on neuromusculoskeletal integrity for the purpose of enhancing health and performance.

From: Assess and document a patient's health status, needs, concerns and conditions.

To: Assess and document a patient's health status, needs, concerns and conditions with special consideration of axial and appendicular structures, including subluxation/neuro-biomechanical dysfunction.

The meeting was adjourned.



Dr. Joseph Brimhall, President
University of Western States



Dr. William Meeker, President
Palmer College of Chiropractic



Dr. Lawrence O'Connor, President
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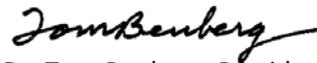
Dr. Kate Rufolo, President
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International Chiropractors Association



Dr. Craig Little, Council Chair
Council on Chiropractic Education



Dr. Tom Benberg, President
Council on Chiropractic Education

Preface (As Amended)

An accredited DCP prepares its graduates to practice as primary care chiropractic physicians, and provides curricular and clinical evidence of such through outcome measures. CCE applies the understanding that in order to competently practice as a primary care chiropractic physician, DCP education trains its graduates to:

- Practice primary health care as a portal-of-entry provider for patients of all ages and genders focusing on the inherent ability of the body to heal and enhance function without unnecessary drugs or surgery.
- Assess and document a patient's health status, needs, concerns and conditions with special consideration of axial and appendicular structures, including subluxation/neuro-biomechanical dysfunction.
- Formulate the clinical diagnosis(es).
- Develop a goal-oriented case management plan that includes treatment, prognosis, risk, lifestyle counseling, and any necessary referrals for identified diagnoses and health problems.
- Follow best practices in the management of health concerns and coordinate care with other health care providers as necessary.
- Focus on neuromusculoskeletal integrity for the purpose of enhancing health and performance.
- Promote health, wellness and disease prevention by assessing health indicators and by providing general and public health information directed at improving quality of life.
- Serve as competent, caring, patient-centered and ethical healthcare professionals and maintain appropriate doctor/patient relationships.
- Understand and comply with laws and regulations governing the practice of chiropractic in the applicable jurisdiction.

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The Requirements for Accreditation for each of the 11 areas noted in Section 2 A. through K. consist of bold-faced language which cites the particular Requirement in overarching terms. This is followed by (1) a Context section that articulates elements related to the Standard that a DCP exhibits to be compliant with the Requirement, and (2) a Characteristics of Evidence section that is intended to guide the DCP as it assembles evidence to demonstrate compliance with all elements of the Requirement. A DCP, at its discretion and where it feels warranted, may provide alternate or other forms of evidence to demonstrate compliance with a particular Requirement.

Two Requirements, G. Student Admissions and H. Educational Program for the Doctor of Chiropractic Degree, refer to CCE Policies that are to be considered as essential components of the Requirements themselves.

Preface

(Showing Amendments)

An accredited DCP prepares its graduates to practice as primary care chiropractic physicians, and provides curricular and clinical evidence of such through outcome measures. CCE applies the understanding that in order to competently practice as a primary care chiropractic physician, DCP education trains its graduates to:

- Practice primary health care as a portal-of-entry provider for patients of all ages and genders **focusing on the inherent ability of the body to heal and enhance function without unnecessary drugs or surgery.**
- Assess and document a patient's health status, needs, concerns and conditions **with special consideration of axial and appendicular structures, including subluxation/neuro-biomechanical dysfunction.**
- Formulate the clinical diagnosis(es).
- Develop a goal-oriented case management plan that includes treatment, prognosis, risk, lifestyle counseling, and any necessary referrals for identified diagnoses and health problems.
- Follow best practices in the management of health concerns and coordinate care with other health care providers as necessary.
- **Focus on neuromusculoskeletal integrity for the purpose of enhancing health and performance.**
- Promote health, wellness and disease prevention by assessing health indicators and by providing general and public health information directed at improving quality of life.
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