Higher education accreditation is rapidly shifting from structure and process evaluations to outcome measurement. As educators are frequently asked to look at their outcomes, so too are the educators' accreditors. In its current regulations, the United States Department of Education (USDE) requires its recognized accreditors to look at student achievement. The AOA Bureau of Professional Education's accreditation standards, under review as of this writing, propose standards to address these student achievement requirements. The AOA Bureau of Professional Education (BPE), as the college of osteopathic medicine (COM) accreditation body recognized by the USDE, and its subordinate committees, the Council on Predoctoral Education (CPE) and the CPE/BPE Joint Committee, believe that student achievement is best examined through performance-based standards and outcome measures. Therefore, over the next 2 to 3 years, the accreditation process will undergo a comprehensive review to ensure the current process emphasizes mission-based accreditation and performance and outcome measures.

In addition to the USDE-required changes, the BPE recognizes the need to become more proactive about accreditation activities, trends, and practices. To do this, the BPE and its subordinate committees plan to pursue various activities over the next few years to ensure that the accreditation standards and procedures accurately measure the quality of the osteopathic medical education provided at the 19 colleges of osteopathic medicine. This article highlights these quality initiatives, which include the comprehensive standards review process, COM standards survey, progress reports, site visits, annual report review process, the COM self-study, the 7-year curriculum, and accreditation training activities.

Accreditation standards remain the benchmark by which the quality of osteopathic medical education is measured. To ensure that the accreditation standards measure the quality of osteopathic medicine education, the BPE will conduct a COM standard survey. This survey will ask respondents about standard clarity and importance and about those standards identified in the 1997 survey as "least clear," as well as questions that have been generated by the osteopathic profession. This survey and the survey conducted in 1997 will become the database from which these review activities will be initiated.

Using the accreditation standards as the measurement tool, the BPE and its subordinate committees use a variety of methods to assess a COM's compliance with the accreditation standards. An essential part of the accreditation process is the on-site evaluation. This takes several forms, depending on the developmental status of the COM: (1) the preaccreditation on-site visit; (2) the annual provisional accreditation on-site visit; and (3) the full accreditation on-site visit that occurs every 7 years. The purpose of these on-site visits is to review the educational institution or program to ensure that the COM is in compliance with the accreditation standards. Depending on the results of that on-site visit, other methods of review may be required. If the site visit evaluation team cited issues that must be addressed, the COM must provide a written progress report. These reports can provide sufficient information to determine whether a requirement is met. Another review method that can be used is the interim progress review, which is an on-site visit usually scheduled to review specific standards that cannot be thoroughly reviewed through a written progress report. The visitation, which is also an on-site visit, is another review method, but its review focuses on specific issues that may or may not be related to a full or provisional accreditation site visit. These interim cycle visits provide assurance to the public that the quality of osteopathic medical education is an ongoing process. Other oversight methods can occur if a COM requests a substantive change to which the BPE can elect to conduct an on-site visit.

In addition to the 7-year accreditation site visit schedule, the BPE requires each school to complete an annual report. Currently this report is a combined activity with the American Association of Colleges of Osteopathic Medicine. The CPE annually reviews portions of that Unified Statistical Report to ensure each COM remains in compliance with the accreditation standards. However, as student achievement and performance and outcome measures are more closely scrutinized, the need for tabular data may not be sufficient. As a result, the CPE has established the Annual Report Process...
Committee to begin looking at the annual report to determine if it continues to provide the information necessary for accreditation activities. This Committee has met once and has agreed to conduct an opinion survey from those who complete the annual survey. The survey instrument will be mailed before the end of 2001.

Another method of measuring compliance with the accreditation standards is the COM self-study. The self-study is the instrument that each COM must develop before either the annual provisional accreditation on-site visit or the full accreditation on-site visit. The BPE provides COMs with guidelines from which to develop a comprehensive self-study. With few exceptions, the completed self-study usually describes, standard by standard, how a COM meets the standards. Although this format has worked well over the years, accreditation activities are focusing more on student achievement through performance and outcome measures, which will require a more comprehensive self-study from each COM. The Committee on College Accreditation Training (CCAT), a standing committee of the CPE, will soon begin to examine the self-study requirements, the preparation guidelines, how COMs complete the self-study, and what information the CPE needs to determine compliance with the accreditation standards. Improvements to the self-study are even more important as the BPE embarks on its comprehensive standards review. The self-study must become a more dynamic self-assessment that provides valuable information, not just for the accreditor, but also for the COM. The self-study as currently completed is a static document and frequently does not reflect the full range of assessment and planning activities conducted by the COM, and it is often perceived by the COM as a hurdle to successfully negotiate in preparation for a full survey on-site evaluation.

The 7-year curriculum is another initiative that will have a profound impact on COMs. It is a philosophical approach toward a continuous, seamless transition from predoctoral osteopathic medical education through postdoctoral osteopathic medical training. This initiative will require the COMs and osteopathic postdoctoral training institutions (OPTIs) to work even more closely together to develop this seamless education. Its goal is to ensure that sufficient osteopathic training programs from third- and fourth-year clinical clerkship positions to AOA-approved intern and residency positions can be readily available to all students. The Executive Committee of the Council on Postdoctoral Training (ECCOPT) composed the first resolution, which was presented to the BPE at its meeting on June 2-3, 2001. The BPE referred the resolution to the CPE for review. The CPE endorsed the concept of this resolution at its teleconference on June 28, 2001, but determined that standards implementation needed more work at a smaller committee level and will defer the 7-year curriculum standards development to the CPE/BPE Joint Committee. This initiative is in its infancy. The osteopathic profession will continue to hear about the 7-year seamless curriculum.

As the COM accreditor, the BPE and its subordinate committees believe that a more concentrated effort to coordinate its accreditation activities and to be more proactive about accreditation trends and practices will better serve the osteopathic medical education community. The BPE will continue to seek feedback from the profession and will encourage and welcome input and advice from its entire constituency throughout these years of change.