The accrediting body for each Program within the School of Pharmacy and Health Professions (SPAHP) requires a policy for handling student complaints in cases where a Program is alleged to be in violation of its accreditation standards. This policy governs only those instances where students allege that one or more accreditation standards have been violated. The accreditation standards for the respective Programs are available at:

- The entry-level Doctor of Occupational Therapy program at Creighton University is accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association, Inc. (AOTA)
  4720 Montgomery Lane, Suite 200
  Bethesda, MD 20814-3425
  Phone: 301-652-6611 x2914
  TDD: 1-800-377-8555
  Fax: 301-652-7711
  [http://www.aota.org/Education-Careers/Accreditation.aspx](http://www.aota.org/Education-Careers/Accreditation.aspx)

- The entry-level Doctor of Pharmacy program at Creighton University is accredited by the Accreditation Council for Pharmacy Education (ACPE)
  190 S. LaSalle Street, Suite 2850
  Chicago, IL 60603-3410
  Phone: (312) 664-3575
  Fax: (866) 228-2631
  [https://www.acpe-accredit.org/](https://www.acpe-accredit.org/)

- The entry-level Doctor of Physical Therapy program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) of the American Physical Therapy Association.
  1111 North Fairfax Street
  Alexandria, VA 22314-1488
  Phone: 703-684-2782
  Fax: 703-684-7343
  [http://www.capteonline.org/Home.aspx](http://www.capteonline.org/Home.aspx)

- The Post-Professional Doctor of Occupational Therapy, the Non-Traditional Doctor of Pharmacy, the Transitional Doctor of Physical Therapy and the Physical Therapy Residency programs are **not** accredited by the specialty accreditation agencies listed above. These programs fall under the Regional Accreditation awarded to Creighton University by the Higher Learning Commission (HLC), a Commission of the North Central Association of Colleges and Schools (NCA).
  230 South LaSalle Street, Suite 7-500
  Chicago, IL 60602-2504
  Phone: 800-621-7440
The faculty, staff, and administration of the SPAHP are committed to maintaining educational programs that meet or exceed accreditation standards. The Occupational Therapy Program, Pharmacy Program, and Physical Therapy Program are committed to correcting those areas where standards are not being met and encourage student participation in assuring that accreditation standards are being adhered to. Students are encouraged to voice and discuss concerns they have about a Program’s adherence to its accreditation standards. In cases where a formal complaint is deemed necessary, established procedures will be followed.

1. Students with complaints alleging that a Program is not adhering to its accreditation standards must present their complaints in writing on an Accreditation Standards Complaint Form at the end of this policy. A complaint must identify the specific accreditation standard that is not being adhered to, include evidence to support the complaint, and be signed by the student(s) making the complaint.

2. Written complaints must be submitted to the Associate Dean for Academic and Student Affairs.

3. The Assistant/Associate Dean in the Office of Academic and Student Affairs will review each complaint and forward it to the respective Department Chair(s). The Department Chair(s) will investigate the complaint, make a determination on the validity of the complaint, determine the appropriate course of action, and provide a written report to the Dean, Senior Associate Dean, Assistant/Associate Dean in the Office of Academic and Student Affairs. The Department Chair(s) will provide a written response to the student(s) making the complaint.

4. Complaints that result in a corrective action will be shared by the Department Chair(s) with the respective program’s faculty.

5. The Assistant/Associate Dean in the Office of Academic and Student Affairs and the Department Chair(s) will maintain a complete file of all complaints received and their disposition. Each accrediting body is to have access to this information as part of its routine accreditation review process.
ACCREDITATION STANDARDS COMPLAINT FORM

Last Name ___________________________ First Name ___________________________

E-mail ___________________________ Phone ___________________________

Program ___________________________

Anticipated Graduation Date ________________

1. Identify the specific accreditation standard(s) that is/are not being adhered to:

2. Provide evidence to support your compliant(s):

Signature(s) ___________________________ Date ___________________________

Submit this completed and signed form to:
Kelly K. Nystrom, Pharm.D., BCOP
(KellyNystrom@creighton.edu)
Acting Assistant Dean for Academic Affairs
School of Pharmacy and Health Professions, Criss Complex
Creighton University
2500 California Plaza
Omaha, NE 68178