

MINUTES

COMMISSION ON DENTAL ACCREDITATION ADA HEADQUARTERS BUILDING, CHICAGO

FEBRUARY 5, 2015 (CLOSED SESSION)

Call to Order: The Chair, Dr. Perry Tuneberg, called a regular meeting of the Commission on Dental Accreditation to order at 10:00 A.M. on Thursday, February 5, 2015, in the Executive Board Room of the American Dental Association Headquarters Building, Chicago, in closed session for the purpose of reviewing educational programs.

Roll Call: Dr. Byron “Pete” Benson, Dr. Patricia Blanton, Dr. Stephen Campbell, Dr. Thomas Cangialosi, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Dr. Milton Glicksman, Dr. Richard Kahn, Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. William Leffler, Dr. Mark Lerman, Dr. Harold Livingston, Dr. William Lobb, Dr. Ana Karina Mascarenhas, Dr. Michael Mills, Dr. William Schindler, Ms. Kathi Shepherd, Dr. James Sherrard, Dr. David Stanton, Ms. Cindy Stergar, Dr. Stanley Surabian, Dr. Ivan Torres-Nazario, Dr. Perry Tuneberg (chair), Dr. Karen West (vice-chair) and Dr. Matthew Wheeler.

Dr. Charlotte Royeen attended a portion of the meeting; Dr. Robert Sherman attended a portion of the meeting by telephone.

Trustee Liaison: Dr. Jeffrey Dow, ADA Trustee Liaison, First District, attended a portion of the meeting by telephone.

CODA Staff: Dr. Sherin Tooks, *ex-officio*, and Ms. Alyson Ackerman, Ms. Cathy Baumann, Dr. Catherine Horan, Ms. Patrice Renfrow, Ms. Peggy Soeldner and Ms. Jennifer Snow were in attendance. Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, was also in attendance.

Adoption of the Agenda: The agenda of the meeting was adopted.

Commissioner Fiduciary Duties and Conflict of Interest Obligations: Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, reminded the Commission of its fiduciary responsibilities and the Conflict of Interest policy.

Policy Reminder of Confidentiality: Dr. Sherin Tooks, CODA Director, read the Commission’s Reminder of Confidentiality, noting the confidential nature of the Commission’s materials and deliberations related to the accreditation of programs.

Accreditation Mail Ballots Since Last Commission Meeting: The Commission approved for the record, four (4) mail ballots related to program accreditation actions, which had been considered since the Summer 2014 Commission meeting.

Consideration of Site Visitor Nominations: Site Visitors are appointed annually for one-year terms but for no more than six (6) consecutive years. Members of the Commission’s Review

Committees are also considered site visitors; they serve one four-year term. The Commission considered the names of individuals recommended by the fourteen (14) Review Committees for a one-year appointment as site visitors for 2015-2016.

The Commission also discussed that some Commissioners do not appear on the site visitor nomination list. The Commission determined that all Commissioners should appear on the site visitor list.

Commission Action: The Commission approves the site visitor appointments for 2015-2016. The Commission further approves addition of all Commissioners to the site visitor appointment list for 2015-2016. (**Appendix 1**)

Consideration of Matters Relating to Accreditation Actions: The Commission reviewed site visit evaluations, progress reports, and other requested reports on predoctoral dental education programs, advanced general dental education programs, advanced specialty education programs, and allied dental education programs.

A special appearance was made before the Commission by an educational program reviewed in the Commission's Report on the Accreditation Statuses of Educational Programs.

Commission Action: Accreditation status was granted to programs evaluated since the Summer 2014 meeting. Accreditation actions are summarized in the "Report on the Accreditation Statuses of Educational Programs" (**Appendix 2**).

New Business:

Use of Outside Information in Review of Programs: The Commission discussed the appropriateness of using outside information not provided by the program when conducting program reviews and deliberations during Review Committee and Commission meetings. The Commission was informed that programs are advised to provide all pertinent and complete information to the Commission for review. The Commission's philosophy is to only review information submitted by the program and to avoid seeking outside information as this information could interject inaccuracies, misinterpretations and bias into the review process. The Commission's process is designed to give the program fair notice of what is being used in making decisions and to allow the program to demonstrate compliance in accordance with due process. Additionally, it was noted that the Commission has a complaint process in which individuals may submit complaints with supporting documentation related to alleged program non-compliance.

Adjournment: The Commission adjourned the closed session at 4:40 P.M.

MINUTES

COMMISSION ON DENTAL ACCREDITATION ADA HEADQUARTERS BUILDING, CHICAGO

February 6, 2015 (OPEN SESSION)

Call to Order: The Chair, Dr. Perry Tuneberg, called a regular meeting of the Commission on Dental Accreditation to order at 8:00 A.M. on Friday, February 6, 2015, in the Executive Board Room of the ADA Headquarters Building, Chicago, in open session.

Roll Call: Dr. Byron “Pete” Benson, Dr. Patricia Blanton, Dr. Stephen Campbell, Dr. Thomas Cangialosi, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Dr. Milton Glicksman, Dr. Richard Kahn, Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. William Leffler, Dr. Mark Lerman, Dr. Harold Livingston, Dr. William Lobb, Dr. Ana Karina Mascarenhas, Dr. Michael Mills, Dr. Charlotte Royeen, Dr. William Schindler, Ms. Kathi Shepherd, Dr. James Sherrard, Dr. David Stanton, Ms. Cindy Stergar, Dr. Stanley Surabian, Dr. Ivan Torres-Nazario, Dr. Perry Tuneberg (chair), Dr. Karen West (vice-chair) and Dr. Matthew Wheeler.

Dr. Robert Sherman attended a portion of the meeting by telephone.

Trustee Liaison: Dr. Jeffrey Dow, ADA Trustee Liaison, First District, attended the meeting by telephone.

CODA Staff: Dr. Sherin Tooks, *ex-officio*, and Ms. Alyson Ackerman, Ms. Cathy Baumann, Dr. Catherine Horan, Ms. Patrice Renfrow, Ms. Peggy Soeldner and Ms. Jennifer Snow were in attendance. Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, was also in attendance.

Adoption of Agenda: The agenda of the meeting was adopted.

Conflict of Interest Statement: Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, reminded the Commissioners of their fiduciary responsibilities and the CODA Conflict of Interest policy.

Accept for the Record the Minutes of the Summer 2014 Meeting: The minutes of the Summer 2014 Commission meeting were accepted for the record. Since the last meeting, the minutes had been approved via mail ballot of the Commission.

Consent Calendar: The following reports in their entirety were placed on the consent calendar and were adopted as received:

- Report of the Review Committee on Dental Assisting Education (**Appendix 3**)
- Report of the Review Committee on Dental Laboratory Technology Education (**Appendix 4**)

- Report of the Review Committee on Dental Public Health Education (**Appendix 5**)
- Report of the Review Committee on Endodontics Education (**Appendix 6**)
- Report of the Review Committee on Orthodontics and Dentofacial Orthopedics Education (**Appendix 7**)
- Report of the Review Committee on Pediatric Dentistry Education (**Appendix 8**)
- Report of the Review Committee on Periodontics Education (**Appendix 9**)
- Mail Ballots Since the Last Commission Meeting
 - a. Dental Laboratory Technology Site Visitor Nomination
 - b. Standing Committee on Nominations, Public Members
 - c. 2014 Summer Commission Meeting Minutes

Report of the Review Committee on Predoctoral Dental Education: Committee Chair: Dr. William Lobb. Committee Members: Drs. Joseph D’Ambrosio, Nicolaas Geur; Liz Kaz, Stephanie Oberhaus, Charlotte Royeen, and Deborah Weisfuse. Guest (Open Session only): Dr. Anthony Palatta, senior director, Educational Program Development, American Dental Education Association (ADEA). CODA Staff: Dr. Catherine Horan, manager, Predoctoral Dental Education and Dr. Sherin Tooks, director, Commission on Dental Accreditation. A one-day meeting of the Review Committee on Predoctoral Dental Education was held at ADA Headquarters in Chicago on January 5, 2015 and continued on January 15, 2015 via telephone conference call.

Consideration of Revision to Standard 5-8 of the Accreditation Standards for Dental Education Programs: The Commission considered the report of the Predoctoral Dental Education Review Committee (PREDOC RC) regarding a proposed change to the Accreditation Standards, which included an addition to Standard 5-8 regarding eye safety. It was noted that federal, state, and local agencies develop guidelines on workplace and clinical safety and the Commission’s standards do not include the level of specificity requested in the proposed change. To ensure succinct language with Predoctoral Standard 5-7, the PREDOC RC recommended the proposed revision as follows (addition is underlined):

- 5-8 The dental school **must** establish and enforce a mechanism to ensure adequate preclinical/clinical/laboratory asepsis, infection and biohazard control and disposal of hazardous waste; consistent with accepted dental practice.

Commission action: The Commission adopts the revision to Standard 5-8 of the Accreditation Standards for Dental Education Programs (noted above), with immediate implementation.

Informational report of the Joint Advisory Committee on International Accreditation (JACIA): The PREDOC RC and Commission considered the report of the JACIA noting that JACIA affirmed its process for established international dental education programs and not developing international programs. The PREDOC RC and Commission learned that JACIA determined the international predoctoral dental education program offered by the *Universidad de la Salle Bajío*, Leon Guanajuato, Mexico has the potential to pursue accreditation and may elect to apply for the Commission’s accreditation process.

Commission action: This report is informational in nature and no action was taken.

Report of the Joint Advisory Committee on Dental Education Information (JACDEI): The Commission reviewed the report of the PREDOC RC related to the JACDEI, particularly the update to the Student Roster survey (Group II Survey). It was learned that the American Dental Association's Health Policy Institute (ADA HPI) is discontinuing the use of the server and application that drives the Student Roster survey and that, in its place, a new data collection effort will need to be developed. The PREDOC RC concurred with JACDEI's conclusion that collection and retention of data on students is important. The PREDOC RC recommended that the Commission support an ADA HPI proposal to collect such data at the level of the dental school and not at the level of the students.

Commission action: The Commission directs that the Student Roster survey (Group II survey) be retained as part of the Commission's Annual Survey.

The Commission further directs that the data of the Student Roster survey be collected in the aggregate, by class, and not at the level of the students.

New Business: Consideration of an Additional Dental Education Member for the Predoctoral Dental Education Review Committee: The Commission considered a request by the PREDOC RC to add an additional member to the Predoctoral Dental Education Review Committee. The request for an additional member was made to address the increased workload of the committee that has resulted from an increase in new programs, increased monitoring of programs particularly related to off-campus sites and increases in enrollment, and monitoring of programs related to the revised accreditation standards. The Commission noted the PREDOC RC's need for another dental educator, with content expertise, bringing the number of dental educators to four (4) or 50% of an eight-member committee.

Commission action: The Commission directs the addition of a dental educator to the Predoctoral Dental Education Review Committee, increasing the size of the Committee from seven (7) to eight (8) members, with the newest member's term initiating in Winter 2016.

Report of the Review Committee on Postdoctoral Dental Education: Committee chair: Dr. Harold "Mark" Livingston. Committee members: Dr. John Coke, Dr. Mahnaz Fatazadeh, Dr. Kenneth Fedor, Dr. Timothy Halligan, Dr. Jeffery Hicks, Dr. Jeffry Shaefer, Mr. David Squire, Dr. Robert Strauss, and Dr. Allen Wong. Dr. Ralph Epstein participated via telephone and Dr. Stephen Dusza did not attend the meeting. Guest (Open Session only): Dr. Anthony Palatta, American Dental Education Association. CODA Staff: Ms. Peggy Soeldner, manager, Postdoctoral General Dentistry Education and Dr. Sherin Tooks, director, CODA. Ms. Cathy Albrecht, senior associate general counsel, attended a portion of the meeting. The meeting of the Postdoctoral General Dentistry Review Committee (PGD RC) was held January 8-9, 2015 in the ADA Headquarters Building.

Consideration of Proposed Revision to Accreditation Standard 1-1 for all Postdoctoral General Dentistry Education Programs (Advanced Education in General Dentistry, General Practice

Residency and Advanced General Dentistry Education Programs in Oral Medicine, Dental Anesthesiology and Orofacial Pain): The Commission considered the report of the PGD RC related to a proposed revision to Standard 1-1 for all postdoctoral general dentistry education programs. In Summer 2014, the Commission directed circulation of the proposed Standard 1-1, for a period of public comment, with an open hearing held at the 2014 American Dental Association Annual Meeting. The Commission noted that comments received were supportive of the revision; therefore, the PGD RC recommended immediate adoption of the proposed change to Standard 1-1.

Commission action: The Commission adopts the revision to Standard 1-1 of the Accreditation Standards for Advanced Education Programs in General Dentistry and General Practice Residency, and Advanced General Dentistry Education Programs in Dental Anesthesiology, Oral Medicine and Orofacial Pain found in **Appendix 10**, with immediate implementation.

Informational Report on Conduct of Validity and Reliability Study for Accreditation Standards for Advanced General Dentistry Education Programs in Orofacial Pain: The Commission learned the Accreditation Standards for Advanced General Dentistry Education Programs in Orofacial Pain, which were adopted by the Commission in July 2009 and implemented in January 2010, are due for a validity and reliability study. The study will include input from the broad communities of interest. It is anticipated that a report with results of the study will be available for consideration by the PGD RC and Commission at their Summer 2015 meetings.

Commission action: This report is informational in nature and no action was taken.

Report of the Review Committee on Dental Hygiene Education: Committee chair: Ms. Kathi Shepherd. Committee members: Dr. Carolyn Breen, Ms. Michele Carr, Dr. Ellen Grimes, Ms. Karen Haldemann, Ms. Carolyn Jackson, Dr. James Jones, Ms. Sri Koduri, Ms. JoAnn Nyquist, Mr. Alan Rogalski, and Commission Chair, Dr. Perry Tuneberg. Guests (Open Portion Only): Ms. Pamela Steinbach, director, Education and Research, American Dental Hygienists' Association, and Ms. Tami Grzesikowski, senior director, Allied Dental Education, American Dental Education Association attended the policy portion of the meeting. Commission Staff: Ms. Patrice Renfrow, manager, Allied Dental Education, Mr. Aaron Pinkston, senior project assistant, Allied Dental Education, CODA. Dr. Sherin Tooks, director, CODA, attended portions of the meeting. The meeting of the Review Committee on Dental Hygiene Education (DH RC) was held January 7-8, 2015 at the ADA Headquarters Building.

Consideration of Dental Hygiene Standard 2-1: The Commission considered the report of the DH RC related to a proposed revision to Standard 2-1. The Commission noted Standard 2-1 requires two-year institutions to grant an associate degree and four-year institutions to grant an associate degree, certificate, or baccalaureate degree. A subcommittee of the DH RC considered this standard and proposed revisions to the DH RC that would provide appropriate clarification of degree award for both two- and four-year programs. Additionally, the DH RC proposed a revision to the Definition of Terms, with the addition of "post-degree certificate". The DH RC recommended to the Commission a one year implementation period to allow sufficient time for programs to modify related institutional and program documentation and policies.

Commission action: The Commission adopts revisions to Dental Hygiene Standard 2-1 (**Appendix 11**) and the addition of “post-degree certificate” to the Definition of Terms (**Appendix 12**), with implementation January 1, 2016.

New Business: Consideration of Proposed Dental Hygiene Standard 2-18: The Commission considered a proposed revision to Standard 2-18 submitted by the DH RC. The DH RC believed that the existing Standards provide inadequate oversight for programs in states that allow graduates of CODA-accredited programs to perform skills and functions not specified within the existing Standards. The DH RC and Commission noted that currently there is no oversight over content not required by the standards; therefore the DH RC believed a new standard to address state-specific skills and functions is warranted at this time. The DH RC also believed that if graduates of a CODA-accredited program are permitted to perform skills and functions not specified within the standards, that programs should provide content in the skills/functions at the level, scope and depth required by the state. The Commission discussed the variance among states related to delegable duties for dental hygienists and also noted that a similar standard currently exists in the dental assisting standards.

Commission action: The Commission directs that proposed Dental Hygiene Standard 2-18 (**Appendix 13**) be circulated to the communities of interest for review and comment for a period of six months, with Hearings conducted at the 2015 annual meetings of the American Dental Education Association (ADEA) and American Dental Hygienists’ Association (ADHA), with comments reviewed at the Commission’s Summer 2015 meeting for consideration of adoption with potential implementation in January 2016.

New Business: Consideration of Proposed Revisions to Dental Hygiene Standards 3-6 and 3-7, b: The Commission considered proposed revisions to Dental Hygiene Standard 3-6 and 3-7b to provide greater clarity and interpretation, and enhance compliance. Since the proposed revisions were considered minor modifications, the DH RC recommended CODA immediately adopt the proposed changes.

Commission action: The Commission adopts revisions to Dental Hygiene Standards 3-6 and 3-7b (**Appendix 14**) with immediate implementation.

Report of the Review Committee on Oral and Maxillofacial Pathology Education:

Committee Chair: Dr. Mark Lerman. Committee Members: Dr. Frank Kratochvil, Dr. Leslie Roeder, and Dr. Kurt Summersgill. Dr. Matthew Wheeler was unable to participate in the meeting. Guests (Open Portion Only): Dr. Evelyn Lucas-Perry, director of public policy research, American Dental Education Association (ADEA) and Ms. Janet Svazas, executive director, American Academy of Oral and Maxillofacial Pathology (AAOMP). Staff Members: Ms. Catherine Baumann, manager, Advanced Specialty Education, CODA. The meeting of the Review Committee on Oral and Maxillofacial Pathology Education (OMP RC) was held via telephone conference call on Thursday, January 8, 2015.

New Business: Policy on Non-Enrollment of First Year Students: The Commission considered a request from the OMP RC to revise the Commission’s Policy on Non-Enrollment of First Year

Students. In particular, due to the sparse enrollment in oral and maxillofacial pathology programs, there was a concern that the current wording of the policy could pose challenges for developing programs. It was noted that five (5) of the sixteen (16) currently accredited oral and maxillofacial pathology programs do not have first year enrollment, which is not uncommon for programs in this discipline.

The OMP RC proposed the following revision (underline indicated addition):

Policy on Non-Enrollment of First Year Students

The accreditation status of programs within the purview of the Commission on Dental Accreditation will be discontinued when all first-year positions remain vacant for two (2) consecutive years. Exceptions to this policy may be made by the Commission for programs with “approval without reporting requirements” status upon receipt of a formal request from the institution stating reasons why the accreditation of the program should not be discontinued. Exceptions to this policy may also be made by the Commission for programs in Oral and Maxillofacial Pathology with “initial accreditation” status upon receipt of a formal request from the institution stating reasons why the accreditation of the program should not be discontinued. If the Commission grants an institution’s request to continue the accreditation of a program, the continuation of accreditation is effective for one (1) year. Only one request for continued accreditation will be granted for a total of three (3) consecutive years of non-enrollment. See the Commission’s policies related to Initial Accreditation, Intent to Withdraw Accreditation and Termination of Educational Programs for additional information.

A motion was made and failed, which would allow programs with the status “approval with reporting requirements” to be included in the policy. It was noted that programs “with reporting requirements” must demonstrate compliance with the standards within a maximum of two years or accreditation is withdrawn; therefore, no program with this status would be eligible for a third year of non-enrollment. A second motion was made and failed, which would include all specialties in the revised exemption language. Following discussion, the Commission considered the proposed change submitted by the OMP RC.

Commission action: The Commission adopts revision to the Policy on Non-Enrollment of First Year Students, as noted above, with immediate implementation.

Report of the Review Committee on Oral and Maxillofacial Radiology Education:

Committee Chair: Dr. Byron “Pete” Benson. **Committee Members:** Dr. Neila Afonso, Dr. Charles Massler, and Dr. Vijay Parashar. Dr. Debra Gander was unable to participate in the meeting. Dr. Sanjay Mallya substituted as needed for discipline specific program review. **Guests (Open Portion Only):** Dr. Evelyn Lucas-Perry, director of public policy research, American Dental Education Association (ADEA). **Staff Members:** Ms. Catherine Baumann, manager, Advanced Specialty Education, CODA. The meeting of the Review Committee on Oral and Maxillofacial Radiology Education (OMR RC) was held via telephone conference call on Monday, January 5, 2015.

New Business: Commission on Dental Accreditation (CODA) Annual Survey: The Commission considered the report of the OMR RC, noting recommendations on Review Committee involvement in development of the Annual Survey prior to distribution to the accredited programs. Through personal experience, members of the OMR RC believed that portions of the

curriculum section of the Annual Survey included redundant questions or questions that appeared to not be mutually exclusive with no guidance on the type of information being sought. The Review Committee expressed concern regarding what information was collected in the curriculum survey and the reliability for use of the information.

The Commission discussed the recommendations of the OMR RC, noting that current process for review of the Annual Survey includes review by the Review Committee Chair and staff consultation with the Health Policy Institution staff of the American Dental Association, which manages survey distribution and data collection on behalf of the Commission. The survey serves as a continuous monitoring mechanism of the Commission; staff follows up with programs related to reported information that requires further consideration by the Commission. All survey data is considered confidential at the programmatic level. Based upon this discussion, the original recommendations of the OMR RC were modified to request that each Review Committee have an opportunity to review the Annual Survey Curriculum Section during the Winter Review Committee meeting in the year in which the survey will be distributed, and that aggregate data of the curriculum survey be provided to Review Committees as an informational report when available.

Commission action: The Commission directs that each Review Committee review a draft of its discipline-specific Annual Survey Curriculum Section during the Winter meeting in the year in which the Survey will be distributed.

The Commission further suggested to staff that each Review Committee review aggregate data of its discipline-specific Annual Survey Curriculum Section when the materials are available following data collection and analysis.

Report of the Review Committee on Oral and Maxillofacial Surgery Education: Committee Chair: Dr. David Stanton. Committee Members: Drs. Jeffery Bennett, Alan Herford, Steven Lepowsky, and Vincent Perciaccante; and Ms. Cindy Stergar. Dr. Paul Tiwana participated via telephone conference call (substitute as needed for discipline specific program review). Guests (Open Session Only): Drs. Douglas Fain, Brett Ferguson, William Nelson and Louis Rafetto and Ms. Mary E. Allaire-Schnitzer, American Association of Oral and Maxillofacial Surgeons (AAOMS); Mr. Lance Hoxie, American Board of Oral and Maxillofacial Surgery (ABOMS); Mr. Matthew Mikkelsen, manager, Educational and Organizational Surveys, Health Policy Institute, American Dental Association; and Dr. Anthony Palatta, American Dental Education Association (ADEA). Staff Members: Ms. Jennifer E. Snow, manager, Advanced Specialty Education, and Dr. Sherin Tooks, director, Commission on Dental Accreditation (CODA). Ms. Cathryn Albrecht, legal counsel, CODA, attended a portion of the meeting. The meeting of the Review Committee on Oral and Maxillofacial Surgery Education (OMS RC) was held at the ADA Headquarters Building on January 6, 2015.

Consideration of Revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery: The Commission considered the report of the OMS RC related to proposed revisions to the Accreditation Standards, specifically revisions to Standard 1, Affiliations, which is common to all specialties, and OMS Standard 4-8, Minimum Clinical Requirements Outpatient Oral and Maxillofacial Surgery Experience be adopted and implemented, as well as the deletion of OMS Standard 4-8.2 regarding

minimum number of outpatient visits per year for each authorized final year position. The proposed revisions were circulated for a period of one year for review and comment by the Commission's communities of interest. Written and hearing comments received were considered at this meeting.

Commission action: The Commission on Dental Accreditation adopts revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery, including revision to Standard 1, Affiliations, which is common to all specialties, and OMS Standard 4-8, Minimum Clinical Requirements Outpatient Oral and Maxillofacial Surgery Experience and delete Standard 4-8.2 (**Appendix 15**) with implementation July 1, 2015.

Consideration of Revisions to the Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery: The Commission considered the report of the OMS RC related to proposed revised Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery (OMS-CF), specifically new standards regarding microvascular reconstructive surgery and endoscopic maxillofacial surgery and revision to OMS-CF Standard 6-4.3.2 related to the Pediatric Advanced Life Support (PALS) requirement. The proposed revisions were circulated for one year, for review and comment by the Commission's communities of interest, with comment reviewed at this meeting.

Commission action: The Commission on Dental Accreditation adopts revisions to the Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery, including the new standards regarding microvascular reconstructive surgery and endoscopic maxillofacial surgery and revision to Standard 6-4.3.2 related to the Pediatric Advanced Life Support (PALS) requirement and the noted editorial and formatting changes (**Appendix 16**), with implementation July 1, 2015.

Informational Report of the Subcommittee of the Review Committee on Oral and Maxillofacial Surgery Education to Consider Feasibility of Adding a New Procedure Log to the Existing CODA Annual Survey for Oral and Maxillofacial Surgery Programs: The Commission reviewed an informational report of the OMS RC related to its progress toward enhancing the Commission's Annual Survey for oral and maxillofacial surgery education programs. The OMS RC identified several edits that will be made to the annual survey but is postponing action on most revisions in light of pending changes to the oral and maxillofacial surgery accreditation documents. It was identified that revision of the Commission's accreditation documents that support the Accreditation Standards is warranted to enhance alignment of the documents with the Standards. Additionally, the OMS RC noted that the interface between the CODA Annual Survey and the developing AAOMS resident log will require continued discussion and planning. With the changes made thus far to the Annual Survey as noted in the OMS RC's report and plans to revise the accreditation documents in support of the standards, the OMS RC believed the work of the Subcommittee was completed and the remaining effort to align the accreditation documents could be completed by Commission staff with the OMS RC, with a report to the Commission when additional information on updates to the CODA Annual Survey is available.

Commission action: This report is informational in nature and no action was taken.

Informational Report on the Conduct of Validity and Reliability Studies for the Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery: The Commission learned the Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery, which were adopted by the Commission in January 2007 and implemented in July 2007 are due for a validity and reliability study. The study will include input from the broad communities of interest. It is anticipated that a report with results of the study will be available for consideration by the OMS RC and Commission at their Summer 2015 meetings.

Commission action: This report is informational in nature and no action was taken.

New Business: Informational Consideration of Reporting Apprentice/Preceptor/Internship Programs as a Report of Program Change: The OMS RC discussed the impact that unaccredited apprentice/preceptor/internship programs may have on Commission-accredited programs. The Committee noted that in July 2014 the Review Committees were asked to consider whether the Commission's Policy on Reporting Program Changes in Accredited Programs should be revised to include the reporting of apprentice/preceptor/internship programs as changes that require Commission review as it relates to the impact on an accredited program in the same discipline. Following discussion, the OMS RC reiterated that apprentice/preceptor/internship programs are an enhancement to oral and maxillofacial surgery resident education; therefore, the OMS RC would be opposed to required reporting of the impact of apprentice/preceptor/internship programs on Commission-accredited oral and maxillofacial surgery programs.

Commission action: This report is informational in nature and no action was taken.

Report of the Review Committee on Prosthodontics Education: Committee Chair: Dr. Stephen Campbell. Committee Members: Dr. Julie Holloway, Dr. Martin Rutt, Capt. Robert Taft, and Dr. James Sherrard. Dr. David Felton was unable to participate in the meeting. Guests (Open Portion Only): Dr. John Agar, immediate past president, American College of Prosthodontists (ACP), Ms. Nancy Deal Chandler, executive director, ACP, and Dr. Anthony Palatta, senior director for educational program development, American Dental Education Association (ADEA). Staff Members: Ms. Catherine Baumann, manager, Advanced Specialty Education and Ms. Sheron Parkman, senior project assistant, (CODA). Dr. Sherin Took, director, CODA, Dr. Perry Tuneberg, chair, CODA, and Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel attended a portion of the meeting. The meeting of the Review Committee on Prosthodontic Education (PROS RC) was held via telephone conference call on Wednesday, January 7, 2015.

Consideration of Proposed Revisions to the Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics: The Commission reviewed the report of the PROS RC related to the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics. The PROS RC considered the proposed standards at their Winter 2015 meeting along with documentation received from the American College of Prosthodontists (ACP), which included proposed revisions and were submitted in response to the Commission's Summer 2014 action to not approve the proposed standards. It was noted that the PROS RC made several changes to the proposed standards in regard to Standard 4-1, 4-11, 4-14,

4-16, and 4-22. The Commission discussed the PROS RC's proposed standards, noting the changes and the rationale for each change. It was reported to the Commission that a majority of prosthodontic programs currently educate students/residents in the placement of implants and general dentists may also perform this clinical procedure. The Commission was informed that for the past 10 years, prosthodontics has included placement of implants in its parameters of care; further, the prosthodontics specialty board examines individuals on this procedure for board certification. The PROS RC believed that the standards should reflect what is currently occurring so that programs are held accountable to the Accreditation Standards.

A substitute motion was submitted to postpone definitely, until the Summer 2015 Commission meeting, the review of the prosthodontic standards, with immediate circulation to the communities of interest. It was believed that the documentation received from the ACP included external letters of support from program directors and may have unfairly excluded some communities of interest from an opportunity to comment since the proposed standards were not under a period of circulation for comment. The Commission was informed that the letters received were part of the ACP submission and presumably letters of support that had been obtained by the ACP in relation to the document submitted to CODA. It was also identified that the Commission staff must submit to the appropriate committee any materials received within the Commission office and that it is within the committee's or Commission's purview to determine whether the documentation should be considered.

Some Commissioners believed the changes made by the PROS RC do not address the concerns raised in prior meetings related to program length and competence in surgical placement of implants. It was identified that Standard 4-12 was corrected; however, Standard 4-13 still lists medical emergencies and pain control and sedation as taught to the understanding level, Standard 4-14 only adds referral but is still taught at the understanding level, Standard 4-11 does not include surgical anatomy, which is applied anatomy, and does not include the management of surgical complications or medical emergencies, and relative to time there is a belief by some Commissioners that the program should include an additional one year of training to provide training to the level of surgical competence, although prosthodontics only added one month of training to the standards noting that laboratory time has been reduced in its programs.

Following lengthy discussion the substitute motion passed.

Commission action: The Commission directs the proposed Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics be circulated to the communities of interest for review and comment until June 1, 2015, with a hearing at the 2015 American Dental Education Association (ADEA) annual session, with comments reviewed at the Commission's Summer 2015 meetings.

Miscellaneous Affairs- Consideration of Matters Relating to More than One Review Committee

Informational Report on Review Committee and Commission Meeting Dates: The Commission reviewed the meeting dates of the 2015 to 2016 meetings. The Commission noted

that the Predoctoral Dental Education Review Committee may meet on two days as needed depending upon workload.

Commission action: This report is informational in nature and no action was taken.

Reminder of Professional Conduct Policy and Prohibition Against Harassment: The Commission reviewed the Association's policy on professional conduct and prohibition against harassment.

Commission action: This report is informational in nature and no action was taken.

Consideration of Resolutions Adopted by the ADA House of Delegates and the ADA Board of Trustees Related to the Commission on Dental Accreditation and Dental Education: The Commission reviewed the American Dental Association's (ADA) House of Delegates resolutions related to education and the Commission. Resolutions 1H and 2H included revisions to the Commission's *Rules* and ADA's *Duties* of the Commission on Dental Accreditation, respectively. Additionally, Resolution 3H included an addition to the ADA *Bylaws* giving the Commission on Dental Accreditation authority to make editorial corrections to its *Rules*.

Commission action: This report is informational in nature and no action was taken.

Consideration of Proposed Revision to the Advanced Specialty Education Standard 1 Related to Institutional Sponsorship:

Commission action: See report of the Standing Committee on Documentation and Policy Review elsewhere in this document.

Miscellaneous Affairs- Matters for the Commission as a Whole

Report of the Standing Committee on Finance:

Review of Shared Services (Indirect Expenses): The Finance Committee reported to the Commission that the CODA and ADA staff conducted an analysis of the shared services (indirect expenses) which indicated that if shared services expenses are calculated on actual usage of the services, there is a significant decrease in expenses compared to using the standard formula of 37.5% of direct expenses. The Finance Committee believed shared services should be adjusted on an annual basis prospectively based upon the Commission's actual expenses. Further, as discussed during the Summer 2014 meeting, the Finance Committee believed the Commission should monitor direct and indirect expenses and discuss retention of year-end revenue as part of its operating budget, once the Commission can fund both direct and indirect expenses.

Commission action: The Commission directs that shared services (indirect expenses) be calculated based on actual expenses, on an annual basis, prospectively within the Commission's budget beginning in 2015.

CODA Self-Assessment Directive: The Finance Committee reported on its review of the *Duties* and *Rules* of the Commission, noting that the American Dental Association's *Bylaws* stipulate one duty of the Commission is to submit the Commission's annual budget to the Board of Trustees of the American Dental Association. The Finance Committee believed the Commission may want to review this duty as it moves to a self-sufficient budget model. The Finance Committee believed that the budget oversight process of the ADA related to the Commission's annual budget should be discussed at the next ADA/CODA Workgroup meeting, with an update to CODA in Summer 2015.

Commission action: The Commission directs CODA Staff and CODA representatives on the ADA/CODA Workgroup to bring before the Workgroup the topic of ADA oversight of the Commission's budget, with a report on the Workgroup's deliberations of this topic for review by the Finance Committee and Commission in Summer 2015.

Potential Revenue Sources:

Charge-Back to ADA for Services Provided by CODA: The Finance Committee reported that the ADA/CODA Workgroup discussed the Joint Advisory Committee on International Accreditation (JACIA), noting that 0.6 full-time equivalent (FTE) Commission staff supports the work of this committee. The Finance Committee and Commission believed further discussion by the ADA/CODA Workgroup was warranted to determine whether the Joint Advisory Committee may be best identified as a committee of CODA or whether CODA should charge back to the ADA the expense of 0.6 FTE support provided to this committee, with a report to the Finance Committee and CODA in Summer 2015.

Commission action: The Commission directs that CODA Staff and CODA representatives on the ADA/CODA Workgroup bring before the Workgroup the topic of the Joint Advisory Committee on International Accreditation, particularly related to 0.6 FTE CODA staff resources that are expended in support of the Joint Advisory Committee's activities and impact to CODA's budget and resources with a report on the Workgroup's deliberations of this topic for review by the Finance Committee and Commission in Summer 2015.

Re-Consideration of the "Seat Fee": The Finance Committee reported its recommendation on the concept of a "seat fee," noting that the committee continued to have reservations related to the ability of some groups to pay the fee, based upon a large disparity among groups represented on the Commission with regard to size of the sponsoring organization, number of programs, and other factors. The Commission concurred with this assessment.

Commission action: The Commission directs that a "Seat Fee" for the Commission not be pursued at this time.

Implementation of a Late Fee for Invoices Not Paid by the Discipline: The Finance Committee reported on its discussion related to the concept of late fees. The Committee believed that imposing a late fee to programs would impact staff resources to manage the late fee process and was not a good use of Commission resources. Further, the Finance Committee believed, and the

Commission concurred, that implementing a minimal late fee could be perceived as “nickeling and diming” programs, which could create ill will among accredited programs. It was identified that late payments may be due to online payment processing systems or internal processes that are outside the control of the program. The Finance Committee recommended and the Commission agreed that a late fee should not be imposed at this time.

Commission action: The Commission directs that late fees to programs that are delayed in paying invoices not be pursued at this time.

Potential Revision of Annual Fee Model Based Upon: Number of Off-Campus Sites: The Commission considered the Finance Committee’s report on potential revision to the annual fee model based upon a number of factors such as 1) program size and number of enrollees, 2) number of off-campus sites, and 3) an analysis of specific resources required to support activities of the discipline. The Finance Committee believed that of these options, the establishment of a fee model based upon number of off-campus sites necessitated further consideration. However, the Committee noted that annual survey data lacked sufficient detail related to the number of sites and location of these sites used by programs. The Committee believed the Commission should direct staff to collect data on the number of programs with off-campus sites and the number of sites used by each program, the number of students rotating to off-campus sites, the location of the off-campus sites, the purpose of the sites (observational versus mandatory and clinical versus didactic) and staff time commitment to oversee off-campus sites. Following data collection and analysis, the Committee will be better able to determine whether oversight of off-campus sites creates a financial hardship for the Commission and whether the Commission’s fees should be adjusted based on program utilization of off-campus sites.

Commission action: The Commission directs CODA staff to conduct a mandatory survey of all accredited programs to collect data on the use of off-campus sites, including but not limited to the number of programs with off-campus sites and the number of sites used by each program, the number of students rotating to off-campus sites, the location of the off-campus sites, and the purpose of the sites (observational versus mandatory and clinical versus didactic);

further, the Commission directs CODA staff to gather data on staff time and resources necessary to oversee programs with off-campus sites;

and further, the Commission directs that these data be considered by the Finance Committee and Commission at a future meeting as it relates to the Commission’s annual budget.

Standing Committee on Quality Assurance and Strategic Planning (QASP) Comment on Consulting Services for Finance Committee Review: In its work to further develop a definition or scope of work for consulting services, the QASP committee submitted to the Finance Committee comments related to the policy on Staff Consultation Services. The Committee agreed with the policy, which outlines the required reimbursement of costs related to staff consulting services to US-based and international programs. The Finance Committee recommended to the Commission that in addition to all expenses for travel as dictated by current policy, a consulting

fee of \$10,000 paid in US dollars should be assessed for international consulting services for travel outside the United States. The Committee believed this revenue should be placed in the Commission's Research and Development Fund. The Commission concurred with this recommendation and further believed that the Commission should request through the ADA/CODA Workgroup and ADA Board of Trustees that the fees associated with international consulting be deposited in the Commission's Research and Development Fund.

Commission action: The Commission adopts, with immediate implementation, a \$10,000 consultation fee for international consultation services, paid in US dollars.

Commission action: The Commission directs that through the ADA/CODA Workgroup and ADA Board of Trustees, the Commission request that fees collected for international consultation services be deposited into the Commission's Research and Development Fund.

Annual Fee and Application Fees: The Commission reviewed the Finance Committee's report on annual fees and application fees, noting that the proposed 4% increase in 2016 annual fees will result in a projected revenue covering 122% of the Commission's direct expenses and 94% of its total expenses. A 4% increase in annual fees would result in a fee of \$6,740 for predoctoral dental education programs, \$1,685 for dental assisting, dental hygiene, and advanced dental education programs, and \$1,186 for dental laboratory technology programs. The Finance Committee also recommended to the Commission that the application fees to predoctoral dental education programs increase from \$50,000 to \$60,000; however, all other application fees should remain the same as 2015, \$15,000.

Commission action: The Commission adopts the following accreditation fees for 2016:

- Annual fee: \$6,740 for predoctoral dental education programs, \$1,685 for dental assisting, dental hygiene, and advanced dental education programs, and \$1,186 for dental laboratory technology programs.
- A doubling of the annual fee during the year a program is due for a regular accreditation site visit.
- Application fee: \$60,000 for predoctoral programs and \$15,000 for all other dental programs.

International Fees: The Commission considered the Finance Committee's recommendations related to fees for international predoctoral dental education programs, noting the proposed increases for 2016.

Commission action: The Commission adopts the following international predoctoral accreditation fees and policies for 2016:

- Application fee: \$65,000 for international predoctoral dental education programs
- Annual fee: \$15,000 for international predoctoral dental education programs
- International predoctoral dental education programs pay all site visit expenses (actual expenses) for all site visits during the application and regular site visit schedule.

- International predoctoral dental education programs pay an administrative fee of 25% of the total site visit cost for coordination of each site visit.
- International fees must be paid in U.S. Dollars.

Other Accreditation Fees: The Commission discussed several additional fees that may be assessed to programs, including the R & D Fund administrative fee, special focused site visit administrative fee, the HIPAA policy violation fee, the electronic conversion of paper documents fee, and the email/contact distribution fee.

Commission action: The Commission adopts the following additional fees for 2016:

- Special Focused Site Visit Administrative Fee: \$4000.
- CODA Penalty for Non-Compliance with CODA Policy on HIPAA Fee: \$1000.
- Electronic Conversion of Paper Documents Fee: \$500
- Email/Contact Distribution List Fee: \$200 minimum.
- Research and Development Fund Administrative Fee: \$35.

Commission Policies Related to Fees: The Commission considered a proposed revision to the “Annual Fee Policy,” which was renamed the “Program Fee Policy.” The proposed revisions were made to accurately reflect the expectation of the Commission that all fees assessed to a program must be paid.

Commission action: The Commission adopts the revisions to the Program Fee Policy found in **Appendix 17**, with immediate implementation.

Report of the Task Force on Development of Accreditation Standards for Dental Therapy Education Programs:

The Commission considered the report of the Task Force, noting that the second draft of the proposed Dental Therapy Standards was circulated for a period of public comment for one year in 2014, with hearings conducted at the American Dental Education Association, American Dental Hygienists’ Association, American Dental Assistants Association, and American Dental Association Annual Meetings. Comments received through the hearings, as well as written comments received, were considered by the Task Force and Commission.

It was noted that similar to the prior year, comments received in 2014 focused on several themes, including the program length, the scope of training, the level of supervision, and the program director requirements. The Commission reviewed and discussed the report of the Task Force, which provided a detailed explanation of the Task Force’s recommendations related to each theme, including rationale. The Commission discussed in detail Standard 2-20f, noting that “dispense” could mean prescribe in some states with regard to “dispensing and administering non-narcotic analgesics, anti-inflammatory, and antibiotic medications.” Following discussion, the Commission modified Standard 2-20f as follows (red verbiage indicates addition):

- f. dispensing and administering **via the oral and/or topical route** non-narcotic analgesics, anti-inflammatory, and antibiotic medications **as prescribed by a licensed healthcare provider**.

Following discussion, the Commission approved the amended dental therapy standards.

The Commission further discussed that the Task Force's charge was to develop the Accreditation Standards, not to assess whether Criteria #2 and #5 of the *Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation* were satisfied. Therefore, the charge of the Task Force had been fulfilled with completion of the Accreditation Standards document. With regard to the *Principles and Criteria Eligibility*, the Commission believed that the communities of interest should be notified that the standards will not be implemented until Criteria #2 and #5 are met. The Commission also directed that it will accept documentation until June 1, 2015, which shows that the Criteria are met, for consideration at the Summer 2015 Commission meeting.

Commission action: The Commission directs adoption, as amended, of the Accreditation Standards for Dental Therapy Education Programs (**Appendix 18**);

further, the Commission directs that the communities of interest be notified that the Commission will not implement the Accreditation Standards, nor a program of accreditation for dental therapy education programs until Criteria #2 and #5 of the *Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation* are met;

and further, the Commission directs that it will accept written documentation until June 1, 2015, which shows that Criteria #2 and #5 are met, for consideration at the Summer 2015 meeting of the Commission.

Report of the Standing Committee on Documentation and Policy:

Consideration of Including Apprentice/Preceptor/Internship Programs in Policy on Reporting Program Changes in Accredited Programs: The Commission reviewed the report of the Standing Committee noting that findings of a Commission study of preceptor/fellowship programs indicate that most programs do not offer this type of program. The Commission also noted that a program's access to sufficient resources is monitored through the Accreditation Standards, which are reviewed by site visit teams, and other continuous monitoring mechanisms. The Standing Committee recommended that a monitoring mechanism for unaccredited apprentice/preceptor/internship programs not be implemented at this time.

Commission action: The Commission directs that a monitoring process for unaccredited preceptor/fellowship programs not be implemented at this time.

Advanced Standing Students/Residents in All CODA-Accredited Education Programs: The Commission discussed the Standing Committee's recommendation related to the concept of "advanced standing," noting that the assessment of the individual seeking advanced standing and the decision to enroll this individual is beyond the purview of the Commission and should remain with the individual program and institution based upon their policies and procedures. The Commission considered a proposed intent statement to the Standards, which would provide clarification for the communities of interest. Additionally, the Commission noted that the term

“transfer student/resident” in some standards is redundant as it is one type of advanced standing student.

Commission action: The Commission adopts the intent statement (**Appendix 19**) for addition to the standard related to advanced standing in each discipline’s accreditation standards under the Commission’s purview, with immediate implementation;

and further, the Commission directs that the word “transfer” that appears in the standard related to advanced standing in each discipline’s accreditation standards, be deleted from the accreditation standards related to advanced standing in each discipline and be replaced with “advanced standing” where appropriate as noted in **Appendix 20**, with immediate implementation.

Communication between Review Committees and Site Visit Teams: The Commission discussed whether the Review Committees of the Commission could consult with the Site Visit Team during the time of the Review Committee meeting. A number of concerns were raised by the Standing Committee related to how communication between Site Visit Teams and Review Committees would occur and the implications of communication between these groups. It was believed that if communication between the Review Committees and Site Visit Teams was permitted, the roles of each could become blurred and may result in a non-objective review of the report. Another concern related to the increased amount of time needed for the review process to allow for the communication between the two groups. Other concerns expressed included how and who determines if there was a “gross discrepancy” in the report and who would conduct the communication between the Review Committee and Site Visit Team. Finally, interaction between Review Committees and Site Visit Teams could be perceived by programs that the review of the report, based on its own merits and not additional information provided by the Site Visit Team, was not objective.

Commission action: The Commission directs that a process and procedures for communication between Review Committees and Site Visit teams not be pursued at this time.

Request to Consider Revision to the Conflict of Interest Policy to Allow Public Members of the Commission and Review Committees to Observe Multiple Site Visits: The Commission noted the Standing Committee’s report and recommendation on allowing public members to observe multiple site visits. The Committee acknowledged that since public members are new to the dental accreditation process and have no expertise in the field, attending a site visit would be beneficial. However, it was noted that the public member would be required to recuse himself/herself from the discussion of the report during Review Committee and/or Commission review, thereby limiting the number of reviewers at these levels. Further, it was determined that the Commission’s training opportunities for public member currently provide an adequate orientation to the Commission without imposing an unnecessary financial or logistical burden on the Commission. All new Commissioners and Review Committee members participate in a 1.5 day in-person training session and have the opportunity to observe a site visit. In addition, all new Commissioners and Review Committee members are required to complete the web-based Site Visitor Training.

Commission action: The Commission directs that policies and practices related to public members of Review Committees and the Commission observing site visits not be modified at this time.

Consideration of Proposed Revision to Accreditation Standard 1 for Advanced Specialty Education Programs: The Commission considered the report of the Standing Committee related to a proposed revision to Standard 1 for all advanced specialty education programs. In Summer 2014, the Commission directed circulation of the proposed Standard 1, for a period of public comment, with an open hearing held at the 2014 American Dental Association Annual Meeting. The Commission noted that comments received were supportive of the revision and that all nine (9) specialty Review Committees recommended approval of the proposed revision. Therefore, the Standing Committee on Documentation and Policy Review recommended immediate adoption of the proposed change to Standard 1 in all advanced specialty education Accreditation Standards.

Commission action: The Commission adopts the revision to Standard 1 for all advanced specialty education programs (**Appendix 21**), with immediate implementation.

Periodic Review of Commission on Dental Accreditation Policies and Procedures: The Commission reviewed proposed revisions to selected policies submitted by the Standing Committee on Documentation and Policy Review.

Commission action: The Commission adopts revisions to select policies for periodic review (**Appendix 22**), with immediate implementation.

Report of the Standing Committee on Quality Assurance and Strategic Planning (QASP):

Strategic Goal #5: The Commission considered the Standing Committee on Quality Assurance and Strategic Planning (QASP) report related to Strategic Goal #5, an ongoing communications/marketing program to promote its mission to broad communities of interest. Related to this goal, QASP committee believed that the Commission should engage in several activities to promote its mission with all communities of interest, and particularly with the dental assisting and dental laboratory technology communities. The Commission discussed and acted upon the QASP committee recommendations related to Goal #5.

Commission action: The Commission directs development of a recruitment and retention plan for the allied dental programs of Dental Assisting and Dental Laboratory Technology that provides for action steps for follow-up on programs that approach the CODA on becoming accredited or those that voluntarily discontinue accreditation;

further, the Commission directs development of a two-to-four page informational brochure about the importance of CODA accreditation for a targeted audience of all state dental boards and associations and component societies, the national dental assisting and dental laboratory technology associations and related state components, and dental assisting and dental laboratory technology educators;

further, the Commission directs that CODA staff commence discussion with the American Association of Dental Boards (AADB), including but not limited to making presentations at the AADB national meeting, to inform state agencies about the importance of CODA accreditation for dental assisting and dental laboratory technology;

and further, the Commission directs that the financial impact for all these recruitment and retention plan activities be carefully considered.

Follow-up on JACIA structure: The QASP committee informed the Commission of its preliminary discussion related to the structure of the Joint Advisory Committee on International Accreditation (JACIA). The Commission learned that the QASP committee tabled further discussion of the future structure of the JACIA until the ADA/CODA Workgroup discussed this matter, including whether JACIA will continue under its current structure, or a new structure.

Commission action: The Commission directs continued discussion through the ADA/CODA Workgroup related to the future structure of the Joint Advisory Committee on International Accreditation.

Accreditation of off-campus sites for U.S.-accredited programs: The Commission considered the QASP report on accreditation of off-campus sites for U.S.-accredited programs, noting Strategic Goal #3 related to the Commission's role in the global arena. Prior Commission reports, as well as current fees and Commission policies on international accreditation, were noted in QASP committee's discussion. The QASP committee believed that if the Commission were to allow approval of international off-campus sites for U.S.-accredited programs, there may be a need to modify CODA standards or policies, and financial policies and implications need to be considered. The Committee reiterated that CODA's Accreditation Standards would be the same regardless of the location of the off-site; however, there may be a need for policy on other issues. The Committee was reminded that Special Focused Site Visit (SFSV) fees are paid by the program; further, CODA recently implemented a new fee policy to prepay a percentage of the cost for Special Focused Site Visits. The QASP committee believed that further discussion of international off-campus sites of U.S.-accredited programs by the Commission through a mega issue discussion was warranted.

Commission action: The Commission directs a one-half day strategic-planning/mega issue discussion on the topic of approving international off-campus sites for U.S.-accredited programs.

Comparative Analysis Study: The Commission received an update from the QASP committee related to its progress toward developing a comparative analysis survey by which the Commission could benchmark itself against other accrediting organizations. The QASP committee identified a list of organizations to which the questionnaire could be mailed but noted that much of the information may be found on the websites of the selected organizations, including but not limited to operational policies and procedures, fiscal support, comparison of services and types of accreditation, which would streamline the length of the survey. Further, some information could be collected from a recent salary survey conducted by the Association of Specialized and Professional Accreditors (ASPA) with permission, and from the assemblage of

information gathered for the development of the Commission's White Paper: Transition to an Operational Structure for Independent Authority. The QASP committee believed that following continued review and development, the survey could be administered and analyzed with a report to the Commission at a future meeting.

Commission action: The Commission directs the QASP committee to develop and administer the comparative analysis survey with results of the survey to be presented to the Committee at a future meeting.

Review of CODA and ADA Documents Based upon CODA Assessment: In response to a Commission directive, the QASP committee reviewed the Commission's Duties and Rules, the ADA's Standing Rules for Councils and Commissions, and ADA Constitution and Bylaws. The QASP committee noted that there were some "threads" throughout this analysis, such as CODA composition, including membership, structure and appointments, and reporting requirements for budget administration and oversight of the CODA Duties and Rules, which should be further discussed by the ADA/CODA Workgroup as these relate to CODA's strategic plan.

Commission action: The Commission directs CODA staff and Commissioners on the ADA/CODA Workgroup to bring before the Workgroup in June 2015 the topics of CODA composition, including membership, structure and appointments, and reporting requirements for budget administration and oversight of the CODA Duties and Rules.

Consideration of the Report of the Task Force on Off-Campus Sites: The Commission reviewed reports of the 2012 Task Force on Off-Campus Sites and 2013 Standing Committee on Documentation and Policy Review associated with the topic of programs with off-campus sites. The findings of these reports were summarized and briefly discussed by the Commission. The Commission believed that these reports should be included in the mega issue discussion planned for Summer 2015.

Commission action: This report is informational in nature and no action was taken.

Report of the Joint Advisory Committee on International Accreditation (JACIA): The Commission noted the actions of the JACIA since the last Commission meeting. The JACIA affirmed its process for established international dental education programs and not developing international programs. Additionally, the JACIA determined the international predoctoral dental education program offered by the *Universidad de la Salle Bajío*, Leon Guanajuato, Mexico has the potential to pursue accreditation and may elect to apply for the Commission's accreditation process.

Commission action: This report is informational in nature and no action was taken.

Informational Report on Request from Dental Council of New Zealand on Revalidation of Existing Prescribed Qualifications in New Zealand: The Commission received an update on the Dental Council's revalidation activities. It was noted that the Dental Council provided to the Commission a "Notice of Scopes of Practice and Prescribed Qualifications," a comparison document of the Dental Council and CODA Accreditation Standards for Dental Hygiene, a Comparison of Competency Standards for Newly Qualified Dental Hygienists, and Newly

Approved Australian Dental Council/Dental council of New Zealand Program Accreditation Standards for dentistry, the dental specialties, dental hygiene, dental therapy, oral health therapy, and clinical dental technology. The Commission noted that if, at a later date, it elects to proceed with the Dental Council of New Zealand's request to initiate a review of processes and standards for potential mutual recognition (reciprocal agreement), the Commission may wish to direct its Standing and Review Committees to review all the information provided to date by the Dental Council.

Commission action: This report is informational in nature and no action was taken.

Update on USDE: Dr. Sherin Tooko provided an update on important national topics related to education and accreditation that could have an impact on the Commission, including the college rating system, Reauthorization of the Higher Education Act, and activities of the National Advisory Committee on Institutional Quality and Integrity.

Survey of Meeting: Dr. Sherin Tooko reminded Commissioners to complete the electronic post-meeting survey following the meeting. The survey is important for determining whether the Commission is achieving its goals for the year.

New Business: Policy on Progress Reports: The Commission discussed a proposed change to the Policy entitled "Progress Reports" found in the Commission's Evaluation and Operational Policies and Procedures manual. The proposed change is noted below (addition is underlined):

C. PROGRESS REPORTS (Excerpt of Policy)

Programs with recommendations identified as unmet following Commission review of site visit reports and institutional responses are required to submit progress reports. A progress report is submitted by the chief administrator of the program and it is due at a time specified by the Commission, usually at six (6) month intervals unless otherwise specified. If an interval of longer than six (6) months is established, an institution may submit its progress report earlier than requested, but prior approval is necessary if a delay is anticipated. Evidence of compliance with all recommendations must be demonstrated within the specified time frame (eighteen (18) months if the program is between one (1) and two (2) years in length or two (2) years if the program is at least two (2) years in length). When Accreditation Standards are revised during the period in which the program is submitting progress reports, the program will be responsible for demonstrating compliance with the new standards.

The progress report must respond specifically to each recommendation determined to be unmet that was contained in the Commission's report. The progress report should quote each individual recommendation as it appears in the Commission report and follow each quote with comments and documentation of the institution's implementation of the specific recommendation.

Commission action: The Commission adopts the revision to the policy on Progress Reports, with immediate implementation.

Adjourn: The Commission adjourned the open session at 2:40 P.M.