

REVISIONS TO EVALUATION AND OPERATIONAL POLICIES AND PROCEDURES MANUAL (EOPP)

Underline indicates addition; ~~Strikethrough~~ indicates deletion

Revised Review Committee Structure EOPP Page 15

A. REVIEW COMMITTEES AND REVIEW COMMITTEE MEETINGS

1. **Structure:** The chair of each Review Committee will be the appointed Commissioner from the relevant discipline.
 - i. The Commission will appoint all Review Committee members.
 - a. Review Committee positions not designated as discipline-specific will be appointed from the Commission where feasible, e.g. a public representative on the Commission could be appointed to serve as the public member on the Dental Laboratory Technology Review Committee; an ADA appointee to the Commission could be appointed to the Dental Assisting Review Committee as the general dentist practitioner.
 - b. Discipline-specific positions on Review Committees will be filled by appointment by the Commission of an individual from a small group of qualified nominees (at least two) submitted by the relevant national organization, discipline-specific sponsoring organization or certifying board. Nominating organizations may elect to rank their nominees, if they so choose. If fewer than two (2) qualified nominees are submitted, the appointment process will be delayed until such time as the minimum number of required qualified nominations is received.
 - ii. Consensus is the method used for decision making; however if consensus cannot be reached and a vote is required, then the Chair may only vote in the case of a tie (American Institute of Parliamentarians Standard Code of Parliamentary Procedures).
 - iii. Member terms will be staggered, four year appointments; multiple terms may be served on the same or a different committee, with a one-year waiting period between terms. A maximum of two (2) terms may be served in total. The one-year waiting period between terms does not apply to public members.
 - iv. One public member will be appointed to each committee.
 - v. The size of each Review Committee will be determined by the committee's workload.
 - vi. As a committee's workload increases, additional members will be appointed while maintaining the balance between the number of content experts and non-content experts. Committees may formally request an additional member through New Business at Review Committee/Commission meetings. If an additional member is approved, this member must be a joint nomination from the professional organization and certifying board, as applicable.
 - vii. Conflict of interest policies and procedures are applicable to all Review Committee members.
 - viii. Review Committee members who have not had not been on a site visit within the last two (2) years prior to their appointment on a Review Committee should observe at least one site visit within their first year of service on the Review Committee.

- ix. In the event that fewer than 50% of discipline-specific experts are present for any one discipline, the decision by a quorum of the Review Committee shall be acceptable. In the case of less than 50% of discipline-specific experts, including the Chair, available for a review committee meeting, for specified agenda items or for the entire meeting, the Review Committee Chair may temporarily appoint an additional discipline-specific expert(s) with the approval of the CODA Director. The substitute should be a previous Review Committee member or an individual approved by both the Review Committee Chair and the CODA Director. The substitute would have the privileges of speaking, making motions and voting. ~~In the event that fewer than 50% of discipline-specific experts are present for any one discipline, the decision by a quorum of the Review Committee shall be acceptable.~~
- x. Consent agendas may be used by Review Committees, when appropriate, and may be approved by a quorum of the Review Committee present at the meeting.
Revised: 8/20; 1/20; 8/18; 8/17; 2/15; 1/14, 2/13, 8/10, 7/09; 7/08; 7/07; Adopted: 1/06

Revised Policy on Attendance at Review Committee Meetings EOPP Page 18

4. Policy On Attendance At Open Portion Of Review Committee Meetings: The policy portion of Review Committee meetings is open to representatives from organizations and certifying boards represented on the Review Committee. Participation of these representatives during the meeting is at the discretion of the Review Committee Chair. Confidential accreditation matters are discussed in a closed session of the meeting that is not open to observers.

Representatives attending the open portion of meetings are asked to pre-register to assist the Commission in making arrangements for the meeting. Pre-registration ensures that the individual receives a copy of the meeting agenda and policy reports at the same time as Review Committee members.

Revised: 8/20; 2/15; 7/07, 7/97; Reaffirmed: 8/17; 8/10, 7/01; CODA: 07/96:10

Revised Distribution of Meeting Minutes EOPP Page 24

10. Distribution Of Meeting Minutes: Final minutes of each Commission meeting, including the report on accreditation status of dental education programs, are made available to the Commission's communities of interest through an e-mail notice of posting on the Commission's website. ~~Organizations may request to be added to the distribution list which follows.~~

~~Academy of General Dentistry, Executive Director
American Academy of Oral and Maxillofacial Pathology, Executive Director/Secretary
American Academy of Oral and Maxillofacial Radiology, Executive Director/Secretary
American Academy of Oral Medicine, Executive Director~~

~~American Academy of Orofacial Pain, Executive Director~~
~~American Academy of Pediatric Dentistry, Executive Director/Secretary~~
~~American Academy of Periodontology, Executive Director/Secretary~~
~~American Association of Dental Boards, Executive Director~~
~~American Association of Endodontists, Executive Director/Secretary~~
~~American Association of Oral and Maxillofacial Surgeons, Executive Director/Secretary~~
~~American Association of Orthodontists, Executive Director/Secretary~~
~~American Association of Public Health Dentistry, Executive Director/Secretary~~
~~American College of Prosthodontists, Executive Director/Secretary~~
~~American Dental Assistants Association, Executive Director~~
~~American Dental Association, Board of Trustees —~~
~~American Dental Association, Council on Dental Education and Licensure~~
~~American Dental Education Association, Executive Director~~
~~American Dental Hygienists' Association, Executive Director~~
~~American Society of Dentist Anesthesiologists, Executive Director~~
~~American Student Dental Association, Executive Director~~
~~Asociación Dental Mexicana, A.C., Director International Relations~~
~~Chiefs of Federal Dental Services~~
~~Commission on Dental Accreditation of Canada, Chair, Director~~
~~Constituent Dental Societies, Executive Directors~~
~~Council for Higher Education Accreditation, President~~
~~Dental Assisting National Board, Executive Director~~
~~Members, Commission on Dental Accreditation~~
~~Members, Review Committees, Commission on Dental Accreditation~~
~~National Association of Dental Laboratories, Executive Director~~
~~National Board for Certification of Dental Laboratories, Executive Director~~
~~National Institutional and Specialized Accrediting Bodies, Executive Directors~~
~~Regional Institutional Accrediting Agencies, Executive Directors~~
~~Special Care Dentistry Association (SCDA), Executive Director~~
~~Specialty Certifying Boards, Executive Directors/Secretaries~~
~~State Boards of Dentistry, Executive Secretaries/Administrators~~

Revised: 8/20; 8/18; 8/17; 2/15; 1/14; 8/10; Reaffirmed: 8/14

Revised Confidentiality Policy

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E. CONFIDENTIALITY POLICY

All materials generated and received in the accreditation process are confidential. In all instances Protected Health Information (PHI), Personally Identifiable Information (PII) and student/resident/fellow identifying information must not be improperly disclosed. The Commission's confidentiality policies apply to Commissioners, Review Committee members, members of the Appeal Board, and site visitors. Confidential materials are maintained to ensure the integrity of the institution/program and of the accreditation process, and may be shared by the Commission in instances related to USDE re-recognition or responding to state or federal legal requirements, as appropriate. Because of the confidential nature of the accreditation process, the Commission identifies three (3) points of contact with whom Commission staff is authorized to communicate, either in writing or verbally. These individuals are designated by the sponsoring

institution and include the chief executive officer (university president/chancellor/provost or medical center director), the chief academic officer (dean/academic dean/chair/chief of dental service, etc.), and the program director. Commission staff is not authorized to discuss program-specific situations or share confidential material with any other individual(s).

Confidentiality applies without limitation, to the following:

SELF-STUDY DOCUMENT: At the discretion of the institution, the administration may either release information from this document to the public or keep it confidential. The Commission will not release ~~any information in the self-study document without the prior written approval of the institution.~~

SITE VISIT REPORT: The preliminary draft of a site visit report is an unofficial document and remains confidential between the Commission and the institution's executive officers and may not, under any circumstances, be released. Members of a visiting committee who review preliminary drafts of the report must consider the report as privileged information and must not discuss it or make its contents known to anyone, under any circumstances. Oral comments made by site visit team members during the course of the site visit are not to be construed as official site visit findings unless documented within the site visit report and may not be publicized. Further, publication of site visit team members' names and/or contact information is prohibited. Reasons for assigning any non-adverse status other than full approval remain confidential between the institution and the Commission unless the institution wishes to release them. Public release of the final draft of the site visit report that is approved by the Commission is at the sole discretion of the institution. If there is a point of contention about a specific section of the final site visit report and the institution elects to release the pertinent section to the public, the Commission reserves the right to make the entire site visit report public.

INSTITUTION'S RESPONSE TO A SITE VISIT REPORT: Release of this information is at the sole discretion of the institution. An institution's response must not improperly disclose any Protected Health Information; however, if any such information is included in the response, such information will not be made public.

TRANSMITTAL LETTER OF ACCREDITATION NOTIFICATION: Information such as accreditation status granted and scheduled dates for submission of additional information is public information. However, release of other information or details is at the sole discretion of the institution and will not be disclosed by the Commission.

PROGRESS REPORT: The scheduled date for submission of progress reports is public information. Release of the content of a progress report is at the sole discretion of the institution. If there is a point of contention about a particular portion of the progress report and the institution elects to release the pertinent portion to the public, the Commission reserves the right to make public the entire progress report. Progress reports must not disclose Protected Health Information (PHI) or Personally Identifiable Information (PII).

SURVEYS: Routinely gathered data are used in the accreditation process and also provide a national data base of information about the accredited dental and dental-related educational programs. The Commission may release to the public any portion of survey data that is collected annually unless the terms of confidentiality for a specific section are clearly indicated on the

survey instrument. Subsections of each survey instrument containing data elements which are confidential are clearly marked. Any data which may be reported from confidential subsections are published in a manner which does not allow identification of an individual institution/program.

EXIT INTERVIEWS: The final conference or exit interview between the site visit committee and the chief executive officer, dental dean, chief of dental service or the program director(s) is also confidential. Additional people may be included at the discretion of the institutional administration. The interview is a confidential summation of the preliminary findings, conclusions, recommendations and suggestions which will appear in the site visit report to the institution. This is a preliminary oral report and the preliminary written report is often only in draft stage at this point; therefore, this session may not be recorded in either audio or video format. Note taking is permitted and encouraged.

ON-SITE INTERVIEWS AND ORAL COMMUNICATIONS: In order to carry out their duties as on-site evaluators, visiting committee members must communicate freely with administrators, faculty, staff and students and any other appropriate individuals affiliated with an education program. As part of their on-site accreditation duties, committee members are expected to share with other team members pertinent and relevant information obtained during interviews. All oral communications occurring on-site, however, are confidential. Interviews may not be recorded in either audio or video format. Note taking is permitted and encouraged. When the site visit ends, team members may communicate orally, or in writing, only with Commission staff or other team members about any on-site interview or conversation. All questions related to any aspect of the site visit including oral communications must be referred to the Commission office.

MEETING MATERIALS/DISCUSSIONS: Background reports and informational materials related to accreditation matters are regularly prepared for review by the Commission and its Review Committees. These materials and all discussions related to accreditation matters routinely remain confidential. The Commission determines when, and the manner in which, newly adopted policy and informational reports will receive public distribution.

PROTECTED HEALTH INFORMATION: Patients' protected health information, which includes any information that could identify an individual as a patient of the facility being site visited, may not be used by the site visitors, Review Committee members, or Commissioners for any purpose other than for evaluation of the program being reviewed on behalf of the Commission. Protected Health Information may not be disclosed to anyone other than Commissioners, Commission staff, Review Committee members or site visitors reviewing the program from which the Protected Health Information was received. Individual Protected Health Information should be redacted from Commission records whenever that information is not essential to the evaluation process. If a site visitor, Review Committee member, or Commissioner believes any Protected Health Information has been inappropriately used or disclosed, he/she should contact the Commission office.

MEETINGS: Policy portions of the Review Committee and Commission-meetings are open to observers, while accreditation actions are confidential and conducted in closed session. All deliberations of the Appeal Board are confidential and conducted in closed session.

NOTICE OF REASONS FOR ADVERSE ACTION: Notice of the reasons for which an adverse accreditation action (i.e. deny or withdraw) is taken is routinely provided to the Secretary of the U.S. Department of Education, any appropriate state agencies, and, upon request, to the public.

Revised: [8/20](#); 8/18; 2/18; 2/16; 8/14; 1/05, 2/01, 7/00; Reaffirmed: 8/12, 8/10; Adopted: 7/94, 5/93

Revised Policy Statement on Site Visitor Training EOPP Page 67

3. Policy Statement On Site Visitor Training: The Commission has a long history of a strong commitment to site visitor training and requires that all program evaluators receive training. Prior to participation, site visitors must demonstrate that they are knowledgeable about the Commission's accreditation standards and its Evaluation and Operational Policies and Procedures. Initial and ongoing training takes place in several formats.

New site visitors must attend a two-day formal workshop that follows the format of an actual site visit. All new site visitors are directed to the Commission's on-line training program and are required to successfully complete the training program and site visitor final assessment.

Site visitor update sessions take place at several dental-related meetings, such as the annual session of the American Dental Education Association (ADEA), the American Association of Oral and Maxillofacial Surgeons and the ADEA Allied Dental Program Directors' Conference. The Commission may entertain requests from other organizations. Components from the workshop are sometimes presented at these meetings; however, the primary purpose of the update sessions is to inform site visitors about recent Commission activities, revisions to standards and newly adopted policies and procedures.

Keeping costs in mind, the Commission continually explores new methods of providing initial [and ongoing](#) training to site visitors, as well as ensuring their ongoing competence and calibration. Methods being examined include on-line materials, [virtual webinars \(synchronous and/or asynchronous\)](#) ~~conference calls~~, broadcast e-mails and other self-instructional materials.

The Commission emphasizes its increased commitment to quality training for site visitors. While the Commission sponsors comprehensive training for new site visitors and provides updates for site visitors on a regular basis, all parent organizations are urged to provide support for [CODA-sponsored](#) training to augment the Commission's programs. All active site visitors must complete mandatory annual web-based retraining in order to retain appointment.

Revised: [8/20](#); 8/19; 2/19; 8/14; 8/10, 7/06, 7/00, 1/98; Reaffirmed: 7/07, 7/01, 7/96; CODA: 01/94:9

**Revised Site Visit Reports
EOPP Page 76****N. SITE VISIT REPORTS**

1. Preliminary Site Visit Report: The site visit report is a written summary of the findings of a site visit ~~review of the quality of the program~~ and serves as the primary basis for the Commission's accreditation decision. The report also serves to identify for officials and administrators of educational institutions any program deficiencies and weaknesses relative to the accreditation standards.

The report is an assessment of the program's compliance with the accreditation standards, including any areas needing improvement, and the program's performance with respect to student achievement. The report may include recommendations and suggestions related to the program's compliance with the accreditation standards ~~program quality~~. A program's continued compliance with any standards for which deficiencies are noted in previous reports, as well as its compliance with current Commission policies and procedures are also noted.

Preliminary drafts of site visit reports are prepared by site visitors, consolidated by Commission staff and transmitted to visiting committee members for review, comment and approval prior to transmittal to the sponsoring institution for review and response.

Effective July 26, 2007, commendations are no longer cited in site visit reports; however, verbal acknowledgement of a program's strengths may be provided during the exit interview.

Revised: 8/20; 8/14; Reaffirmed: 8/10, 7/07, 7/01, 4/83

2. Policy On Institutional Review Of Site Visit Reports: Accreditation is a peer review process whereby an educational program is evaluated by individuals in education and the profession who are identified as having particular expertise in a specific area or field. In this context, a visiting committee is a fact-finding committee charged by the Commission with the responsibility of assessing the quality of an educational program utilizing pre-determined educational requirements and guidelines (standards).

Subsequent to such peer review, an evaluation report (See Preliminary Site Visit Report) is developed based upon the factual findings, perceptions, interpretations, observations and conclusions of the external reviewing team. The information contained in site visit reports is obtained from review and verification of materials and documents submitted by the institution's administration, program directors, faculty and students. Since the information is gathered from various sources, on occasion the perceptions, interpretations and conclusions of the visiting committee may not coincide with those of the administration and program directors who review and comment on the preliminary draft.

In compliance with the due process policy and procedures established by the Commission, the preliminary draft report is sent to the chief executive officer(s), chief academic officer(s), and appropriate program director(s). The Commission requests that the entire preliminary draft report, or specific sections, be released to departmental chairs, and appropriate faculty and standing committees for review. In reviewing the report the Commission requests that the

program respond to correct factual inaccuracies within the report and/or note any differences in perception.

It is the policy of the Commission to correct bona fide factual inaccuracies in a report. It does not change the substance of a report based upon differences of interpretations and perceptions. In such cases, however, the institution's observations regarding these matters are discussed and considered at the Commission's meeting and the final judgment of the Commission is based not only on the site visit report, but also on the institution's response to that report.

Revised: 8/20; Reaffirmed: 8/10, 7/07, 7/01; CODA: 12/78:4

Revised Information on the Commission's Website EOPP Page 79

A. INFORMATION ON THE COMMISSION'S WEBSITE

The following information is posted on the Commission's website as indicated. Some of these items are mandated by the Commission, while others are merely viewed as a service to accredited programs.

The following items are routinely posted following the Commission's winter meeting:

- Report of Unofficial Actions of the Commission
- List of Commissioners and appended biographical information
- List of Scheduled Site Visits
- Policy On Third Party Comments
- Policy on Complaints and Guidelines for Filing a Complaint
- Summer Commission Meeting – Open Session Announcement and Materials, as available
- Commission policies, procedures and guidelines for reporting program changes:
 - Guidelines for Requesting Increase in Enrollment (for all dental and advanced dental education programs)
 - Policy and Guidelines for Reporting Program Changes In Accredited Programs
 - Policy and Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs
 - Policy and Guidelines for Preparing a Teach-Out Report
 - Policy and Guidelines for Transfer of Sponsorship
 - Policy and Guidelines for Interruption of Education
 - BioSketch Templates
 - Electronic Submission Guidelines
 - Privacy and Data Security Summary for Institutions/Programs

The following items are routinely posted following the Commission's summer meeting:

- Report of Unofficial Actions of the Commission
- List of Scheduled Site Visits
- Policy On Third Party Comments
 - Policy on Complaints and Guidelines for Filing a Complaint

- Winter Commission Meeting – Open Session Announcement and Materials, as available
- Commission policies, procedures and guidelines for reporting program changes:
 - Guidelines for Requesting Increase in Enrollment (for all dental and advanced dental education programs)
 - Policy and Guidelines for Reporting Program Changes In Accredited Programs
 - Policy and Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs
 - [Policy and Guidelines for Preparing a Teach-Out Report](#)
 - [Policy and Guidelines for Transfer of Sponsorship](#)
 - [Policy and Guidelines for Interruption of Education](#)
 - BioSketch Templates
 - Electronic Submission Guidelines
 - [Privacy and Data Security Summary for Institutions/Programs](#)

The following items are posted at appropriate intervals:

- Department of Education Observers May Attend Site Visits
- Re-recognition: Opportunity for Third Party Testimony
Revised: [8/20](#); 2/16; 8/15; 2/15; Reaffirmed: 8/10

Revised Progress Reports EOPP Page 80

B. PROGRESS REPORTS

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 director and it is due at a time specified by the Commission, 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 not to exceed ~~(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. Identification of new deficiencies during the reporting time period will not result in a modification of the specified deadline for compliance with prior deficiencies.

The progress report must respond specifically to each recommendation determined to be unmet that was contained in the Commission's report. The progress report must 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.

Questions on the preparation of progress reports should be directed to Commission staff. The Commission has developed Guidelines for Preparation of Reports to assist programs and to illustrate examples of acceptable documentation.

The Commission reviews a progress report in the same manner as a site visit report. Based on the progress report, the Commission will determine any subsequent actions necessary. The Commission may request a report of additional progress, an appearance of an institutional representative before the Commission, and/or a special focused reevaluation visit to the program.

If the program does not demonstrate compliance with the accreditation standards within the specified time frame, the Commission will withdraw the program's accreditation, unless the Commission extends the period for achieving compliance for good cause.

Revised: 8/20; 8/15; 2/15; 1/99, 1/98; Reaffirmed: 8/10, 7/05; Adopted: 07/96

Revised Policy on Reporting Program Changes EOPP Page 80

C. REPORTING PROGRAM CHANGES IN ACCREDITED PROGRAMS

The Commission on Dental Accreditation recognizes that education and accreditation are dynamic, not static, processes. Ongoing review and evaluation often lead to changes in an educational program. The Commission views change as part of a healthy educational process and encourages programs to make them as part of their normal operating procedures.

At times, however, more significant changes occur in a program. Changes have a direct and significant impact on the program's potential ability to comply with the accreditation standards. These changes tend to occur in the areas of finances, program administration, enrollment, curriculum and clinical/laboratory facilities, but may also occur in other areas. All program changes that could affect the ability of the program to comply with the Accreditation Standards must be reported to the Commission. When a change is planned, Commission staff should be consulted to determine reporting requirements. Reporting program changes in the Annual Survey does not preclude the requirement to report changes directly to the Commission. Failure to report and receive approval in advance of implementing the change, using the Guidelines for Reporting Program Change, may result in review by the Commission, a special site visit, and may jeopardize the program's accreditation status.

Advanced dental education programs must adhere to the Policy on Enrollment Increases in Advanced Dental Education Programs. In addition, programs adding off-campus sites must adhere to the Policy on Reporting and Approval of Sites Where Educational Activity Occurs. Guidelines for Reporting and Approval of Sites where Educational Activity Occurs are available from the Commission office. Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program and Guidelines for Reporting Enrollment Increases in Advanced Dental Education Programs are available from the Commission office.

On occasion, the Commission may learn of program changes which may impact the program's ability to comply with accreditation standards or policy. In these situations, CODA will contact the sponsoring institution and program to determine whether reporting may be necessary. Failure to report and receive approval prior to the program change may result in further review

by the Commission and/or a special site visit, and may jeopardize the program's accreditation status.

The Commission's Policy on Integrity also applies to the reporting of changes. If the Commission determines that an intentional breach of integrity has occurred, the Commission will immediately notify the chief executive officer of the institution of its intent to withdraw the accreditation of the program(s) at its next scheduled meeting.

A Report of Program Change must document how the program will continue to meet accreditation standards. The Commission's Guidelines for Reporting Program Changes are available on the Commission's website and may clarify what constitutes a change and provide guidance in adequately explaining and documenting such changes.

The following examples illustrate, but are not limited to, changes that must be reported by **June 1 or December 1** and must be reviewed by the appropriate Review Committee and **approved by the Commission prior to the implementation** to ensure that the program continues to meet the accreditation standards:

- Establishment of Off-Campus Sites not owned by the sponsoring institution used to meet accreditation standards or program requirements (See Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs);
- Changes to Off-Campus Sites not owned by the sponsoring institution that impacts the use of the site (e.g. minor site to major site, or termination of enrollment at or discontinued use of major site);
- Transfer of sponsorship from one institution to another;
- Moving a program from one geographic site to another, including but not limited to geographic moves within the same institution;
- Program director qualifications not in compliance with the standards. In lieu of a CV, a copy of the new or acting program director's completed BioSketch must be provided to Commission staff. Contact Commission Staff for the BioSketch template.
- Substantial increase in program enrollment as determined by preliminary review by the discipline-specific Review Committee Chair.
 - Requests for *retroactive permanent* increases in enrollment will not be considered. Requests for *retroactive temporary* increases in enrollment may be considered due to special circumstances on a case-by-case basis. Programs are reminded that resources must be maintained even when the full complement of students/residents is not enrolled in the program. (see Policy on Enrollment Increases In Advanced Dental Education Programs and Predoctoral programs see Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program);
- Change in the nature of the program's financial support that could affect the ability of the program to meet the standards;
- Curriculum changes that could affect the ability of the program to meet the standards;
- Reduction in faculty or support staff time commitment that could affect the ability of the program to meet the standards;
- Change in the required length of the program;
- Reduction of program dental facilities that could affect the ability of the program to meet the standards;

- Addition of advanced standing opportunity; and/or
- Expansion of a developing dental hygiene or assisting program which will only be considered after the program has demonstrated success by graduating the first class, measured outcomes of the academic program, and received approval without reporting requirements.

The Commission recognizes that unexpected, changes may occur. If an unexpected change occurs, it must be reported no more than 30 days following the occurrence. Unexpected changes may be the result of sudden changes in institutional commitment, affiliated agreements between institutions, faculty support, or facility compromise resulting from natural disaster ([See Policy/Guidelines on Interruption of Education](#)). Failure to proactively plan for change will not be considered an unexpected change. Depending upon the timing and nature of the change, appropriate investigative procedures including a site visit may be warranted.

The following examples illustrate, but are not limited to, additional program changes that must be reported in writing at least thirty (30) days prior to the anticipated implementation of the change and are not reviewed by the Review Committee and the Commission but are reviewed at the next site visit:

- Establishment of Off-Campus Sites owned by the sponsoring institution used to meet accreditation standards or program requirements;
- Expansion or relocation of dental facilities within the same building;
- Change in program director. In lieu of a CV, a copy of the new or acting program director's completed BioSketch must be provided to Commission staff. Contact Commission Staff for the BioSketch template.
- First-year non-enrollment. See Policy on Non Enrollment of First Year Students/Residents.
- [Addition of distance education methods \(see reporting requirements found in the Policy on Distance Education\)](#).

The Commission uses the following process when considering reports of program changes. Program administrators have the option of consulting with Commission staff at any time during this process.

1. A program administrator submits the report by **June 1 or December 1**.
2. Commission staff reviews the report to assess its completeness and to determine whether the change could impact the program's potential ability to comply with the accreditation standards. If this is the case, the report is reviewed by the appropriate Review Committee for the discipline and by the Commission.
3. Receipt of the report and accompanying documentation is acknowledged in one of the following ways:
 - a. The program administrator is informed that the report will be reviewed by the appropriate Review Committee and by the Commission at their next regularly scheduled meeting. Additional information may be requested prior to this review if the change is not well-documented; or
 - b. The program administrator is informed that the reported change will be reviewed during the next site visit.
4. If the report will be considered by a Review Committee and by the Commission, the report is

added to the appropriate agendas. The program administrator receives notice of the results of the Commission's review.

The following alternatives may be recommended by Review Committees and/or be taken by the Commission in relation to the review of reports of program changes received from accredited educational programs.

- *Approve the report of program change:* If the Review Committee or Commission does not identify any concerns regarding the program's continued compliance with the accreditation standards, the transmittal letter should advise the institution that the change(s) have been noted and will be reviewed at the next regularly-scheduled site visit to the program.
- *Approve the report of program change and request additional information:* If the Review Committees or Commission does not identify any concerns regarding the program's compliance with the accreditation standards, but believes follow up reporting is required to ensure continued compliance with accreditation standards, additional information will be requested for review by the Commission. Additional information could occur through a supplemental report or a focused site visit,
- *Postpone action and continue the program's accreditation status, but request additional information:* The transmittal letter will inform the institution that the report of program change has been considered, but that concerns regarding continued compliance with the accreditation standards have been identified. Additional specific information regarding the identified concerns will be requested for review by the Commission. The institution will be further advised that, if the additional information submitted does not satisfy the Commission regarding the identified concerns, the Commission reserves the right to request additional documentation, conduct a special focused site visit of the program, or deny the request.
- *Postpone action and continue the program's accreditation status pending conduct of a special site visit:* If the information submitted with the initial request is insufficient to provide reasonable assurance that the accreditation standards will continue to be met, and the Commission believes that the necessary information can only be obtained on-site, a special focused site visit will be conducted.
- *Deny the request:* If the submitted information does not indicate that the program will continue to comply with the accreditation standards, the Commission will deny the request for a program change. The institution will be advised that they may re-submit the request of program change with additional information if they choose. If the program change was submitted retroactively, and non-compliance is identified, the program's accreditation status will be changed. The transmittal letter will inform the institution that the report of program change has been considered, but an area of non-compliance with the accreditation standards has been identified. The program's accreditation status is changed and additional specific information regarding the identified area(s) of non-compliance will be requested for review by the Commission.

Revised: 8/20; 1/20; 8/18; 2/18; 8/17; 8/16; 2/16; 8/15; 2/15; 8/13 2/12, 8/11, 8/10, 7/09, 7/07, 8/02, 7/97; Reaffirmed: 7/07, 7/01, 5/90; CODA: 05/91:11

Revised Policy On Preparation and Submission of Documents EOPP Page 85

E. POLICY ON PREPARATION AND SUBMISSION OF DOCUMENTS TO THE COMMISSION

All institutions offering programs accredited by the Commission are expected to prepare documents that adhere to guidelines set forth by the Commission on Dental Accreditation, including required verification signatures by the institution's chief executive officer, the institution's chief academic officer, and program director. These documents may include, but are not limited to, self-study, responses to site visit/progress reports, initial accreditation applications, reports of program change, and transfer of sponsorship and exhibits. The Commission's various guidelines for preparing and submitting documents, including electronic submission, can be found on the Commission's website or obtained from the Commission staff.

In addition, all institutions must meet established deadlines for submission of requested information. Any information that does not meet the preparation or submission guidelines or is received after the prescribed deadlines may be returned to the program, which could affect the accreditation status of the program.

Electronic Submission of Accreditation Materials: All institutions will provide the Commission with an electronic copy of all accreditation documents and related materials, which conform to the Commission's Electronic Submission Guidelines. Electronic submission guidelines can be found on the Commission's website or obtained from the Commission staff. ~~will be provided to programs.~~ Accreditation documents and related materials must be complete and comprehensive.

Documents that fail to adhere to the stated Guidelines for submission ~~Submission~~ will not be accepted and the program will be contacted to submit a corrected document. In this case, documents may not be reviewed at the assigned time which may impact the program's accreditation status.

Compliance with Health Insurance Portability and Accountability Act (HIPAA). HIPAA is the federal law that governs how "Covered Entities" handle the privacy and security of patients' protected health information (PHI). HIPAA Covered Entities include health care providers ~~and health plans~~ that send certain information electronically as well as certain health plans and clearinghouses. The Commission may be deemed a "Business Associate" of ~~certain~~ institutions that are HIPAA Covered Entities. A Business Associate is an individual or entity that performs a function or activity on behalf of a HIPAA Covered Entity involving the use or disclosure of individually identifiable health information. Business Associates must comply with certain HIPAA Security and Privacy rules provisions and implement training programs. The Commission "~~HIPPA~~ HIPAA Policy and Procedure Manual" is updated on a yearly basis periodically. ~~A copy of the manual is available upon request.~~ All Commission site visitors, Review Committee members, Commissioners, and staff are required to complete attend a CODA HIPAA training exercise session on a yearly basis.

The program's documentation for CODA must not contain any patient protected health information (PHI) or sensitive personally identifiable information (PII). If the program submits documentation that does not comply with the policy on PHI or PII, CODA will assess an administrative processing fee of \$4,000 per program submission to the institution; a program's resubmission that continues to contain PHI or PII will be assessed an additional \$4,000 administrative processing fee.

Revised: 8/20; Adopted 1/20 (Formerly Policy on Electronic Submission of Accreditation Materials, Commission Policy and Procedure Related to Compliance with the Health Insurance Portability and Accountability Act [HIPAA] and Policy on Preparation and Submission of Reports to the Commission)

Revised Policy On Failure to Comply with Commission Requests for Survey Information EOPP Page 86

H. POLICY ON FAILURE TO COMPLY WITH COMMISSION REQUESTS FOR SURVEY INFORMATION

The Commission on Dental Accreditation continuously monitors the educational programs it accredits through annual surveys. Completion of the Commission's annual survey by each accredited program is a requirement for continued participation in the voluntary accreditation program. The Commission expects that all accredited programs will ~~return~~ submit completed surveys by the stated deadline. Administrators who anticipate difficulty in submitting completed surveys on time must submit a written request for extension prior to the date on which the survey is due. Requests for extension must specify a submission date no later than two (2) weeks beyond the initial deadline date. If a program fails to submit its completed survey or request for extension by the deadline, the Commission will notify the institution that action to withdraw accreditation will be initiated at the next Commission meeting.

Revised: **8/20;** 8/19; Reaffirmed: 8/15; 8/10, 7/07, 7/01, 12/79, 4/83

Revised Policy on Non-Enrollment of First Year Students/Residents EOPP Page 87

J. POLICY ON NON-ENROLLMENT OF FIRST YEAR STUDENTS/RESIDENTS

First-year non-enrollment must be reported to the Commission.

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 (1) 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 Reporting Program Changes in Accredited Programs, Initial Accreditation, Intent to Withdraw Accreditation, Voluntary Discontinuance, and Discontinuance or Closure of Educational Programs Accredited by The Commission and Teach-Out Plans for additional information.

Revised: 8/20; 8/16; 2/15; Reaffirmed: 8/15; 8/10, 7/07, 7/01, 7/99, 12/87, 4/83, 12/76

Revised Policy on Enrollment Increases in Advanced Dental Education Programs EOPP Page 87

L. POLICY ON ENROLLMENT INCREASES IN ADVANCED DENTAL EDUCATION PROGRAMS

An advanced dental education program considering or planning an enrollment increase, or any other substantive change, should notify the Commission early in the program's planning. Such notification will provide an opportunity for the program to seek consultation from Commission staff regarding the potential effect of the proposed change on the accreditation status and the procedures to be followed.

The following advanced dental education disciplines have authorized total complement enrollment: dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery (per year enrollment is authorized), orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics. Programs with authorized enrollment must use the discipline-specific Guidelines to request and obtain approval for an increase in enrollment prior to implementing the increase.

The following advanced dental education disciplines do not have authorized enrollment: advanced education in general dentistry, general practice residency, dental anesthesiology, oral medicine, and orofacial pain. However, approval of an increase in enrollment in these advanced dental education programs must be reported to the Commission if the program's total enrollment increases beyond the enrollment at the last site visit or prior approval of enrollment increase. Programs must use the discipline-specific Guidelines to request an increase in enrollment prior to implementing the increase. Upon submission of the program change report, a substantial increase in program enrollment as determined by preliminary review by the discipline-specific Review Committee Chair, will require prior approval by CODA.

A request for an increase in enrollment with all supporting documentation must be submitted in writing to the Commission by June 1 or December 1. A program must receive Commission approval for an increase in enrollment prior to publishing or announcing the additional positions or accepting additional students/residents. Failure to comply with this policy will jeopardize the program's accreditation status, up to and including withdrawal of accreditation.

Requests for *retroactive permanent* increases in enrollment will not be considered. The Commission may consider retroactive temporary enrollment increases due to special circumstances on a case-by-case basis, including, but not limited to:

- Student/Resident extending program length due to illness, parental leave, incomplete projects/clinical assignments, or concurrent enrollment in another program;
- Unexpected loss of an enrollee and need to maintain balance of manpower needs;
- Urgent manpower needs demanded by U.S. armed forces; and
- Natural disasters.

If a program has enrolled beyond the approved number of students/residents without prior approval by the Commission, the Commission may or may not retroactively approve the enrollment increase without a special focused site visit at the program's expense.

If the focused visit determines that the program does not have the resources to support the additional student(s)/resident(s), the program will be placed on "intent to withdraw" status and no additional student(s)/resident(s) beyond the previously approved number may be admitted to the program until the deficiencies have been rectified and approved by the Commission. Student(s)/Resident(s) who have already been formally accepted or enrolled in the program will be allowed to continue.

Revised: 8/20; 1/20; 8/18; 8/16; 2/16; 8/15; 8/10; Reaffirmed: 7/07; CODA: 08/03:22

Revised Policy on Principles and Ethics in Programmatic Advertising EOPP Page 91

Q. POLICY STATEMENT ON PRINCIPLES OF ETHICS IN PROGRAMMATIC ADVERTISING AND STUDENT RECRUITMENT

All accredited dental and dental-related education programs, or individuals acting on their behalf, are expected to exhibit integrity and responsibility in programmatic advertising and student recruitment. Responsible self-regulation requires rigorous attention to principles of ethical practice. If the Commission determines that the institution or program has provided the public with incorrect or misleading information regarding the accreditation status of the program, the contents of site visit evaluations reports, or the Commission's accrediting actions with respect to the program, the program must provide public correction of this information to all possible audiences that received the incorrect information. The Commission must be provided with documentation of the steps taken to provide public correction. Other areas covered in this policy include, but are not limited to:

Advertising, Publications, and Promotional Literature

- Educational programs and services offered should be the primary emphasis of all advertisements, publications, promotional literature and recruitment activities.
- All statements and representations should be clear, factually accurate and current. Supporting information should be kept on file and be readily available for review.
- The sponsor of the educational program must be clearly identified when referencing the program's accreditation status with CODA.
- The sponsor of the educational program must be clearly identified when referencing any educational activity site(s) used by the program.
- Catalogs and other official publications should be readily available and accurately depict:
 - a. purpose and goals of the program(s);

- b. admission requirements and procedures;
 - c. degree and program completion requirements;
 - d. faculty, with degrees held and the conferring institution;
 - e. tuition, fees, and other program costs including policies and procedures for refund and withdrawal; and
 - f. financial aid programs.
- College catalogs and/or official publications describing career opportunities should provide clear and accurate information on the following, as applicable:
 - a. national and/or state requirements for eligibility for licensure or entry into the occupation or profession for which education and training are offered;
 - b. any unique requirements for career paths, or for employment and advancement opportunities in the profession or occupation; and

Student Recruitment for Admissions

- Student recruitment should be conducted by well-qualified admissions officers, faculty or trained volunteers whose credentials, purposes, and position or affiliation with the program and/or institution are clearly specified.
- Independent contractors or agents used by the program and/or institution for recruiting purposes should be governed by the same principles as institutional admissions officers and volunteers.
- Prospective students must be fully informed of program costs, available financial aid and repayment options.
- All catalogs and career materials should accurately describe the skills and competencies that students will need at the time of admission to the program. Options to accommodate students with lesser or greater skills, such as remediation or advanced standing programs, should be included in this description.
- If information about employment or career opportunities is included in an official publication, such information must be current and accurate.
- Accurate information must be provided for all dental education programs.
- Programs applying for accreditation must make it clear that submission of an application for accreditation indicates the institution has entered into the accreditation process; it does not mean that the program is accredited. Further, programs must not enroll students/residents until accreditation is granted and must make it clear to applicants that accreditation is granted only by the Commission.

Educational programs accredited by the Commission on Dental Accreditation should assume responsibility for informing the Commission office of improper or misleading advertising or unethical practices which come to their attention, so that the Commission may take appropriate steps to be sure the situation is rectified as quickly as possible.

Revised: 8/20; 8/18; 8/17; 8/15; 7/04, 7/96; Reaffirmed: 8/10, 7/09, 7/01; Adopted: 12/88

Revised Staff Consulting Services
EOPP Page 93

R. STAFF CONSULTING SERVICES

The staff of the Commission on Dental Accreditation is available for consultation to all educational programs which fall within the Commission's accreditation purview. Educational institutions conducting programs oriented to dentistry are encouraged to obtain such staff counsel and guidance by written or telephone request. Consultation is provided on request prior to, as well as subsequent to, the Commission's granting of accreditation to specific programs. Consultation shall be limited to providing information on CODA's policies and procedures. The Commission expects to be reimbursed if substantial costs are incurred.

Revised: 8/20; Reaffirmed: 8/15; 8/10

Revised Policy on Distance Education
EOPP Page 97

T. POLICY ON DISTANCE EDUCATION

The Commission's accreditation standards have been stated, purposefully, in terms which allow flexibility, innovation and experimentation. Regardless of the method(s) used to provide instruction, the Commission expects that each accredited program will comply with the accreditation standards.

Distance education means education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

- the internet;
- one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- audio conferencing; and/or
- video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed above.

A program that is planning to implement the use of distance education methods must submit a report of program change (See Policy on Reporting Program Changes in Accredited Programs) and include evidence of the program's compliance with the Student Identity Verification noted below. Upon review and Commission acknowledgement that the program has addressed all Student Identity Verification requirements, the use of distance education and the program's compliance with the below noted items will be further reviewed at the time of the program's next site visit.

Revised: 8/20; 8/10; Reaffirmed: 8/15

1. Student Identity Verification Requirement For Programs That Have Distance Education Sites:

Programs that offer distance education must:

- have a processes in place through which the program establishes that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit;
- verify the identity of a student who participates in class or coursework by using, at the option of the program, methods such as a secure login and pass code; proctored examinations; and/or new or other technologies and practices that are effective in verifying student identity;
- make clear in writing that processes are used that protect student privacy;
- notify students of any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

~~Programs that offer distance education must have processes in place through which the program establishes that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit. Programs must verify the identity of a student who participates in class or coursework by using, at the option of the program, methods such as a secure login and pass code; proctored examinations; and/or new or other technologies and practices that are effective in verifying student identity. The program must make clear in writing that processes are used that protect student privacy and programs must notify students of any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.~~

Revised: 8/20; Reaffirmed: 8/15; Adopted: 8/10

Removal of Policy on Personally Identifiable Student Information Formerly EOPP Page 99

~~V. POLICY ON PERSONALLY IDENTIFIABLE STUDENT INFORMATION~~

~~On behalf of the Commission on Dental Accreditation, the American Dental Association's Health Policy Institute annually collects data from each accredited dental, advanced dental and allied dental education program. As a specialized accrediting agency recognized by the United States Department of Education, the Commission is required to monitor accredited programs' compliance with accreditation standards and established policies related to enrollment, diversity, student achievement and program outcomes. Data, which includes some personally identifiable student information, is collected via the annual surveys and is utilized to assist the Commission in meeting these requirements.~~

~~National aggregate data collected via the annual surveys is reported and published by the ADA Health Policy Institute in the Annual Reports on Dental Education, Advanced Dental Education and Allied Dental Education. Data specific to an accredited program is reported in a summary data profile which is made available to a program and a visiting committee prior to a site visit.~~

~~Individual student identifiers such as the dental personal identification number (DENTPIN), gender, race or grade point average are not used in the site visit process or in any published reports. However, this information is used by the Commission in data verification procedures,~~

~~e.g. determining if an individual student has been inadvertently listed and counted more than once, impacting summary data. For some advanced dental education programs with enrollment restrictions, this information is essential for determining compliance with accreditation standards.~~

~~The Commission and the ADA Health Policy Institute recognize their responsibility to collect personally identifiable student information solely for accreditation purposes and their obligation to preserve the confidential nature of the information. This information is not released to the public.~~

~~Revised: 8/18; 8/15; 8/10; Reaffirmed: 7/06; Adopted: 7/00~~

Revision of Policy on Requests for Contact Distribution Lists EOPP Page 101

BB-CC. POLICY ON REQUESTS FOR CONTACT DISTRIBUTION LISTS

Periodically, the Commission receives requests for contact distribution lists from the communities of interest. The nature and scope of a request will determine whether the Commission will be able to comply with the request. For all types of requests, a “Contact Distribution List Request Form” must be submitted to the Director of the Commission, who will consult with CODA staff regarding the potential for supplying the requested lists based on staff workload capacity and the purpose for which the contact list is requested. This form is available upon request from the Commission office. Examples of potential requesting parties include member and non-member dentists; other dental professionals; deans, dental faculty and affiliates of dental education programs; non-profit dental organizations; researchers; and government officials (Federal and state). Contact distribution lists will not be supplied to commercial interests. A commercial interest is defined as an entity or corporation whose primary purpose for requesting the information is to sell a product or service. Granting the request is at the sole discretion of the Commission.

Additional requirements:

- Requests will be granted only in ~~the following output formats used by the Commission: Word or Excel format.~~
- The Commission office should be contacted for current fees and rates.
- A formal agreement specifying the permitted use of the data is required before the Commission will act on the request.

Revised: 8/20 8/15; 1/14; Adopted: 8/12