CHANGES MADE TO EVALUATION AND OPERATIONAL POLICIES AND PROCEDURES MANUAL (EOPP)

Underline indicates addition; Strikethrough indicates deletion

J. SITE VISITORS

The Commission uses site visitors with education and practice expertise in the discipline or areas being evaluated to conduct its accreditation program. Nominations for site visitors are requested from national dental and dental-related organizations representing the areas affected by the accreditation process. Self-nominations are accepted. Site visitors are appointed by the Commission annually and may be re-appointed.

During the term of service as a Review Committee member, these individuals should not serve as site visitors for an actual accreditation site visit to an accredited or developing program, unless deemed necessary. Two instances when a review committee member could serve on a site visit include: 1) an inability to find a site visitor from the comprehensive site visitor list, or 2) when the review committee believes a member should attend a visit for consistency in the review process. This applies only to site visits that would be considered by the same review committee on which the site visitor is serving. Review committee members are prohibited from serving as independent consultants for mock accreditation purposes. These policies help avoid conflict of interest in the decision making process and minimize the need for recusals.

During the term of service as a commissioner, these individuals may not independently consult with a CODA-accredited program or a program applying for CODA accreditation. In addition, site visitors serving on the Commission may not serve on a site visit team during their terms. All other active site visitors who independently consult with educational programs accredited by CODA or applying for accreditation must identify all consulting roles to the Commission and must file with the Commission a letter of conflict acknowledgement signed by themselves and the institution/program with whom they consulted. All conflict of interest policies as noted elsewhere in this document apply. Contact the CODA office for the appropriate conflict of interest declaration form.

Prior to a site visit, a list of site visitors and other participants is reviewed by the institution/program for conflict of interest or any other potential problem. The program/institution being site visited will be permitted to remove individuals from the list if a conflict of interest, as described in the Commission’s Conflict of Interest Policy, can be demonstrated. Information concerning the conflict of interest must be provided in writing clearly stating the specifics of the conflict.

Site visitors are appointed by the Chair and approved by the institution’s administration, i.e. dental school dean or program director. The visiting committee conducts the site visit and prepares the report of the site visit findings for Commission action. The size and composition of a visiting committee varies with the number and kinds of educational programs offered by the
institution, and will include, whenever possible, at least one (1) educator and one (1) practitioner. All visiting committees will include at least one person who is not a member of a Review Committee of the Commission or a Commission staff member. Two dental hygiene site visitors shall be assigned to dental school-sponsored dental hygiene site visits.

When appropriate, a generalist representative from a regional accrediting agency may be invited by the chief executive officer of an institution to participate in the site visit with the Commission’s visiting committee. A generalist advises, consults and participates fully in committee activities during a site visit. The generalist’s expenses are reimbursed by the institution. The generalist can help to ensure that the overall institutional perspective is considered while the specific programs are being reviewed.

The institution is encouraged to invite the state board of dentistry to send a current member to participate in the site visit. If invited, the current member of the state board receives the same background materials as other site visit committee members and participates in all site visit conferences and executive sessions. The state board of dentistry reimburses its member for expenses incurred during the site visit.

In addition to other participants, Commission staff member may participate on the visiting committee for training purposes. It is emphasized that site visitors are fact-finders, who report committee findings to the Commission. Only the Commission is authorized to take action affecting the accreditation status.

Revised: 2/23; 4/22; 8/19; 2/16; 8/14; 1/14; 1/03, 1/00, 7/97; Reaffirmed: 8/10, 7/09, 7/07, 7/06, 7/01; CODA: 07/96:10, 12/83:4

M. SITE VISIT PROCEDURES

The basic purpose of the site visit is to permit peers to assess a program’s compliance with the accreditation standards and with its own stated goals and objectives. Information provided in the self-study is confirmed, documentation is reviewed, interviews are conducted and the programs are observed by the visiting committee. Information related to the site visit is viewed as confidential. Therefore, no audio, video or other type of recording of the site visit is permitted. The Commission’s policy on confidentiality, elsewhere in this document, gives more specific information about the degree of confidentiality extended to various materials.

The Commission recognizes that there is considerable latitude in determining procedures and methodology for site visits. Experience has shown that the conference method for conducting a site visit is widely favored and effective. Conferences are scheduled with identified administrators, faculty and students at specified times.

In all cases, the recommendations of the dean or program director determine protocol to be followed during conferences with chief executive officers of the parent institution and/or their
appointed representatives. Program administrators are excused during conferences scheduled with faculty members, students or other invitees.

In addition to formal scheduled conferences, committee members may informally discuss department and division programs with chairs and faculty members throughout the site visit. The visiting committee chair will make every effort to schedule hearings with any individual or group of individuals wishing to present information about a program.

Executive sessions of the visiting committee are a critical part of the on-site evaluation process. These sessions are scheduled at intervals during the day and evening and provide time for the committee to meet privately to prepare its findings and recommendations.

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.

Revised: 8/18; 2/16; Reaffirmed: 8/19; 8/10

1. Duration Of Site Visits:

Predoctoral dental education program and initial accreditation (pre-enrollment) site visits are scheduled for 2.5 days. Advanced and allied dental education programs evaluated during a comprehensive dental school visit are 1.5 days.

Single-discipline advanced dental education program site visits scheduled outside of a comprehensive dental school visit are 1 day in length. Multi-discipline advanced dental education site visits conducted outside of a comprehensive dental school visit are 1.5 days in length. Initial accreditation (pre-enrollment) site visits are typically 1 day in length.

Allied dental education site visits scheduled outside of a comprehensive dental school visit are of varying length based on the number of programs to be evaluated. All single discipline visits are 1.75 days. All multiple visit site visits are 2.5 days. Initial accreditation (pre-enrollment) site visits are typically 1.5 days.

Additional time can be added to any educational program site visit if additional training sites will be evaluated or if other cause exists.

Revised: 8/18; 2/16; 8/14; 7/01; Reaffirmed: 8/19; 8/10, 7/07; CODA: 07/95:3

2. Final Conferences:

It is the visiting committee’s responsibility to prepare and present an oral summary of its findings to the dean, chief of dental service, program director(s) and the institutional executives. Two separate conferences are scheduled at the end of every visit, one with the program director(s) and chief of dental service or dental dean and one with the chief executive officer(s) of the institution.

During these conferences, the committee presents the findings it will submit to the Commission. These findings address both program strengths and weaknesses. The committee also informs individuals in charge of the program(s) about the Commission’s procedures for processing and
acting on the report. In keeping with the Commission’s policy on Public Disclosure and Confidentiality, these final conferences are not recorded on tape or by stenographer. Note taking, however, is permitted and encouraged.

Site visitors or any other participants are not authorized, under any circumstances, to disclose any information obtained during site visits. For more specific information, see the Commission’s Statement of Policy on Public Disclosure and Confidentiality.

Revised: 8/14; Reaffirmed: 8/19; 8/10

3. Rescheduling Dates Of Site Visits: In extraordinary circumstances the Commission staff can reschedule the site visit if the program will be reviewed within the same calendar year. Commission staff can also reschedule the site visit to an earlier year to coincide with other programs at the institution. If the site visit would occur in a later year because of the rescheduling, the request must be considered and acted on by the Commission. In general, the Commission does not approve such requests, but it does review each request on a case-by-case basis. Should a site visit be changed the term of the accreditation will remain unchanged.

Revised: 8/16; Reaffirmed: 8/19; 8/14; 8/10

4. Enrollment Requirement For Site Visits For Fully Developed Programs: Site visit evaluations of dental, allied dental and advanced dental education programs will be conducted at the regularly established intervals, provided that students are enrolled in at least one year of the program. If no students are enrolled on the established date for the site visit, the visit will be conducted when students are enrolled, preferably in the latter part of the final year prior to graduation. In instances where the program utilizes educational activity sites where students/residents/fellows are primarily located for their education, enrollment requirements as noted above apply. (Refer to the Policy on Non-enrollment of First Year Students)

Revised: 2/23; 8/19; 5/93; Reaffirmed: 8/14; 8/10, 7/07, 7/01

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

First-year non-enrollment must be reported to the Commission. The Commission expects institutions to maintain compliance with all accreditation standards during a period of non-enrollment. In addition, resources accounting for the potential enrollment capacity of the program must be maintained during a period of non-enrollment.

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 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
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: 2/23; 2/22; 2/21; 8/20; 8/16; 2/15; Reaffirmed: 8/15; 8/10, 7/07, 7/01, 7/99, 12/87, 4/83, 12/76

O. POLICY ON DISCONTINUANCE OR CLOSURE OF EDUCATIONAL PROGRAMS ACCREDITED BY THE COMMISSION AND TEACH-OUT PLANS

It is the responsibility of an institution sponsoring an accredited program to report to the Commission any programmatic change that might affect a program’s ability to meet accreditation standards.

When an institution is considering discontinuance or closure of a Commission-accredited educational program that currently enrolls students/residents, the Commission must be notified officially in writing as early as possible in the decision making process. Specifically, the Commission must be informed of the institution’s reason for program discontinuance and/or closure, and the program’s plans for the entire Teach-Out period, during which students/residents are enrolled, including a detailed explanation of any significant changes relative to retention of qualified faculty and support personnel, student/resident enrollment by class, the didactic and clinical teaching programs (including curriculum, extramural experiences and facilities), and financial support that will be provided. During the period of Teach-Out, the program may not enroll additional students/residents in any year of the program.

The institution must ensure that the program continues to meet minimum accreditation standards and that students/residents and other interested parties are protected throughout the Teach-Out period. In this regard, the Commission reserves the right to closely monitor the Teach-Out through the annual accreditation survey, or periodic reports from the institution detailing changes in administration, faculty, curriculum, facilities, finances, and other major components that could affect the quality of the educational program. In addition, the Commission reserves the right to conduct a special site visit following review of each of these reports. If a program fails to submit a Teach-Out report or requested monitoring information, the Commission will notify the chief executive officer of the institution of its intent to withdraw accreditation at its next scheduled meeting.

The institution has moral and ethical obligations to meet the commitment and responsibility it assumes when it matriculates students/residents into the program; those obligations include providing the students/residents with the opportunity to complete the educational sequence at that institution. When an institution indicates its intent to close an accredited program or to voluntarily discontinue participation in the Commission’s accreditation program, and if there will
not be adequate resources for the program to meet its obligations to enrolled students/residents and allow them to complete their training, the institution must assist students/residents in a timely fashion in transferring to other accredited programs in order to complete their educational program. The Commission will assist students/residents in transferring to other accredited programs; this assistance will be provided in the form of guidance with reporting program changes to CODA for review, in cooperation with the institution that sponsors the closing program.

The program to which students/residents transfer should be able to demonstrate that the finances, facilities, faculty, and patient resources can accommodate the transferring students/residents. Any changes in program enrollment that would result from the transfer of students/residents must be reported to the Commission by the receiving program(s) in accordance with the Commission’s policy for reporting program changes. Formal teach-out agreements must be developed with all institutions accepting transferring students/residents to specify the conditions of the transfer. These agreements must ensure that the combined educational experiences meet the Commission’s accreditation standards. Such teach-out agreements must be submitted to the Commission as part of the Teach-Out plan.

Students/Residents who are enrolled and successfully complete the program during the Teach-Out will be considered graduates of an accredited program. Students/Residents who transfer to another program and successfully complete that program will be considered graduates of the latter program. Such students/residents will be considered graduates of an accredited program if the latter program is accredited during the time such students/residents are enrolled. It will be the closing institution’s responsibility to ensure that appropriate student/resident records and transcripts are maintained for future reference.

The Commission will take action to affirm a program’s reported discontinuance or closure effective date at the appropriate time when the program no longer enrolls students/residents in any year of the program. The Commission has developed Guidelines for Submitting Teach-Out Reports by Institutions Discontinuing or Closing Commission-Accredited Educational Programs to assist institutions with preparing teach-out reports for the Commission. These guidelines are routinely distributed along with the Commission’s Policy on Discontinuance or Closure of Educational Programs.

Revised: 2/23; 8/17; 2/16; 8/15; 5/93; Reaffirmed: 8/20; 8/10, 7/07, 07/01, 12/92, 12/85, 12/79

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D. POLICY AND PROCEDURE REGARDING INVESTIGATION OF COMPLAINTS AGAINST EDUCATIONAL PROGRAMS

The following policy and procedures have been developed to handle the investigation of “formal” complaints and “anonymous” comments/complaints about an accredited program, or a program which has a current application for initial accreditation pending, which may not be in substantial compliance with Commission standards or established accreditation policies.
The Commission will consider formal, written, signed complaints using the procedure noted in the section entitled “Formal Complaints.” Unsigned comments/complaints will be considered “anonymous comments/complaints” and addressed as set forth in the section entitled “Anonymous Comments/Complaints.” Oral comments/complaints will not be considered.

**Formal Complaints**
A “formal” complaint is defined as a complaint filed in written (or electronic) form and signed by the complainant. This complaint should outline the specific policy, procedure or standard in question and rationale for the complaint including specific documentation or examples. Complainants who submit complaints verbally will receive direction to submit a formal complaint to the Commission in written, signed form following guidelines in the EOPP manual.

1. **Investigative Procedures for Formal Complaints:** Students, faculty, constituent dental societies, state boards of dentistry, patients, and other interested parties may submit an appropriate, signed, formal complaint to the Commission on Dental Accreditation regarding any Commission accredited dental, allied dental or advanced dental education program, or a program that has an application for initial accreditation pending. An appropriate complaint is one that directly addresses a program’s compliance with the Commission’s standards, policies and procedures. The Commission is interested in the continued improvement and sustained quality of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

In accord with its responsibilities to determine compliance with accreditation standards, policies, and procedures, the Commission does not intervene in complaints as a mediator but maintains, at all times, an investigative role. This investigative approach to complaints does not require that the complainant be identified to the program.

The Commission, upon request, will take every reasonable precaution to prevent the identity of the complainant from being revealed to the program; however, the Commission cannot guarantee the confidentiality of the complainant.

The Commission strongly encourages attempts at informal or formal resolution through the program's or sponsoring institution's internal processes prior to initiating a formal complaint with the Commission. The following procedures have been established to manage complaints:

When an inquiry about filing a complaint is received by the Commission office, the inquirer is provided a copy of the Commission’s Evaluation and Operational Policies and Procedures Manual which includes the policies and procedures for filing a complaint and the appropriate accreditation standards document.

The initial screening is usually completed within thirty (30) days and is intended to ascertain that the potential complaint relates to a required accreditation policy or procedure (i.e. one contained in the Commission’s Evaluation and Operational Policies and Procedure Manual) or to one or
more accreditation standard(s) or portion of a standard which have been or can be specifically identified by the complainant.

Written correspondence clearly outlines the options available to the individual. It is noted that the burden rests on the complainant to keep his/her identity confidential. If the complainant does not wish to reveal his/her identity to the accredited program, he/she must develop the complaint in such a manner as to prevent the identity from being evident. The complaint must be based on the accreditation standards or required accreditation procedures. Submission of documentation which supports the noncompliance is strongly encouraged.

When a complainant submits a written, signed statement describing the program’s noncompliance with specifically identified policy(ies), procedure(s) or standard(s), along with the appropriate documentation, the following procedure is followed:

1. The materials submitted are entered in the Commission’s database and the program’s file and reviewed by Commission staff. At this point, the complaint is the property of the Commission and may not be withdrawn by the complainant for the purposes of the Commission’s review.
2. Legal counsel, the Chair of the appropriate Review Committee, and the applicable Review Committee members may be consulted to assist in determining whether there is sufficient information to proceed.
3. If the complaint provides sufficient evidence of probable cause of noncompliance with the standards or required accreditation procedures, the complainant is so advised and the complaint is investigated using the procedures in the following section, formal complaints.
4. If the complaint does not provide sufficient evidence of probable cause of noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s), the complainant is so advised. The complainant may elect:
   a. to revise and submit sufficient information to pursue a formal complaint; or
   b. not to pursue the complaint. In that event, the decision will be so noted and no further action will be taken.

Initial investigation of a complaint may reveal that the Commission is already aware of the program’s noncompliance and is monitoring the program’s progress to demonstrate compliance. In this case, the complainant is notified that the Commission is currently addressing the noncompliance issues noted in the complaint. The complainant is informed of the program’s accreditation status and how long the program has been given to demonstrate compliance with the accreditation standards and how to monitor the program’s status through the Commission’s website.

Revised: 2/23; 2/18; 8/17; 1/14, 11/11; Reaffirmed: 8/21; 8/15; 8/10

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D. DUE PROCESS RELATED TO APPEAL OF ACCREDITATION STATUS DECISIONS

An institution/program may request a special appearance (hearing) before the appropriate Review Committee in order to supplement the written information about the program which has already
been provided to the Review Committee. (See Due Process Related to Review Committee Special Appearance).

If the Review Committee’s recommended accreditation status to the Commission is “approval with reporting requirements,” “approval with reporting requirements, intent to withdraw,” or if the Review Committee recommends denying a requested program change, the Review Committee will make a recommendation to the Director and Chair of the Commission and indicate whether an appearance before the full Commission is appropriate.

If representatives of the institution choose to appear before the Commission, they may present arguments that the Review Committee made an error in judgment, based on the information available, in making the accreditation status or action recommendation. During the special appearance before the Commission, no new information regarding correction of deficiencies subsequent to the Review Committee special appearance may be presented. The institution’s representative(s) may attend the Commission meeting only during the time assigned for the hearing.

If the Commission determines the program accreditation status is “approval with reporting requirements,” “approval with reporting requirements, intent to withdraw,” or denies a requested program change, and the institution/program believes that the Commission has made an error in judgment regarding accreditation status or action, a special appearance (hearing) before the Commission may be requested sixty (60) days prior to the Commission meeting. The special appearance (hearing) before the Commission would be held at the next regularly scheduled meeting. At the hearing, representatives of the institution may present arguments that the Commission, based on the information available when the decision was made, made an error in judgment in determining the accreditation status of the program. The Director of the Board of Commissioners must receive any written evidence or argument at least thirty (30) days prior to the hearing. Under these circumstances, no new information regarding correction of deficiencies subsequent to the site visit and previous Commission meeting may be presented. The institution’s representative(s) may attend the Commission meeting only during the time assigned for the hearing.

The decision of the Commission on the accreditation status of the program after this special appearance is final.

Revised: 2/23; 8/18; 8/16; Reaffirmed: 8/21; 8/10

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13. Procedure For Disclosure Notice Of Adverse Actions: The following procedure is used when an adverse action (to deny or withdraw accreditation) is taken. Applicants, when they inquire about initial accreditation, are to be notified by Commission staff that the Notice of Reasons for Adverse Actions statement will be prepared and distributed should accreditation be denied.
1. The Commission sends notice of any initiated adverse action in a transmittal letter to the
appropriate institutional executives no later than fourteen (14) days after the Commission meeting. This letter is sent by tracked electronic communication mail (including email) and includes the reasons for any adverse action to deny or withdraw accreditation. All current and prospective students/residents/fellows must be informed by the institution of the Commission’s notice of any initiated adverse action within seven (7) business days of the program’s receipt of the notice. The USDE Secretary, the appropriate state entities, and any appropriate institutional accrediting agency are notified at the same time, usually by a letter to the Secretary with copies to the other entities and the institution.

2. A statement of the reasons for any adverse action is developed and available for distribution within sixty (60) days after the decision is final. This new statement will include the same information that has been contained in the transmittal letter. For this reason, the statement will be drafted and the draft will be sent to the institution/program for review at the same time as the transmittal letter. As needed, the draft statement will be reviewed by legal counsel prior to being sent.

3. The institution must notify the Commission within fourteen (14) days if it wishes to indicate an intent to appeal an adverse action. If an intent to appeal is received, the usual appeal procedures are followed according to the Commission policy on Due Process Related to Appeal of Accreditation Actions.

4. If an intent to appeal is not received by the fourteen (14) day deadline specified, the adverse action is considered final and the USDE Secretary, the appropriate state entities, and any appropriate institutional accrediting agency are notified at the same time, usually by a letter to the Secretary with copies to the other entities and the institution.

5. During the same fourteen (14) days, the institution/program will be asked to review the draft statement and:
   a. indicate agreement with the statement; and/or,
   b. make official comments with regard to the decision, or state that the affected institution has been offered the opportunity to provide official comment.

6. When the final statement (or statement and response) has been developed and signed by both parties, it will be distributed as required in the regulations to the USDE Secretary, to the appropriate state licensing or authorizing agency, and to any appropriate institutional accrediting agency, at the same time, usually by a letter to the Secretary with copies to the other entities and the institution. Written notice to the public will occur within one (1) business day of its notice to the program through the Commission’s website. All current and prospective students/residents/fellows must be informed by the institution of the Commission’s final decision within seven (7) business days of the program’s receipt of the notice.

7. The Commission’s final decision; the statement summarizing the reasons for the Commission’s decision; and the program’s official comments will be posted on the Commission’s website no later than sixty (60) days after the decision is final.

When there are no differences of opinion regarding the statement, it may be possible to send it to the Secretary along with the letter in step #4 above, along with posting the final decision and reasons on the Commission’s website.

Revised: 2/23; 4/22; 2/21; 8/17; 5/12; 7/06; Reaffirmed: 8/22; 8/14; 8/10; Adopted: 7/00; CODA: 07/94:
G. POLICY ON PROGRAMS DECLINING A RE-EVALUATION VISIT

When an institution elects not to schedule a site visit, the chief executive officer of the institution will be informed of the Commission’s intent to withdraw accreditation at its next scheduled meeting. This notification shall be by tracked electronic communication mail with required signature.

Revised: 2/23; 8/15; Reaffirmed: 8/20; 8/10, 7/07, 7/01, 12/80

VII. DUE PROCESS

The Commission makes every effort to protect the due process rights of institutions and programs and follow ethical accrediting practices. Because due process is a necessary and integral part of accreditation, the Commission builds due process measures into various aspects of the accreditation process. For example, the Commission sends a copy of the site visit report to the institution for review prior to action by the Commission and encourages the institution to prepare a response to the report.

Adverse actions, or those that may be appealed, are defined as those related to denial or withdrawal of accreditation. Such decisions become final fourteen (14) days after the date on the transmittal letter or when any appeal has been resolved. The Commission has procedures in place to provide notice of the reasons for taking an adverse accreditation action. Such procedures are required in order for accrediting agencies to comply with U.S. Department of Education's Criteria and Procedures for Recognition of Accrediting Agencies.

Notice of “intent to withdraw” accreditation at a subsequent meeting is sent by tracked electronic communication mail within fourteen (14) days. (See “Notice of Accreditation Actions to Programs/Institutions” for more information.)

The following sections describe the Commission’s due process practices and indicate the sequence of events that is typically followed when such procedures are needed.

Revised: 2/23; 8/16; Reaffirmed: 8/21

E. DUE PROCESS RELATED TO DENIAL OF INITIAL ACCREDITATION

An institution/program may request a special appearance (hearing) before the appropriate Review Committee in order to supplement the written information about the program which has already been provided to the Review Committee. (See Due Process Related to Review Committee Special Appearance)

If the Review Committee’s recommendation to the Commission is to deny initial accreditation, the Review Committee will make a recommendation to the Director and Chair of the Commission and indicate whether an appearance by the program before the full Commission is appropriate. If so, representatives of the institution may present arguments that the Review Committee made an error in judgment, based on the information available, in making its recommendation to deny initial accreditation. During this special appearance before the
Commission, no new information regarding correction of deficiencies subsequent to the Review Committee special appearance may be presented. The institution’s representative(s) may attend the Commission meeting only during the time assigned for the hearing. If a program is denied accreditation by the Commission, reasons for the denial are provided. Because denial-of accreditation is defined as an adverse action, notice of such decisions occurs within fourteen (14) days and is sent by tracked electronic communication mail (including email).

If the Review Committee recommendation to the Commission is to grant initial accreditation and the Commission subsequently denies initial accreditation, reasons for the denial are provided. Because denial-of accreditation is defined as an adverse action, notice of such decisions occurs within fourteen (14) days and is sent by tracked electronic communication mail (including email). Within fourteen (14) days after receipt of such notice, the educational program may, in writing, request a hearing before the Board of Commissioners at its next meeting. Within fourteen (14) days after receipt of the request, the Board of Commissioners shall schedule a hearing and notify the educational program of the date, time and place of such hearing. A request for a hearing due to the Board of Commissioner’s decision to deny for the first time, accreditation to a new program, shall automatically stay the decision to deny accreditation. In the event the educational program that has been denied initial accreditation for the first time does not make a timely request for a hearing, the Board of Commissioners’ findings and proposed decision to deny accreditation shall become final.

In both circumstances outlined above the program has the opportunity, at the next regularly scheduled Commission meeting, to present additional information to the Commission through the appropriate-Review Committee, following the special appearance procedures outlined in “Due Process Related to Review Committee Special Appearances.” Such a request for a hearing automatically stays the Commission’s decision. When a program has been denied initial accreditation and requests a stay of that decision, no additional application fee will be assessed. Should a program choose to reapply, rather than request a stay of the Commission’s decision, a second application fee must be submitted with the program’s reapplication.

If, following reconsideration, the Commission again denies accreditation to the program, the program will be notified of its right to appeal this decision to the Appeal Board.

Programs also have the right, after initial accreditation is denied by the Commission the FIRST time, to immediately appeal this decision to the Appeal Board. If the Appeal Board sustains the decision of the Commission, the program forfeits the right to present additional information to the Commission through the appropriate Review Committee as outlined above.

Adverse actions, or those that may be appealed, are defined as those related to denial or withdrawal of accreditation. Such decisions become final fourteen (14) days after the date on the transmittal letter or when any appeal has been resolved. The Commission has procedures in place to provide notice of the reasons for taking an adverse accreditation action. Such procedures are required in order for accrediting agencies to comply with U.S. Department of Education's Criteria and Procedures for Recognition of Accrediting Agencies. The Commission’s
DUE PROCESS RELATED TO WITHDRAWAL OF ACCREDITATION

An institution/program may request a special appearance (hearing) before the appropriate Review Committee in order to supplement the written information about the program which has already been provided to the Review Committee. (See Due Process Related to Review Committee Special Appearance)

If the Review Committee’s recommendation to the Commission is to withdraw accreditation, the Commission will notify the institution of the proposed action and the date of the Commission meeting at which the Review Committee’s recommendation will be considered. This notification will advise the institution of its right to provide additional information for the Commission to consider prior to reaching a decision on the proposed action. Any additional information must be submitted in writing at least one (1) week prior to the meeting, absent documented extraordinary circumstances, and should include any reasons why the institution believes that the withdrawal of accreditation is unjustified.

If the Commission determines that accreditation should be withdrawn, the program will be notified within fourteen (14) days and the notification is sent by tracked electronic communication mail (including email). The program is also notified of its right to appeal this decision to the Appeal Board. The filing of an appeal shall automatically stay the final decision of the Commission.

Adverse actions, or those that may be appealed, are defined as those related to denial or withdrawal of accreditation. Such decisions become final fourteen (14) days after the date on the transmittal letter or when any appeal has been resolved. The Commission has procedures in place to provide notice of the reasons for taking an adverse accreditation action. Such procedures are required in order for accrediting agencies to comply with U.S. Department of Education's Criteria and Procedures for Recognition of Accrediting Agencies. The Commission’s notice of initiated and final adverse actions will be reported as described in the Commission’s Procedure For Disclosure Notice Of Adverse Actions.

3. Appeal Procedures: If a program has been denied accreditation or if its accreditation has been withdrawn, the following appeal procedures are followed:

1. Within fourteen (14) days after the institution’s receipt of notification of the Commission on Dental Accreditation’s decision to deny or withdraw accreditation, the program may file a written request of appeal to the Director of the Commission. If a request of appeal is not made, the Commission’s proposed decision will automatically become final and the appropriate announcement will be made.
2. If a request of appeal is received, the Director of the Commission shall acknowledge receipt
of the request and notify the program of the date of the appeal hearing. The appeal date shall be within sixty (60) days after the appeal has been filed.

3. The program filing the appeal may be represented by legal counsel in addition to the program administrator and other program representatives and shall be given the opportunity at such hearing to offer evidence and argument in writing or orally or both tending to refute or overcome the findings and decision of the Board of Commissioners. The educational program need not appear in person or by its representative at the appellate hearing.

4. Legal counsel of the American Dental Association will be available to members of the Appeal Board upon request.

5. No new information regarding correction of the deficiencies may be presented with the exception of review of new financial information if all of the following conditions are met: (i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made. (ii) The financial information is significant and bears materially on the financial deficiencies identified by the Commission. The criteria of significance and materiality are determined by the Commission. (iii) The only remaining deficiency cited by the Commission in support of a final adverse action decision is the institution’s or program’s failure to meet the Commission’s standard pertaining to finances. An institution or program may seek the review of new financial information described in this section only once and any determination by the Commission made with respect to that review does not provide a basis for an appeal.

6. The Appeal Board may make the following decisions: to affirm, amend, or remand the adverse actions of the Commission. A decision to affirm, or amend the adverse action is implemented by the Commission. In a decision to remand the adverse action for further consideration, the Appeal Board will identify specific issues that the Commission must address. The Commission must act in a manner consistent with the Appeal Board’s decisions or instructions.

7. No change in the accreditation status of the program will occur pending disposition of the appeal.

8. Within ten (10) days of the hearing, the applicant shall be notified by tracked electronic communication mail (including email) of the Appeal Board's decision. The decision may be to sustain the decision of the Commission or to remand the matter back to the Commission for reconsideration. Notice shall include a statement of the specifics on which the decision is based.

9. The decision rendered by the Appeal Board shall be final and binding.

10. In the event the educational program does not file a timely appeal of the Board of Commissioner’s findings and decisions, the Board of Commissioner’s decision shall become final. The Commission’s notice of final adverse actions will be reported as described in the Commission’s Procedure For Disclosure Notice Of Adverse Actions.

In accord with due process measures, the Appeal Board will, when appropriate, review substantive procedural issues raised by the appellants. To this end, the Appeal Board is limited in its inquiry to the factual determinations up to the time of the Commission on Dental Accreditation’s decision regarding the status of the program at issue.
It is not proper for the Appeal Board to either receive or consider facts not previously presented to the Commission on Dental Accreditation since it does not sit as an initial reviewing body. Similarly, it is not the function of the Appeal Board to determine whether the facts, singularly or cumulatively, justify the decision of the Commission on Dental Accreditation unless it can be shown that the Commission’s decision was clearly against the manifest weight of the evidence. Further, the Appeal Board will not hear testimony relative to the reasonableness of previously determined requirements for accreditation since this is clearly outside the scope of authority of this reviewing body.

Revised: 2/23; 4/22; 2/21; 8/18; 8/16; 8/11, 1/03; Reaffirmed: 8/21; 8/10

4. Mechanism For The Conduct Of The Appeal Hearing:
1. A brief opening statement may be made by the Commission of Dental Accreditation for the purpose of establishing the Commission’s finding and the reasons therefore.
2. The Appellant will then present its argument to the Board.
3. The Commission may then present its rebuttal of the Appellant’s argument.
4. After hearing the evidence, the Appeal Board shall meet in executive session to discuss the appeal and make its decision. The Appeal Board’s decision may be to sustain the decision of the Commission, or remand the matter to the Commission for reconsideration. The decision shall be based on a majority vote of the members of the Appeal Board with the Chair voting only to break a tie vote.
5. The Appellant shall be notified by tracked electronic communication mail of the decision of the Appeal Board, including a statement of specifics, within ten (10) days following the hearing.

Revised: 2/23; 8/16; 7/07, 7/06, 7/00, 12/88, 1978; Reaffirmed: 8/21; 8/11, 8/10; Adopted: 12/77