

COMMISSION ON DENTAL ACCREDITATION GUIDELINES FOR REPORTING THE USE OF DISTANCE EDUCATION

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/residents/fellows who are separated from the instructor or instructors and to support regular and substantive interaction between the students/residents/fellows and the instructor or instructors, 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 conference; or
- Other media used in a course in conjunction with any of the technologies listed above.

For purposes of this definition, an instructor is an individual responsible for delivering course content and who meets the qualifications for instruction established by an institution's or program's accrediting agency.

For purposes of this definition, substantive interaction is engaging students/residents/fellows in teaching, learning, and assessment, consistent with the content under discussion, and also includes at least two of the following:

- Providing direct instruction;
- Assessing or providing feedback on a student's/resident's/fellow's coursework;
- Providing information or responding to questions about the content of a course or competency;
- Facilitating a group discussion regarding the content of a course or competency; or
- Other instructional activities approved by the institution's or program's accrediting agency.

An institution ensures regular interaction between a student/resident/fellow and an instructor or instructors by, prior to the student's/resident's/fellow's completion of a course or competency:

- Providing the opportunity for substantive interactions with the student/resident/fellow on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course or competency; and
- Monitoring the student's/resident's/fellow's academic engagement and success and ensuring that an instructor is responsible for promptly and proactively engaging in substantive interaction with the student/resident/fellow when needed on the basis of such monitoring, or upon request by the student/resident/fellow.

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/Resident/Fellow Identity Verification noted below. Upon review and Commission acknowledgement that the program has addressed all Student/Resident/Fellow 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: 8/21; 8/20; 8/10; Reaffirmed: 8/15

PURPOSE: A "Report of Program Change" must be submitted to the Commission on Dental Accreditation (CODA) when a program is planning to implement distance education or make changes in the use of distance education that could affect the ability of the program to meet the standards.

CONSULTATION: Programs anticipating the use of distance education or changes in its current use of distance education should consult with Commission staff prior to submitting a report. Staff will provide guidance in adequately explaining and documenting all changes. In addition, program administrators frequently consult with staff when they are anticipating changes. This allows the program administrator to assess the impact of the proposed change on the accreditation status of the program.

PROCESS: The Commission uses the following process when considering reports of program changes, including implementation of or changes in the use of distance education. Program administrators have the option of consulting with Commission staff at any time during this process.

1. A program administrator submits the report by **May 1 or November 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.

FORMAT: The report must be clear and concise and must follow the "Format" and "Mechanics" illustrated within this guideline. Reports that fail to adhere to the stated guidelines will be returned to the program for proper formatting.

DESCRIBE THE CHANGE briefly and as clearly as possible. Document specific changes made to the delivery method of educational curriculum in didactic, laboratory, preclinical or clinical portions of the program (for example, changes in traditional vs. distance education).

The report must address the following:

1. Outline the specific uses of distance education within the curriculum or changes to the current use of distance education within the curriculum including:
 - a. Describe whether the use of distance education is permanent or temporary? If temporary, provide the time frame for use of distance education.
 - b. Describe the curriculum areas that will be delivered using distance education? What specific course(s) will be delivered using distance education and what distance education method(s) will be used?
 - c. Describe the technology used/to be used to deliver instruction using distance education.
 - d. Describe whether students/residents/fellows and/or faculty/instructors will be located away from the main program site.
 - e. Describe how the program will provide opportunity for regular and substantive interaction with the student/resident/fellow on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course(s) or competency, prior to the student/resident/fellow completing the course or competency.
 - f. Describe how the program will monitor the student's/resident's/fellow's academic engagement and success and ensure that an instructor promptly and proactively engages in substantive interaction with the student/resident/fellow when needed on the basis of such monitoring, or upon request by the student/resident/fellow, prior to the student/resident/fellow completing the course or competency.
2. Document the methods by which the program applies student/resident/fellow identity verification to address the following:
 - a. Document how the identity of each student/resident/fellow who registers for the course is verified as the one who participates in, completes, and receives academic credit for the course.
 - b. Document that the verification process used includes methods such as secure login and passcode, proctored examinations, and/or other technologies effective in verifying student/resident/fellow identity.
 - c. Document that the program provides a written statement to make it clear that the verification processes used are to protect student/resident/fellow privacy, and
 - d. Document how students/residents/fellows are notified of additional charges associated with the student/resident/fellow identity verification at the time of registration or enrollment.

PROVIDE RELEVANT DOCUMENTATION to illustrate how the program will continue to comply with the accreditation standard(s). When deciding how to explain a change and selecting appropriate documentation, it may be helpful to use the following approach:

- a. Description: discuss BEFORE and AFTER the change;

- b. Appraisal and Analysis: assess the IMPACT of the change;
- c. Supportive Documentation: EVIDENCE that the program continues to meet the standards.

Institutions/Programs are expected to follow Commission policy and procedure on privacy and data security, including those related to compliance with the Health Insurance Portability and Accountability Act (HIPAA). The Commission's statement on HIPAA, as well as the Privacy and Data Security Summary for Institutions/Programs (PDF), are found in the Policies/Guidelines section of the Commission's website at <https://coda.ada.org/en/policies-and-guidelines/hipaa>. Programs that fail to comply with CODA's policy will be assessed an administrative fee of \$4000.

The Commission has directed that program materials be submitted electronically through a secure CODA electronic submission portal or by email, solely. **Paper copies and/or electronic copies mailed to the Commission office will not be accepted.**

MECHANICS: The following guidelines must be observed when preparing your report. Electronic Submission Guidelines are available and **must be strictly followed**.

The Commission requires one (1) report be submitted for each program affected following the Electronic Submission Guidelines. Failure to comply with these guidelines will constitute an incomplete report. Electronic Submission Guidelines are available on the CODA website at this link: <https://coda.ada.org/en/policies-and-guidelines/electronic-submission-guidelines>

1. **COVER PAGE** – **Must** include the following information:
 - a. date of report
 - b. name and address of the institution
 - c. program title;
 - d. name, title, telephone number, e-mail address and signature of the program director;
 - e. name, title, telephone number, e-mail address and signature of the department head/dean;
 - f. name, title, telephone number, e-mail address and signature of the chief executive officer of the institution (the chief executive officer of the institution sponsoring the program must be copied on the letter to the Commission).

The report must include a signed cover/verification page and must conform to the Commission's electronic submission guidelines.

2. **DOCUMENTATION** – The report must be succinct and provide only the information necessary to fully address the questions noted above. See above related to page limitations.

DEADLINES: Depending on the specific program change, reports **must** be submitted to the Commission **by May 1 or November 1** (for reports that must be reviewed by the Review Committee and Commission) or at least thirty (30) days prior to the anticipated implementation of a change. Because of the above deadlines, program administrators should consult with Commission staff well in advance of an anticipated change in order to assess any potential

impact of the anticipated change on the accreditation status of the program. If the report of change will be considered by a Review Committee and the Commission, the Commission acknowledgment will indicate the meeting date. Failure to adhere to established deadlines and/or comply with the policy will jeopardize the program's accreditation status.

POLICY ON MISSED DEADLINES: So that the Commission may conduct its accreditation program in an orderly fashion, all institutions offering programs accredited by the Commission are expected to adhere to deadlines for requests for program information. Programs/institutions must meet established deadlines to allow scheduling of regular or special site visits and for submission of requested information. Program information (i.e. self-studies, progress reports, annual surveys or other kinds of accreditation-related information requested by the Commission) is considered an integral part of the accreditation process. If an institution fails to comply with the Commission's request, or a prescribed deadline, it will be assumed that the institution no longer wishes to participate in the accreditation program. In this event, 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.

Revised: 2/16; Reaffirmed: 8/20; 8/15; 8/10, 7/07, 7/01, 5/88

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. Accreditation documents and related materials must be complete and comprehensive.

Documents that fail to adhere to the stated Guidelines for 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) (Excerpt): 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: 8/30; 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

ASSISTANCE: If you have questions, it is preferred that you contact staff via email. CODA staff emails can be found on the CODA website at the following link:

<https://coda.ada.org/en/accreditation/coda-membership/coda-staff>

Staff can also be contacted at the phone number and extension below: 312-440-(ext.)

- dental education programs and dental therapy programs, extension 2721;
- advanced dental education programs in dental public health, oral and maxillofacial pathology, oral and maxillofacial radiology, pediatric dentistry and prosthodontics, extension 2672;
- advanced dental education programs in endodontics, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics and periodontics, and fellowships in oral and maxillofacial surgery and orthodontics and dentofacial orthopedics, extension 2714;
- advanced dental education programs in advanced education in general dentistry, general practice residency, dental anesthesiology, oral medicine and orofacial pain, extension 2788;
- dental assisting programs and dental laboratory technology programs, extension 4660; and
- dental hygiene programs, extension 2695

Commission on Dental Accreditation Privacy and Data Security Reminders

Protect sensitive personally identifiable information (“PII”) such as social security numbers, drivers’ license numbers, credit card numbers, account numbers, etc.

Security Reminder: Personally Identifiable Information

Before submitting any documents to CODA or to a CODA site visitor, an institution must:

- Review for PII and patient identifiers.
- Fully and appropriately redact any PII and patient identifiers.
- Make sure the redacted information is unreadable in hard copy and electronic form. You must use appropriate redaction methods to ensure personal information cannot be read or reconstructed.

CODA **does not accept** PII or patient identifiers in any materials submitted by a program.

Security Reminder: Patient Identifiers

Before submitting any information about a patient to CODA or to a CODA site visitor, you must **thoroughly redact all 18 patient identifiers listed on the next page.**

Examples of information about a patient:

- Dental records
- Rosters of procedures (procedure logs)
- Chart review records (chart audit records)
- Information from affiliated teaching institutions, to include items listed above
- Brochures with patient images and/or information
- Presentations with patient images and/or information
- Course materials (exams, lecture materials) with patient images and/or information

If **even one** identifier is readable, do not submit the information to CODA.

CODA **does not accept** documents containing PII or patient identifiers from institutions. Any PHI/PII that is necessary for CODA accreditation may only be reviewed by CODA site visitors when they are on-site at the institution.

When redacting identifiers, you must ensure that the information is unreadable and cannot be reconstructed in both hard copy and electronic form. For example, certain information redacted on a hard copy can become readable when the hard copy is scanned. Instead, it may be effective to use opaque cover-up tape on the hard copy, scan, and then ensure the redacted information on the scanned version is not visible/readable through the redaction.

Commission on Dental Accreditation
Privacy and Data Security Requirements for Institutions
(Rev. 8/2021)

1. **Sensitive Information.** To protect the privacy of individuals and to comply with applicable law, the Commission on Dental Accreditation (“CODA” or “the Commission”) **prohibits all programs/institutions from disclosing in electronic or hard copy documents** provided to CODA other than on-site during a site visit, any of the following information (“Sensitive Information” or “PII”):
 - Social Security number
 - Credit or debit card number or other information (e.g., expiration date, security code)
 - Drivers’ license number, passport number, or other government issued ID
 - Account number with a pin or security code that permits access
 - Health insurance information, such as policy number or subscriber I.D.
 - Medical information, such as information about an individual’s condition, treatment, or payment for health care
 - Mother’s maiden name
 - Taxpayer ID number
 - Full date of birth
 - Any data protected by applicable law (e.g., HIPAA, state data security law)
 - Biometric data, such as fingerprint or retina image
 - Username or email address, in combination with a password or security question that permits access to an online account

2. **Patient Identifiers.** Before submitting information about a patient to CODA other than on-site during a site visit, a program/institution **must remove the following data elements** of the individual, and of relatives, household members, and employers of the individual (the “Patient Identifiers”):
 1. Names, including initials
 2. Address (including city, zip code, county, precinct)
 3. Dates, including **treatment date**, admission date, age, date of birth, or date of death [a range of dates (e.g., May 1 – 31, 2015) is permitted provided such range cannot be used to identify the individual who is the subject of the information]
 4. Telephone numbers
 5. Fax numbers
 6. E-mail addresses
 7. Social Security numbers
 8. Medical record numbers
 9. Health plan beneficiary numbers
 10. Account numbers
 11. Certificate/license numbers
 12. Vehicle identifiers and serial numbers, including license plate numbers
 13. Device identifiers and serial numbers
 14. Web Universal Resource Locators (URLs)

15. Internet Protocol (IP) address numbers
16. Biometric identifiers (e.g., finger and voice prints)
17. Full face photographic images and comparable images
18. Any other unique identifying number, characteristic, or code:
 - that is derived from information about the individual
 - that is capable of being translated so as to identify the individual, or
 - if the mechanism for re-identification (e.g., the key) is also disclosed

In addition, the information provided to CODA cannot be capable of being used alone or in combination with other information to identify the individual.

3. **Redaction.** When removing any Sensitive Information or Patient Identifier from paper or electronic documents disclosed to CODA, programs/institutions shall **fully and appropriately** remove the data such that the data cannot be read or otherwise reconstructed. Covering data with ink is not an appropriate means of removing data from a hard copy document and may sometimes be viewable when such documents are scanned to an electronic format.
4. **Administrative fee.** *If the program/institution submits any documentation that does not comply with the directives noted above, CODA will assess an administrative fee of \$4000 to the program/institution; a resubmission that continues to contain prohibited data will be assessed an additional \$4000 fee.*
 - CODA Site Visitors and Commission volunteers are only authorized to access Sensitive Information and Patient Identifiers:
 - Onsite during a site visit, and
 - That are necessary for conducting the accreditation site visit
 - CODA Site Visitors and Commission volunteers may not download or make hard copies or electronic copies of Sensitive Information or Patient Identifiers.

NOTE: If a document includes fictitious information, which may otherwise appear to be Sensitive Information or Patient Identifiers, the program is expected to clearly mark the document as “Fictitious Example”.