

REPORT OF THE STANDING COMMITTEE ON DOCUMENTATION AND POLICY REVIEW

Background: The charge of the Standing Committee on Documentation and Policy Review is to: 1) ensure all Commission documents reflect consistency in application of Commission policies, and that relevant sections of accreditation standards are consistent across disciplines; 2) review and consolidate the recommendations of all review committees into standard language for the Commission's consideration for adoption, when new or revised standards are proposed and will impact more than one discipline; and 3) periodically review current Commission policies and procedures to ensure that they are current and relevant.

June 25, 2025 and July 17, 2025 Standing Committee on Documentation and Policy Review

Meetings: The Standing Committee on Documentation and Policy Review met via a virtual meeting on June 25, 2025 and July 17, 2025. **Standing Committee Members:** Ms. Lisa Mayer (chair), Dr. Carolyn Brown, Dr. Scott De Rossi, Dr. Theresa Gonzales, Dr. Paul Luepke, Dr. Monica Nenad, Dr. Nancy Rosenthal, and Dr. Glenn Sameshima. All members attended the June 25, 2025 meeting except Dr. Carolyn Brown, Dr. Scott De Rossi, and Dr. Nancy Rosenthal. All members attended the July 17, 2025 meeting except Dr. Nancy Rosenthal. **Commissioners:** Dr. Frank Licari, chair, Commission on Dental Accreditation (CODA), *ex officio*, attended both meetings, and Dr. Cataldo Leone, vice-chair, CODA, *ex officio* attended the July 17, 2025 meeting. **Commission Staff:** Dr. Sherin Tooks, senior director, and Ms. Peggy Soeldner, senior manager, CODA attended both meetings. Ms. Jamie Asher Hernandez, Mr. Shawn Morrison, Dr. Yesenia Ruiz, and Ms. Taylor Weast, managers, CODA, and Ms. Samara Schwartz, senior associate general counsel, ADA/CODA attended the June 25, 2025 meeting.

Following review of the charge of the Standing Committee on Documentation and Policy Review, the Committee discussed the following:

Regular Review of Commission Policies: One of the charges of the Standing Committee on Documentation and Policy Review is to regularly review Commission policies and procedures found in the Commission's Evaluation and Operational Policies and Procedures manual (EOPP) to ensure that they are current and relevant.

The Standing Committee discussed the *Reporting Program Changes in Accredited Programs* policy, specifically sections related to the establishment of off-campus sites, program relocation, and enrollment increases.

Through discussion of the policy, specifically related to the establishment of off-campus sites *not owned* by the sponsoring institution, the Standing Committee noted this type of change requires reporting to and approval by the Commission prior to implementation and reporting deadline of May 1 for consideration at the Summer meeting of the Commission or November 1 for consideration at the Winter meeting of the Commission. The Standing Committee also noted that establishment of off-campus sites that are *owned* by the sponsoring institution have a

different reporting requirement and are reported to the Commission at least 30 days prior to the change, do not require review by the Review Committee or Commission and are reviewed at the time of the program's next site visit.

The Standing Committee learned that the experiences provided at sites *owned* by the sponsoring institution can be significant in terms of site usage and discussed whether the addition of off-campus sites owned by the institution that provide significant experiences should be reviewed by the Review Committee and approved by the Commission prior to implementation. Following discussion, the Standing Committee concluded there are situations where these type of sites should be reviewed and approved by the Commission prior to implementation and believed the revisions to the policy found in this section of **Appendix 1** are warranted to provide appropriate clarification and to ensure programs are aware of the reporting requirements, specifically the May 1 and November 1 deadlines for report submission.

The Standing Committee continued its discussion of the *Reporting Program Changes in Accredited Programs* policy and discussed the program change example related to moving a program from one geographic location to another, noting this type of change must also be reviewed by the appropriate Review Committee and approved by the Commission prior to the implementation as well as the report submission deadline of May 1 or November 1. The Standing Committee learned that recently questions have arisen related the reporting requirements of a change in location of a "major" off-campus site not owned by the institution. The Standing Committee learned the policy states the relocation of the program is reportable to the Commission but does not specifically state that relocation of an affiliated site of the program is reportable. Following discussion, the Standing Committee believed that "the program" includes any component of the program, including affiliated sites and the policy should be interpreted as such. The Standing Committee believed revision to the policy is not warranted at this time given the interpretation for reporting.

The Standing Committee also discussed the section of the policy related to reporting enrollment increases, specifically the reminder to programs about maintaining resources when the full complement of students/residents is not enrolled in the program. The Standing Committee learned that many programs appear to be unaware of this expectation. Through discussion, the Standing Committee noted the policy specifically cites other changes related to resources that could affect the ability of the program to meet Standards and that are reportable to the Commission, including changes in financial support, reduction in faculty or support staff time commitment, and reduction in facilities. Through further discussion, the Standing Committee considered whether a revision to the policy which states directly that if the resources do not support a full complement of student enrollment the Commission must be notified. Following discussion, the Standing Committee agreed a revision is warranted and believed the revision found in **Appendix 1** provides appropriate clarification and confirmation that this type of program change is reportable to the Commission. The Standing Committee also noted an editorial revision in this section and agreed it should be approved. Upon conclusion of its

discussion, the Standing Committee believed the revisions to the *Reporting Program Changes in Accredited Programs* policy found in **Appendix 1** should be approved.

The Standing Committee also discussed the *Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs* policy as it relates to the establishment of off-campus training sites owned by the sponsoring institution and noted previously in this report. As previously discussed, the Standing Committee agreed that the addition of off-campus sites owned by the sponsoring institution may require prior approval by the Commission due to the reported use of the site. Therefore, the Standing Committee believes the revisions to the *Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs* policy found in **Appendix 1** are warranted.

Following discussion of the policies scheduled for regular review, as well as proposed revisions, the Standing Committee determined that, unless noted, the policies remain current and relevant and should be reaffirmed. In addition, the Standing Committee believed revisions to select policies noted in **Appendix 1** are warranted and recommended the revisions be adopted with immediate implementation.

Standing Committee Recommendation: It is recommended that the Commission on Dental Accreditation adopt and implement immediately the proposed revisions to policies found in **Appendix 1**, including the revision of policies in the Commission's Evaluation and Operational Policies and Procedures manual and in all appropriate Commission documents.

Consideration of Proposed Revisions to Miscellaneous Policies: On occasion, outside of the regular policy review process, policies that may warrant revision are identified for discussion and possible revision by the Standing Committee. These policies include the following: Policies and Procedures for Accreditation of Programs in a New Dental Education Area or Discipline, Confidentiality Policy, Site Visits, specifically the section related to Cooperative Site Visits With Other Accreditors, Commission and Commission Meetings, Review Committees and Review Committee Meetings, Accreditation Status Definitions, section related to withdrawal, Complaint Policy, Rules of the Commission, sections related to Commission, Appeal Board, and Review Committee Meetings, Policy on Advertising, Program Requirements and Procedures, Site Visitors, and Conflict of Interest Policy.

As directed by the Commission at its Winter 2025 meeting, the Standing Committee considered the *Policies and Procedures for Accreditation of Programs in a New Dental Education Area or Discipline* to determine whether revisions are warranted related to the development of an accreditation processes for subdisciplines (i.e. fellowships) of dentistry already under the Commission's purview. The Standing Committee was reminded that at its Winter 2025 meeting, the Commission considered a request to initiate an accreditation process for clinical fellowship training programs in oral and maxillofacial surgery - trigeminal nerve surgery and disorders and that its directive was a result of this request. The Standing Committee discussed the process used

when the subdisciplines currently accredited by the Commission were added and whether that process is still appropriate at this time or whether a new subdiscipline should undergo the process outlined in the Commission's current *Policies and Procedures for Accreditation of Programs in a New Dental Education Area or Discipline*. Following considerable discussion, the Committee concluded that a new subdiscipline of dentistry that is part of a discipline already under the Commission's purview, such as oral and maxillofacial surgery fellowships, should undergo the same process as other new areas of dentistry to determine whether a process of accreditation review should be initiated and that each request should be considered by the Commission. The Standing Committee also believed that should the Commission determine, an ad hoc committee should be formed to study the request, and should consider each request on a case-by-case basis. The Standing Committee concluded that revisions to the policy and process are not warranted at this time but should be applied to every area or discipline seeking CODA accreditation.

The Standing Committee also discussed the Commission's *Confidentiality Policy*. The Committee learned that on a more frequent basis, program directors and other program representatives are not providing business email addresses, and instead, are providing what appear to be personal email addresses, raising a concern related to the confidentiality of interactions with CODA. This also makes it difficult for Commission staff to monitor program affiliations, and raises a concern of the confidentiality of information received in a personal email account when a program director or other representative is no longer affiliated with the program. The Standing Committee discussed whether there is any reason that the Commission shouldn't require a program representative to use a business email address and none was identified. Therefore, the Standing Committee recommended the proposed revision to the *Confidentiality Policy* found in **Appendix 2** be approved.

The Standing Committee discussed the Commission's *Site Visits Policy*, specifically as it relates to the section on *Cooperative Site Visits With Other Accreditors*. The Committee learned that in the case of international predoctoral site visits, coordinating the site visit with governmental agencies could be appropriate and was asked to consider whether a modification to the policy is warranted to address this situation. Following discussion, the Standing Committee determined the language in the policy is sufficiently broad to include such a request and concluded that revisions to the policy are not warranted at this time.

The Standing Committee also reviewed the *Rules of the Commission*, specifically related to Commission, Appeal Board and Review Committee Meetings and the proposed revisions found in **Appendix 2**. Through its review, the Standing Committee noted the proposed revisions clarify that the Commission has authority to choose the format of its meetings, including the Board of Commissioner and Appeal Board meetings. Through discussion, the Standing Committee agreed with the proposed revision and recommended approval of the revisions found in **Appendix 2**. The Committee was also reminded that these *Rules* may be amended at any meeting of the Board of Commissioners by a two-thirds majority vote of the members of the Board present and voting.

The Standing Committee also discussed the policies on *Commission and Commission Meetings* and *Review Committee and Review Committee Meetings* and proposed revisions adding language related to meeting format found in **Appendix 2** and related to the proposed revisions to the *Rules of the Commission* noted previously. Following discussion, the Committee agreed the revisions found in **Appendix 2** should be approved. The Standing Committee also noted revisions to the *Review Committee and Review Committee Meetings* are editorial in nature and to include information currently found in the *Commission and Commission Meetings* policy. Following discussion, the Committee agreed these revisions should also be approved.

The Standing Committee also discussed the *Review Committee and Review Committee Meetings* policy, specifically the nomination criteria, as well as the *Commission and Commission Meetings* policy, specifically the appointee criteria. The Committee noted both policies identify “Member of a predoctoral, advanced, or allied dental education program faculty” as a role the public member nominee or appointee must not possess. The Committee discussed a situation where a public member volunteer (not affiliated with dentistry) holds an administrator position at an institution that directly oversees a dental education program, and, therefore, discussed whether modification to the policy is warranted. Through further discussion, the Standing Committee determined modification to both policies is warranted to provide further clarification of the criteria. The Committee concluded the proposed revisions found in **Appendix 2** provide appropriate clarification and should be approved.

The Standing Committee also reviewed the *Accreditation Status Definitions*, specifically the definition of “withdraw.” The Standing Committee was reminded of language within the policy that states: “*In the event the Commission withdraws accreditation from a program, students currently enrolled in the program at the time accreditation is withdrawn and who successfully complete the program, will be considered graduates of an accredited program.*” The Committee was also reminded that the Commission monitors programs that are teaching out until all students/residents/fellows have graduated. The Committee considered whether the Commission should implement a mechanism for monitoring students/residents/fellows enrolled in a program at the time accreditation is withdrawn to ensure resources are retained through completion of the program. Through discussion, the Standing Committee determined revisions to the policy are not warranted at this time.

The Standing Committee also discussed the Commission’s *Policy and Procedure Regarding Investigation of Complaints Against Educational Programs*, specifically related to the screening process for Formal and Anonymous Complaints. The Committee learned the written procedures for screening Formal and Anonymous Complaints are slightly different regarding the procedures for processing the complaint to determine whether linkage to Accreditation Standards or CODA policies and procedures warrant Commission review. The Standing Committee discussed that formal and anonymous complaints are generally managed in a similar fashion; therefore, the policy should reflect similar processes in the Commission’s review. Following discussion, the Standing Committee determined the policy should be revised as noted in **Appendix 2**.

The Standing Committee reviewed the Commission's *Policy on Advertising and Program Requirements and Procedures* and learned the Commission's contact information found in both policies requires revision due to the recent relocation of the American Dental Association headquarters office. Since the proposed revisions are editorial in nature, the Committee believes the revisions found in **Appendix 2** should be approved.

The Standing Committee also had a general discussion related to requirements for serving as Commission volunteers, including Commissioners, Review Committee members and site visitors, as well as the time commitment expected. The Standing Committee was reminded that, in addition to submitting mandatory annual paperwork, attending the virtual site visitor training is required for all new site visitors and new Review Committee members who have not been on a site visit within the last two (2) years prior to their appointment on a Review Committee. In addition, new Commissioners are to attend site visitor training within the first year of service on the Commission. The Committee learned there have been challenges with volunteers, and Review Committee members in particular, being able to attend the required virtual site visitor training. The Standing Committee discussed whether there is value in maintaining site visitor training as a requirement for serving on the Review Committee and Commission, given additional training programs are currently provided specifically to new Review Committee members and Commissioners. Following further discussion, the Standing Committee affirmed the importance of training and believed attending site visitor training should be maintained as a requirement for both roles. Through further discussion, the Standing Committee learned that the Commission's efforts for identifying a learning management system (LMS) which could house site visitor training are proceeding and with its implementation could provide an alternative to attendance at the virtual site visitor training. In conclusion, the Standing Committee concluded revisions to policies related to Commissioner, Review Committee and Site Visitor training are not warranted at this time.

The Standing Committee reviewed the Commission's *Conflict of Interest Policy*, specifically as it relates to the time limitations for some of the conflicts, noting the time limitations differ. For example, for a site visitor, serving on a program's visiting committee within the last seven (7) years is a conflict of interest. However, there is no time limitation for having served as an independent consultant, employee or appointee of the institution. Similar restrictions are also noted for Commissioners, Review Committee members, and members of the Appeal Board. Through discussion, the Standing Committee determined there are some conflicts that should be absolute, such as being a former employee of the institution. In these cases, the Standing Committee believed that as a former employee there could be biases and that a former employee should never be allowed to serve as a site visitor to the institution where the individual was previously employed. However, the Standing Committee discussed that the conflict of serving as an independent consultant or appointee of the institution could be modified to add a time limitation serving in this role within the past ten (10) years. Accordingly, the Standing Committee recommended that the proposed revisions found in **Appendix 2** be approved.

Standing Committee Recommendations: It is recommended that the Commission on Dental Accreditation adopt and implement immediately the proposed revisions to the policies found in **Appendix 2**, including the revision of policies in the Commission's Evaluation and Operational Policies and Procedures manual and in all appropriate Commission documents.

Commission Action:

PROPOSED REVISIONS TO POLICIES UNDER REGULAR REVIEW

Underline indicates addition; ~~Strikethrough~~ indicates deletion

N. SITE VISIT REPORTS

1. Preliminary Site Visit Report: The site visit report is a written summary of the findings of a site visit 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. 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: 8/25; 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.

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

6 Revised: 8/20; Reaffirmed: 8/25; 8/10, 7/07, 7/01; CODA: 12/78:4

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8 **3. Deadlines For Submission Of Supplemental Information:** All programs receive thirty (30) days in
9 which to prepare a response to the preliminary draft site visit report. This response may address any
10 factual inaccuracies or differences in perception and may also report any progress made in implementing
11 recommendations contained in the report.

12
13 After the response to the preliminary report has been submitted, a program may wish to report additional
14 progress in implementing recommendations contained in the preliminary report or wish to submit other
15 information for review by the Commission and its Review Committees. While submission of multiple
16 reports is not encouraged, the Commission will accept supplemental information no later than December
17 1 (for site visits occurring May1 through October 31) or June 1 (for site visits occurring November 1
18 through April 30) to allow time for review by the Review Committees.

19
20 In this way, fair review of the additional information can be ensured. Any unsolicited information
21 received after December 1 or June 1 will be reviewed by the Review Committee Chair. If adequate time
22 is not available to ensure appropriate review, the materials may be returned to the program or held for
23 consideration at the following meeting in accord with the wishes of the program.

24 Revised: 8/14; 7/05; Reaffirmed: 8/25; 8/20; 8/10, 7/01, 5/93, 12/88

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26 **4. Final Site Visit Report:** After the Commission has reached a decision regarding the accreditation
27 status of the program, a final site visit report is prepared and transmitted to the chief executive officer(s),
28 chief academic officer(s), and appropriate program director(s). The site visit report reflects the program
29 as it existed at the time of the site visit. The final report to the institution does not reflect any
30 improvements or changes made subsequent to a site visit and described in the institution's response to the
31 preliminary draft of the site visit report. Such changes or improvements represent progress made by the
32 institution subsequent to the site visit. It should be noted, however, that information on such progress is
33 considered by the Commission in determining accreditation status.

34 Reaffirmed: 8/25; 8/20; 8/14; 8/10

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36 **5. Policy On Distribution Of Site Visit Reports:** The Commission recommends that the chief
37 academic officer and program director disseminate the preliminary draft report and the final site visit
38 report to all chairs, appropriate faculty and standing committees for review to allow for broad input as the
39 program works toward implementing any specific recommendations contained in the report.

40 Revised: 8/14; Reaffirmed: 8/25; 8/20; 8/10, 7/07, 7/01, 12/91, 5/80

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42 **6. Policy On Reports For Co-Sponsored Programs:** In special circumstances of co-sponsorship of
43 programs where preparation of an integrated site visit report would breach confidentiality for one or more
44 of the programs, the Commission has determined that confidentiality takes precedence over integration of
45 reports and separate reports may be prepared. This decision will be made in consultation with the chief
46 executive officers of the co-sponsoring institutions.

Reaffirmed: 8/25; 8/20; 8/14; 8/10, 7/07, 7/01; CODA: 12/91:12

V. OTHER POLICIES AND PROCEDURES RELATED TO ACCREDITATION

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
 - 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
 - Policy and Guidelines for Reporting the Use of Distance 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
 - 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
 - Policy and Guidelines for Reporting the Use of Distance 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: 8/23; 8/21; 8/20; 2/16; 8/15; 2/15; Reaffirmed: 8/25; 8/10

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 program director and it is due at a time specified by the Commission, at six (6) month intervals unless otherwise specified. 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: 8/25; 8/10, 7/05; Adopted: 07/96

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, Guidelines for Reporting Enrollment Increases in Advanced Dental Education Programs, and Guidelines for Reporting Enrollment Increases in Dental Hygiene 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 **May 1 or November 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 that impact the use of the site (e.g. minor site to major site, or termination of enrollment at or discontinued use of major site);

- 1 • Transfer of sponsorship from one institution to another;
- 2 • Changes in institutional accreditor or pending or final adverse actions. (See Policy on Regard For
- 3 Decisions of States and Other Accrediting Agencies);
- 4 • Moving a program from one geographic site to another, including but not limited to geographic
- 5 moves within the same institution;
- 6 • Program director qualifications not in compliance with the standards. In lieu of a CV, a copy of the
- 7 new or acting program director's completed BioSketch must be provided to Commission staff.
- 8 Contact Commission Staff for the BioSketch template.
- 9 • Substantial increase in program enrollment as determined by preliminary review by the discipline-
- 10 specific Review Committee Chair.
 - 11 ○ Requests for *retroactive permanent* increases in enrollment will not be considered. Requests
 - 12 for *retroactive temporary* increases in enrollment may be considered due to special
 - 13 circumstances on a case-by-case basis. Programs are reminded that resources must be
 - 14 maintained even when the full complement of students/residents/fellows is not enrolled in the
 - 15 program. If resources do not support the full complement, a program change report must be
 - 16 submitted to the Commission. (see Policy on Enrollment Increases In Advanced Dental
 - 17 Education Programs and Predoctoral programs see Guidelines for Requesting an Increase in
 - 18 Enrollment in a Predoctoral Dental Education Program);
- 19 • Change in the nature of the program's financial support that could affect the ability of the program to
- 20 meet the standards;
- 21 • Curriculum changes that could affect the ability of the program to meet the standards;
- 22 • Reduction in faculty or support staff time commitment that could affect the ability of the program to
- 23 meet the standards;
- 24 • Change in the required length of the program;
- 25 • Reduction of program dental facilities that could affect the ability of the program to meet the standards;
- 26 • Addition of advanced standing opportunity, part-time track or multi-degree track, or other track
- 27 offerings;
- 28 • Expansion of a developing dental hygiene or assisting program which will only be considered after the
- 29 program has demonstrated success by graduating the first class, measured outcomes of the academic
- 30 program, and received approval without reporting requirements; and/or
- 31 • Implementation of changes in the use of distance education that could affect the ability of the program
- 32 to meet the standards (see reporting requirements found in the Policy on Distance Education).

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

- 37
- 38 • Establishment of Off-Campus Sites owned by the sponsoring institution used to meet accreditation
- 39 standards or program requirements;
- 40 • Expansion or relocation of dental facilities within the same building;
- 41 • Change in chief executive officer, chief academic officer, and program director. **For the program**
- 42 **director only (new, acting, interim):** In lieu of a CV, a copy of a completed BioSketch must be
- 43 provided to Commission staff. Contact Commission Staff for the BioSketch template.
- 44 • First-year non-enrollment. See Policy on Non Enrollment of First Year Students/Residents.
- 45

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 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 **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.

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: 8/25; 8/23; 2/22; 8/21; 2/21; 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

D. REQUESTS FOR TRANSFER OF SPONSORSHIP OF ACCREDITED PROGRAMS

The sponsorship of an accredited program may be transferred from one educational institution to another without affecting the accreditation status of the program, provided the accreditation standards continue to be met following the transfer. A request for transfer of sponsorship will be considered by the Commission if significant aspects of the program will remain unchanged following the transfer.

Critical factors that will be weighed in review of the transfer of sponsorship request include: administration, funding sources, curriculum, faculty, facilities, and patient volume. If most of these critical factors will be unchanged, then the Commission will consider the request for transfer of sponsorship of the program. If most of these factors will be significantly altered following the change in sponsorship, then the program cannot be considered as a continuation of the same program under different sponsorship. Rather, the program to be offered by the new sponsoring institution will be considered as a new program and will be required to complete the established application process for initial accreditation appropriate to the discipline. If the program is viewed as a new program, the accreditation status of the previous program will be discontinued at an appropriate time.

Information regarding the transfer of sponsorship and its effect on the program's compliance with the accreditation standards must be submitted prior to implementation of the transfer. Written notice of the agreement to transfer sponsorship of the program must be provided to the Commission by both institutions; the new sponsor must explicitly indicate its willingness to accept responsibility for the transferred program. The information to be submitted must include the expected date of the transfer and the anticipated enrollment in each year of the program following the transfer. In addition, documentation must be submitted to demonstrate how the program will continue to meet the accreditation standards related to administration, financial support, curriculum, faculty and facilities. Any other changes that will occur in the program as a result of the transfer of sponsorship must also be explained and documented. Programs anticipating a possible transfer of sponsorship are strongly encouraged to consult with Commission staff prior to submitting a request. The Commission has guidelines for preparing a request

for transfer of sponsorship, to assist institutions in adequately explaining and documenting such changes.

The following alternatives may be recommended by Review Committees and/or be taken by the Commission in relation to the review of requests for transfer of sponsorship.

- *Approve the transfer of sponsorship:* 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 program will be reviewed at the next regularly-scheduled site visit to the new sponsoring institution. If concerns have been identified that are not of such a nature as to require the submission of additional information immediately, the concerns may be cited in the transmittal letter; the institution will be advised that the concerns will be reviewed at the time of the next regularly-scheduled site visit.
- *Postpone action and continue the program's accreditation status, but request additional information:* This action may be taken only once following submission of the initial request. The transmittal letter will inform the institutions that Commission action has been postponed because 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 institutions will be further advised that, if the additional information submitted does not satisfy the identified concerns, the Commission reserves the right to conduct a special focused site visit of the program at an appropriate time following implementation of the transfer, or to 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 to the new sponsoring institution will be conducted.
- *Deny the request for transfer:* 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 transfer of sponsorship. The institutions will be advised that they may re-submit the request with additional information if they choose.

Revised: 1/14, 8/10, 7/07, 7/97; Reaffirmed: 8/25; 8/20; 8/15; 7/07, 7/01, 5/91, 12/82; CODA: 05/91:11

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

1 deadlines may be returned to the program, which could affect the accreditation status of the program.

2
3 **Electronic Submission of Accreditation Materials:** All institutions will provide the Commission with
4 an electronic copy of all accreditation documents and related materials, which conform to the
5 Commission's Electronic Submission Guidelines. Electronic submission guidelines can be found on the
6 Commission's website or obtained from the Commission staff. Accreditation documents and related
7 materials must be complete and comprehensive.

8
9 Documents that fail to adhere to the stated Guidelines for submission will not be accepted and the
10 program will be contacted to submit a corrected document. In this case, documents may not be reviewed
11 at the assigned time which may impact the program's accreditation status.

12
13 **Compliance with Health Insurance Portability and Accountability Act (HIPAA).** HIPAA is the
14 federal law that governs how "Covered Entities" handle the privacy and security of patients' protected
15 health information (PHI). HIPAA Covered Entities include health care providers that send certain
16 information electronically as well as certain health plans and clearinghouses. The Commission may be
17 deemed a "Business Associate" of institutions that are HIPAA Covered Entities. A Business Associate is
18 an individual or entity, other than a workforce member of the Covered Entity, that performs a function or
19 activity on behalf of a HIPAA Covered Entity that involves creating, receiving, maintaining, or
20 transmitting protected health information. Business Associates must comply with certain provisions of the
21 HIPAA Security, Privacy and Breach Notification Rules. The Commission "HIPAA Policy and Procedure
22 Manual" is updated periodically. All Commission site visitors, Review Committee members,
23 Commissioners, and staff are required to complete a CODA HIPAA training exercise on a yearly basis.

24
25 The program's documentation for CODA must not contain any patient protected health information (PHI)
26 or sensitive personal information (SPI). If the program submits documentation that does not comply with
27 the policy on PHI or SPI, CODA will assess an administrative processing fee of \$4,000 per program
28 submission to the institution; a program's resubmission that continues to contain PHI or SPI will be
29 assessed an additional \$4,000 administrative processing fee.

30 Revised: 2/24; 8/23; 8/20; Reaffirmed: 8/25; Adopted 1/20 (Formerly Policy on Electronic Submission of
31 Accreditation Materials, Commission Policy and Procedure Related to Compliance with the Health
32 Insurance Portability and Accountability Act [HIPAA] and Policy on Preparation and Submission of
33 Reports to the Commission)

34 35 36 F. POLICY ON MISSED DEADLINES

37
38 So that the Commission may conduct its accreditation program in an orderly fashion, all institutions
39 offering programs accredited by the Commission are expected to adhere to deadlines for requests for
40 program information. Programs/institutions must meet established deadlines to allow scheduling of
41 regular or special site visits and for submission of requested information. Program information (i.e. self-
42 studies, progress reports, annual surveys or other kinds of accreditation-related information requested by
43 the Commission) is considered an integral part of the accreditation process. If an institution fails to
44 comply with the Commission's request, or a prescribed deadline, it will be assumed that the institution no
45 longer wishes to participate in the accreditation program. In this event, the Commission will immediately
46 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: 8/25; 8/20; 8/15; 8/10, 7/07, 7/01,
5/88

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.

Revised: 2/23; 8/15; Reaffirmed: 8/25; 8/20; 8/10, 7/07, 7/01, 12/80

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 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: 8/25; 8/15; 8/10, 7/07, 7/01, 12/79, 4/83

I. REFERRAL OF POLICY MATTERS TO APPROPRIATE COMMITTEES

The Chair of the Commission, in consultation with the Director and Commission staff, will review all agenda items and refer policy matters to the appropriate committee(s) for discussion and recommendation.

Reaffirmed: 8/25; 8/20; 8/15; 8/10, 7/07, 7/01; CODA: 05/83:9

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. 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: 8/25; 8/15; 8/10, 7/07, 7/01, 7/99, 12/87, 4/83, 12/76

K. POLICY ON INTERRUPTION OF EDUCATION

Interruption of an educational program due to unforeseen circumstances that requires a modification of the program, the curriculum, or take faculty, administrators or students away from the program is a potentially serious problem. If such interruption may compromise the quality and effectiveness of education, the Commission must be notified in writing.

If the interruption results in modification of the program, instructional time, or curriculum content, for example, the institution must provide a comprehensive plan for how the loss of instructional time will be addressed and how the program will continue to comply with the Accreditation Standards during the period of interruption of education. If the program's modifications result in the same student/resident/fellow achievement experiences and requirements and can be completed without extension of the overall program length, an interruption report is not required. When an interruption occurs, Commission staff should be consulted to determine reporting requirements.

A program which experiences an interruption of longer than two (2) years will be notified of the Commission's intent to withdraw accreditation at its next scheduled meeting unless the institution applies for and is granted extension for good cause by the Commission.

Modification of the program due to an interruption of education will be viewed by the Commission as a temporary solution to maintain educational quality and compliance with Accreditation Standards. Following the interruption of education, should the program subsequently decide to permanently implement a change, the program must submit a formal Report of Program Change for consideration by the Commission.

Revised: 8/22; 2/22; 8/15; 8/10, 5/91, 1975; Reaffirmed: 8/25; 8/20; 7/07, 7/01

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.

Programs may, from time to time, require a temporary, one-time only increase in enrollment to permit a student/resident/fellow to complete a program, which was extended beyond the program's regular completion date. A program must use the discipline-specific Guidelines to request a temporary, one-time only increase in enrollment prior to implementing the increase. Upon submission of the program change report, a temporary, one-time only increase in program enrollment of up to a maximum of six (6) months may be reviewed and approved by the Review Committee Chair, if the program provides evidence of sufficient resources and procedures to support the temporary increase. If the temporary, one-time only increase in enrollment may not be adequately supported, as determined by preliminary review by the discipline-specific Review Committee Chair, prior approval by CODA will be required and the report will be considered at the next regularly scheduled Commission meeting.

Programs are reminded that resources must be maintained even when the full complement of students/residents/fellows is not enrolled in the program.

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 **May 1 or November 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: 2/24; 8/23; 2/22; 8/20; 1/20; 8/18; 8/16; 2/16; 8/15; 8/10; Reaffirmed: 8/25; 7/07; CODA: 08/03:22

M. GUIDELINES FOR REQUESTING AN INCREASE IN ENROLLMENT IN A PREDOCTORAL DENTAL EDUCATION PROGRAM

Guidelines for requesting an increase in enrollment in a predoctoral dental education program complement the Commission's Policy on Reporting Program Change and are available upon request from the Commission Office. These Guidelines focus upon the adequacy of programmatic resources in support of additional student enrollees. Enrollment increases are tracked to ensure over time total enrollment does not exceed the resources of the program.

A program considering or planning an enrollment increase, or any other substantive change, should notify the Commission early in the program's planning. Programs are reminded that resources must be maintained even when the full complement of students is not enrolled in the program.

Approval of an increase in enrollment in predoctoral 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. Upon submission of the enrollment increase 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. Programs should be cognizant of the impending need for enrollment increases through short- and long-term planning and proactively request permission for the increase. The Commission will not consider retroactive permanent requests, nor will it consider inter-cycle requests unless there are documented extenuating circumstances.

Revised 2/24; 1/20; 8/19; Reaffirmed: 8/25; 8/20; 8/15; Adopted: 08/14

N. VOLUNTARY DISCONTINUANCE OF ACCREDITATION

The Commission may become aware of an accredited program's decision to voluntarily discontinue its participation in the accreditation program when it receives official notification from the sponsoring institution's chief executive officer. When the Commission becomes aware of the program's intent to discontinue accreditation, it takes the following steps:

1. Commission staff verifies that both the program and institution understand the impact of this intended action and informs the institution and program of the specific audiences that will be notified of their decision to let accreditation lapse (the USDE Secretary, the appropriate accrediting agency and state licensing agency). If students/residents who matriculated prior to the program's reported discontinuance effective date are enrolled in any year of the program, the program must submit a Teach-Out Plan until all of these students/residents have graduated. (See Policy on Discontinuance or

Closure of Educational Programs Accredited by the Commission and Teach-Out Plans)

2. Within ten (10) business days, Commission staff contacts the institution's chief executive officer and program director and acknowledges the date when accreditation will lapse (i.e. program's discontinuance effective date) and the date by which the program will no longer be listed in the Commission's lists of accredited programs (i.e. date of CODA meeting or mail ballot). The USDE Secretary and the state licensing or accrediting agency are copied on this letter. Commission staff will inform the program that any classes enrolled on or after the program's reported date of discontinuance must be advised that they will not graduate from a CODA-accredited program. (See Policy on Discontinuance or Closure of Educational Programs Accredited by the Commission and Teach-Out Plans)
3. At its next meeting, or by mail ballot if waiting until the next meeting would preclude a timely review, the Commission will take action to affirm the program's decision to let accreditation lapse, either through a Discontinuance or Teach-Out (See Other Accreditation Action Definitions). The USDE Secretary and appropriate state licensing or accrediting agency are copied on any follow-up correspondence to the institution/program that may occur after this meeting.

Revised: 2/21; 2/16; 8/15; 7/06, 7/00; Reaffirmed: 8/25; 8/20; 8/10

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

1 institution indicates its intent to close an accredited program or to voluntarily discontinue participation in
2 the Commission's accreditation program, and if there will not be adequate resources for the program to
3 meet its obligations to enrolled students/residents and allow them to complete their training, the institution
4 must assist students/residents in a timely fashion in transferring to other accredited programs in order to
5 complete their educational program. The Commission will assist students/residents in transferring to other
6 accredited programs; this assistance will be provided in the form of guidance with reporting program
7 changes to CODA for review, in cooperation with the institution that sponsors the closing program.

8
9 The program to which students/residents transfer should be able to demonstrate that the finances,
10 facilities, faculty, and patient resources can accommodate the transferring students/residents. Any
11 changes in program enrollment that would result from the transfer of students/residents must be reported
12 to the Commission by the receiving program(s) in accordance with the Commission's policy for reporting
13 program changes. Formal teach-out agreements must be developed with all institutions accepting
14 transferring students/residents to specify the conditions of the transfer. These agreements must ensure
15 that the combined educational experiences meet the Commission's accreditation standards. Such teach-
16 out agreements must be submitted to the Commission as part of the Teach-Out plan.

17
18 Students/Residents who are enrolled and successfully complete the program during the Teach-Out will be
19 considered graduates of an accredited program. Students/Residents who transfer to another program and
20 successfully complete that program will be considered graduates of the latter program. Such
21 students/residents will be considered graduates of an accredited program if the latter program is accredited
22 during the time such students/residents are enrolled. It will be the closing institution's responsibility to
23 ensure that appropriate student/resident records and transcripts are maintained for future reference.

24
25 The Commission will take action to affirm a program's reported discontinuance or closure effective date
26 at the appropriate time when the program no longer enrolls students/residents in any year of the program.
27 The Commission has developed Guidelines for Submitting Teach-Out Reports by Institutions
28 Discontinuing or Closing Commission-Accredited Educational Programs to assist institutions with
29 preparing teach-out reports for the Commission. These guidelines are routinely distributed along with the
30 Commission's Policy on Discontinuance or Closure of Educational Programs.

31 Revised: 2/23; 8/17; 2/16; 8/15; 5/93; Reaffirmed: 8/25; 8/20; 8/10, 7/07, 07/01, 12/92, 12/85, 12/79

32 33 34 P. POLICY ON ADVERTISING

35
36 Any advertising pertaining to an educational program that is accredited by the Commission on Dental
37 Accreditation must be clear and comprehensive, indicating the accrediting body by name and accurately
38 specifying the scope of accreditation. Any reference to a specific aspect of the program and its length
39 should indicate that accreditation standards for the respective discipline are met.

40
41 The Commission has authorized use of the following statement by institutions or programs that wish to
42 announce their programmatic accreditation by the Commission. Programs that wish to advertise the
43 specific programmatic accreditation status granted by the Commission may include that information as
44 indicated in italics below (see text inside square brackets); that portion of the statement is optional but, if
45 used, must be complete and current. The logo of the Commission on Dental Accreditation cannot be used
46 alone without the following advertising statement. When used in electronic publications, the logo must

link to the Commission website included in the statement.

The program(s) in (--discipline(s)-- is/are accredited by the Commission on Dental Accreditation *[and has/ have been granted the accreditation status(es) of (--X--)]*. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at ~~(312) 440-4653~~ (800) 232-6108 or at ~~211 East Chicago 401 North Michigan~~ Avenue, Suite 3300, Chicago, IL ~~60611-2678-60611-4250~~. The Commission's web address is: <http://www.ada.org/en/coda> <http://coda.ada.org>.

In addition to the statement noted above, programs in advanced dental education must include the following statement in advertising materials:

The Commission on Dental Accreditation has accredited the program in (--education discipline--). However, accreditation of the program does not in itself constitute recognition of any dental specialty status.

Revised: 8/25; 8/18; 8/16; 8/14; 7/09; Reaffirmed: 8/20; 8/15; 8/10, 7/04, 7/00, 1/95; Adopted: 12/83

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: 8/25; 8/10, 7/09, 7/01; Adopted: 12/88

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: 8/25; 8/15; 8/10

Staff consultation to international programs or groups may also be available. All consultation services are provided in English, and if necessary, the program or group is responsible for costs associated with the use of interpreters. The schedule for international consultation activities must be arranged around staff primary responsibilities in the United States. International consultation trips should be long enough to allow ample time for staff to adjust to any time change. The program pays a consultation fee and all expenses associated with the consultation visit, including travel, hotel, and meals. U. S. State Department travel warnings and advisories are consulted *prior* to international travel and Commission staff will not provide consultation services in any location where staff is placed at risk. This includes but is not limited to locations where a U. S. State Department travel warning and/or travel alert is in effect.

Reaffirmed: 8/25; 8/20; 8/15; Adopted: 8/11

S. POLICY STATEMENT ON REPORTING AND APPROVAL OF SITES WHERE EDUCATIONAL ACTIVITY OCCURS

The Commission on Dental Accreditation recognizes that students/residents may gain educational experiences in a variety of settings and locations.

An accredited program may use one or more than one setting or location to support student/resident learning and meet Commission on Dental Accreditation standards and/or program requirements. The Commission expects programs to follow the EOPP guidelines and accreditation standards when developing, implementing and monitoring activity sites used to provide educational experiences.

Reporting Requirements:

The Commission on Dental Accreditation must be informed when a program accredited by the Commission plans to initiate educational experiences in new settings and locations. Off-Campus training sites that are owned by the sponsoring institution or where the sponsoring organization has legal responsibility and operational oversight ~~do not need~~ may require prior approval before utilization due to the reported use of the site, but and must be reported to the Commission in accordance with the Policy on Reporting Program Changes in Accredited Programs.

Reporting Requirements for Off-Campus Sites	Major Activity Sites	Minor Activity Sites	Supplemental Activity Sites
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Standing Committee on Documentation and Policy Review

Commission Only

Summer 2025

Definitions	Students/Residents required to complete an experience at this site to meet a program requirements or accreditation standards, and Competency assessments or comparable summative assessments performed at the site	Students/Residents required to complete an experience at this or another site to meet a program requirements or accreditation standards, and No competency assessments or comparable summative assessments performed at the site. Evaluation may occur.	Student/Resident chooses whether to visit the site outside of the educational program (e.g. volunteer mission trips, health fair, etc. not used to fulfill program or accreditation requirements).
Program Report Requirement	Report required by May 1 or November 1	Report required at least 30 days prior to planned implementation of educational activity site.	No report required.
Acknowledgement/Approval	Commission approval required prior to implementation of the educational activity site. Approval of the major activity sites required prior to recruiting students/residents for the site and initiating use of the site.	Commission acknowledgement of review at the program's next site visit.	No approval required.
Site Visit(s) to Educational Activity Site	Commission may direct special focused site visit to review educational activity site prior to or after approval of the site. Commission may review site at future site visits.	Commission may visit educational activity site during program's next site visit.	No site visit required.

1 The Commission must ensure that the necessary education as defined by the standards is available, and
2 appropriate resources (adequate faculty and staff, availability of patient experiences, and distance learning
3 provisions) are provided to all students/residents enrolled in an accredited program. Generally, only
4 programs without reporting requirements will be approved to initiate educational experiences at major
5 activity sites.
6

1 When the Commission has received notification that an institution plans to offer its accredited program at
2 an off-campus educational activity site, the Commission may conduct a special focused site visit to each
3 educational activity site where each student's/resident's educational experience is provided, based on the
4 specifics of the program, the accreditation standards, and Commission policies and procedures, or if other
5 cause exists for such a visit as determined by the Commission. There may be extenuating circumstances
6 when a special review is necessary.

7
8 The program must report the rationale for adding an educational activity site and how that site affects the
9 program's goals, objectives, and outcomes. For example, program goals, objectives, and outcome measures
10 may address institutional support, faculty support, curriculum, student didactic and clinical learning,
11 research, and community service. The program must support the addition of an educational activity site with
12 trends from pertinent areas of its outcomes assessment program that indicates the rationale for the additional
13 site.

14
15 When conducting a review of the program, the Commission's site visit team will identify the sites to be
16 visited based upon educational experiences at the site (for example based upon length of training at the site,
17 educational experience or evaluation/competencies achieved). After the initial visit or review, each
18 educational activity site may be visited during the regularly scheduled CODA evaluation visit to the program.

19 20 **Discipline-specific Exemptions:**

21 The Commission recognizes that dental assisting and dental laboratory technology programs utilize
22 numerous extramural private dental offices and laboratories to provide students with clinical/laboratory work
23 experience. The program will provide a list of all currently used extramural sites in the self-study document.
24 The Commission will then randomly select and visit facilities at the time of a site visit to the program. Prior
25 Commission approval of these extramural dental office and laboratory sites will not be required.

26
27 The Commission recognizes that dental public health programs utilize numerous off-campus sites to
28 provide students/residents with opportunities to conduct their supervised field experience. The program
29 will provide a list of all currently used sites in the self-study document. The visiting committee will select
30 and visit facilities during the site visit to the program to evaluate compliance with CODA accreditation
31 standards. Prior Commission approval of these supervised field experience sites will not be required.
32 Programs where 30% or more of the overall student/resident training occurs at off-campus site(s) must
33 report the off-campus site(s) under the Commissions *Policy Statement on Approval of Sites Where*
34 *Educational Activity Occurs*.

35
36 The Commission recognizes that advanced dental education programs in dental anesthesiology utilize
37 numerous mobile ambulatory settings and rotations to provide residents with opportunities to gain
38 required clinical experiences. The program will provide a list of all currently used settings and rotations
39 in the self-study document. The visiting committee will randomly select and visit several settings and
40 rotation locations during the site visit to the program to evaluate compliance with Commission on Dental
41 Accreditation standards. Prior Commission approval of these settings and rotations will not be required.

42
43 For predoctoral dental education programs, when primary program faculty travel with student(s) to a site
44 and competency is assessed, the site may be treated as a minor site for reporting purposes.

45 The use of service-learning/community service sites where patient education, patient screening or

voluntary (non-credit) participation in patient care occurs are exempt from reporting.

Expansion of a developing dental hygiene program and/or current or developing dental assisting program 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.

Fees Related to the Use of Educational Activity Sites:

All programs accredited by the Commission pay an annual fee. Additional fees will be based on actual accreditation costs incurred during the visit to and educational activity site. The Commission office should be contacted for current information on fees.

Commission on Dental Accreditation Consideration of Educational Activity Sites:

The Commission uses the following process when considering reports for adding educational activity sites. Program administrators have the option of consulting with Commission staff at any time during this process.

1. Depending upon the type of educational activity site established, a program administrator submits either:
 - (1) the major educational activity site report **by May 1 or November 1** or (2) the minor educational activity site report at least thirty (30) days prior to planned implementation of educational activity site.
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, whether the site is major or minor, the report is reviewed by the appropriate Review Committee for the discipline and by the Commission.
3. Receipt of the educational activity site 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 addition of educational activity sites received from accredited educational programs.

- *Approve the addition of the educational activity site:* If the Review Committees 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 has been noted and will be reviewed at the next regularly-scheduled site visit to the program.
- *Approve the addition of the educational activity site 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. Use of the educational site is permitted.

- *Postpone action and continue the program's accreditation status, but request additional information:*
The transmittal letter will inform the institution that the report of the addition of the educational activity site 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. Use of the educational activity site is not permitted until Commission approval is granted.
- *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 the addition of educational activity sites. The institutions will be advised that they may re-submit the request with additional information if they choose.

Revised: 8/25; 1/25; 2/24; 2/22; 8/18; 8/17; Reaffirmed: 8/20; Adopted: 2/16 (Former Off-Campus Policy)

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: 8/25; 8/15

1. Student/Resident/Fellow Identity Verification Requirement For Programs That Offer Distance Education:

Programs that offer distance education must:

- have a process in place through which the program establishes that the student/resident/fellow who registers in a distance education course or program is the same student/resident/fellow who participates in and completes the course or program and receives the academic credit;
- verify the identity of a student/resident/fellow 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/resident/fellow identity;
- make clear in writing that processes are used that protect student/resident/fellow privacy;
- notify students/residents/fellows of any projected additional student/resident/fellow charges associated with the verification of student/resident/fellow identity at the time of registration or enrollment.

Revised: 8/21; 8/20; Reaffirmed: 8/25; 8/15; Adopted: 8/10

U. POLICY ON INSTITUTIONS OFFERING BOTH ACCREDITED AND NON-ACCREDITED PROGRAMS

Institutions offering both accredited programs and non-accredited programs, (other than continuing education programs) have an obligation to explain program differences to potential students and the community. Therefore, any information publicizing the institution's programs should indicate which programs are and are not accredited by the Commission.

1 Because establishment of a non-accredited program may dilute the instructional resources available for
2 the accredited program, the Commission reserves the right to request information about a non-accredited
3 program and its relationship to the accredited program.

4 Revised: 8/13; Reaffirmed: 8/25; 8/20; 8/15; 8/10, 7/07, 7/01, 12/90, 12/85

5 6 7 V. POLICY ON COMBINED CERTIFICATE AND DEGREE PROGRAMS IN ADVANCED DENTAL 8 EDUCATION 9

10 The Commission supports the principle that advanced dental education programs culminate with the
11 awarding of a certificate attesting to successful completion of an accredited program. Further, such
12 certificates indicate fulfillment of educational requirements and are recognized as meeting eligibility
13 requirements for ethical announcement of limitation of practice and examination by the dental certifying
14 boards.

15
16 The Commission expects that advanced dental education programs leading to the awarding of a certificate
17 and an academic degree, (e.g. M.S. or Ph.D. degree), will be conducted in compliance with standards
18 stipulated by the graduate school. Graduate level academic degrees must maintain the level of excellence,
19 quality controls and academic standards established by the graduate school of the university. The
20 Commission further expects that the requirements for research projects and theses will demonstrate a
21 scholarly effort. It is recognized that completion of the educational requirements, as stipulated in the
22 accreditation standards on advanced dental education training and the academic degree requirements of a
23 graduate school, may require an additional year of training devoted primarily to research and theses
24 completion.

25 Revised: 8/18; 8/15; Reaffirmed: 8/25; 8/20; 8/10, 7/07, 7/01; CODA: 12/76:2

26 27 28 W. QUALIFICATIONS OF A PROGRAM DIRECTOR FOR A COMBINED ADVANCED DENTAL 29 EDUCATION PROGRAM 30

31 When an institution sponsors a combined advanced dental education program, (e.g. orthodontics and
32 dentofacial orthopedics/periodontics), it is most desirable that the program director be qualified according
33 to the accreditation standards in all areas involved in the combined program. At a minimum, the program
34 director must be qualified (i.e. board certified by nationally accepted certifying boards or grandfathered)
35 in one of the involved areas and educationally trained (i.e. completed a Commission-accredited advanced
36 dental education program) in the other involved areas. Board certification is to be active and applies to an
37 interim/acting program director as well.

38 Revised: 8/18; 8/15; Reaffirmed: 8/25; 8/20; 8/10, 7/07

39 40 41 X. POLICY ON REGARD FOR DECISIONS OF STATES AND OTHER ACCREDITING AGENCIES 42

43 The Commission takes into account decisions made by other recognized accrediting or state agencies. If
44 the Commission determines that an institution sponsoring an accredited program or a program seeking
45 accreditation is the subject of an interim action or threatened loss of accreditation or legal authority to
46 provide postsecondary education, the Commission will act as follows.

The Commission does not renew the accreditation status of a program during any period in which the institution offering the program:

- Is the subject of an interim action or final decision by a recognized institutional accrediting agency potentially leading to the suspension, revocation, withdrawal, or termination of accreditation or pre-accreditation;
- Is the subject of a decision by a recognized institutional accrediting agency to deny accreditation or pre-accreditation;
- Is the subject of a pending or final action by a state agency potentially leading to the suspension, revocation, withdrawal or termination of the institution's legal authority to provide postsecondary education;
- Has been notified of probation or an equivalent status, or a threatened loss of accreditation, and the due process procedures required by the action have not been completed; and/or
- Has been notified of a threatened suspension, revocation, or termination by a state of the institution's legal authority to provide postsecondary education, and the due process procedures required by the action have not been completed.

In considering whether to grant initial accreditation to a program, the Commission takes into account actions by:

- Recognized institutional accrediting agencies that have denied accreditation or pre-accreditation to the institution offering the program, placed the institution on public probationary status, or revoked the accreditation or pre-accreditation of the institution; and
- State agency that has suspended, revoked, or terminated the institution's legal authority to provide postsecondary education.

If the Commission grants accreditation to a program notwithstanding its actions described above, the Commission will provide to the USDE Secretary, within 30 days of granting initial or continued accreditation, a thorough and reasonable explanation, consistent with the accreditation standards, why the action by a recognized institutional accrediting agency or the state does not preclude the Commission's grant of accreditation. The Commission's review and explanation will consider each of the findings of the other agency in light of its own standards. Upon formal request, the Commission will share with other appropriate USDE-recognized accrediting agencies and USDE-recognized State approval agencies information about the accreditation status of a program and any adverse actions it has taken against an accredited program.

Revised: 2/21; 5/12; Reaffirmed: 8/25; 8/20; 8/15; 8/10, 7/07, 7/01; Revised: 7/96; 12/88

Y. COMMENTS ON POLICY PROPOSED AND/OR ADOPTED BY PARTICIPATING ORGANIZATIONS

The Commission may provide comments on another organization's proposed policy, procedures, or other documents as part of that organization's review and comment period when requested.

Revised: 1/03; Reaffirmed: 8/25; 8/20; 8/15; 8/10, 7/09; CODA: 05/93:10

Z. POLICY ON RESIDENT DUTY HOURS RESTRICTIONS

The Commission on Dental Accreditation (CODA) acknowledges the revised resident duty-hours and supervision requirements of the Accreditation Council for Graduate Medical Education (ACGME). Recognized by the United States Department of Education, the Commission is the specialized programmatic accreditor for dental and dental-related programs. Institutions in which both graduate medical education residencies and advanced dental education programs reside may determine that CODA-accredited programs should comply with ACGME standards. It is the policy of the Commission that the institution should consider the accreditation standards of the Commission on Dental Accreditation for hospital-based dental residency programs and consider whether the ACGME requirements are in the best interests of patient safety, resident education and the CODA-accredited programs.

Reaffirmed: 8/25; 8/20; 8/15; Adopted: 8/11

AA. POLICY ON CUSTOMIZED SURVEY DATA REQUESTS

Periodically, the Commission receives requests for data collected in the annual surveys of accredited dental education programs from the communities of interest. The nature and scope of a request will determine whether approval of the Commission and the ADA Officers or the ADA Board of Trustees must be attained. For all types of requests, a "Survey Data Request Form" must be submitted to the Director of the Commission, who will consult with the ADA Health Policy Institute or appropriate ADA agency regarding the potential for supplying requested data. This form is available upon request from the Commission office or the ADA Health Policy Institute. 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). Granting the request is at the sole discretion of the ADA.

Requests which can be approved directly through the ADA Division of Education and Professional Affairs involve non-confidential and non-commercial data and include:

- Data that are collected in the annual surveys and are available publicly, but presented in a different way than the published report (e.g., broken down by certain characteristics, by individual school/program, and/or for a specific trend period).
- Data that are collected in different surveys and published in different reports, grouped together in a single report.

Survey data will not be provided for the following types of requests:

- Requests made for data from surveys that are still in the data collection or analysis phase. Custom data requests cannot be fulfilled if the corresponding published report has not yet been released.
- Confidential data (e.g., financial data; curriculum/patient care figures collected from advanced programs; protected student information).
- Requests at a level of granularity which would compromise confidentiality of the survey respondents.
- Requests that involve reproduction in a publication of any sort, appear to be for the purpose of monetary gain, or used in some type of litigation or for questionable motives.
- The scope of the request exceeds the Health Policy Institute's workload capacity.

Additional requirements:

- Requests will be granted only in the following output formats used by the Health Policy Institute: Word, PDF, Excel, and certain SAS output types.
- Fees are charged based on a time estimate to complete the request, with a one-hour minimum. 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 Health Policy Institute will act on the request.

Revised: 8/15; Reaffirmed: 8/25; 8/20; Adopted: 8/11

BB. 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 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; Reaffirmed: 8/25; Adopted: 8/12

CC. POLICY ON REPRINTS

All Commission on Dental Accreditation material is copyrighted and may be reprinted by permission only. “Reprint” means reproducing Commission materials in any paper or electronic format or media. Requests must be in writing or via e-mail. Permission will not be granted over the phone.

Requests must include the exact materials intended for reprint, i.e.: “Accreditation Standards for Dental Education Programs – Standard 5.” All permissions are granted for one-time usage only, as stated in the permission agreement.

The Commission requires that materials be reprinted, unedited and in their entirety. Deletion or alteration of any Commission on Dental Accreditation material is prohibited. Content must not be placed on any electronic platform; however, the reprint may include a link to the Commission’s website where the material is located.

1 The Commission does not provide hard copies of the requested reprint content.

2
3 Each page of the reproduced Commission on Dental Accreditation material should contain the following
4 statement, clearly indicating these materials are the Commission's. The statement must be placed at the
5 bottom of each page of the print copy (remove quotation marks):

6
7 "Reprinted by permission of the Commission on Dental Accreditation, [current year]. Further
8 reproduction by permission only. Permission to reprint Commission on Dental Accreditation
9 materials does not constitute explicit or implicit endorsement of any activity, program, or
10 presentation in which the materials may be used."

11
12 No content may be translated into any language without the expressed permission of the Commission on
13 Dental Accreditation.

14 Revised: 2/21; 1/20; Reaffirmed: 8/25; 8/20; Adopted:
15 8/18
16
17
18

**OTHER COMMISSION ON DENTAL ACCREDITATION
POLICIES AND PROCEDURES FOR REVIEW**

Underline indicates addition; ~~Strikethrough~~ indicates deletion

E. CONFIDENTIALITY POLICY

All materials generated and received in the accreditation process are confidential. In all instances Protected Health Information (PHI), Sensitive Personal Information (SPI) 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. The Commission will only communicate with program representatives through official institutional email. 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 the self-study document.

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.

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

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

10
11 SURVEYS: Routinely gathered data are used in the accreditation process and also provide a national data
12 base of information about the accredited dental and dental-related educational programs. The
13 Commission may release to the public any portion of survey data that is collected annually unless the
14 terms of confidentiality for a specific section are clearly indicated on the survey instrument. Subsections
15 of each survey instrument containing data elements which are confidential are clearly marked. Any data
16 which may be reported from confidential subsections are published in a manner which does not allow
17 identification of an individual institution/program.

18
19 EXIT INTERVIEWS: The final conference or exit interview between the site visit committee and the
20 chief executive officer, dental dean, chief of dental service or the program director(s) is also confidential.
21 Additional people may be included at the discretion of the institutional administration. The interview is a
22 confidential summation of the preliminary findings, conclusions, recommendations and suggestions
23 which will appear in the site visit report to the institution. This is a preliminary oral report and the
24 preliminary written report is often only in draft stage at this point; therefore, this session may not be
25 recorded in either audio or video format. Note taking is permitted and encouraged.

26
27 ON-SITE INTERVIEWS AND ORAL COMMUNICATIONS: In order to carry out their duties as on-
28 site evaluators, visiting committee members must communicate freely with administrators, faculty, staff
29 and students and any other appropriate individuals affiliated with an education program. As part of their
30 on-site accreditation duties, committee members are expected to share with other team members pertinent
31 and relevant information obtained during interviews. All oral communications occurring on-site,
32 however, are confidential. Interviews may not be recorded in either audio or video format. Note taking is
33 permitted and encouraged. When the site visit ends, team members may communicate orally, or in
34 writing, only with Commission staff or other team members about any on-site interview or conversation.
35 All questions related to any aspect of the site visit including oral communications must be referred to the
36 Commission office.

37
38 MEETING MATERIALS/DISCUSSIONS: Background reports and informational materials related to
39 accreditation matters are regularly prepared for review by the Commission and its Review Committees.
40 These materials and all discussions related to accreditation matters routinely remain confidential. All Ad
41 Hoc and Standing Committee meeting materials remain confidential unless the Commission determines
42 the materials warrant public distribution. The Commission determines when, and the manner in which,
43 newly adopted policy and informational reports will receive public distribution.

44

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 Ad Hoc and Standing Committee meetings, and all meetings related to CODA operations 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: 8/25; 8/23; 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

II. REVIEW COMMITTEES AND BOARD OF COMMISSIONERS

A. REVIEW COMMITTEES AND REVIEW COMMITTEE MEETINGS

The Commission's Review Committees meet twice each year to consider site visit reports and institutional responses, progress reports, information from annual surveys, applications for initial accreditation, and policies related to accreditation. These meetings are held in the winter and the summer and shall be conducted in the format of the Commission's choosing (e.g., in-person, virtual, hybrid) based upon the Review Committee's workload and in consultation with the Review Committee chair and approval of the Commission's leadership.

Reports from site visits conducted less than 90 days prior to a Commission meeting are usually deferred and considered at the next Commission meeting. Commission staff can provide information about the specific dates for consideration of a particular report.

The Commission has established policy and procedures for due process which are detailed in the Due Process section of this manual.

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. Following consideration of workload, public members may concurrently serve on more than one (1) review 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 been on a site visit within the last two (2) years prior to their appointment on a Review Committee should attend the Commission's site visitor training workshop within their first year of service on the Review Committee.
 - ix. 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.
 - x. Recommendations to the Commission from the Review Committee must be taken at meetings in which there is both a quorum and at least one (1) discipline-specific expert, other than the Chair, present.
 - xi. 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: 8/25; 8/23; 8/22; 2/22; 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
- 2. Composition**
- Predoctoral Education Review Committee (9 members)
 - 1 discipline-specific Commissioner appointed by American Dental Education Association

Standing Committee on Documentation and Policy Review

Commission Only

Summer 2025

- 1 public member
- 3 dental educators who are involved with a predoctoral dental education program (two must be general dentists)
- 1 general dentist } (One of whom is a practitioner
- 1 non-general* dentist } dentist and the other an educator)
- 1 dental assistant, dental hygienist, dental therapist or dental laboratory technology professional educator
- 1 dental therapist educator
- *a dentist who has completed an advanced dental education program in dental anesthesiology, dental public health, endodontics, oral and maxillofacial radiology, oral and maxillofacial pathology, oral and maxillofacial surgery, oral medicine, orofacial pain, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, or prosthodontics.

Six (6) Advanced Dental Education Review Committees (DENTANES, DPH, OFP, OMP, OMR, OM - 5 members each. At least one member must be a dental educator.)

- 1 discipline-specific Commissioner appointed by the discipline-specific sponsoring organization
- 1 public member
- 1 dentist nominated by the discipline-specific sponsoring organization
- 1 dentist nominated by the discipline-specific certifying board
- 1 general dentist

Six (6) Advanced Dental Education Review Committees (ENDO, OMS, ORTHO, PERIO, PED, PROS - 6 members each. At least one member must be a dental educator.)

- 1 discipline-specific Commissioner appointed by the discipline-specific sponsoring organization
- 1 public member
- 1 dentist nominated by the discipline-specific sponsoring organization
- 1 dentist nominated by the discipline-specific certifying board
- 1 dentist nominated by the discipline-specific certifying board and discipline-specific sponsoring organization
- 1 general dentist

Postdoctoral General Dentistry Review Committee (9 members)

- 1 discipline-specific Commissioner, jointly appointed by American Dental Education Association (ADEA) and the Special Care Dentistry Association (SCDA)
- 1 public member
- 2 current General Practice Residency (GPR) educators nominated by the SCDA
- 2 current Advanced Education in General Dentistry (AEGD) educators nominated by ADEA
- 1 general dentist graduate of a GPR or AEGD
- 1 non-general* dentist
- 1 higher education or hospital administrator with past or present experience in administration in a teaching institution
- *a dentist who has completed an advanced dental education program in dental anesthesiology, dental public health, endodontics, oral and maxillofacial radiology, oral and maxillofacial pathology, oral and maxillofacial surgery, oral medicine, orofacial pain, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, or prosthodontics.

Dental Assisting Education Review Committee (10 members)

- 1 discipline-specific Commissioner appointed by American Dental Assistants Association
- 1 public member
- 2 general dentists (practitioner or educator)
- 5 dental assisting educators
- 1 dental assisting practitioner who is a graduate of a Commission accredited program

Dental Hygiene Education Review Committee (13 members)

- 1 discipline-specific Commissioner appointed by American Dental Hygienists' Association
- 1 public member
- 5 dental hygienist educators
- 2 dental hygienist practitioners
- 2 dentist practitioners
- 1 dentist educator
- 1 higher education administrator

Dental Laboratory Technology Education Review Committee (5 members)

- 1 discipline-specific Commissioner appointed by National Association of Dental Laboratories
- 1 public member
- 1 general dentist
- 1 dental laboratory technology educator
- 1 Certified Dental Technician who manages and/or supervises dental laboratory technicians nominated by National Association of Dental Laboratories

Revised: 8/22; 2/22; 2/21; 8/18; 2/16; 2/15; 8/14; 2/13, 7/09, 7/08, 1/08; Reaffirmed: 8/17; 8/10; Adopted: 1/06

3. Nomination Criteria: The following criteria are requirements for nominating members to serve on the Review Committees. Rules related to the appointment term on Review Committees apply.

All Nominees:

- Ability to commit to one (1) four (4) year term;
- Willingness to commit ten (10) to twenty (20) days per year to Review Committee activities, including training, comprehensive review of print and electronically delivered materials and travel to Commission headquarters;
- Ability to evaluate an educational program objectively in terms of such broad areas as curriculum, faculty, facilities, student evaluation and outcomes assessment;
- Stated willingness to comply with all Commission policies and procedures (e.g. Agreement of Confidentiality; Conflict of Interest Policy; Operational Guidelines; Simultaneous Service; HIPAA Training, Licensure Attestation, and Professional Conduct Policy and Prohibition Against Harassment); and
- Ability to conduct business through electronic means (email, Commission Web Sites)

Educator Nominees:

- Commitment to predoctoral, advanced, and/or allied dental education;
- Active involvement in an accredited predoctoral, advanced, or allied dental education program as a full- or part-time faculty member;
- Subject matter experts with formal education and credentialed in the applicable discipline; and

- Prior or current experience as a Commission site visitor is preferred.

Practitioner Nominees:

- Commitment to predoctoral, advanced, and/or allied dental education;
- Majority of current work effort as a practitioner; and
- Formal education and credential in the applicable discipline.

Public/Consumer Nominees:

- A commitment to bring the public/consumer perspective to Review Committee deliberations. The nominee should not have any current or past (within the past three years) formal or informal connection to the profession of dentistry; also, the nominee should have an interest in, or knowledge of, health-related and accreditation issues. In order to serve, the nominee must not be a:
 - a. Dentist or member of an allied dental discipline;
 - b. Member of a predoctoral, advanced, or allied dental education program faculty or be in an administrative position overseeing a dental program;
 - c. Employee, member of the governing board, owner, or shareholder of, or independent consultant to, a predoctoral, advanced, or allied dental education program that is accredited by the Commission on Dental Accreditation, has applied for initial accreditation or is not-accredited;
 - d. Member or employee of any professional/trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission, dental education or dentistry; and
 - e. Spouse/Partner, parent, child or sibling of an individual identified above (a through d).

Higher Education Administrator:

- A commitment to bring the higher education administrator perspective to the Review Committee deliberations. In order to serve, the nominee must not be a:
 - a. Member of any trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission; and
 - b. Spouse, parent, child or sibling of an individual identified above.

Hospital Administrator:

- A commitment to bring the hospital administrator perspective to Review Committee deliberations. In order to serve, the nominee must not be a:
 - a. Member of any trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission; and
 - b. Spouse, parent, child or sibling of an individual identified above.

Revised: 8/25; 8/22; 4/22; 8/21; 2/21; 8/18; 8/17; 8/14; 8/10; Adopted: 07/08

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: 8/22; 8/17; 8/10, 7/01; CODA: 07/96:10

5. Chairs Of Review Committees: Review Committees are chaired by the Commissioner for the respective discipline(s). The Chair of the Predoctoral Review Committee is selected by the Chair of the Commission from among the four (4) Commissioners appointed by ADEA.

Revised: 8/17; Reaffirmed: 8/22; 8/10

6. Calibration Protocol: The following protocol used to calibrate Review Committee members:

- i. Documentation Guidelines for Selected Recommendations is provided to all programs scheduled to submit either a response to a preliminary draft site visit report or a progress report.
- ii. Documentation Guidelines for Selected Recommendations is provided to all members of Review Committees for use as accreditation reports are reviewed.
- iii. At the beginning of each committee meeting, the chair reminds the committee of the Documentation Guidelines for Selected Recommendations and reviews how the document is to be used.
- iv. A specific calibration exercise is conducted prior to each committee's consideration of accreditation reports.
- v. Each staff secretary refers the committee to the Documentation Guidelines at appropriate points throughout the committee's discussion of accreditation reports.
- vi. At the end of the committee's accreditation actions, the staff secretary asks for comments and feedback on the calibration process.
- vii. Following each meeting of the Commission, a staff meeting is convened for the purpose of discussing input received from each committee on the *Documentation Guidelines for Selected Recommendations*. Appropriate adjustments are incorporated into the document annually, following the July meeting of the Commission.
- viii. When specific calibration problems are identified, a specific exercise to address the problem will be designed and implemented as soon as feasible, usually at the next meeting.
- ix. Reports of calibration activities are provided to the committees and the Commission as needed.

Revised: 7/97, 7/00; Reaffirmed: 8/22; 8/17; 8/10, 7/07, 7/01; CODA: 12/92:8

7. Procedure To Resolve Differences Between Allied Dental Review Committees: The Dental Assisting, Dental Hygiene and Dental Laboratory Technology Education Review Committees usually consider reports with common recommendations as their first item of accreditation business. The staff secretaries compare the two or three committees' decisions relative to the common recommendations, accreditation status and changes to the report. Discrepancies must then be reconsidered.

At the earliest opportunity convenient to the involved Review Committees, the two reviewers (primary and secondary) from each committee will meet to discuss and resolve any differences. These individuals will be excused, if necessary, from committee deliberations for this purpose and committees will adjust their agendas as much as possible to accommodate this process. The two reviewers from each committee will have delegated authority to act on behalf of their respective committees in reaching consensus.

Representatives of the Review Committees should be reminded prior to the joint meeting that every effort should be made to focus on substantive issues affecting accreditation status, to relate report contents to

the discipline standards and to reach a consensus whenever appropriate. The agreed-upon decision, or the failure to achieve consensus, will be reported back to the disciplines' Review Committees.

If a decision on a single joint recommendation cannot be reached by consensus, then each committee will prepare a report stating the rationale for its recommendation and all reports will be submitted to the Commission for consideration. The Chair and Director of the Commission should be informed promptly when this occurs.

The Chair of each Review Committee or its designated spokesperson will be expected to speak to the committee's position during the Commission meeting. The Commission will consider both reports and will determine the accreditation status.

Revised: 7/99; Reaffirmed: 8/22; 8/17; 8/10, 7/07, 7/01

B. COMMISSION AND COMMISSION MEETINGS

The Commission and its Review Committees meet twice each year to consider site visit reports and institutional responses, progress reports, information from annual surveys, applications for initial accreditation, and policies related to accreditation. These meetings are held in the winter and the summer and shall be conducted in the format of the Commission's choosing (e.g., in-person, virtual, hybrid) based upon the Review Committee's workload and in consultation with the Review Committee chair and approval of the Commission's leadership.

Reports from site visits conducted less than 90 days prior to a Commission meeting are usually deferred and considered at the next Commission meeting. Commission staff can provide information about the specific dates for consideration of a particular report.

The Commission has established policy and procedures for due process which are detailed in the Due Process section of this manual.

Revised: 8/25; 8/17; 8/14; 7/06, 7/96; Reaffirmed: 8/22; 8/10; Adopted: 7/96

1. Composition and Criteria

Composition

The Board of Commissioners shall consist of:

Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.

Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of any dental education program.

Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.

The remaining Commissioners shall be selected as follows: one (1) certified dental assistant selected by the American Dental Assistants Association from its active or life membership, one (1) licensed dental hygienist selected by the American Dental Hygienists' Association, one (1) certified dental laboratory technician selected by the National Association of Dental Laboratories, one (1) student selected jointly by the American Student Dental Association and the Council of Students, Residents and Fellows of the American Dental Education Association, one (1) dentist who is board certified in the respective discipline-specific area of practice and is selected by each of the following organizations: American Academy of Oral and Maxillofacial Pathology, American Academy of Oral and Maxillofacial Radiology, American Academy of Oral Medicine, American Academy of Orofacial Pain, American Academy of Pediatric Dentistry, American Academy of Periodontology, American Association of Endodontists, American Association of Oral and Maxillofacial Surgeons, American Association of Orthodontists, American Association of Public Health Dentistry, American College of Prosthodontists, American Society of Dentist Anesthesiologists; one (1) dentist who is jointly appointed by the American Dental Education Association and the Special Care Dentistry Association, and four (4) members of the public who are neither dentists nor allied dental personnel nor teaching in a dental or allied dental education institution and who are selected by the Commission, based on established and publicized criteria. In the event a Commission member sponsoring organization fails to select a Commissioner, it shall be the responsibility of the Commission to select an appropriate representative to serve as a Commissioner. The Director of the Commission shall be an ex-officio member of the Board without the right to vote.

Criteria (All Appointees)

- Ability to commit to one (1) four (4) year term;
- Willingness to commit ten (10) to twenty (20) days per year to activities, including training, comprehensive review of print and electronically delivered materials, and travel to Commission headquarters;
- Ability to evaluate an educational program objectively in terms of such broad areas as curriculum, faculty, facilities, student evaluation and outcomes assessment;
- Stated willingness to comply with all Commission policies and procedures (e.g. Agreement of Confidentiality; Conflict of Interest Policy; Operational Guidelines; Simultaneous Service; HIPAA Training, Licensure Attestation, and Professional Conduct Policy and Prohibition Against Harassment);
- Ability to conduct business through electronic means (email, Commission Web Sites); and
- Active, life or retired member of the American Dental Association, where applicable.

Revised: 2/21; 8/18; 8/17; Reaffirmed: 8/22; Adopted: 8/14

Public/Consumer Commissioner:

- A commitment to bring the public/consumer perspective to Commission deliberations. The appointee should not have any current or past (within the past three years) formal or informal connection to the profession of dentistry; also, the appointee should have an interest in, or knowledge of, health-related and accreditation issues. In order to serve, the appointee must not be a:

- a. Dentist or member of an allied dental discipline;
- b. Member of a predoctoral, advanced, or allied dental education program faculty or be in an administrative position overseeing a dental program;
- c. Employee, member of the governing board, owner, or shareholder of, or independent consultant to, a predoctoral, advanced, or allied dental education program that is accredited by the Commission on Dental Accreditation, has applied for initial accreditation or is not-accredited;
- d. Member or employee of any professional/trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission, dental education or dentistry; and
- e. Spouse/Partner, parent, child or sibling of an individual identified above (a through d).

Revised: 8/25; 8/22; Adopted: 4/22

2. Policy On Absence From Commission Meetings: When a Commissioner notifies the Director that he/she will be unable to attend a meeting of the Commission, the Director will notify the Chair. The Chair determines if another individual should be invited to attend the meeting in the Commissioner's absence. A substitute will be invited if the Commissioner's discipline would not otherwise be represented. This individual must be familiar with the Commission's policies and procedures; and therefore, must be a current or former member of the appropriate Review Committee and must represent the same discipline or appointing organization as the absent Commissioner. In the event that these criteria cannot be met, the Commission Chair may elect not to invite another individual to the meeting. The substitute would have the privileges of speaking, introducing business, making motions, and voting.

Revised: 8/17; 8/10, 7/97; Reaffirmed: 8/22; 7/07, 7/01; CODA: 12/86:14

3. New Commissioner Orientation and Training: Newly appointed Commissioners will undergo a six-month training period prior to beginning their official term. This training includes attendance at a Commission meeting, at the discipline-specific review committee meeting and the Commission's site visitor training workshop within their first year of service on the Commission.

Revised: 8/23; Reaffirmed: 8/22; 8/17; 8/14; Adopted: 8/11

4. Protocol For Review Of Report On Accreditation Status Of Educational Programs: Commission staff sends the final listing of programs to be reviewed at the Commission meeting to each Commissioner to allow each Commissioner to identify all conflicts with these programs.

A conflict includes, but is not limited to:

- close professional or personal relationship or affiliation with the institution/program or key personnel in the institution/program which may create the appearance of a conflict;
- serving as an independent consultant to the institution/program;
- being a graduate of the institution/program;
- being a current employee or appointee of the institution/program;
- previously applied for a position at the institution within the last five (5) years;
- being a current student at the institution/program;
- having a family member who is employed by or affiliated with the institution;
- manifesting a professional or personal interest at odds with the institution or program;
- key personnel of the institution/program having graduated from the program of the Commissioner;
- having served on the program's visiting committee within the last seven (7) years; and/or

- no longer a current employee of the institution or program, but having been employed there within the past five (5) years.

Conflicts of interest for Commissioners may also include being from the same state, but not the same program. The Commission is aware that being from the same state may not itself be a conflict; however, when residence within the same state is in addition to any of the items listed above, a conflict would exist.

When a program is being considered, Commissioners must leave the room if they have any of the above conflicts.

Each year Commissioners report conflicts to the Director. Prior to each Commission meeting, staff analyze the reported conflicts to determine whether reformatting of the Report on Accreditation Status of Educational Programs (yellow sheet reports) is necessary. Reformatting of yellow sheet reports may include grouping all dental school based programs and/or any institution that sponsors multiple programs so that recusals leave the room once.

During the Commission meeting, in addition to yellow sheet reports, each Commissioner receives a copy of the key guidelines of the Commission's Conflict of Interest policy and a listing of conflicts reflecting their listings. Explanation of protocol, including definitions of conflicts, will be provided to Commissioners prior to each Commission meeting.

The Chair will confirm conflicts and remind Commissioners of their responsibility to recuse themselves. The Chair will then allow appropriate time for exiting of relevant Commissioners before review of each yellow sheet report and promptly invite the return of these Commissioners after the specific report is reviewed.

After the Commission meeting, the Report of Accreditation Status of Education Programs in the minutes of the meeting will include the Commissioners' identified conflicts.

Revised: 2/22; 8/14; 8/11, 8/10, 7/09; Reaffirmed: 8/22; 8/17; Adopted: 7/06

5. Policy On Attendance At Open Portion Of Commission Meetings: The policy portion of Commission meetings is open to interested observers from all members of the public, including the communities of interest, international observers, and representatives of dental education programs. Those attending are observers only and do not participate in the Commission's discussion. Confidential accreditation matters are discussed in a closed session of the meeting that is not open to observers.

Observers are asked to pre-register to assist the Commission in making arrangements for the meeting. Pre-registration ensures that the individual is notified when the preliminary agenda is available. When possible, policy reports and committee summary reports related to agenda items will be available prior to the meeting. Access to the preliminary meeting agenda and meeting materials is provided through CODA's website.

The Commission does not assume any travel, hotel or other costs for observers attending the meeting. Observers are not required to pay any registration or materials fee for observing the meeting.

Revised: 2/16; 2/15; 7/97; Reaffirmed: 8/22; 8/17; 8/10, 7/07, 7/01, 7/95; CODA: 12/92:13; 05/93:9

6. Guests Invited To Commission Meetings: Representatives from an accrediting agency in any country with which the Commission has a reciprocal agreement, such as the Commission on Dental Accreditation of Canada, or other accreditors as the Commission deems appropriate, may attend both the closed and open portion of Commission meetings as guests provided they comply with confidentiality guidelines and procedures.

Revised: 2/16; 7/07; Reaffirmed: 8/22; 8/17; 8/14; 8/10, 7/01; CODA: 05/93:11; 01/94:10

7. Commission Communication Of Actions To The Review Committees: On occasion, an accreditation action taken by the Commission differs from the action recommended by a Review Committee. In these instances, the actions taken by the Commission are communicated back to the relevant Review Committee with an explanation regarding the Commission's final decision. The Chair of the Review Committee communicates the Commission's final decision to members of the Review Committee through a letter of explanation.

Reaffirmed: 8/22; 8/17; 8/10, 7/09; CODA: 01/04:20

8. Confidentiality Of Accreditation Reports: Commission members are not authorized, under any circumstances, to disclose any information obtained during site visits or Commission meetings. All accreditation actions are confidential and accreditation reports are reviewed during the closed portion of the meeting. The extent to which publicity is given to site visit reports is determined by the chief executive officer of the educational institution. For more specific information, see the Commission's Statement of Policy on Public Disclosure and Confidentiality in this manual.

Reaffirmed: 8/22; 8/17; 8/14; 8/10, 7/07, 7/01, 5/80

9. Notice Of Accreditation Actions To Programs/Institutions: An institution will receive the formal notice, including the accreditation status awarded to the program, within thirty (30) days following the official meeting of the Commission. Actions resulting in other than "approval without reporting requirements" will be accompanied by the specific date(s) for submission of progress report(s) and/or notification that a special site visit will be conducted.

When warranted, the Commission action may include a notification of its intent to withdraw a program's accreditation and the time at which this intended action will be taken. When a program is notified of the Commission's intent to withdraw accreditation, the Commission will provide written notification to the United States Department of Education, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision. Additionally, the Commission requires that the institution/program disclose such an action, within seven (7) business days of receipt, to all current and prospective students/residents/fellows. The Commission also requires the program to submit to the Commission office evidence of communicating such notice to all current and prospective students/residents/fellows within seven (7) business days of the Commission's written notification to the program. This notification will also advise the institution of an opportunity to submit additional information and that a special appearance (hearing) before the Commission or one of its Review Committees may be requested. If a program's accreditation status is withdrawn, the institution is advised of its right to appeal the decision before the Appeal Board. For further information, refer to the Policy on Due Process in this manual.

Revised: 1/25; Reaffirmed: 8/22; 8/17; 8/14; 8/10

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.

Revised: 8/20; 8/18; 8/17; 2/15; 1/14; 8/10; Reaffirmed: 8/22; 8/14

11. Notice Of Accreditation Actions To Communities Of Interest: In carrying out its responsibilities as an accrediting agency, the Commission on Dental Accreditation announces its decisions to grant, renew or discontinue (at an institution's request) accreditation to the USDE Secretary, the appropriate state licensing or authorizing agency, appropriate accrediting agencies, the public, educational institutions, dental examining boards, related dental organizations, and the profession no later than thirty (30) days after it makes the decisions.

The Commission publishes listings of accredited programs in predoctoral, advanced, and allied dental education. Lists of accredited programs are posted to the Commission's website within thirty (30) days following a Commission meeting to be available to educational institutions' executives and administrators, the USDE, regional and appropriate national accrediting agencies, state licensing agencies and to other interested agencies and organizations.

When warranted, the Commission may notify an institution of its intent to withdraw a program's accreditation and the time at which this intended action will be taken. In these instances, the Commission will provide written notification to the United States Department of Education, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision. Additionally, the Commission requires that the institution/program disclose such an action, within seven (7) business days of receipt, to all current and prospective students/residents/fellows. The Commission also requires the program to submit to the Commission office evidence of communicating such notice to all current and prospective students/residents/fellows within seven (7) business days of the Commission's written notification to the program. Notice to the public is provided through the listings of accredited programs that is available on the Commission's website and is updated within one (1) business day of providing the final notice to the program's sponsoring institution.

The Commission may also reach the decision to deny or withdraw the accreditation of a program. In these instances, the Commission provides written notice of the final decision to deny or withdraw accreditation to the USDE Secretary, the appropriate accrediting agencies, and the appropriate state licensing or authorizing agency at the same time it notifies the sponsoring institution of the decision. Notice to the public is provided through the listings of accredited programs that is available on the Commission's website and is updated within one (1) business day of providing the final notice to the program's sponsoring institution.

Revised: 1/25; 4/22; 8/17; 2/15; Reaffirmed: 8/22; 8/14; 8/10

12. Notice Of Reasons For Adverse Actions: Accrediting agencies recognized by the Secretary of the USDE, including the Commission, are required to report any adverse accreditation action (defined as an action to deny or withdraw accreditation). Accordingly, when the Commission makes a final decision to deny or withdraw a program's accreditation, a brief statement summarizing the reasons for the Commission's decision and the official comments that the affected program may make with regard to that decision, is made available to the USDE Secretary, the appropriate state licensing or authorizing agency

and the public. 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.

The Commission's Notice of Reasons for Adverse Action Disclosure Statement includes the following information about the program's accreditation history, past problems, current problems, specific reasons why action to deny or withdraw accreditation was taken and what future option are available to the program.

To illustrate the scope of the statement and the level of reasons reported, a sample announcement follows:

Disclosure Statement: Dental Assisting Program
Pick Your State Community College

The Commission on Dental Accreditation, the only nationally-recognized accrediting agency for predoctoral, advanced, and allied dental education programs, reviewed an application for initial accreditation of the new dental assisting program offered by Pick-Your-State Community College. On the basis of information provided in the application, the Commission was unable to grant "initial accreditation" status to the program.

The Commission determined, at its (date) meeting, that the application did not provide sufficient information and assurances that the proposed program meets the intent of the Accreditation Standards for Dental Assisting Education Programs. Specific concerns in compliance with the standards were noted in the following areas:

- Financial Support (adequacy of resources);
- Curriculum (adequacy of knowledge and skills offered, scope and depth of instruction in required areas, and documentation of student competence);
- Admissions (documentation that written criteria, procedures, and policies are used);
- Faculty (adequacy of teaching and supervision of students);
- Facilities (insufficient documentation of adequacy of physical facilities and equipment).

The Commission informed the program and sponsoring institution that these specific concerns would need to be addressed before the institution reapplied for "initial accreditation" status of the dental assisting program.

CEO, Sponsoring Institution (date)

Chair, Commission on Dental Accreditation (date)

Revised: 8/17; 5/12; Reaffirmed: 8/22; 8/14; 8/10

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 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: 07/94:6

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 to determine linkage to Accreditation Standards or CODA policy(ies) and procedures. 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 probable-cause of potential noncompliance with the standards or required accreditation policy(ies) or 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 probable-cause of potential 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 to monitor the program's status through the Commission's website.

Revised: 8/25; 2/23; 2/18; 8/17; 1/14, 11/11; Reaffirmed: 8/21; 8/15; 8/10

2. Formal Complaints: Formal complaints (as defined above) are investigated as follows:

1. The complainant is informed in writing of the anticipated review schedule.
2. The Commission informs the chief administrative officer (CAO) of the institution sponsoring the accredited program that the Commission has received information indicating that the program's compliance with specific required accreditation policy(ies), procedure(s) or designated standard(s) has been questioned.
3. Program officials are asked to report on the program's compliance with the required policy(ies), procedure(s) or standard(s) in question by a specific date, usually within thirty (30) days.
 - a. For standard(s)-related complaints, the Commission uses the questions contained in the

- 1 appropriate sections of the self-study to provide guidance on the compliance issues to be
2 addressed in the report and on any documentation required to demonstrate compliance.
3 Additional guidance on how to best demonstrate compliance may also be provided to the
4 program.
- 5 b. For policy(ies) or procedure(s)-related complaints, the Commission provides the program with
6 the appropriate policy or procedural statement from the Commission's Evaluation and
7 Operational Policies and Procedures Manual. Additional guidance on how to best demonstrate
8 compliance will be provided to the program. The Chair of the appropriate Review Committee
9 and/or legal counsel may assist in developing this guidance.
- 10 4. Receipt of the program's written compliance report, including documentation, is acknowledged.
- 11 5. The appropriate Review Committee and the Commission will investigate the issue(s) raised in the
12 complaint and review the program's written compliance report at the next regularly scheduled
13 meeting. In the event that waiting until the next meeting would preclude a timely review, the
14 appropriate Review Committee(s) will review the compliance report in a virtual meeting. ~~telephone~~
15 ~~conference-call(s)~~. The action recommended by the Review Committee(s) will be forwarded to the
16 Commission for mail ballot approval in this later case.
- 17 6. The Commission may act on the compliance question(s) raised by the complaint by:
- 18 a. determining that the program continues to comply with the policy(ies), procedure(s) or
19 standard(s) in question and that no further action is required.
- 20 b. determining that the program may not continue to comply with the policy(ies), procedure(s) or
21 standard(s) in question and going on to determine whether the corrective action the program
22 would take to come into full compliance could be documented and reported to the Commission in
23 writing or would require an on-site review.
- 24 i. If by written report: The Commission will describe the scope and nature of the problem and
25 set a compliance deadline and submission date for the report and documentation of
26 corrective action taken by the program.
- 27 ii. If by on-site review: The Commission will describe the scope and nature of the problem and
28 determine, based on the number and seriousness of the identified problem(s), whether the
29 matter can be reviewed at the next regularly scheduled on-site review or whether a special
30 on-site review will be conducted. If a special on-site review is required, the visit will be
31 scheduled and conducted in accord with the Commission's usual procedures for such site
32 visits.
- 33 c. determining that a program does not comply with the policy(ies), procedure(s) or standards(s) in
34 question and:
- 35 i. changing a fully-operational program's accreditation status to "approval with reporting
36 requirements"
- 37 ii. going on to determine whether the corrective action the program would take to come into full
38 compliance could be documented and reported to the Commission in writing or would require
39 an on-site review.
- 40 • If by written report: The Commission will describe the scope and nature of the problem
41 and set a compliance deadline and submission date for the report and documentation of
42 corrective action taken by the program.
- 43 • If by on-site review: The Commission will describe the scope and nature of the problem
44 and determine, based on the number and seriousness of the identified problem(s), whether
45 the matter can be reviewed at the next regularly scheduled on-site review or whether a
46 special on-site review will be conducted. If a special on-site review is required, the visit

will be scheduled and conducted in accord with the Commission's usual procedures for such site visits.

7. Within two weeks of its action on the results of its investigation, the Commission will also:
 - a. notify the program of the results of the investigation.
 - b. notify the complainant of the results of the investigation.
 - c. record the action.
8. The compliance of programs applying for initial accreditation is assessed through a combination of written reports and on-site reviews.
 - a. When the Commission receives a complaint regarding a program which has an application for initial accreditation pending, the Commission will satisfy itself about all issues of compliance addressed in the complaint as part of its process of reviewing the applicant program for initial accreditation.
 - b. Complainants will be informed that the Commission does provide developing programs with a reasonable amount of time to come into full compliance with standards that are based on a certain amount of operational experience.

Revised: 8/25; 8/17; 1/98; Reaffirmed: 8/21; 8/15; 8/10, 7/09, 7/04; Adopted: 7/96

Anonymous Comments/Complaints

An "anonymous comment/complaint" is defined as an unsigned comment/complaint submitted to the Commission. Any submitted information that identifies the complainant renders this submission a formal complaint and will be reviewed as such (e.g. inclusion of a complainant's name within an email or submitted documentation).

All anonymous complaints will be reviewed by Commission staff to determine linkage to Accreditation Standards or CODA policy and procedures. If linkage to Accreditation Standards or CODA policy is identified, 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 evidence of ~~probable cause~~ of potential noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s) to proceed with an investigation. The initial screening is usually completed within thirty (30) days. If further investigation is warranted, the anonymous complaint will be handled as a formal complaint (See Formal Complaints); however, due to the anonymous nature of the submission, the Commission will not correspond with the complainant.

Anonymous comments/complaints determined to be unrelated to an Accreditation Standard or CODA policies and procedures will not be considered. Anonymous comments/complaints that do not provide sufficient evidence of probable cause of noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s) to proceed, will not be considered.

Revised: 8/25; 8/22; 2/22; 2/21; Reaffirmed: 8/21; Adopted: 8/17

P. POLICY ON ADVERTISING

Any advertising pertaining to an educational program that is accredited by the Commission on Dental Accreditation must be clear and comprehensive, indicating the accrediting body by name and accurately specifying the scope of accreditation. Any reference to a specific aspect of the program and its length should indicate that accreditation standards for the respective discipline are met.

The Commission has authorized use of the following statement by institutions or programs that wish to announce their programmatic accreditation by the Commission. Programs that wish to advertise the specific programmatic accreditation status granted by the Commission may include that information as indicated in italics below (see text inside square brackets); that portion of the statement is optional but, if used, must be complete and current. The logo of the Commission on Dental Accreditation cannot be used alone without the following advertising statement. When used in electronic publications, the logo must link to the Commission website included in the statement.

The program(s) in (--discipline(s)--) is/are accredited by the Commission on Dental Accreditation *[and has/ have been granted the accreditation status(es) of (--X--)]*. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at ~~(312) 440-4653~~ (800) 232-6108 or at ~~211 East Chicago 401 North Michigan~~ Avenue, Suite 3300, Chicago, IL ~~60611-2678~~ 60611-4250. The Commission's web address is: <http://www.ada.org/en/coda> <http://coda.ada.org>.

In addition to the statement noted above, programs in advanced dental education must include the following statement in advertising materials:

The Commission on Dental Accreditation has accredited the program in (--education discipline--). However, accreditation of the program does not in itself constitute recognition of any dental specialty status.

Revised: 8/25; 8/18; 8/16; 8/14; 7/09; Reaffirmed: 8/20; 8/15; 8/10, 7/04, 7/00, 1/95; Adopted: 12/83

B. PROGRAM REQUIREMENTS AND PROCEDURES

NOTICE OF OPPORTUNITY TO FILE COMPLAINTS: In accord with the U.S. Department of Education's Criteria and Procedures for Recognition of Accrediting Agencies, the Commission requires accredited programs to notify students of an opportunity to file complaints with the Commission.

Each program accredited by the Commission on Dental Accreditation must develop and implement a procedure to inform students of the mailing address and telephone number of the Commission on Dental Accreditation. The notice, to be distributed at regular intervals, but at least annually, must include but is not necessarily limited to the following language:

The Commission on Dental Accreditation will review complaints that relate to a program's compliance with the accreditation standards. The Commission is interested in the sustained quality and continued improvement 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.

A copy of the appropriate accreditation standards and/or the Commission's policy and procedure for submission of complaints may be obtained by contacting the Commission at ~~211 East Chicago 401 North Michigan~~ Avenue, Suite 3300, Chicago, IL ~~60611-2678~~ 60611-4250 or by calling ~~1-312-440-4653~~ (800) 232-6108.

The accredited program must retain in its files information to document compliance with this policy so that it is available for review during the Commission's on-site reviews of the program.

REQUIRED RECORD OF COMPLAINTS: The program must maintain a record of student complaints received since the Commission's last comprehensive review of the program.

At the time of a program's regularly scheduled on-site evaluation, visiting committees evaluate the program's compliance with the Commission's policy on the Required Record of Complaints. The team reviews the areas identified in the program's record of complaints during the site visit and includes findings in the draft site visit report and note at the final conference.

Revised: 8/25: 2/13, 8/02, 1/9; Reaffirmed: 8/21; 8/15; 8/10, 7/09, 7/08, 7/07, 7/04, 7/01, 7/96;
CODA:01/94:64

D. CONFLICT OF INTEREST POLICY

Evaluation policies and procedures used in the accreditation process provide a system of checks and balances regarding the fairness and impartiality in all aspects of the accreditation process. Central to the fairness of the procedural aspects of the Commission's operations and the impartiality of its decision making process is an organizational and personal duty to avoid real or perceived conflicts of interest. The potential for a conflict of interest arises when one's duty to make decisions in the public's interest is compromised by competing interests of a personal or private nature, including but not limited to pecuniary interests.

Conflict of interest is considered to be: 1) any relationship with an institution or program, or 2) a partiality or bias, either of which might interfere with objectivity in the accreditation review process. Procedures for selection of representatives of the Commission who participate in the evaluation process reinforce impartiality. These representatives include: Commissioners, Review Committee members, site visitors, and Commission staff.

In addition, procedures for institutional due process, as well as strict guidelines for all written documents and accreditation decisions, further reinforce adherence to fair accreditation practices. Every effort is made to avoid conflict of interest, either from the point of view of an institution/program being reviewed or from the point of view of any person representing the Commission.

On occasion, current and former volunteers involved in the Commission's accreditation process (site visitors, review committee members, commissioners) are requested to make presentations related to the Commission and its accreditation process at various meetings. In these cases, the volunteer must make it clear that the services are neither supported nor endorsed by the Commission on Dental Accreditation. Further, it must be made clear that the information provided is based only on experiences of the individual and not being provided on behalf of the Commission.

Revised: 8/15; 8/14; Reaffirmed: 8/23; 8/18; 2/18; 8/12, 8/10

1. Visiting Committee Members: Conflicts of interest may be identified by either an institution/program, Commissioner, site visitor or Commission staff. An institution/program has the right to reject the assignment of any Commissioner, site visitor or Commission staff because of a possible or

perceived conflict of interest. The Commission expects all programs, Commissioners and/or site visitors to notify the Commission office immediately if, for any reason, there may be a conflict of interest or the appearance of such a conflict.

All 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. Following service on the site visit team, an active site visitor is prohibited from independently consulting with the program that they evaluated within the past ten (10) years. All conflict of interest policies as noted elsewhere in this document apply. Contact the CODA office for the appropriate conflict of interest declaration form.

Conflicts of interest include, but are not limited to, a site visitor who:

- is a graduate of the institution;
- has served on the program's visiting committee within the last seven (7) years;
- has served as an independent consultant, ~~employee~~ or appointee of the institution within the past ten (10) years;
- has a family member who is employed or affiliated with the institution;
- has a close professional or personal relationship with the institution/program or key personnel in the institution/program which would, from the standpoint of a reasonable person, create the appearance of a conflict;
- manifests a partiality that prevents objective consideration of a program for accreditation;
- is a former employee of the institution or program;
- previously applied for a position at the institution within the last five (5) years;
- is affiliated with an institution/program in the same state as the program's primary location;
- is a resident of the state; and/or
- is in the process of considering, interviewing and/or hiring key personnel at the institution.

Note: Because of the nature of their positions, a state board representative will be a resident of the state in which a program is located and may be a graduate of the institution/program being visited. These components of the policy do not apply for state board representatives, although the program retains the right to reject an individual's assignment for other reasons.

If an institutional administrator, faculty member or site visitor has doubt as to whether or not a conflict of interest could exist, Commission staff should be consulted prior to the site visit. The Chair, Vice-Chair and a public member of the Commission, in consultation with Commission staff and legal counsel, may make a final determination about such conflicts.

Revised: 8/25; 8/24; 2/24; 2/21; 8/18; 2/18; 2/16; 8/14; 1/14; 2/13; 8/10; Reaffirmed: 8/23; 8/12

2. Commissioners, Review Committee Members And Members Of The Appeal Board: The Commission firmly believes that conflict of interest or the appearance of a conflict of interest must be avoided in all situations in which accreditation recommendations or decisions are being made by Commissioners, Review Committee members, or members of the Appeal Board. No Commissioner, Review Committee member, or member of the Appeal Board should participate in any way in accrediting

1 decisions in which he or she has a financial or personal interest or, because of an institutional or program
2 association, has divided loyalties and/or has a conflict of interest on the outcome of the decision.
3

4 During the term of service as a Review Committee member, these individuals should not serve as site visitors
5 for an actual accreditation site visit to an accredited or developing program, unless deemed necessary. Two
6 instances when a review committee member could serve on a site visit include: 1) an inability to find a site
7 visitor from the comprehensive site visitor list, or 2) when the review committee believes a member should
8 attend a visit for consistency in the review process. This applies only to site visits that would be considered
9 by the same review committee on which the site visitor is serving. Review committee members may not
10 independently consult with a CODA-accredited program or a program applying for CODA accreditation. In
11 addition, review committee members may not serve as a site visitor for mock accreditation purposes. These
12 policies help avoid conflict of interest in the decision making process and minimize the need for recusals.
13

14 During the term of service as a commissioner or appeal board member, these individuals may not
15 independently consult with a CODA-accredited program or a program applying for CODA accreditation. In
16 addition, Commissioners or appeal board may not serve on a site visit team during their terms.
17

18 Areas of conflict of interest for Commissioners, Review Committee members and/or members of the Appeal
19 Board include, but are not limited to:
20

- 21 • close professional or personal relationships or affiliation with the institution/program or key personnel in
22 the institution/program which may create the appearance of a conflict;
- 23 • serving as an independent consultant or mock site visitor to the institution/program;
- 24 • being a graduate of the institution/program;
- 25 • being a current employee or appointee of the institution/program;
- 26 • previously applied for a position at the institution within the last five (5) years;
- 27 • being a current student at the institution/program;
- 28 • having a family member who is employed by or affiliated with the institution;
- 29 • manifesting a professional or personal interest at odds with the institution or program;
- 30 • key personnel of the institution/program having graduated from the program of the Commissioner,
31 Review Committee member, or member of the Appeal Board;
- 32 • having served on the program's visiting committee within the last seven (7) years; and/or
- 33 • no longer a current employee of the institution or program but having been employed there within the past
34 ten (10) years.
35

36 To safeguard the objectivity of the Review Committees, conflict of interest determinations shall be made by
37 the Chair of the Review Committee. If the Chair, in consultation with a public member, staff and legal
38 counsel, determines that a Review Committee member has a conflict of interest in connection with a
39 particular program, the Review Committee member will be instructed to not access the report either in
40 advance of or at the time of the meeting. Further, the individual must leave the room when they have any of
41 the above conflicts. In cases in which the existence of a conflict of interest is less obvious, it is the
42 responsibility of any committee member who feels that a potential conflict of interest exists to absent
43 himself/herself from the room during the discussion of the particular accreditation report.
44

To safeguard the objectivity of the Commission, conflict of interest determinations shall be made by the Chair of the Commission. If the Chair, in consultation with a public member, staff and legal counsel, determines that a Commissioner has a conflict of interest in connection with a particular program, the Commissioner will be instructed to not access the report either in advance of or at the time of the meeting. Further, the individual must leave the room when they have any of the above conflicts. In cases in which the existence of a conflict of interest is less obvious, it is the responsibility of any Commissioner who feels that a potential conflict of interest exists to absent himself/herself from the room during the discussion of the particular accreditation report.

To safeguard the objectivity of the Appeal Board, any member who has a conflict of interest in connection with a program filing an appeal must inform the Director of the Commission. The Appeal Board member will be instructed to not access the report for that program either in advance of or at the time of the meeting, and the individual must leave the room when the program is being discussed. If necessary, the respective representative organization will be contacted to identify a temporary replacement Appeal Board member.

Conflicts of interest for Commissioners, Review Committee members and members of the Appeal Board may also include being from the same state, but not the same program. The Commission is aware that being from the same state may not itself be a conflict; however, when residence within the same state is in addition to any of the items listed above, a conflict would exist.

This provision refers to the concept of conflict of interest in the context of accreditation decisions. The prohibitions and limitations are not intended to exclude participation and decision-making in other areas, such as policy development and standard setting.

Commissioners are expected to evaluate each accreditation action, policy decision or standard adoption for the overall good of the public. The American Dental Association (ADA) Constitution and Bylaws limits the involvement of the members of the ADA, the American Dental Education Association and the American Association of Dental Boards in areas beyond the organization that appointed them. Although Commissioners are appointed by designated communities of interest, their duty of loyalty is first and foremost to the Commission. A conflict of interest exists when a Commissioner holds appointment as an officer in another organization within the Commission's communities of interest. Therefore, a conflict of interest exists when a Commissioner or a Commissioner-designee provides simultaneous service to the Commission and an organization within the communities of interest. (Refer to Policy on Simultaneous Service)

Revised: 2/21; 8/16; 2/16; 2/15; 8/14; 1/14, 8/10; Reaffirmed: 8/23; 8/18; 8/12

3. Commission Staff Members: Although Commission on Dental Accreditation staff does not participate directly in decisions by volunteers regarding accreditation, they are in a position to influence the outcomes of the process. On the other hand, staff provides equity and consistency among site visits and guidance interpreting the Commission's policies and procedures.

For these reasons, Commission staff adheres to the guidelines for site visitors, within the time limitations listed and with the exception of the state residency, including:

- graduation from a dental program at the institution within the last five (5) years;
- service as a site visitor, employee or appointee of the institution within the last five (5) years; and/or

- close personal or familial relationships with key personnel in the institution/program which would from the standpoint of a reasonable person, create the appearance of a conflict.

Revised: 2/24; 8/14; 8/10, 7/09, 7/07, 7/00, 7/96, 1/95, 12/92; Reaffirmed: 8/23; 8/18; 8/12, 1/03; Adopted: 1982

2. Rules Of The Commission On Dental Accreditation:

Article I. MISSION

The Commission on Dental Accreditation serves the public and dental professions by developing and implementing accreditation standards that promote and monitor the continuous quality and improvement of dental education programs.

Adopted August 5, 2016; Revised August 6, 2021

Article II. BOARD OF COMMISSIONERS

Section 1. LEGISLATIVE AND MANAGEMENT BODY: The legislative and management body of the Commission shall be the Board of Commissioners.

Section 2. COMPOSITION: The Board of Commissioners shall consist of:

Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.

Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of any dental education program.

Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.

The remaining Commissioners shall be selected as follows: one (1) certified dental assistant selected by the American Dental Assistants Association from its active or life membership, one (1) licensed dental hygienist selected by the American Dental Hygienists' Association, one (1) certified dental laboratory technician selected by the National Association of Dental Laboratories, one (1) student selected jointly by the American Student Dental Association and the Council of Students, Residents and Fellows of the American Dental Education Association, one (1) dentist who is board certified in the respective discipline-specific area of practice and is selected by each of the following organizations: American Academy of Oral and Maxillofacial Pathology, American Academy of Oral and Maxillofacial Radiology, American Academy of Oral Medicine, American Academy of Orofacial Pain, American Academy of Pediatric Dentistry, American Academy of Periodontology, American Association of Endodontists, American Association of Oral and Maxillofacial Surgeons, American Association of Orthodontists,

American Association of Public Health Dentistry, American College of Prosthodontists, American Society of Dentist Anesthesiologists; one (1) dentist who is jointly appointed by the American Dental Education Association and the Special Care Dentistry Association, and four (4) members of the public who are neither dentists nor allied dental personnel nor teaching in a dental or allied dental education institution and who are selected by the Commission, based on established and publicized criteria. In the event a Commission member sponsoring organization fails to select a Commissioner, it shall be the responsibility of the Commission to select an appropriate representative to serve as a Commissioner. The Director of the Commission shall be an ex-officio member of the Board without the right to vote.

Section 3. TERM OF OFFICE: The term of office of the members of the Board of Commissioners shall be one four (4) year term except that the member jointly selected by the American Dental Education Association and the American Student Dental Association shall serve only one two (2) year term.

Terms of members of the Board of Commissioners shall begin and end with adjournment of the closing session of the annual meeting of the House of Delegates of the American Dental Association in the appropriate year.

Section 4. POWERS:

- A. The Board of Commissioners shall be vested with full power to conduct all business of the Commission subject to the laws of the State of Illinois, the *Constitution and Bylaws* of the American Dental Association, the *Governance and Organizational Manual* of the American Dental Association, *Standing Rules for Councils and Commissions* of the American Dental Association, and these *Rules*.
- B. The Board of Commissioners shall have the power to establish rules and regulations to govern its organization and procedure provided that such rules and regulations are consistent with the *Constitution and Bylaws* of the American Dental Association, the *Governance and Organizational Manual* of the American Dental Association, and the *Standing Rules for Councils and Commissions* of the American Dental Association.
- C. The Board of Commissioners shall be vested with full power to conduct meetings in accordance with these *Rules* and the *Evaluation and Operational Policies and Procedures* manual of the Commission on Dental Accreditation.
- D. The Board of Commissioners shall appoint special committees of the Commission for the purpose of performing duties not otherwise assigned by these *Rules*.
- E. The Board of Commissioners shall appoint consultants/site visitors to assist in developing accreditation standards and conducting accreditation evaluations, including on-site reviews of predoctoral, advanced dental and allied dental educational programs and to assist with other duties of the Commission from time to time as needed. The Board of Commissioners shall have the authority to remove a consultant/site visitor for cause in accordance with procedures established by the Commission.
- F. The Board of Commissioners shall have the sole authority to remove a Commission member,

Review Committee member, or Appeal Board member for cause in accordance with procedures established by the Commission, which procedures shall provide for notice of the charges, including allegations of the conduct purported to constitute each violation, and a decision in writing which shall specify the findings of fact which substantiate any and all of the charges. Prior to issuance of the decision of the Commission, no Commission, Review Committee, or Appeal Board member shall be excused from attending any meeting of a Commission, Review Committee, or Appeal Board unless there is an opportunity to be heard or compelling reasons exist which are specified in writing by the Commission. The Commission shall inform the American Dental Association Board of Trustees and any relevant appointing organization when it has removed a member for cause.

Section 5. DUTIES:

- A. The Board of Commissioners shall prepare a budget annually for carrying on the activities of the Commission for the ensuing fiscal year and shall submit said budget to the Board of Trustees of the American Dental Association in accordance with the *Governance and Organizational Manual* of the American Dental Association.
- B. The Board of Commissioners shall submit an annual report of the Commission's activities to its communities of interest including the House of Delegates of the American Dental Association and interim reports, on request, to the Board of Trustees of the American Dental Association.

Section 6. MEETINGS:

- A. REGULAR MEETINGS: There shall be two (2) regular meetings of the Board of Commissioners each year, which shall be conducted in the format of the Commission's choosing (e.g., in-person, virtual, hybrid).
- B. SPECIAL MEETINGS: Special meetings of the Board of Commissioners may be called at any time by the Chair of the Commission. The Chair shall call such meetings on request of a majority of the voting members of the Board provided at least ten (10) days' notice is given to each member of the Board in advance of the meeting. Confirmation of meeting attendance by a majority of voting members of the Board shall serve as an indication of the Board's request to conduct the special meeting. No business shall be considered except that provided in the call to the meeting unless consideration of said business is approved by unanimous consent of the members of the Board present and voting.
- C. LIMITATION OF ATTENDANCE DURING MEETINGS: In keeping with the confidential nature of the deliberations regarding the accreditation status of individual educational programs, a portion of the meetings of the Commission, and its committees shall be designated as confidential, with attendance limited to members, the American Dental Association Trustee Liaison, selected staff of the Commission and affiliated or other accreditors as the Commission deems appropriate.

Section 7. QUORUM: A majority of the voting members of the Board of Commissioners shall constitute

1 a quorum.

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3 Section 8. VACANCIES: In the event of a vacancy in the office of a Commissioner, the following
4 procedures shall be employed:
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- 6 A. In the event that the Commissioner was selected by an association, the Director of the
7 Commission shall notify the appointing organization and such association shall select a
8 successor who possesses the qualifications established by the *Governance and*
9 *Organizational Manual* of the American Dental Association and these *Rules* to complete the
10 unexpired term. In the event the appointing organization fails to select a Commissioner by the
11 prescribed deadline, it shall be the responsibility of the Commission to select an appropriate
12 representative to serve as a Commissioner.
13
- 14 B. In the event that the Commissioner was the public representative, the Board of
15 Commissioners shall elect a successor who possesses the qualifications established by these
16 *Rules* and Commission policy to complete the unexpired term.
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- 18 C. If the term of the vacated office of a member of the Commission has fifty percent (50%) or
19 less of a full four-year term remaining at the time the successor member is appointed to fill
20 the vacancy, the successor member shall be eligible for appointment to a new four-year term.
21 If more than fifty percent (50%) of the vacated term remains to be served at the time of the
22 appointment of a successor member to fill the vacancy, the successor member shall not be
23 eligible for another term.
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25 Article III. APPEAL BOARD 26

27 Section 1. APPEAL BOARD: The appellate body of the Commission shall be the Appeal Board which
28 shall have the authority to hear and decide appeals filed by predoctoral and advanced dental educational
29 and allied dental educational programs from decisions rendered by the Board of Commissioners denying
30 or revoking accreditation. Such appeals shall be heard pursuant to procedures established by these *Rules*
31 and the Commission's *Evaluation and Operational Policies and Procedures* manual.
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33 Section 2. COMPOSITION: The Appeal Board shall consist of four (4) permanent members. The four
34 (4) permanent members of the Appeal Board shall be selected as follows: one (1) selected by the Board
35 of Trustees of the American Dental Association from the active, life or retired membership of the
36 American Dental Association giving special consideration whenever possible to former members of the
37 Council on Dental Education and Licensure, one (1) member selected by the American Association of
38 Dental Boards from the active membership of that body, one (1) member selected by the American Dental
39 Education Association from the active membership of that body and one (1) consumer member who is
40 neither a dentist nor an allied dental personnel nor teaching in a dental or allied dental educational
41 program and who is selected by the Commission, based on established and publicized criteria. In
42 addition, a representative from either an allied or advanced dental education discipline would be included
43 on the Appeal Board depending upon the type and character of the appeal. Such special members shall be
44 selected by the appropriate allied or advanced dental education organization. Since there is no national
45 organization for general practice residencies and advanced education programs in general dentistry,

representatives of these areas shall be selected by the American Dental Education Association and the Special Care Dentistry Association. One (1) member of the Appeal Board shall be appointed annually by the Chair of the Commission to serve as the Chair and shall preside at all meetings of the Appeal Board. If the Chair is unable to attend any given meeting of the Appeal Board, the other members of the Appeal Board present and voting shall elect by majority vote an acting Chair for that meeting only. The Director of the Commission shall provide assistance to the Appeal Board.

Section 3. TERM OF OFFICE: The term of office of members on the Appeal Board shall be one four (4) year term.

Section 4. MEETINGS: The Appeal Board shall meet at the call of the Director of the Commission, provided at least ten (10) days' notice is given to each member of the Appeal Board in advance of the meeting. Such meetings shall be called by the Director only when an appeal to the appellate body has been duly filed by a predoctoral or advanced dental educational or allied dental educational program, The Appeal Board meeting shall be conducted in the format of the Director's choosing (e.g., in-person, virtual, hybrid).

Section 5. QUORUM: A majority of the voting members of the Appeal Board shall constitute a quorum.

Section 6. VACANCIES:

- A. In the event of a vacancy in the membership of the Appeal Board of the Commission, the Chair of the Commission shall appoint a member of the same organization, or in the case of a consumer of the general public, possessing the same qualifications as established by these *Rules*, to fill such vacancy until a successor is selected by the respective representative organization.
- B. If the term of the vacated position has fifty percent (50%) or less of a full four-year term remaining at the time the successor member is appointed, the successor member shall be eligible for a new, consecutive four-year term. If more than fifty percent (50%) of the vacated term remains to be served at the time of the appointment, the successor member shall not be eligible for another term.

Article IV. ACCREDITATION PROGRAM

Section 1. ACCREDITATION STANDARDS: The Commission, acting through the Board of Commissioners, shall establish and publish specific accreditation standards for the accreditation of predoctoral, advanced dental and allied dental educational programs.

Section 2. EVALUATION: Predoctoral, advanced, and allied dental education programs shall be evaluated for accreditation status by the Board of Commissioners on the basis of the information and data provided on survey forms and secured by the members of, and consultants to, the Board of Commissioners during site evaluations.

If the Board of Commissioners decides to deny, for the first time, accreditation to a new educational program or to withdraw accreditation from an existing program, the Board of Commissioners shall first notify the educational program of its intent to deny or withdraw accreditation. Notification and subsequent due process policies and procedures shall be dictated by the Commission through its

1 Evaluation and Operational Policies and Procedures manual.

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3 Section 3. HEARING: Upon completion of an evaluation for accreditation status, the Board of
4 Commissioners shall notify the predoctoral, advanced or allied dental education program (hereinafter
5 called "education program") of its findings and decision regarding the program's accreditation status.
6 Two types of hearings (challenge and supplement) can be held to review the appropriateness of the
7 decision made by the Commission. Due process policies and procedures shall be dictated by the
8 Commission through its Evaluation and Operational Policies and Procedures manual.

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10 A. CHALLENGE: This type of hearing is available to a program/institution that wishes to
11 challenge the decision of the Commission to change its accreditation status or to a new
12 program that wishes to challenge the decision of the Commission to deny, for the first time,
13 initial accreditation.
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15 B. SUPPLEMENT: An institution/program may request a hearing in order to supplement
16 written information, which has already been submitted to the Commission. A representative
17 of the institution would be permitted to appear in person before the Commission to present
18 this additional information.
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20 Section 4. APPEAL: In the event the final decision of the Board of Commissioners is a denial or
21 withdrawal of accreditation, the educational program shall be informed of this decision within fourteen
22 (14) days following the Commission meeting. Within fourteen (14) days after receipt of the final decision
23 of the Board of Commissioners, the educational program may appeal the decision of the Board of
24 Commissioners by filing a written appeal with the Director of the Commission. Due process policies and
25 procedures shall be dictated by the Commission through its Evaluation and Operational Policies and
26 Procedures manual.
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28 Section 5. HEARING AND APPEAL COSTS: If a hearing is held before the Board of Commissioners,
29 the costs of the Commission respecting such hearing shall be borne by the Commission. If an appeal is
30 heard by the Appeal Board, the costs of the Commission respecting such appeal shall be shared equally by
31 the Commission and the appellant educational program filing the appeal except in those instances where
32 equal sharing would cause a financial hardship to the appellant. However, each educational program shall
33 bear the cost of its representatives for any such hearing or appeal.
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35 Article V. OFFICERS

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37 Section 1. OFFICERS: The officers of the Commission shall be a Chair, Vice-chair, a Director and such
38 other officers as the Board of Commissioners may authorize. The Chair and Vice-chair shall be elected
39 by the Board of Commissioners.
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41 Section 2. ELIGIBILITY: The Chair and Vice-chair shall be dentists who are members of the Board of
42 Commissioners. The Chair and Vice-chair shall be active, life or retired members of the American Dental
43 Association.
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45 Section 3. ELECTION AND TERM: The Chair and Vice-chair of the Commission shall be elected
46 annually by the Board of Commissioners. The term of the Chair and Vice-chair shall be one (1) year

beginning and ending with adjournment of the closing session of the annual meeting of the House of Delegates of the American Dental Association.

Section 4: DUTIES: The duties of the officers are as follows:

A. CHAIR:

1. Appoint members and chairs of such committees as are necessary for the orderly conduct of business except as otherwise provided in these *Rules*.
2. Circulate or cause to be circulated an announcement and an agenda for each regular or special meeting of the Board of Commissioners.
3. Preside during meetings of the Board of Commissioners.
4. Prepare or supervise the preparation of an annual report of the Commission.
5. Prepare or supervise the preparation of an annual budget of the Commission.
6. Represent the Commission during sessions of the House of Delegates of the American Dental Association.

B. VICE-CHAIR: The Vice-chair of the Commission shall assist the Chair in the performance of his or her duties. If the Chair is unable to attend any given meeting of the Board of Commissioners, the Vice-chair shall preside at the meeting. If the Vice-chair also is unable to attend the meeting, the other members of the Board of Commissioners present and voting shall elect by majority vote an acting chair for the purpose of presiding at that meeting only.

C. VACANCIES: In the event the vacancy involves the Chair, the Vice-chair shall immediately assume all duties of the Chair. In the event the vacancy involves the Vice-chair, a meeting of the Commission shall be convened to select a new Vice-chair.

Section 5. DIRECTOR:

A. Appointment: The Director of the Commission shall be an employee of the American Dental Association selected by the Executive Director of that Association.

B. Duties: The Director of the Commission shall:

1. Prepare an agenda and keep minutes of meetings of the Board of Commissioners.
2. See that all notices are duly given in accordance with the provisions of these *Rules* or as required by law.
3. Be the custodian of records of the Commission.
4. Manage the office and staff of the Commission.
5. In general shall perform all duties incident to the office of Director.

Article VI. REMOVAL FOR CAUSE

Pursuant to the *Rules* of the Commission on Dental Accreditation, the following are causes for removal of a member from the Board of Commissioners, Committees, or Appeal Board:

- continued, gross or willful neglect of the duties of the office;
- failure to comply with the Commission's policies on conflict of interest;

- failure or refusal to disclose necessary information on matters of Commission business;
- failure to keep confidential any exclusive information protected by secrecy that becomes known to the member by reason of the performance of his or her duties on the Commission's behalf;
- failure to comply with the Association's professional conduct policy and prohibition against harassment;
- unauthorized expenditures or misuse of Commission funds;
- unwarranted attacks on the Commission, any of its committees or any person serving the Commission in an elected, appointed or employed capacity;
- unwarranted refusal to cooperate with any Commission officer, Commission, Review Committee or Appeal Board member or staff;
- misrepresentation of the Commission and any person serving the Commission in an elected, appointed or employed capacity to outside persons;
- being found to have engaged in conduct subject to discipline pursuant to Chapter XI of the *Governance and Organizational Manual* of the American Dental Association; and
- conviction of a felony.

Article VII. MISCELLANEOUS

Section 1. Meeting Minutes: Minutes of the Commission on Dental Accreditation meetings shall be posted and available for public viewing.

Section 2. Contracts: The Commission may enter into contracts for services related to accreditation activities pursuant to the policies and procedures of the Commission.

Section 3. Parliamentary Procedure: The rules contained in the current edition of "The American Institute of Parliamentarians Standard Code of Parliamentary Procedure (AIPSC)" shall govern the deliberations of the Board of Commissioners and Appeal Board in all instances where they are applicable and not in conflict with the *Constitution and Bylaws* of the American Dental Association, the *Governance and Organizational Manual* of the American Dental Association, and these *Rules*.

Article VIII. AMENDMENTS

These *Rules* may be amended at any meeting of the Board of Commissioners by a two-thirds majority vote of the members of the Board present and voting.

Revised: 8/25; 2/21; 1/20; 2/19; 8/18; 8/17; 1/17; 8/15; 8/10, 10/02, 10/97, 10/87, 11/82; Reaffirmed: 8/22; 8/12