

COMMISSION ON DENTAL ACCREDITATION

Evaluation &
Operational Policies
& Procedures

**COMMISSION ON DENTAL ACCREDITATION
EVALUATION AND OPERATIONAL
POLICIES AND PROCEDURES MANUAL**

**Commission on Dental Accreditation
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I. INTRODUCTION AND GENERAL INFORMATION

A. PURPOSE OF THIS MANUAL

This manual provides information about the Commission on Dental Accreditation's accreditation policies and procedures for all institutions sponsoring predoctoral, advanced, and allied dental education programs. It contains background information on the Commission and its accreditation policies, as well as specific information to assist programs in attaining accreditation and in preparing for on-site reviews. The information in this manual applies to all dental education programs (predoctoral, advanced, and allied dental) except where specifically noted. Dates following each policy refer to the date of the Commission action to Adopt, Revise, or Reaffirm the policy. A reference noted as CODA: 7/00;4 indicates that additional information can be found on page four (4) of the Commission's July 2000 minutes.

Revised: 8/17

B. HISTORY AND AUTHORITY OF THIS COMMISSION

The Commission on Dental Accreditation, the successor of the Council on Dental Education which had conducted the accreditation program since 1937, began operating in 1975. Although the Commission has conducted all accreditation activities since it was formed in 1975, the Council on Dental Education (now known as the Council on Dental Education and Licensure) was the first accrediting body for dentistry and the related dental disciplines. All accreditation policy that had been used by the Council was adopted by the Commission in 1975 and became Commission policy even though some pre-1975 policy continues to be referenced in Council action and minutes. The Commission serves as the only nationally-recognized accrediting body for dentistry and the related dental fields. The Commission receives its accreditation authority from the acceptance of the dental community and by being recognized by the United States Department of Education (USDE), a governmental agency.

The Commission has participated in governmental recognition since 1952 when the U. S. Commissioner of Education was first required to publish a list of "nationally recognized accrediting agencies." USDE has established recognition requirements that an accrediting agency must meet in order to be recognized and conducts reviews for continued recognition at five-year intervals.

1. American Dental Association Constitution and Bylaws and Governance and Organizational Manual

Chapter IX Commissions, Section 30 Duties: The ADA Constitution and Bylaws describe the duties of the Commission on Dental Accreditation as follows:

- a. Formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental and allied dental educational programs.
- b. Accredite dental, advanced dental and allied dental educational programs.
- c. Provide a means for appeal from an adverse decision of the accrediting body of the Commission to a separate and distinct body of the Commission whose membership shall be totally different from that of the accrediting body of the Commission.
- d. Submit an annual budget to the Board of Trustees of the Association.

Section 30 Duties: Revised by the ADA House of Delegates, November 2015 and October 2018

Governance and Organizational Manual, Chapter IX Commissions, Section L. Power To Adopt Rules (excerpt): The Commission on Dental Accreditation shall have the authority to make corrections in punctuation, grammar, spelling, name changes, gender references, and similar editorial corrections to the *Rules* of the Commission on Dental Accreditation which do not alter its context or meaning without the need to submit such editorial corrections to the House of Delegates. Such corrections shall be made only by a unanimous vote of the Commission on Dental Accreditation members present and voting.

Section L: Approved by the ADA House of Delegates, October 2014

2. Rules Of The Commission On Dental Accreditation:

Article I. MISSION

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

Adopted August 5, 2016

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

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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.
- 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 a quorum.

Section 8. **VACANCIES:** In the event of a vacancy in the office of a Commissioner, the following procedures shall be employed:

- A. In the event that the Commissioner was selected by an association, the Director of the Commission shall notify the appointing organization and such association shall select a successor who possesses the qualifications established by the *Governance and Organizational Manual* of the American Dental Association and these *Rules* to complete the unexpired term. In the event the appointing organization fails to select a Commissioner by the prescribed deadline, it shall be the responsibility of the Commission to select an appropriate representative to serve as a Commissioner.
- B. In the event that the Commissioner was the public representative, the Board of Commissioners shall elect a successor who possesses the qualifications established by these *Rules* and Commission policy to complete the unexpired term.
- C. If the term of the vacated office of a member of the Commission has fifty percent (50%) or less of a full four-year term remaining at the time the successor member is appointed to fill the vacancy, the successor member shall be eligible for appointment to a new four-year term. If more than fifty percent (50%) of the vacated term remains to be served at the time of the appointment of a successor member to fill the vacancy, the successor member shall not be eligible for another term.

Article III. APPEAL BOARD

Section 1. APPEAL BOARD: The appellate body of the Commission shall be the Appeal Board which shall have the authority to hear and decide appeals filed by predoctoral and advanced dental educational and allied dental educational programs from decisions rendered by the Board of Commissioners denying or revoking accreditation. Such appeals shall be heard pursuant to procedures established by these *Rules* and the Commission's *Evaluation and Operational Policies and Procedures* manual.

Section 2. COMPOSITION: The Appeal Board shall consist of four (4) permanent members. The four (4) permanent members of the Appeal Board shall be selected as follows: one (1) selected by the Board of Trustees of the American Dental Association from the active, life or retired membership of the American Dental Association giving special consideration whenever possible to former members of the Council on Dental Education and Licensure, one (1) member selected by the American Association of Dental Boards from the active membership of that body, one (1) member selected by the American Dental Education Association from the active membership of that body and one (1) consumer member who is neither a dentist nor an allied dental personnel nor teaching in a dental or allied dental educational program and who is selected by the Commission, based on established and publicized criteria. In addition, a representative from either an allied or advanced dental education discipline would be included on the Appeal Board depending upon the type and character of the appeal. Such special members shall be selected by the appropriate allied or advanced dental education organization. Since there is no national 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.

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 Evaluation and Operational Policies and Procedures manual.

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

- A. CHALLENGE: This type of hearing is available to a program/institution that wishes to challenge the decision of the Commission to change its accreditation status or to a new program that wishes to challenge the decision of the Commission to deny, for the first time, initial accreditation.

- B. SUPPLEMENT: An institution/program may request a hearing in order to supplement written information, which has already been submitted to the Commission. A representative of the institution would be permitted to appear in person before the Commission to present this additional information.

Section 4. APPEAL: In the event the final decision of the Board of Commissioners is a denial or withdrawal of accreditation, the educational program shall be informed of this decision within fourteen (14) days following the Commission meeting. Within fourteen (14) days after receipt of the final decision of the Board of Commissioners, the educational program may appeal the decision of the Board of Commissioners by filing a written appeal with the Director of the Commission. Due process policies and procedures shall be dictated by the Commission through its Evaluation and Operational Policies and Procedures manual.

Section 5. HEARING AND APPEAL COSTS: If a hearing is held before the Board of Commissioners, the costs of the Commission respecting such hearing shall be borne by the Commission. If an appeal is heard by the Appeal Board, the costs of the Commission respecting such appeal shall be shared equally by the Commission and the appellant educational program filing the appeal except in those instances where equal sharing would cause a financial hardship to the appellant. However, each educational program shall bear the cost of its representatives for any such hearing or appeal.

Article V. OFFICERS

Section 1. OFFICERS: The officers of the Commission shall be a Chair, Vice-chair, a Director and such other officers as the Board of Commissioners may authorize. The Chair and Vice-chair shall be elected by the Board of Commissioners.

Section 2. ELIGIBILITY: The Chair and Vice-chair shall be dentists who are members of the Board of Commissioners. The Chair and Vice-chair shall be active, life or retired members of the American Dental Association.

Section 3. ELECTION AND TERM: The Chair and Vice-chair of the Commission shall be elected 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: 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: 8/12

3. Governing Law And Venue Policy: Any court action challenging an adverse accreditation decision made by the Commission or otherwise pertaining to these Evaluation and Operational Policies and Procedures (EOPP) shall be governed by and construed in accordance with the laws of Illinois, without regard to where the challenge arises and without regard to conflict of laws principles. Any suit pertaining to EOPP shall be brought in the state or federal courts sitting in Chicago, Illinois, each party subject to the EOPP waiving any claim or defense that such forum is not convenient or proper. Each such party further agrees that any such court shall have *in personam* jurisdiction over it and consents to service of process in any manner authorized by Illinois law.

Revised: 8/10; Reaffirmed: 8/17; 8/12; Adopted: 7/07

C. SCOPE AND DECISIONS

The Commission on Dental Accreditation is concerned with the educational quality of predoctoral, advanced, and allied dental education programs in the United States. The Commission accredits more than 1400 programs in the disciplines within its purview, conducting all aspects of the accreditation process. Through its accreditation activities, the Commission attempts to foster educational excellence, supports programmatic self-improvement and assures the general public of the ongoing availability of quality dental care. These goals are an integral part of a process of evaluation which combines on-site visits with regular review of written and quantitative data. Decisions on accreditation status are the sole responsibility of the Commission. Neither Commission staff, site visitors, independent consultants, individual members of the Commission, nor any other agents of the Commission are empowered to make or modify accreditation decisions.

The Commission formulates and adopts accreditation standards for the accreditation of predoctoral, advanced, and allied dental education programs.

The Commission, in fulfilling its accreditation responsibilities, focuses on the educational results or outcomes of the programs for which it has authority, as well as on the process used to obtain these results. During its review process, the Commission evaluates programs in relation to predetermined standards. These accreditation standards afford educational institutions latitude and flexibility in program development and implementation. In evaluating the educational process, the Commission applies the established accreditation standards for each discipline uniformly to all programs. All accreditation actions are based on and directly linked to the educational standards or required accreditation policies.

The Commission shares routinely with other accrediting agencies and state licensing agencies information about the status of and any adverse actions taken against any accredited program. Likewise, the Commission receives information about the accreditation actions taken by other accrediting agencies. In accord with established procedure, staff reviews that information and makes note of actions taken at those institutions that also sponsor a Commission-accredited program. When a new program seeks initial accreditation, information regarding the sponsoring institution's accreditation status must be provided. If any potential problems are revealed, staff seeks additional clarifying information and presents that information to the Commission, usually at its next regularly scheduled meeting. If the Commission were notified by the Department of Education of a potential problem at an institution sponsoring an education program accredited by the Commission on Dental Accreditation, that issue would be addressed immediately.

Revised: 8/17; Reaffirmed: 8/12, 8/10

D. UNITED STATES DEPARTMENT OF EDUCATION

The United States Department of Education (USDE) periodically publishes a list of Nationally Recognized Accrediting Agencies and Associations, which is used to determine eligibility for U.S. federal funding or government assistance under certain legislation. Agencies and associations included on the USDE list are those determined to be the reliable authorities in evaluating the quality of education offered by educational institutions or programs. In order for institutions to become eligible for federal funds, the accrediting agency for that institution must be recognized by USDE. The authority and recognition responsibility of USDE is governed by the Higher Education Act (HEA) of 1965, as amended. This legislation is periodically reauthorized, usually at five-year intervals. Following each reauthorization, the Department promulgates new Procedures and Criteria for Recognition of Accrediting Agencies. The Secretary of Education requires the Commission on Dental Accreditation to submit to USDE the standards, policies, and procedures used in its evaluation program. Periodic reviews by USDE are conducted to determine the Commission's continued eligibility for recognition. The Commission on Dental Accreditation has been recognized since the first recognition list was published in 1952.

Policy On Communication With The United States Department Of Education (USDE):

As required by the USDE, the Commission will forward to the USDE Secretary annually the following:

- Copies of all Annual Report(s);
- Copies, updated annually, of its directory of accredited programs;
- A summary of the Commission's major accrediting activities during the previous year, if requested by the Secretary of Education; and
- Any proposed changes in the Commission's policies, procedures, or accreditation standards that might alter the Commission's scope of recognition or compliance with the requirements of this part of the USDE recognition criteria.

Revised: 8/17; 8/10; Reaffirmed: 8/12, 7/07, 7/01; CODA: 7/96:23

E. PHILOSOPHY OF ACCREDITATION

The Commission believes that its first responsibility is accountability to the public. The Commission fulfills its responsibility to the public by ensuring that the programs under its purview meet the established educational standards, that Commission policies are applied impartially, and that the Commission follows established procedures to obtain input from a broad constituency and allow for due process. Further, representatives from the public are members of the Commission and its Review Committees, and public comment is regularly solicited on the accreditation standards as well as the educational programs accredited by the Commission.

Reaffirmed: 8/17; 8/12; Adopted: 8/10

1. Accreditation Standards: The Commission on Dental Accreditation evaluates the educational quality of predoctoral, advanced, and allied dental education programs in the United States. All 50 states plus Puerto Rico and the District of Columbia recognize the Commission's authority to accredit predoctoral, advanced, and allied dental education programs in the predoctoral, advanced, and allied dental education disciplines. The Commission also evaluates the educational quality of international dental education programs (see International Predoctoral Policies and Procedures). The Commission on Dental Accreditation has developed accreditation standards for each of the disciplines within its purview. The standards, which are the basis for accreditation actions, are reviewed periodically and revised as necessary (see Policy and Procedures for Development and Revision of Accreditation Standards). Documents for each discipline are available on the Commission's website and from the Commission office upon request. In addition, each predoctoral, advanced, and allied dental education program defines its own goals and objectives for preparing members of the dental team. The extent to which a program meets its own goals and objectives is also considered by the Commission.

Revised: 8/17; Reaffirmed: 8/10

2. Accreditation Cycle: The Commission on Dental Accreditation formally evaluates programs at regular intervals. Comprehensive site visits based on a self-study are routinely conducted every seven years. Programs in the advanced dental education discipline of oral and maxillofacial surgery are site visited at five-year intervals. Programs found to be in full compliance with the accreditation standards are awarded the accreditation classification of Approval Without Reporting Requirements. Programs not in full compliance with the accreditation standards are awarded the accreditation classification of Approval With Reporting Requirements.

Revised: 8/18; 1/98, 1/99; Reaffirmed: 8/17; 8/12, 8/10, 7/05; Adopted: 7/97, 7/96

F. RECIPROCAL AGREEMENT WITH THE COMMISSION ON DENTAL ACCREDITATION OF CANADA

The reciprocal accreditation arrangement between the Commission on Dental Accreditation and the Commission on Dental Accreditation of Canada (CDAC) has been maintained and expanded since its adoption in 1956. Under the reciprocal agreement, each Commission recognizes the accreditation of educational programs in specified categories accredited by the other agency. Under this arrangement, the Commissions agree that the educational programs accredited by the other agency are equivalent to their own and no further education is required for eligibility for licensure. Commissioners and staff of the accrediting agencies will regularly attend the meetings of the other agency and its standing committees. In addition, Commissioners and/or staff will participate annually in at least one site visit conducted by the other agency. The Commissions believe that this cross-participation is important in maintaining an understanding of the accreditation processes in each country and in ensuring that the accreditation processes in each country continue to be equivalent.

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The following educational programs are included in the scope of the reciprocal agreement.

- Predoctoral dental education
- Dental hygiene
- Level II dental assisting
- Advanced dental education programs in dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics.

The following statement is found in the “Find a Program” section of the CODA website:

Canadian Programs

By reciprocal agreement, programs that are accredited by the Commission on Dental Accreditation of Canada are recognized by the Commission on Dental Accreditation. However, individuals attending dental programs in one country and planning to practice in another country should carefully investigate the requirements of the licensing jurisdiction where they wish to practice.

By reciprocal agreement, predoctoral dental education, level II dental assisting, dental hygiene, and advanced dental education programs in dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics that are accredited by the Commission on Dental Accreditation Canada are recognized by the Commission on Dental Accreditation.

Revised: 8/18; 8/17; 2/15; 7/91; Reaffirmed: 8/12, 8/10, 7/07, 1/03, 7/01; CODA: 1/97:03, 1/94:4-5

G. INTEGRITY

Integrity is expected throughout the accreditation process. In its relationships with the Commission, a program shall demonstrate honesty and integrity. By seeking accreditation or re-accreditation, and maintaining accreditation, the program agrees to comply with Commission requirements, policies, guidelines, self-study requirements, decisions, and requests.

- In the accreditation process, the program shall be completely candid, providing all pertinent information;
- All program changes will be reported in a timely manner and in accordance with the Commission’s Policy on Reporting Program Changes; and
- With due regard for the rights of individual privacy, the program shall provide the Commission with access to all parts of its operations, and with complete and accurate information about the program's affairs, including reports of other accrediting, licensing, and auditing agencies, as requested.

The program’s failure to report honestly, by presenting false information, by omission of essential information or by distortion of information with the intent to mislead, constitutes a breach of integrity, in and of itself. If it appears to the Commission that the program has violated the principles of integrity in the materials submitted to the Commission or in any other manner that requires immediate attention, an investigation will be made, and the program will be offered an opportunity to respond to suspected violations. The Commission will ordinarily withdraw accreditation from a program, after due notice, if:

- The Commission concludes that the program has engaged in illegal conduct or is deliberately misrepresenting itself or presenting false information to the faculty, staff, students, the public or the Commission; or
- The program fails to provide fully and truthfully all pertinent information and materials requested by the Commission.

The Commission may immediately withdraw accreditation if it deems that action to be the most appropriate way to address the issue.

Revised: 2/18; 8/17; Reaffirmed: 8/12, 8/10; Adopted: 7/08

H. DEVELOPMENT OF ADMINISTRATIVE AND OPERATIONAL POLICY STATEMENTS

The purpose of the Commission on Dental Accreditation as described in its *Rules* and in the American Dental Association (ADA) *Bylaws* is (1) to formulate and adopt requirements and guidelines for the accreditation of dental, advanced dental and allied dental educational programs and (2) to accredit dental, advanced dental and allied dental educational programs. It is frequently necessary for the Commission to develop policy statements in the process of conducting its business. Such policy may be accreditation related, administrative or operational. The intended audience of a policy statement may be the accredited programs, the broader educational community, the dental community, the general public or some other more specialized audience.

Although policy statements adopted by the Commission may serve a variety of purposes, the procedures which precede adoption are very similar. As the Commission deems appropriate, comment from all potentially affected communities will generally be obtained by circulating the proposed policy to the appropriate discipline-specific Review Committees and, on occasion, to those organizations traditionally viewed as partners in the accreditation process. Some circumstances may dictate even wider circulation to a broader community to provide the Commission with the information it needs in order to take action. Although the issue may have come from a specific discipline, the Commission may determine that the issue may affect a broader community and provide guidance to staff for further development of the issue. While the Commission may elect to circulate policy for comment, it is not required to do so. Operational policy, such as that related to Commission and Review Committee meetings or policies and procedures related to the accreditation of programs, are the purview of the Commission's Standing Committee on Documentation and Policy Review, and may not be sent out for comment.

Revised: 2/19; 8/17; Reaffirmed: 8/12, 8/10

1. Procedure: The following procedure is used when basic policy statements are developed:

1. An issue or concern surfaces during or between meetings and is placed on the agenda for the next meeting of the Commission.
 - a. If an issue surfaces between meetings, it is automatically placed on the next agenda.
 - b. If an issue surfaces during a meeting, the Commission determines whether or not the issue will be considered further at the next meeting.
2. Staff studies the issue, gathers information from appropriate sources and develops a draft policy statement for circulation to the Commission, a Standing Committee and/or all potentially affected Review Committees, as appropriate.
3. The recommendations of a Standing Committee and/or each affected Review Committee, as applicable, on the draft policy statement are forwarded to the Commission. The Commission may take action on the statement in one of the following ways:

- The statement may be ruled unnecessary and rejected;
- The statement may be referred back to staff for further work (additional study or redrafting) which should be clearly specified; or
- The statement may be adopted, with or without amendments.

If adopted, the policy statement is included in the appropriate compilation of Commission policy statements. In general, the following occurs:

- Accreditation-related policies are included in the Commission's *Evaluation and Operational Policies and Procedures Manual*.
- Accredited programs will be informed of the new policy, usually through an announcement posted in the Accreditation Area of the Commission's website.

Revised: 2/19; 8/17; 2/15; Reaffirmed: 8/12, 8/10

2. Staff Protocol For Drafting Policy Reports: The staff member:

1. Receives writing assignment and determines which staff should be involved in the assignment;
2. Conducts preliminary planning meeting;
3. Develops framework (e.g., outline, notes) for report;
4. Prepares an executive summary that clearly delineates the exact charge to the Commission, a Standing Committee and/or Review Committee(s). This approach will be taken on policies considered by more than one Review Committee (1500's), or by a Standing Committee or the Commission (1600's);
5. Circulates the framework to the Director and managers (those determined at time of assignment);
6. Conducts staff meeting to resolve substantive differences, if necessary;
7. Drafts report;
8. Circulates draft report to the Director and managers for review & comment; requests reviewers to highlight strong concerns; and
9. Conducts staff meeting to resolve any substantive differences in comments received (if necessary).

Revised: 2/19; 7/06; 7/97; Reaffirmed: 8/17; 8/12, 8/10, 7/07, 7/01; CODA: 5/88:5

II. REVIEW COMMITTEES AND BOARD OF COMMISSIONERS

A. REVIEW COMMITTEES AND REVIEW COMMITTEE MEETINGS

1. **Structure:** The chair of each Review Committee will be the appointed Commissioner from the relevant discipline.
 - i. The Commission will appoint all Review Committee members.
 - a. Review Committee positions not designated as discipline-specific will be appointed from the Commission where feasible, e.g. a public representative on the Commission could be appointed to serve as the public member on the Dental Laboratory Technology Review Committee; an ADA appointee to the Commission could be appointed to the Dental Assisting Review Committee as the general dentist practitioner.
 - b. Discipline-specific positions on Review Committees will be filled by appointment by the Commission of an individual from a small group of qualified nominees (at least two) submitted by the relevant national organization, discipline-specific sponsoring organization or certifying board. Nominating organizations may elect to rank their

nominees, if they so choose. If fewer than two (2) qualified nominees are submitted, the appointment process will be delayed until such time as the minimum number of required qualified nominations is received.

- ii. Consensus is the method used for decision making; however if consensus cannot be reached and a vote is required, then the Chair may only vote in the case of a tie (American Institute of Parliamentarians Standard Code of Parliamentary Procedures).
- iii. Member terms will be staggered, four year appointments; multiple terms may be served on the same or a different committee, with a one-year waiting period between terms. A maximum of two (2) terms may be served in total. The one-year waiting period between terms does not apply to public members.
- iv. One public member will be appointed to each committee.
- v. The size of each Review Committee will be determined by the committee's workload.
- vi. As a committee's workload increases, additional members will be appointed while maintaining the balance between the number of content experts and non-content experts. Committees may formally request an additional member through New Business at Review Committee/Commission meetings. If an additional member is approved, this member must be a joint nomination from the professional organization and certifying board, as applicable.
- vii. Conflict of interest policies and procedures are applicable to all Review Committee members.
- viii. Review Committee members who have not been on a site visit within the last two (2) years prior to their appointment on a Review Committee should observe at least one site visit within their first year of service on the Review Committee.
- ix. In the event that fewer than 50% of discipline-specific experts are present for any one discipline, the decision by a quorum of the Review Committee shall be acceptable. In the case of less than 50% of discipline-specific experts, including the Chair, available for a review committee meeting, for specified agenda items or for the entire meeting, the Review Committee Chair may temporarily appoint an additional discipline-specific expert(s) with the approval of the CODA Director. The substitute should be a previous Review Committee member or an individual approved by both the Review Committee Chair and the CODA Director. The substitute would have the privileges of speaking, making motions and voting.
- x. Consent agendas may be used by Review Committees, when appropriate, and may be approved by a quorum of the Review Committee present at the meeting.

Revised: 8/20; 1/20; 8/18; 8/17; 2/15; 1/14, 2/13, 8/10, 7/09; 7/08; 7/07; Adopted: 1/06

2. Composition

Predoctoral Education Review Committee (9 members)

1 discipline-specific Commissioner appointed by American Dental Education Association

1 public member

3 dental educators who are involved with a predoctoral dental education program (two must be general dentists)

1 general dentist

1 non-general* dentist

} (One of whom is a practitioner 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.

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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

* Effective January 1, 2022

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.
- ** Effective January 1, 2022. Through December 31, 2021, the committee name remains Advanced Education in General Dentistry, General Practice Residency, Dental Anesthesiology, Oral Medicine and Orofacial Pain Education Review Committee and includes dental anesthesiology, oral medicine, and orofacial pain educators, one (1) in each discipline.

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 (11 members)

- 1 discipline-specific Commissioner appointed by American Dental Hygienists' Association
- 1 public member

- 4 dental hygienist educators
- 2 dental hygienist practitioners
- 1 dentist practitioner
- 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 dental laboratory owner nominated by National Association of Dental Laboratories

Revised: 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 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;
- 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, 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: 8/21; 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: 8/17; 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: 8/10

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: 8/17; 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: 8/17; 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.

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: 8/17; 8/14; 7/06, 7/96; Reaffirmed: 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; Adopted: 8/14

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: 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 an appropriate site visit.

Reaffirmed: 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;
- 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.

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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: 8/14; 8/11, 8/10, 7/09; Reaffirmed: 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: 8/17; 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: 8/17; 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: 8/17; 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: 8/17; 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. This notification will 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.

Reaffirmed: 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: 8/14

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. Individuals are provided paper copies of such listings upon request.

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. 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 decisions to place a program on "intent to withdraw" or 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 twenty-four (24) hours of providing the final notice to the program's sponsoring institution.

Revised: 8/17; 2/15; Reaffirmed: 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 options 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: 8/14; 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 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 mail (including email) and includes the reasons for any adverse action to deny or withdraw accreditation. All current and prospective students/residents/fellows must be informed of the Commission’s notice of any 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 this 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. 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 this 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, to any appropriate institutional accrediting agency, and to the public. All current and prospective students/residents/fellows must be informed 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: 2/21; 8/17; 5/12; 7/06; Reaffirmed: 8/14; 8/10; Adopted: 7/00; CODA: 07/94:6

C. POLICY ON CHANGES TO THE COMPOSITION OF REVIEW COMMITTEES AND THE BOARD OF COMMISSIONERS

The Commission believes it is imperative that content area experts are represented on site visit committees, Review Committees and on the Commission to accomplish its mission. However, the Commission does not establish Review Committees or add Commissioner positions based upon the number of programs accredited or number of students/residents enrolled within a given discipline.

The Board of Commissioners is composed of representatives and subject area experts from the dental education, dental licensure and private practice communities, advanced dental education, allied dental education, and the public at large. The Commission's Review Committees mirror this structure with committees devoted to dental, dental assisting, dental hygiene, dental laboratory technology, dental anesthesiology, dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, oral medicine, orofacial pain, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, and prosthodontics. The Review Committee on Postdoctoral General Dentistry reviews programs in advanced education in general dentistry and general practice residency; content experts from each of these areas are represented on the Committee. The Predoctoral Dental Education Review Committee reviews programs in predoctoral dental education and dental therapy education; content experts from each of these areas are represented on the Committee. The Review Committees function to ensure the quality of predoctoral, advanced, and allied dental education programs accredited by the Commission is maintained; they are advisory to the Commission on matters of accreditation policy and program review.

As predoctoral, advanced, and allied dental education and practice continues to evolve, the Board of Commissioners may consider a change in its composition, consistent with its *Rules*. The Board may also modify the number or composition of its Review Committees. Such changes may be necessary to reflect changes in the makeup of the dental profession workforce and to provide standards and quality accreditation services to the educational programs in these areas.

For example, changes to the Board of Commissioners or Review Committees may be considered by the Board of Commissioners under the following circumstances:

- When a new dental workforce or discipline is recognized by a nationally accepted agency.
- When development of accreditation standards or accreditation services for a new or existing dental workforce or discipline cannot be supported by the existing structure(s).
- When the Board of Commissioners identifies the need to modify its composition or that of a Review Committee(s).

Procedure for Requesting a New Review Committee and/or Commissioner Position:

- A request is submitted to the Commission for either a new Review Committee and/or Commissioner position.
- The Chair of the Commission may refer the request to the appropriate standing committee and/or review committee(s) for evaluation or may present the request to the Commission at its next regularly scheduled meeting.

- If referred to a committee, the committee considers the request and provides a recommendation to the Commission.
- The Commission considers the report and recommendation of standing/review committee(s) or considers the request directly as presented by the chair and makes a final determination.
- If the Commission approves the request and directs a new Review Committee, a period of implementation and training will also be provided. If a modification to the existing composition of the Board of Commissioners is approved, the Commission's *Rules* will be modified.

Revised: 2/21; 8/18; 8/17; 2/16; Adopted 8/14

D. POLICY ON REMOVAL OF COMMISSION, REVIEW COMMITTEE, AND APPEAL BOARD MEMBERS

Pursuant to the *Rules* of the Commission on Dental Accreditation, the Commission may remove from office a member of the Commission, Review Committee, or Appeal Board for cause. The causes for removal from office are documented within the Commission's *Rules*. Before a member is removed for cause, the following procedures shall be followed by the Board of Commissioners:

The Chair of the Board of Commissioners shall notify the accused member in writing of the allegations concerning the member's performance. The written notice shall include a description of the conduct purported to constitute each charge. The accused shall be invited to respond in writing. If the accused member wishes, he or she may resign the position voluntarily or may request the opportunity to appear before the Board to respond to the allegations received. If an appearance is requested, the Board shall schedule it during the next meeting of the Board.

If the Commission, Review Committee, or Appeal Board on which the accused holds an office is scheduled to meet before the date of the appearance, the Board of Commissioners at its discretion may excuse the accused member from attending that meeting only after the Board of Commissioners offers the accused an opportunity to be heard or where it determines that compelling reasons exist for excusal. It shall specify the reasons for excusal in writing.

Formal rules of evidence shall not apply to the appearance to discuss the allegations made, but if requested, the Board of Commissioners shall permit the accused member to be assisted by legal counsel. Following the appearance, the Board shall decide by majority vote whether or not to remove the accused member. Every decision, which results in removal of a Commission, Review Committee, or Appeal Board member for cause, shall be reduced to writing and shall specify the findings of fact which support the decision to remove the accused members. If the Board of Commissioners decides to remove the accused, that action shall create a vacancy on that Commission, Review Committee, or Appeal Board which shall be filled in accordance the appropriate provisions in these *Rules*. All records of the proceedings and the cause for removal shall be confidential information.

The Commission on Dental Accreditation shall provide notice to the ADA Board of Trustees once the Commission acts to remove a member for cause.

Adopted: 8/18; Revised 10/18

E. POLICY ON PUBLIC STATEMENTS

Public Statements: The current Commission Chair, Vice-chair, and Director have the sole authority to speak on behalf of the Commission. No current or former Commission volunteer, including members of the Board of Commissioners, the Review Committees, the Appeal Board, and Consultants/Site Visitors may issue a public statement, or serve on an external committee as a spokesperson in the name of the Commission.

In their capacity as educators and practitioners, Commission volunteers may be asked from time to time by an external agency to participate in activities related to dental education and accreditation. If a Commission volunteer serves in this capacity, they must disclose to the external agency and the Commission their plan to participate, the role they will serve, and a disclosure statement that they do not speak on behalf of the Commission.

Adopted: 1/20

F. COMMISSION COMMITTEES

The Commission on Dental Accreditation has six (6) standing committees: Quality Assurance and Strategic Planning, Documentation and Policy Review, Finance, Nomination, Communication and Technology, and International Accreditation (Predoctoral only). Additionally, ad hoc committees and other committees and task forces may be formed to address specific issues or concerns. An ad hoc committee functions until the issue is resolved or until it becomes a standing committee of the Commission.

Occasionally, a Commissioner may be asked to serve on other task forces or joint committees that could include representatives from the American Dental Association, the American Dental Education Association or other organizations.

The charge to each of the Commission's standing committees follows:

Quality Assurance and Strategic Planning

- Develop and implement an ongoing strategic planning process;
- Develop and implement a formal program of outcomes assessment tied to strategic planning;
- Use results of the assessment processes to evaluate the effectiveness of the Commission and make recommendations for appropriate changes, including the appropriateness of its structure;
- Monitor USDE, and other quality assurance organizations e.g. Council on Higher Education Accreditation (CHEA), American National Standards Institute/International Organization for Standardization (ANSI/ISO), and International Network for Quality Assurance Agencies in Higher Education (INQAAHE) for trends and changes in parameters of quality assurance; and
- Monitor and make recommendations to the Commission regarding changes that may affect its operations, including expansion of scope and international issues.

Documentation and Policy Review

- Ensure all Commission documents reflect consistency in application of Commission policies, and that relevant sections of accreditation standards are consistent across disciplines;
- 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

- Develop Commission policies and procedures contained in the Evaluation and Operational Policies and Procedures manual.
- Periodically review current Commission policies and procedures to ensure that they are current and relevant.

Nomination

- Review nominations and make recommendations for appointment of consumer/public members to the Commission;
- Review nominations and make recommendations for appointment of individuals to Review Committees of the Commission;
- Ensure the pre-nomination education process provides information regarding expectations and duties of commissioners, review committee members, and site visitors; and
- Periodically review nomination and selection criteria and make recommendations for changes if necessary, consistent with the Commission’s strategic plan and policies.

Finance

- Monitor, review and make recommendations to the Commission concerning the annual budget, provide administrative oversight of the administrative fund, and review and make recommendations regarding the Intercompany Memorandum of Understanding and Services Agreement.

Communication and Technology

- Evaluate and recommend alternative methods, including the use of enhanced technology, for monitoring programs’ continuous compliance with the standards;
- Evaluate and recommend new technological advances in accreditation for reporting and management of information, allowing accreditation to move toward the concepts of continuous assessment, data collection, and readiness;
- Monitor technological trends in alternative site visit methods;
- Develop and implement strategies to increase the effectiveness, quality, content, and processes of communication with all the Commission’s communities of interest;
- Ensure that Commission communications strategies allow for transparency and accountability; and
- Oversee the publication of the e-newsletter, the CODA Communicator, with emphasis on communicating the value/outcomes of accreditation.

International Accreditation (Predoctoral only)

- Provide international consultation fee-based services to international predoctoral dental education programs, upon request.
- Develop and implement international consultation policies and procedures to support the international consultation program.
- Monitor and make recommendations to the Commission regarding changes that may affect its operations related to international issues.

Revised: 1/20; 2/19; 8/17; 2/16; Adopted: 8/10

G. MATERIALS AVAILABLE FROM THE COMMISSION

These materials are available from the Commission on Dental Accreditation upon request.

- Application for initial accreditation for each discipline
- Accreditation standards documents for each discipline

- Self-study documents for each discipline
- Accredited Program Listing:
 - Predoctoral Dental Education Programs,
 - Allied Dental Education Programs, and
 - Advanced Dental Education Programs
- Annual Reports for Predoctoral Advanced, and Allied Dental Education are available online, including:
 - Supplement: Dental School Tuition, Admission and Attrition
 - Supplement: Dental School Faculty and Support
 - Supplement: Dental School Trends
 - Supplement: Dental School Curriculum, Clock Hours of Instruction

Reports listed as confidential include information which was collected with the understanding that the reports would not identify specific educational institutions. Thus, these reports use randomly assigned code numbers for each predoctoral dental education program rather than the name of the institution. Confidential reports include the Supplement: Analysis of Dental School Finances - Financial Report

- Guidelines:
 - Preparation of Reports (Response to Site Visit Reports and Progress Reports)
 - Submitting Teach-Out Reports by Institutions Discontinuing or Closing Commission-Accredited Educational Programs
 - Preparing Phase-out Reports by Institutions Terminating Educational Programs
 - Preparing Requests for Transfer of Sponsorship
 - Reporting Program Changes in Accredited Programs
 - Documentation Guidelines for Selected Recommendations (in site visit reports)
 - Requesting an Enrollment Increase (predoctoral and advanced)
 - Reporting and Approval of Sites Where Educational Activity Occurs (Adopted 2/16)
 - Electronic Submission of Documents
 - Privacy and Data Security Requirements for Institutions
 - Privacy and Data Security Requirements for International Institutions
- Outcomes Assessment - a resource packet on assessing outcomes

Revised: 8/17

III. GENERAL COMMISSION POLICIES AND PROCEDURES

A. POLICY AND PROCEDURE FOR DEVELOPMENT AND REVISION OF ACCREDITATION STANDARDS

The Commission on Dental Accreditation has authority to formulate and adopt educational requirements and guidelines, i.e. standards, for the accreditation of dental educational programs within its purview. These include the predoctoral programs, as well as advanced and allied dental education programs.

In developing and revising accreditation standards, the appropriate communities of interest are substantially involved in all stages of the process. The process culminates in the adoption of accreditation standards which become the property of the Commission. Any individual who assists in developing or revising a standards document must sign a release giving the Commission the right to copyright such documents. During the initial step of the process, representatives from the discipline involved are invited to participate in the development of the preliminary document. These representatives are selected in cooperation with the organizations(s) nationally recognized in the discipline whose membership is reflective of the discipline.

The communities of interest (COI) include, but are not limited to, the following: sponsoring organizations and certifying boards of all dental and dental related disciplines under the purview of the Commission, program directors, dental school deans, administrators of non-dental school institutions offering dental programs, and constituent societies of the American Dental Association.

The Commission uses consistent definitions and terms in its standards documents. The Commission monitors the consistency of the definitions of terms used in the accreditation standards documents and lists a glossary of terms and approved definitions to be used by appropriate audiences when the revision of the accreditation standards for a discipline is initiated.

The following language is used when draft revisions of standards are circulated:

The Commission directed that the proposed revision of the (discipline) Standards be distributed to the appropriate communities of interest for review and comment. The Commission also directed that the proposed revised standards be presented in a hearing to be held....

Based on current word processing programs, the Commission now indicates a proposed deletion with a ~~strike through~~ and recommended additions are underlined. In the case of multiple circulations of proposed revisions, each successive revision will be presented to show all currently proposed changes to the original document, which is the current document in use by the Commission. The title page of the document will provide a chronology of Commission action(s) on revisions. The header on each page will indicate the meeting at which the proposed document was considered by the Commission. In addition, documents for circulation will have line numbers throughout.

The following is a summary of the standards development and revision process:

- Step 1. Development of a preliminary document by staff and selected representatives of the discipline involved.
- Step 2.
 - i. Consideration of preliminary document by appropriate Review Committee
 - ii. Recommendation by Review Committee for circulation of document to COI by the Commission
 - iii. Commission authorizes circulation
- Step 3.
 - i. Circulation of preliminary document to COI for review and comment
 - ii. Hearing at ADA Annual Session and ADEA Annual Meeting and additional communities of interest as appropriate
- Step 4.
 - i. Comments from COI compiled by staff
 - ii. Comments reviewed by appropriate review committee and appropriate changes made
 - iii. Recommendation by Review Committee to implement changes, or to recirculate for further comment if changes are significant
 - iv. Commission approves changes and authorizes implementation timeframe or recirculation to COI for comments
 - v. Steps 3 and 4 can be repeated, depending upon significance of changes. In the case of multiple circulations of proposed revisions, each successive revision will be presented to show all currently proposed changes to the original document, which is the current document in use by the Commission. The title page of the document will provide a chronology of Commission action(s) on revisions. The header on each page will indicate the meeting at which the proposed document

was considered by the Commission. In addition, documents for circulation will have line numbers throughout.

Step 5. Commission notifies all appropriate individuals and programs of implementation timeframe

Revised: 2/15; 1/14; 7/09, 1/04 5/89; 12/89; Reaffirmed: 8/18; 8/12, 8/10, 7/07, 7/01; Adopted: 4/83; CODA: 12/91:15, 12/90:2, 12

1. Frequency Of Citings: Each of the Review Committees and the Commission regularly review an updated analysis of the number of “must” statement citings and their distribution among the “must” statements in the accreditation standards for each discipline. These analyses are conducted at the summer meetings. Frequency of Citings Reports are provided to programs and presented at workshops. To ensure confidentiality, Frequency of Citings Reports will not be made available in disciplines where a limited number (three or less) of programs have been site visited.

Reaffirmed: 8/18; 8/12, 8/10

B. POLICY ON ASSESSING THE VALIDITY AND RELIABILITY OF THE ACCREDITATION STANDARDS

The Commission on Dental Accreditation has developed accreditation standards for use in assessing, ensuring and improving the quality of the educational programs in each of the disciplines it accredits.

The Commission believes that a minimum time span should elapse between the adoption of new standards or implementation of standards that have undergone a comprehensive revision and the assessment of the validity and reliability of these standards. This minimum period of time is directly related to the academic length of the accredited programs in each discipline. The Commission believes this minimum period is essential in order to allow time for programs to implement the new standards and to gain experience in each year of the curriculum.

The Commission’s policy for assessment is based on the following formula: The validity and reliability of accreditation standards will be assessed after they have been in effect for a period of time equal to the minimum academic length of the accredited program plus three years. Thus, the validity and reliability of the new standards for a one year program will be assessed after four years while standards which apply to programs four years in length will be assessed seven years after implementation. In conducting a validity study, the Commission considers the variety of program types in each discipline and obtains data from each type in accord with good statistical practices.

The Commission’s ongoing review of its accreditation standards documents results in standards that evolve in response to changes in the educational and professional communities. Requests to consider specific revisions are received from a variety of sources and action on such revisions is based on broad input and participation of the affected constituencies. Such ongoing assessment takes two main forms, the development or revision of specific standards or a comprehensive revision of the entire standards document.

Specific issues or concerns may result in the development of new standards or the modification of existing standards, in limited areas, to address those concerns. Comprehensive revisions of standards are made to reflect significant changes in disease and practice patterns, scientific or technological advances, or in response to changing professional needs for which the Commission has documented evidence.

If none of the above circumstances prompts an earlier revision, in approximately the fifth year after the validity and reliability of the standards has been assessed, the Commission will conduct a study to determine whether the accreditation standards continue to be appropriate to the discipline. This study will include input from the broad communities of interest. The communities will be surveyed and invited to participate in some national forum, such as an invitational conference, to assist the Commission in determining whether the standards are still relevant and appropriate or whether a comprehensive revision should be initiated.

The following alternatives, resulting in a set of new standards, might result from the assessment of the adequacy of the standards:

- Authorization of a comprehensive revision of the standards;
- Revision of specific sections of the standards;
- Refinement/clarification of portions of the standards; and
- No changes in the standards but use of the results of this assessment during the next revision.

The new document is developed with input from the communities of interest in accord with Commission policies. An implementation date is specified and copyright privileges are sought when the document is adopted. Assessment of the validity and reliability of these new standards will be scheduled in accord with the policy specified above. Exceptions to the prescribed schedule may be approved to ensure a consistent timetable for similar disciplines (e.g. advanced dental education programs and/or allied dental education programs).

Revised: 8/18; 7/07, 07/00; Reaffirmed: 8/12, 8/10, 7/06; Adopted: 12/88

C. PROCEDURES FOR HEARING ON STANDARDS

The Commission makes every effort to have two Commissioners attend each hearing on standards sponsored by the Commission. The Commission believes that two Commissioners is an appropriate number to routinely attend hearings on standards, but also believes that those in attendance are not always appropriately visible. Thus, the Commission directed that all members of the Commission who are present during Commission sponsored hearings on standards be introduced at the beginning of the hearing on standards and, if feasible, be seated at a head table to ensure their visibility to those offering testimony.

The purpose of a hearing on standards is to provide individuals, institutions and organizations that will be affected by the document with an opportunity to comment. The Commissioner selected to chair the hearing is generally responsible for:

- Calling the hearing to order, indicating that the hearing is one (1) hour but will be concluded in 30 minutes if limited comments are received and the agenda is completing during that time;
- Introducing him/herself, other Commission members and Commission staff present;
- Explaining the purpose of the hearing on standards;
- Providing brief background information on the proposed revision;
- Explaining the ground rules for the hearing;
- Listening to comments and maintaining the order and flow of the hearing; and
- Concluding the hearing.

The goal of a hearing on standards is to hear as many varied points of view on the proposed documents as possible in an orderly fashion. The following ground rules facilitate achieving this goal:

- The document should be reviewed on a page-by-page basis so that comments on specific issues can be provided at the same time.
- General comments on the document can be considered either before or after the page-by-page review, as determined by the Chair.
- Individuals who wish to provide comments should wait to be recognized by the Chair, and identify themselves by giving their name, city, state, and educational institution, if applicable.
- Individuals reference the specific section of the document on which they wish to comment by indicating the page and line numbers of the section.
- Comments should be as concise as possible.
- Individuals should provide written comments that summarize their verbal remarks to the Chair by the end of the hearing.

Hearings on standards should be constructive. It is sometimes helpful for the Chair to ask an individual who is speaking at length against a section of the proposed document whether he/she has a specific suggestion for revision. This can help to clarify the speaker's objection more precisely and to bring the comments to closure.

Occasionally, an individual or a few individuals may monopolize a hearing on standards. In fairness to other attendees who may wish to speak, the Chair should direct individuals who have had ample opportunity to express their opinions to conclude their remarks.

Commissioners are present to listen to representatives of the communities of interest and should avoid becoming involved in debates about the relative merits of specific sections of the document.

Similarly, hearings on standards attendees should refrain from engaging in heated debates with each other. If such debates develop, the Chair may wish to remind participants that the Commission is interested in considering all viewpoints on the issues and that no decision regarding any issue will be determined during a hearing on standards.

At the close of the hearing on standards, the Chair should advise attendees of other opportunities for comment (i.e. other hearings on standards, if any, and the deadline for written comments) and indicate when the Commission will take the final action on the document.

Revised: 8/21; 2/15; Reaffirmed: 8/18; 8/12, 8/10, 7/07, 7/01; CODA: 12/91:15

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: 8/18; 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. 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 a program at 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;
- 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: 2/21; 8/18; 2/18; 2/16; 8/14; 1/14; 2/13; 8/10; Reaffirmed: 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 decisions in which he or she has a financial or personal interest or, because of an institutional or program association, has divided loyalties and/or has a conflict of interest on the outcome of the decision.

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

During the term of service as a commissioner or appeal board member, these individuals may not independently consult with a CODA-accredited program or a program applying for CODA accreditation. In addition, Commissioners or appeal board may not serve on a site visit team during their terms. Areas of conflict of interest for Commissioners, Review Committee members and/or members of the Appeal Board include, but are not limited to:

- close professional or personal relationships 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 or mock site visitor 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, Review Committee member, or member of the Appeal Board;
- 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 ten (10) years.

To safeguard the objectivity of the Review Committees, conflict of interest determinations shall be made by the Chair of the Review Committee. If the Chair, in consultation with a public member, staff and legal counsel, determines that a Review Committee member has a conflict of interest in connection with a particular program, the Review Committee member 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 committee member 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 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: 8/18; 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 program at the institution within the last five years;
- service as a site visitor, employee or appointee of the institution within the last five years; and/or
- close personal or familial relationships with key personnel in the institution/program.

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

E. CONFIDENTIALITY POLICY

All materials generated and received in the accreditation process are confidential. In all instances Protected Health Information (PHI), Personally Identifiable Information (PII) and student/resident/fellow identifying information must not be improperly disclosed. The Commission's confidentiality policies apply to Commissioners, Review Committee members, members of the Appeal Board, and site visitors. Confidential materials are maintained to ensure the integrity of the institution/program and of the accreditation process, and may be shared by the Commission in instances related to USDE re-recognition or responding to state or federal legal requirements, as appropriate. Because of the confidential nature of the accreditation process, the Commission identifies three (3) points of contact with whom Commission staff is authorized to communicate, either in writing or verbally. These individuals are designated by the sponsoring institution and include the chief executive officer (university president/chancellor/provost or medical center director), the chief academic officer (dean/academic dean/chair/chief of dental service, etc.), and the program director. Commission staff is not authorized to discuss program-specific situations or share confidential material with any other individual(s).

Confidentiality applies without limitation, to the following:

SELF-STUDY DOCUMENT: At the discretion of the institution, the administration may either release information from this document to the public or keep it confidential. The Commission will not release 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.

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

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

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

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

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

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

PROTECTED HEALTH INFORMATION: Patients' protected health information, which includes any information that could identify an individual as a patient of the facility being site visited, may not be used

by the site visitors, Review Committee members, or Commissioners for any purpose other than for evaluation of the program being reviewed on behalf of the Commission. Protected Health Information may not be disclosed to anyone other than Commissioners, Commission staff, Review Committee members or site visitors reviewing the program from which the Protected Health Information was received. Individual Protected Health Information should be redacted from Commission records whenever that information is not essential to the evaluation process. If a site visitor, Review Committee member, or Commissioner believes any Protected Health Information has been inappropriately used or disclosed, he/she should contact the Commission office.

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

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

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

1. Reminder Of Confidentiality: To be read at meetings or on site:

The Commission on Dental Accreditation reminds you that confidentiality is an integral part of the accreditation process. The Commission must have access to much sensitive information in order to conduct its review of programs. The confidentiality of this information must be protected by participants of meetings as well as by participants on accreditation site visits.

To remind you of the seriousness with which the Commission views its commitment to protect confidentiality, the Commission requires that all participants of meetings and site visits sign an Agreement of Confidentiality. In signing the Agreement which was mailed to you, you indicated your familiarity with the Commission's policy on confidentiality and agreed to abide by it. If you have not already signed the Agreement, please arrange to do so.

Unless indicated otherwise, all meeting and site visit materials, all information obtained on site, all patient Protected Health Information, and all discussions related to the accreditation of programs are confidential. Patients' Protected Health Information, which includes any information that could identify an individual as a patient of the facility you are visiting or reviewing, may not be used by you for any purpose other than for evaluation of the program on behalf of the Commission. If you believe any Protected Health Information has been inappropriately used or disclosed, you must contact the Commission office. And, please remember that confidentiality has no expiration date -- it lasts forever!

Revised: 1/05; Reaffirmed: 8/18; 8/12, 8/10, 7/01; Adopted: 12/85

2. The Agreement Of Confidentiality:

Agreement of Confidentiality

I am aware that, as a participant of an accreditation site visit, committee, or the Commission, I have access to accreditation information which must remain confidential. I have read and understand the Commission on Dental Accreditation's policy on Confidentiality and Public Disclosure and agree to protect the confidentiality of all accreditation materials, all patient Protected Health Information, recommendations and suggestions and discussions before, during and after the meeting or site visit.

EOPP

August 2021

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Signed

Date

Revised: 1/05; Reaffirmed: 8/18; 8/12, 8/10, 7/01; Adopted: 12/8

F. POLICY ON PUBLIC DISCLOSURE

Following each meeting, final accreditation actions taken with respect to all programs, are disclosed to all appropriate agencies, including the general public. The public includes other programs or institutions, faculty, students and future students, governing boards, state licensing boards, USDE, related organizations, federal and state legislators and agencies, members of the dental community, members of the accreditation community and the general public. In general, it includes everyone not directly involved in the accreditation review process at a given institution.

If the Commission, subsequent to and following the Commission's due process procedures, withdraws or denies accreditation from a program, the action will be so noted in the Commission's lists of accredited programs. Any inquiry related to application for accreditation would be viewed as a request for public information and such information would be provided to the public. The scheduled dates of the last and next comprehensive site visits are also published as public information.

The Commission has procedures in place to provide a brief statement summarizing the reasons for which it takes an adverse accreditation action. If initial accreditation were denied to a developing program or accreditation were withdrawn from a currently accredited program, the reasons for that denial would be provided to the Secretary of the U.S. Department of Education, the appropriate accrediting agencies, any appropriate state licensing or authorizing agencies, and to the public. In addition, the official comments that the affected institution or program may wish to make with regard to that decision, or evidence that the affected institution has been offered the opportunity to provide official comment will also be made available to the Secretary of the U.S. Department of Education, the appropriate accrediting agencies, any appropriate state licensing or authorizing agencies, and to the public.

All documents relating to the structure, policies, procedures, and accreditation standards of the Commission are available to the public upon written request. Other official documents require varying degrees of confidentiality.

Revised: 1/05, 2/01, 7/00; Reaffirmed: 8/18; 8/12, 8/10; Adopted: 7/94, 5/93

G. POLICY ON SIMULTANEOUS SERVICE

A member of the Commission on Dental Accreditation, including its Standing and Review Committees,* and Appeal Board, may not simultaneously serve as a principal officer of another organization within any of the Commission's primary communities of interest if that organization has a role in appointing or co-appointing a member of the Commission. The Commission interprets principal officer to mean those in the position of being final decision-makers which usually includes positions such as the president, president-elect, immediate past president, secretary or treasurer of an organization, as well as members of any executive committee that has decision-making authority which does not require confirmation by a board or house. The Commission has defined primary community of interest in this context as any organizations who have a role in appointing Commissioners, and the Regional Clinical Testing Agencies. Additional criteria found in CODA's Rules for nominations apply during an individual's entire term on CODA. When such a conflict is revealed at the time of appointment, the appointing organization will be informed

that the conflict exists and requested to take steps to identify a replacement on the specific committee, Appeal Board, or Commission.

When such a conflict arises during the term of a current Commissioner, Review Committee, or Appeal Board member, the Commissioner, or Review Committee, or Appeal Board member will be asked to resolve the conflict by resigning from one of the conflicting appointments. In the event that the member resigns from the Commission or Appeal Board, the appointing organization will appoint another individual to complete the unfinished term, as specified by the *Rules* of the Commission on Dental Accreditation. In the event that the member resigns from the Review Committee, the Commission will contact the representative organization for nominations to fulfill the unfinished term.

If the term of the vacated Commission, Appeal Board, or Review Committee 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 appointment to 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.

*this applies to appointments made after 2013

Revised: 2/19; 8/18; 8/16; 2/16; 2/13, 7/09, 7/01, 7/95; Reaffirmed: 8/13; 8/10, 7/07

H. NON-DISCRIMINATION POLICY:

The Commission on Dental Accreditation does not discriminate against any person in the conduct of its activities because of race, color, religion, gender, age, disability or national origin.

Reaffirmed: 8/18; 8/13; 8/10, 7/07, 7/01, 5/84, 7/95

I. POLICY ON PROFESSIONAL CONDUCT AND PROHIBITION AGAINST HARASSMENT

All staff members and volunteers must treat each other and all others with whom we work on behalf of the ADA¹ with integrity, courtesy and professionalism. It is ADA policy that all staff members and volunteers are responsible for assuring that the work place is free from improper harassment. With this policy, the ADA prohibits not only unlawful harassment, but also other unprofessional and discourteous actions. For example, rude, insulting, disrespectful, disruptive, uncivil and unprofessional comments or conduct will also not be tolerated.

Workplace harassment isn't limited to sexual harassment, and doesn't preclude same-gender harassment; it can occur between any two people - co-workers, managers, or even non-employees like clients, contractors, or vendors.

The ADA absolutely prohibits sexual harassment and harassment on the basis of one's status as a member of a legally-protected class, such as race, color, religion, sex (including pregnancy, childbirth and related medical conditions), gender, gender identify, national origin, age (40 or older), disability (mental or physical), sexual orientation, military status, genetic information, and marital status. These types of

To Report a Potential Incident

If you believe you have experienced or have become aware of an incident of harassment or a violation of our professional conduct policy, report it as soon as possible to your supervisor and/or Human Resources at (312) 440-2005.

¹ For purposes of these HR protocols 'the ADA' collectively refers to the American Dental Association and its two affiliated organizations, the for-profit company ADA Business Enterprises, Inc. (ADABEI) and the not-for-profit educational and research focused ADA Foundation (ADAF).

discriminatory harassment are prohibited by state and federal laws and may subject the ADA and/or the individual harasser to liability for any such unlawful conduct.

Offensive conduct may include, but is not limited to, offensive jokes, slurs, epithets or name calling, physical assaults or threats, intimidation, ridicule or mockery, insults or put-downs, offensive objects or pictures, unwelcome sexual advances, unwanted physical contact (including touching), and all other verbal, or physical conduct directed at an individual because of their status as a member of a protected class that is unwelcome and interferes with work performance. Such conduct constitutes unlawful harassment when:

- Submission to such conduct is made either implicitly or explicitly a condition of the individual's employment;
- Submission to or rejection of such conduct is used as the basis for decisions affecting an individual's employment; or
- Such conduct is sufficiently severe or pervasive to alter the conditions of employment and to create a hostile or abusive working environment.

Each staff member and volunteer must exercise his or her own good judgment to avoid engaging in conduct that may be perceived by others as harassment. As an ADA staff member or volunteer, you are responsible for keeping our work environment free of all such harassment. If you believe that you have been harassed, or if you become aware of an incident of harassment, whether by an employee, a member, or a non-employee or non-member, you should report it as soon as possible to your supervisor, a volunteer leader, and/or to the Human Resources, (312-440-2005).

If the incident is reported to an employee's supervisor or a volunteer leader, the supervisor or volunteer leader must then report the incident to the head of ADA Human Resources. Do not allow an inappropriate situation to continue by not reporting it, regardless of who is creating that situation.

No staff member or volunteer in this organization is exempt from this policy. This policy applies to the immediate work place as well as to ADA related activity outside the ordinary work place, such as travel on ADA business, meetings outside the ADA building, email and telephone communications, and ADA-sponsored social or recreational events.

**** Reminder to Supervisors and Volunteer Leaders****

If you witness or are informed of a potential incident of harassment or violation of our professional conduct policy, you **MUST** report it to Human Resources at (312) 440-2005.

In response to every complaint, the ADA will take prompt investigatory actions and corrective and preventative actions where necessary. A staff member who brings such a complaint to the ADA in good faith will not be adversely affected as a result of reporting the harassment or objectionable conduct. All staff members should be aware that the privacy of the charging party and the person accused of the harassment will be protected to the extent consistent with effective enforcement of this policy.

The ADA will retain confidential documentation of all allegations and investigations. Any staff member or volunteer found to have violated this policy may be subject to disciplinary action up to and including discharge from employment with the ADA or removal from a volunteer position. Any memoranda regarding a determination that a violation of the Professional Conduct Policy and Prohibition against Harassment has occurred shall be placed in a staff member's personnel file. Effective: January 1, 2015

Procedures Applicable to Professional Conduct Policy and Prohibition against Harassment

- a. If you believe that there has been a violation of the ADA's Professional Conduct Policy and Prohibition against Harassment (ADA's Policy) immediately contact your supervisor, or Human Resources.
- b. If an incident is reported to a supervisor or volunteer leader, the supervisor or volunteer leader must then notify Human Resources of the incident.
- c. In a timely and confidential manner, the ADA will conduct an investigation of any complaint that is made pursuant to the ADA's Policy. Human Resources will conduct an investigation, which includes interviewing witnesses with potential knowledge of the objectionable conduct.
- d. It is the obligation of each staff member and volunteer to cooperate in these investigations by providing truthful, thorough information.
- e. The alleged harasser is given an opportunity to relate his/her version of the events and to provide any information that the ADA should consider before it finalizes its investigation. If the alleged harasser refuses to participate, the ADA will base its decision on the other information gathered during the investigation, the inferences drawn from that evidence and the alleged harasser's unwillingness to cooperate in the interview.
- f. Information obtained pursuant to the investigation is confidential and will be reported to those within the ADA on a "need to know" basis. The privacy of the complaining party and the person accused of the harassment will be protected to the extent consistent with effective enforcement of this Policy.
- g. Attempting to influence the investigation or to disclose confidential information by discussing it with others can be cause for disciplinary action, up to and including discharge, except to the extent such disclosure may be legally permissible.
- h. Human Resources, in consultation with legal counsel, will make a recommendation to the Executive Director as to whether there has been a violation of the ADA's Policy and whether corrective action, if any, should be taken.
- i. Any staff member found to have violated the Professional Conduct Policy and Prohibition against Harassment will be subject to disciplinary action up to and including discharge. Any memoranda regarding violation of the Professional Conduct Policy and Prohibition against Harassment will be placed in the staff member's personnel file.

The ADA prohibits managers and supervisors from taking adverse job consequences against staff who engage in protected activities such as :1) lodging a discrimination complaint or concern, 2) participating in an investigation of such a discrimination complaint or concern or 3) opposing employment practices that an employee reasonably believes discriminate against the employee or another staff member.

The ADA prohibits any form of retaliation against any staff member for making a bona fide complaint under this policy or for assisting in a complaint investigation. Any individual, however, whose complaint is determined to be false or made in bad faith, or supported by false information, may be subject to disciplinary action.

The ADA specifically reserves its right to change, modify or eliminate any of the provisions of its Procedures Applicable to the Professional Conduct Policy and Prohibition against Harassment Policy at any time with or without notice. Effective: January 1, 2015.

Revised: 8/15; 8/14; 7/09, 1/03, 7/97; Reaffirmed: 8/18; /13; 8/10; CODA: 01/95:11

J. PROGRAM FEE POLICY

Programs accredited by the Commission pay an annual fee. The annual fee is doubled in the year of the program's regular interval accreditation site visit. As there is some variation in fees for different disciplines based on actual accreditation costs, programs should contact the Commission office for specific information. Other than doubling of the annual fee during the site visit year, site visits are conducted without any additional charge to the institution and the Commission assumes all expenses incurred by its site visitors. However, accredited programs with multiple sites which must be site visited during a regular site visit and programs sponsored by the U.S. military in international locations are assessed a fee at the time of the site visit. The fee is established on a case-by-case basis, dependent upon the specific requirements to conduct the visit (e.g. additional site visitors, additional days, and additional travel time and expenses). Fees are also assessed to the program for the conduct of special focused site visits. (See Invoicing Process for Special Focused Site Visits in Policy on Special Site Visits). International dental education programs also pay an annual fee and site visit fees (See International Dental Education Site Visits). Expenses for representatives from the state board of dentistry or from other agencies, such as a regional accrediting agency, are not assumed by the Commission. Fee structures are evaluated annually by the Commission. The Commission office should be contacted for current information on fees.

An annual administrative fee is also applied to each program. Fees may also be associated with staff consulting services (See Staff Consulting Services, and International Policies and Procedures) administrative fees related to the Commission policy on protected health information and personally identifiable information (See Policy and Procedures Related to Compliance with the Health Insurance Portability and Accountability Act).

All institutions offering programs accredited by the Commission on Dental Accreditation are expected to adhere to the due date for payment of all fees for each accredited program sponsored by the institution. Written requests for an extension must specify a payment date no later than thirty (30) days beyond the initial due date. Failure to pay fees by the designated deadline is viewed as an institutional decision to no longer participate in the Commission's accreditation program. Following appropriate reminder notice(s), if payment or a request for extension is not received, it will be assumed that the institution no longer wishes to participate in the accreditation program. In this event, the Commission will immediately notify the chief executive officer of the institution of its intent to withdraw the accreditation of the program(s) at its next scheduled meeting. Programs which have been discontinued or had accreditation withdrawn will not be issued a refund of accreditation fees.

Revised: 1/20; 2/19; 2/15; 8/14; 8/13; 7/08; Reaffirmed: 8/18; 8/13; 8/10, 7/07, 7/01, 7/95

K. POLICY ON CODA ADMINISTRATIVE FUND

In 2020, the Commission on Dental Accreditation approved the reclassification of its Research and Development Fund (R&D Fund) to an Administrative Fund.

The Commission on Dental Accreditation Administrative Fund may include but is not limited to the following uses:

- Commission studies and activities related to quality assurance and strategic planning
- Conduct of business through newly formed ad hoc or sub-committees not previously budgeted; engagement of site visitors to gain unique expertise or to provide training

- Ongoing review and enhancement of business resources, human resources, and technology resources in various aspects of the CODA accreditation program
- Expenses related to Shared Services Agreement with the American Dental Association not previously budgeted
- Other business purposes as applicable to the work of the Commission on Dental Accreditation

Criteria Guideline for Distribution of Funds:

1. Funds \$5,000 or less: Funds in this category are classified as discretionary funds that may be used by the CODA Director. A maximum of \$5,000 per use is permissible, with a requirement for immediate reporting on the use of the funds, via email, to the Finance Committee for informational purposes. The discretionary funds do not require a formal request by a CODA committee, nor do they require prior approval for use by the Finance Committee or Commission.
2. Funds between \$5,001 and \$20,000: Projects which require this level of funding must be reviewed and approved by the Finance Committee prior to use. Approval by the Commission is not required.
3. Funds greater than \$20,000: Projects which require funding in excess of \$20,000 must be submitted for review and approval by the Commission upon recommendation of the Finance Committee.

All Funding Disbursements:

- The Finance Committee and Commission will review a full accounting of the Administrative Fund and uses of the fund at each finance committee and Commission meeting.
- Fund allocations requiring approval by the Finance Committee or the Commission require formal requests/proposals from the Commission's review committees or standing committees; disbursement of funds within the Director's discretionary allocation do not require formalized requests.

Adopted: 2/20

L. GUIDELINES FOR MANAGING PROGRAM FILES

All correspondence is maintained and documentation related to one accreditation cycle will be stored electronically. Electronic documents/correspondence do not need signatures (per Commission legal counsel). Transmittal letters can be saved to the accredited program's Knowledge Center space without a signature.

Accredited programs

- All correspondence;
- The most recent site visit report (including the institution's response);
- Most recent self-study (with the hospital's bylaws, and course outlines appendix);
- Second most recent self-study (without hospital bylaws or course outlines appendix);
- All previous site visit reports (including institution's responses);
- Progress reports related to the two (2) most recent site visit reports (without course outlines); and
- Special Reports: (e.g. interim review, major change, transfer of sponsorship) occurring during time period of the two most recent site visit reports.

Discontinued programs

- All correspondence and site visit reports.

Programs with accreditation withdrawn

- All correspondence;
- Two (2) most recent site visit reports (with institutional responses);
- Two (2) most recent self-studies (without hospital bylaws or course outlines); and
- Progress reports related to the two (2) most recent site visit reports.

Revised: 8/02, 8/03, 8/99; Reaffirmed: 8/18; 8/15; 8/10, 7/09; Adopted: 9/92

IV. POLICIES AND PROCEDURES RELATED TO ACCREDITATION OF PROGRAMS

A. ACCREDITATION STATUS DEFINITIONS

1. Programs That Are Fully Operational:

Approval (*without reporting requirements*): An accreditation classification granted to an educational program indicating that the program achieves or exceeds the basic requirements for accreditation.

Approval (*with reporting requirements*): An accreditation classification granted to an educational program indicating that specific deficiencies or weaknesses exist in one or more areas of the program. Evidence of compliance with the cited standards or policies must be demonstrated within a timeframe not to exceed eighteen (18) months if the program is between one and two years in length or two years if the program is at least two years in length. If the deficiencies are not corrected within the specified time period, accreditation will be withdrawn, unless the Commission extends the period for achieving compliance for good cause. Identification of new deficiencies during the reporting time period will not result in a modification of the specified deadline for compliance with prior deficiencies.

Circumstances under which an extension for good cause would be granted include, but are not limited to:

- sudden changes in institutional commitment;
- natural disaster which affects affiliated agreements between institutions; faculty support; or facilities;
- changes in institutional accreditation;
- interruption of an educational program due to unforeseen circumstances that take faculty, administrators or students away from the program.

Revised: 8/17; 2/16; 5/12; 1/99; Reaffirmed: 8/18; 8/13; 8/10, 7/05; Adopted: 1/98

2. Programs That Are Not Fully Operational: A program which has not enrolled and graduated at least one class of students/residents and does not have students/residents enrolled in each year of the program is defined by the Commission as not fully operational. The accreditation classification granted by the Commission on Dental Accreditation to programs which are not fully operational is “initial accreditation.” When initial accreditation status is granted to a developing education program, it is in effect through the projected enrollment date. However, if enrollment of the first class is delayed for two consecutive years following the projected enrollment date, the program’s accreditation will be discontinued, and the institution must reapply for initial accreditation and update pertinent information on program development. Following this, the Commission will reconsider granting initial accreditation status.

Initial Accreditation is the accreditation classification granted to any dental, advanced dental or allied dental education program which is not yet fully operational. This accreditation classification provides evidence to educational institutions, licensing bodies, government or other granting agencies that, at the time of initial evaluation(s), the developing education program has the potential for meeting the standards

set forth in the requirements for an accredited educational program for the specific occupational area. The classification “initial accreditation” is granted based upon one or more site evaluation visit(s).

Revised: 7/08; Reaffirmed: 8/18; 8/13; 8/10; Adopted: 2/02

Other Accreditation Actions:

Teach-Out: An action taken by the Commission on Dental Accreditation to notify an accredited program and the communities of interest that the program is in the process of voluntarily terminating its accreditation due to a planned discontinuance or program closure. The Commission monitors the program until students/residents who matriculated into the program prior to the reported discontinuance or closure effective date are no longer enrolled.

Reaffirmed: 8/18; Adopted: 2/16

Discontinued: An action taken by the Commission on Dental Accreditation to affirm a program’s reported discontinuance effective date or planned closure date and to remove a program from the Commission’s accredited program listing, when a program either 1) voluntarily discontinues its participation in the accreditation program and no longer enrolls students/residents who matriculated prior to the program’s reported discontinuance effective date or 2) is closed by the sponsoring institution.

Intent to Withdraw: A formal warning utilized by the Commission on Dental Accreditation to notify an accredited program and the communities of interest that the program’s accreditation will be withdrawn if compliance with accreditation standards or policies cannot be demonstrated by a specified date. The warning is usually for a six-month period, unless the Commission extends for good cause. The Commission advises programs that the intent to withdraw accreditation may have legal implications for the program and suggests that the institution’s legal counsel be consulted regarding how and when to advise applicants and students of the Commission’s accreditation actions. The Commission reserves the right to require a period of non-enrollment for programs that have been issued the Intent to Withdraw warning.

Revised: 2/16; 8/13; Reaffirmed: 8/18

Withdraw: An action taken by the Commission when a program has been unable to demonstrate compliance with the accreditation standards or policies within the time period specified. A final action to withdraw accreditation is communicated to the program and announced to the communities of interest. A statement summarizing the reasons for the Commission’s decision and comments, if any, that the affected program has made with regard to this decision, is available upon request from the Commission office. Upon withdrawal of accreditation by the Commission, the program is no longer recognized by the United States Department of Education. 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. Students who enroll in a program after the accreditation has been withdrawn will not be considered graduates of a Commission accredited program. Such graduates may be ineligible for certification/licensure examinations.

Revised 6/17; Reaffirmed: 8/18; 8/13; 8/10, 7/07, 7/01; CODA: 12/87:9

Denial: An action by the Commission that denies accreditation to a developing program (without enrollment) or to a fully operational program (with enrollment) that has applied for accreditation. Reasons for the denial are provided. Denial of accreditation is considered an adverse action.

Reaffirmed: 8/18; 8/13; Adopted: 8/11

B. APPLICATION FOR ACCREDITATION FOR FULLY OPERATIONAL PROGRAMS WITH ENROLLMENT AND WITHOUT ACCREDITATION

Those programs that have graduated at least one class of students/residents and are enrolling students/residents in every year of the program are considered fully operational. These programs will complete the self-study document and will be considered for the accreditation status of “approval with reporting requirements” or “approval without reporting requirements” following a comprehensive site visit (Please see procedures for the conduct of a comprehensive site visit). Students/Residents who are enrolled in the program at the time accreditation is granted, and who successfully complete the program, will be considered graduates of an accredited program. Students/Residents who graduated from the program prior to the granting of accreditation will not be considered graduates of an accredited program.

Because accreditation is voluntary, a program may withdraw its application for accreditation at any time prior to the Commission taking action regarding an accreditation status. When an accreditation status has been granted, the program has the right to ask that the status be discontinued at any time for any reason.

Upon request, the Commission office will provide more specific information about types of programs, application forms, deadlines for submission and accreditation standards. Program administrators and faculty are encouraged to consult with Commission staff during this initial process.

An application fee must be submitted with a program’s application for accreditation. Programs should contact the Commission office for the current fee schedule.

The following steps apply:

1. An application for accreditation is completed by the program and submitted to the Commission on Dental Accreditation, along with appropriate documentation and application fee. The first opportunity for the Commission to consider the program, provided that the application is in order, is generally 12 to 18 months following the Commission’s formal acknowledgment of receipt of the application and initiation of the review process.
2. The completed application for accreditation is reviewed to determine whether the program, as proposed, appears to have the potential to meet minimum requirements. The application is considered complete when the Criteria for Granting Accreditation have been addressed as part of the application process.
3. If it is determined that the Criteria for Granting Accreditation have been addressed, a site visit is scheduled four (4) to seven (7) months following completion of the application review.
4. If changes occur within the program between the date of submission of the application and scheduled site visit, the site visit may be delayed.
5. After the site visit has been conducted, the visiting committee submits a draft report to the Commission office.
6. Within four (4) to six (6) weeks following the site visit, the preliminary draft of the site visit report is transmitted to the institution for consideration and comment prior to review by the discipline-specific Review Committee and the Commission.
7. The visiting committee’s report and the institution’s response to the preliminary report are transmitted to the discipline-specific Review Committee for consideration at its meeting prior to the Commission meeting.
8. The Commission then considers the Review Committee’s report and takes action on the accreditation status.
9. The Commission’s action regarding accreditation status and the final site visit report are transmitted to the institution within thirty (30) days of the Commission’s meeting.

Time Limitation for Review of Applications: The review of an application will be terminated if an institution fails to respond to the Commission's requests for information for a period of six (6) months. In this case, the institution will be notified that the application process has been terminated. If the institution wishes to begin the process again, a new application and application fee must be submitted.

Revised: 2/21; 8/16; 2/16; 8/13; 7/08; Reaffirmed: 8/18; 8/13; 8/10; Adopted: 8/02

C. APPLICATION FOR INITIAL ACCREDITATION FOR DEVELOPING PROGRAMS

A program which has not enrolled and graduated at least one class of students/residents and does not have students/residents enrolled in each year of the program is defined by the Commission as "developing." The same review steps that apply for Application for Accreditation for Fully Operational Programs with Enrollment and Without Accreditation apply to Application for Initial Accreditation for Developing Programs.

The developing program must not enroll students/residents until initial accreditation status has been obtained. Once a program is granted "initial accreditation" status, a site visit will be conducted in the second year of programs that are four or more years in duration and again prior to the first class of students/residents graduating. Programs that are less than four (4) years in duration will be site visited again prior to the first class of students/residents graduating.

An institution which has made the decision to initiate and seek accreditation for a program that falls within the Commission on Dental Accreditation's purview is required to submit an application for accreditation. "Initial accreditation" status may then be granted to programs which are developing, according to the accreditation standards.

Because accreditation is voluntary, a program may withdraw its application for accreditation at any time prior to the Commission taking action regarding an accreditation status. The initial accreditation status is granted based upon one or more site evaluation visit(s) and until the program is fully operational. When an accreditation status has been granted, the program has the right to ask that the status be discontinued at any time for any reason.

Upon request, the Commission office will provide more specific information about types of programs, application forms, deadlines for submission and accreditation standards. Program administrators and faculty are encouraged to consult with Commission staff during this initial process.

An application fee must be submitted with a program's application for initial accreditation. Programs should contact the Commission office for the current fee schedule.

The following steps apply:

1. An application for accreditation is completed by the program and submitted to the Commission on Dental Accreditation, along with appropriate documentation and application fee. The first opportunity for the Commission to consider the program, provided that the application is in order, is generally 12 to 18 months following the Commission's formal acknowledgment of receipt of the application and initiation of the review process.
2. The completed application for accreditation is reviewed to determine whether the program, as proposed, appears to have the potential to meet minimum requirements. The application is considered complete when the Criteria for Granting Accreditation have been addressed as part of the application process.

3. If it is determined that the Criteria for Granting Accreditation have been addressed, a site visit is scheduled four (4) to seven (7) months following completion of the application review.
4. If changes occur within the program between the date of submission of the application and scheduled site visit, the site visit may be delayed.
5. After the site visit has been conducted, the visiting committee submits a draft report to the Commission office.
6. Within four (4) to six (6) weeks following the site visit, the preliminary draft of the site visit report is transmitted to the institution for consideration and comment prior to review by the discipline-specific Review Committee and the Commission.
7. The visiting committee's report and the institution's response to the preliminary report are transmitted to the discipline-specific Review Committee for consideration at its meeting prior to the Commission meeting.
8. The Commission then considers the Review Committee's report and takes action on the accreditation status.
9. The Commission's action regarding accreditation status and the final site visit report are transmitted to the institution within thirty (30) days of the Commission's meeting.

Time Limitation for Review of Applications: The review of an application will be terminated if an institution fails to respond to the Commission's requests for information for a period of six (6) months. In this case, the institution will be notified that the application process has been terminated. If the institution wishes to begin the process again, a new application and application fee must be submitted.

Revised: 2/21; 8/16; 2/16; 8/13; 7/08, 8/02, 7/01; Reaffirmed: 8/18; 8/13; 8/11, 8/10

1. Enrollment Of Students In A Developing Program Prior To Granting Of Initial Accreditation Status:

An additional purpose of accreditation recognized by the United States Department of Education (USDE) is the protection of the public through the identification of qualified personnel to staff the health care system. Therefore, the Commission on Dental Accreditation established accreditation classifications, which have proven to be acceptable to educational institutions. Published definitions are a widely recognized means for carrying out accreditation functions.

“Initial accreditation” status is an accreditation classification that is applicable to developing programs. It is granted when a proposed or developing program demonstrates that it has the potential to meet the accreditation standards.

For this reason, the Commission is firm in its policy that the developing program must not enroll students/residents until “initial accreditation” status has been obtained. If a program enrolls students/residents without first having been granted “initial accreditation” status, the Commission will not accept the application for accreditation until after the first enrolled class has graduated. In addition, the Commission expects that the program will notify all students/residents enrolled of the possible ramifications of enrollment in a program operating without accreditation. The Commission will also notify the applicable state board of dentistry.

When “initial accreditation” status is denied and the program wishes to reapply, it is the responsibility of the institution to make use of all possible resources, including consultation with the Commission on Dental Accreditation. (Refer to the Policy on Public Disclosure and Confidentiality for additional information regarding the announcement of an action to deny accreditation).

Revised: 2/16; 7/08, 8/02, 7/96; Reaffirmed: 8/18; 8/13; 8/10, 7/07, 7/01; CDE: 12/74:19

2. Time Limitation For Initial Accreditation:

The classification of “initial accreditation” granted to dental and dental-related educational programs will be terminated at the end of two (2) years following the projected enrollment date if students/residents have not been enrolled. (See the Commission’s Policy on Non-Enrollment of First Year Students for further information).

Revised: 8/02; Reaffirmed: 8/18; 8/13; 8/10; CODA: 05/80:12

D. CRITERIA FOR GRANTING ACCREDITATION

The application for accreditation of a dental or dental-related program is considered complete when the following criteria, as applicable, have been adequately addressed in the application.

- a. A dean/program director/program administrator, as applicable, who meets the requirements of the discipline-specific standards, has been employed at the time the application is submitted and at least six (6) months prior to a projected accreditation site visit.
- b. The program is sponsored by an institution that, at the time of the application, complies with the discipline-specific accreditation standards related to institutional accreditation.
- c. A strategic plan/outcomes assessment process, which will regularly evaluate the degree to which the program’s stated goals and objectives are being met, is developed.
- d. The long and short-term financial commitment of the institution to the program is documented.
- e. Contractual agreements are drafted and signed providing assurance that a program dependent upon the resources of a variety of institutions and/or extramural clinics and/or other entities has adequate support.
- f. A defined student/resident admission process and due process procedures are developed.
- g. A projection of the number, qualifications, assignments and appointment dates of faculty is developed.
- h. An explanation is included of how the curriculum was developed including who developed the curriculum and the philosophy underlying the curriculum. If curriculum materials are based on or are from an established education program, there must be documentation that permission was granted to use these materials.
- i. The first-year curriculum with general course and specific instructional objectives, learning activities, evaluation instruments (including, as applicable, laboratory evaluation forms, sample tests, quizzes, and grading criteria) is developed.
- j. As applicable, courses for the subsequent years of the curriculum are developed, including general and specific course objectives.
- k. If the capacity of the facility does not allow all students to be in laboratory, pre-clinical laboratory and/or clinic at the same time, a plan documenting how students/residents will spend laboratory, pre-clinical and/or clinical education sessions has been developed and is included.
- l. As applicable, evaluation instruments for laboratory, pre-clinical, clinical, and clinical enrichment experiences are developed.
- m. As applicable, policies and procedures such as a patient recruitment system; patient classification system; an ionizing radiation policy; an infection control policy; and a student/resident tracking system are developed.
- n. As applicable, the adequacy of the patient caseload in terms of size, variety and scope to support required clinical experiences is available.
- o. Class schedule(s) noting how each class will utilize the facility are developed.
- p. As applicable, diagrams or blueprints of the didactic, laboratory, pre-clinical laboratory and clinical facilities, and equipment needs are developed to support the anticipated enrollment date.

Revised: 8/16; 8/10, 7/08, 8/03; Reaffirmed: 8/19; 8/13; Adopted: 8/02

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E. POLICIES AND PROCEDURES FOR ACCREDITATION OF PROGRAMS IN A NEW DENTAL EDUCATION AREA OR DISCIPLINE

In the initiation of an accreditation review process for programs in a dental education area or discipline, the Commission on Dental Accreditation seeks only to ensure the quality of the education programs in the area or discipline, for the benefit and protection of both the public and students/residents. The Commission's accreditation process is intended to promote and monitor the continuous quality and improvement of dental education programs and does not confer dental specialty status nor endorse dental disciplines.

Items 1 through 4 listed below provide a framework for the Commission in determining whether a process of accreditation review should be initiated for the new dental education area or discipline. Each item must be addressed in a formal, written request to establish an accreditation process for programs in an area or discipline of dentistry.

1. Does the dental education area or discipline align with the accrediting agency's mission and scope?

Elements to be addressed:

- Define the nationally accepted scope of the dental education area or discipline.
- List the nationally accepted educational goals and objectives of the dental education area or discipline.
- Describe how the area or discipline aligns with the Commission on Dental Accreditation's mission and scope.
- Describe the quality of the dental education area or discipline, and need for accreditation review of the programs, as an important aspect to the health care of the general public. Include evidence that the area of knowledge is important and significant to patient care and dentistry.
- Provide evidence that the programs are academic programs sponsored by an institution accredited by an agency legally authorized to operate and recognized by the United States Department of Education or, as applicable, by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS), rather than a series of continuing education experiences.
- Describe the sponsoring, professional organization/association(s), if any, and (if applicable) the credentialing body, including the following information:
 - number of members;
 - names and contact information of association officers;
 - list of sponsored continuing education programs for members within the last five (5) years; and
 - for credentialing body: exam criteria; number of candidates; and pass rate for the past five (5) years.

2. Is there a sufficient body of knowledge to educate individuals in a distinct dental education area or discipline, not merely one or more techniques?

Elements to be addressed:

- Describe why this area of knowledge is a distinct dental education area or discipline, rather than a series of just one or more techniques.
- Describe how scientific dental knowledge in the education area or discipline is substantive to educating individuals in the education area or discipline.
- Document the complexity of the body of knowledge of the education area by identifying specific techniques and procedures.

- List the nationally accepted competency statements and performance measures for the dental education area.
 - Identify the distinct components of biomedical, behavioral and clinical science in the dental education area or discipline.
 - Provide documentation that there is a body of established, substantive, scientific dental knowledge that underlies the dental education area or discipline.
 - Document that the dental education program is the equivalent of at least one twelve-month full-time academic year in length.
 - Describe the current and emerging trends in the dental education area or discipline; and
 - Document that dental health care professionals currently provide health care services in the identified dental education area or discipline.
3. Do a sufficient number of established programs exist and contain structured curricula, qualified faculty and enrolled individuals so that accreditation can be a viable method of quality assurance?

Elements to be addressed:

- Document that the educational program is comprised of formal curriculum at the postsecondary or postgraduate level of education leading to a bona fide educational credential (certificate or degree) that addresses the scope, depth and complexity of the higher education experience, rather than a series of continued education courses.
- Describe the historical development and evolution of educational programs in the dental education area or discipline. Do not submit information on the history of the sponsoring organization.
- Provide a list of all the currently operational programs in the dental education area or discipline, including the following information:
 - a. sponsoring institution;
 - b. name and qualifications of the program director;
 - c. number of full-time and part-time faculty (define part-time for each program) and list the academic credentials required for these faculty;
 - d. curriculum (academic calendars, class schedules, student/resident competencies, syllabi that address scope, depth and complexity of the higher education experience, including course outlines for each course, formal approval or acknowledgment by the parent institution that the courses or curricula in the education area meet the institution's academic requirements for advanced education);
 - e. textbooks and journals, or other learning resources used within the educational program;
 - f. evidence that the program is a bona fide higher education experience that addresses the scope, depth and complexity of higher education, rather than preceptorships or a series of continuing education courses;
 - g. outcomes assessment methods;
 - h. minimum length of the program for full-time students/residents;
 - i. certificate and/or degree or other credential awarded upon completion;
 - j. number of enrolled individuals per year for at least the past five (5) years; and number of graduates per year for at least the past five (5) years. If the established education programs have been in existence less than five (5) years, provide information since its founding;
 - k. confirmation that the program in the education area would seek voluntary accreditation review, if available;
 - l. programs' recruitment materials (e.g. bulletin, catalogue); and
 - m. evidence that the programs in the discipline are legally authorized to operate by the relevant state or government agencies.

4. Is there evidence of need and support from the public and professional communities to sustain educational programs in the discipline?

Elements to be addressed:

- Provide evidence of the ability to perform a robust, meaningful peer-reviewed accreditation process including a sufficient number of peers to conduct reviews at all levels of the Commission, as needed.
- List states where graduates of the dental education area or discipline are recognized for licensure and/or practice.
- Provide evidence of the potential for graduates to obtain employment, including the following information:
 - Employment placement rates (when available);
 - Documentation of employment/practice opportunities/settings; and
 - Evidence of career opportunities, student interest, and an appropriate patient base.

Adopted: 8/19

(Former Policies and Procedures for Accreditation of Programs in Areas of Advanced Dental Education and Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation)

F. SELF-STUDY GENERAL INFORMATION

In preparation for a site visit, institutions are required to complete a self-study for each program being evaluated. A self-study involves an analysis of the program in terms of the accreditation standards and an assessment of the effectiveness of the entire educational program. It includes a review of the relevance of all its activities to its stated purposes and objectives and a realistic appraisal of its achievements and deficiencies. The self-study process permits a program to measure itself qualitatively prior to evaluation by an on-site committee of peers in education and the profession. On-site evaluation assesses the degree to which the accreditation standards are met and assists the program in identifying strengths and weaknesses.

The self-study manual includes questions which require qualitative evaluation and analysis of the educational program. The intent of the self-study process is to identify program strengths and weaknesses. Latitude is permitted in interpreting questions to meet the specific needs of the program; however, Commission staff should be consulted if revisions are planned.

Visiting committee members review the completed self-study documents in preparation for conducting an on-site review. Any requests by committee members for additional materials relating to the on-site review are forwarded to the institution by the Commission staff, when staff attends the visit, or site visit chair. All such requests are compiled into one official communication from the Commission staff or site visit chair to the institution. Individual site visitors may not request additional material or information directly from an institution. The institution's response serves as an addendum to the self-study document.

The sponsoring institution is required to forward a copy of the completed self-study document to each member of the visiting committee and to the Commission office no later than sixty (60) days prior to the scheduled site visit. If the self-study document is submitted with insufficient time for site visitor review, the visit may be canceled. Further, if an opportunity to reschedule the visit within the same calendar year

is not available, the Commission will be informed. Failure to submit the self-study within the expected deadline could affect the accreditation status of the program.

Guidelines for preparing self-study documents for each discipline, including more specific information and instructions, and Electronic Submission Guidelines, are available upon request from the Commission office or on the Commission's website.

Revised: 1/20; 8/19; 8/14; Reaffirmed: 8/10

G. PRE-VISIT GENERAL INFORMATION

The Commission proposes and confirms dates for the site visit, assists the institution with pre-visit plans and communicates with the visiting committee regarding transportation, hotel accommodations and the program's accreditation history.

A site visit focuses only on the program(s) in operation at the time of the visit. The visiting committee will expect, however, to be apprised of any change in admissions, facilities, faculty, financial support or curriculum which is contemplated, but not yet implemented.

Although the Commission provides a suggested site visit schedule, the institution is responsible for preparing the actual schedule. Any necessary modifications to the schedule proposed by the institution are made prior to the visit either by Commission staff or by the staff representative assigned to the visiting committee. The schedule is also reviewed at the beginning of the visit to determine whether any other changes are indicated. The institution notifies all individuals associated with the institution, who are participating in the review, of the time and place of their scheduled conferences with the visiting committee.

Reaffirmed: 8/19; 8/10

H. POLICY ON THIRD PARTY COMMENTS

The Commission currently publishes, in its accredited lists of programs, the year of the next site visit for each program it accredits. In addition, the Commission posts its spring and fall site visit announcements on the Site Visit Process and Schedule area of the Commission's website for those programs being site visited in the current and next year. Special site visits and initial accreditation site visits for developing programs may be scheduled after the posting on the Commission's website; thus, the specific dates of these site visits may not be available for publication. Parties interested in these specific dates (should they be established) are encouraged to contact the Commission office. The Commission will request written comments from interested parties on the CODA website.

The United States Department of Education (USDE) procedures require accrediting agencies to provide an opportunity for third-party comment, either in writing or at a public hearing (at the accrediting agencies' discretion) with respect to institutions or programs scheduled for review. All comments must relate to accreditation standards for the discipline and required accreditation policies. In order to comply with the Department's requirement on the use of third-party comment regarding program's qualifications for accreditation or initial accreditation, the following procedures have been developed.

Those programs scheduled for regular review must solicit third-party comments through appropriate notification of communities of interest and the public such as faculty, students, program administrators, dental-related organizations, patients, and consumers at least ninety (90) days prior to their site visit. The

notice should indicate the deadline of sixty (60) days for receipt of third-party comments in the Commission office and should stipulate that signed or unsigned comments will be accepted, that names and/or signatures will be removed from comments prior to forwarding them to the program, and that comments must pertain only to the standards for the particular program or policies and procedures used in the Commission's accreditation process. The announcement may include language to indicate that a copy of the appropriate accreditation standards and/or the Commission's policy on third-party comments may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611, or by calling 1-312-440-4653.

All comments submitted must pertain only to the standards relative to the particular program being reviewed or policies and procedures used in the accreditation process. Comments will be screened by Commission staff for relevancy. Signed or unsigned comments will be considered. For comments not relevant to these issues, the individual will be notified that the comment is not related to accreditation and, where appropriate, referred to the appropriate agency. For those individuals who are interested in submitting comments, requests may be made to the Commission office.

All relevant comments will have names and/or signatures removed and will then be referred to the program at least fifty (50) days prior to the site visit for review and response. A written response from the program should be provided to the Commission office and the visiting committee fifteen (15) days prior to the site visit. Adjustments may be necessary in the site visit schedule to allow discussion of comments with proper personnel. Negative comments received after the established deadline of sixty (60) days prior to the site visit will be handled as a complaint. Any unresolved issues related to the program's compliance with the accreditation standards will be reviewed by the visiting committee while on-site.

Programs with the status of initial accreditation, and programs seeking initial accreditation must solicit comment through appropriate notification of communities of interest and the public such as faculty, students, program administrators, dental-related organizations, patients, and consumers utilizing the procedures noted above.

On occasion, programs may be scheduled for special focused or special comprehensive site visits and because of the urgency of the visit, solicitation of third-party comments within the ninety (90) day timeframe may not be possible. However, third party comments must be solicited at the time the program is notified of the Commission's planned site visit, typically sixty (60) days in advance of the visit. In this case, the timeframe for solicitation of third-party comments will be shortened. The notice should indicate the deadline of thirty (30) days for receipt of third-party comments in the Commission office and should stipulate that signed or unsigned comments will be accepted, that names and/or signatures will be removed from comments prior to forwarding them to the program, and that comments must pertain only to the standards for the particular program or policies and procedures used in the Commission's accreditation process. All relevant comments will have names and/or signatures removed and will then be referred to the program at least twenty (20) days prior to the site visit for review and response. A written response from the program should be provided to the Commission office and the visiting committee ten (10) days prior to the site visit. Adjustments may be necessary in the site visit schedule to allow discussion of comments with proper personnel. Any unresolved issues related to the program's compliance with the accreditation standards will be reviewed by the visiting committee while on-site. Negative comments received after the established deadline of thirty (30) days prior to the site visit will be handled as a complaint.

Revised: 8/19; 8/18; 2/18; 2/16; 2/15; 8/13; 8/12, 8/11, 7/09, 8/02, 1/97; Reaffirmed: 8/13; 8/10, 1/03;
Adopted: 7/95

I. SITE VISITS

The Commission on Dental Accreditation formally evaluates accredited programs at regular intervals. Comprehensive site visits based on a self-study are routinely conducted every seven years. Site visits of advanced dental education programs in oral and maxillofacial surgery are conducted at five year intervals.

Special site visits (which may be either focused or comprehensive in scope) are conducted when it is necessary for the Commission to review information about the program that can only be obtained or documented on-site. Information on special site visits is included elsewhere in this manual.

Revised: 8/18; 1/14; Reaffirmed: 8/19; 8/10

1. Overview And Accreditation Cycle: The Commission requires that each accredited program, or program seeking initial accreditation, conduct a self-analysis and submit a self-study report prior to its on-site review. Using the Commission's self-study guide helps the program ensure that its self-study report addresses, assesses critically, and documents the degree of compliance with each of the accreditation standards and with the program's own stated goals.

The Commission expects that one of the goals of a dental or dental-related educational program is to prepare qualified individuals in their respective disciplines. Accredited programs must design and implement their own outcomes measures to determine the degree to which stated goals and objectives are being met. Results of this ongoing and systematically documented assessment process must be used to evaluate the program's effectiveness in meeting its goals, to improve program quality and to enhance student achievement.

All members of the visiting committee carefully review the self-study document prior to the on-site review. This initial assessment serves to identify areas where the program may not comply with the accreditation standards or to raise questions about information that is unclear. While on site, the visiting committee verifies the information provided in the self-study document and carefully assesses any unclear or problem areas. The verification process includes interviews with institutional personnel and review of program documentation. A recommendation is included in the report of the site visit when noncompliance with a standard is identified. If a particular standard is not addressed by the site visit report, the program is viewed as meeting that standard.

The site visit report, along with the institutional response to the report, serves as the Commission's primary basis for accreditation decisions. The report also guides chief executive officers and administrators of educational institutions in determining the degree of the program's compliance with the accreditation standards. The Commission, assisted by the visiting committees, identifies specific program deficiencies or areas of noncompliance with the standards, but it is the responsibility of the program to identify specific solutions or means of improvement.

Reaffirmed: 8/19; 8/10

2. Coordinated Site Visits: If an institution offers more than one dental education program, the Commission evaluates all programs during a single site visit whenever possible and may, at the program's/institution's request reduce the site visit date cycle to coordinate visitation to all programs at one time. Shared faculty, shared facilities and integrated curricula, as well as the time and expense involved in preparing for a visit, are among the reasons for coordinated evaluations. The Commission encourages the coordination of its evaluations with evaluations by regional and/or other nationally recognized accrediting associations. It will make every effort to coordinate its evaluations with

those of other associations if requested to do so by an institution. The Commission has conducted simultaneous evaluations with regional accrediting associations such as the Commission on Colleges of the Southern Association of Colleges and Schools and other specialized agencies such as the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or with state accrediting agencies such as the State Education Department, the University of the State of New York Division of College and University Evaluation. If an institution wishes to coordinate accreditation activities, the Commission should be contacted well in advance of the projected time of the site visit.

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

3. Institutional Review Process – Reminder Statement: The Commission on Dental Accreditation is recognized by the U.S. Department of Education (USDE) as an umbrella specialized accrediting agency for dental and dental-related disciplines. As a specialized accrediting agency, the Commission is responsible for the review of all dental, allied dental, and advanced dental educational programs. The Commission is also responsible for evaluating educational programs which are sponsored in a variety of educational settings, including hospitals. For this reason, when an institution sponsors multiple programs falling within the Commission’s accreditation purview, the institutional component is included as an integral part of the umbrella review process.

Although the Review Committees play a significant role in this broad-based review, the Commission has the final responsibility for ensuring that the impact of the programs on the sponsoring institution is considered.

Revised: 8/18; 7/97, 7/00; Reaffirmed: 8/19; 8/13; 8/10, 7/09, 1/03; CODA: 5/91:16, 1994

4. Policy On Cooperative Site Visits With Other Accreditors: The Commission encourages the coordination of its site visits with the accreditation reviews of other specialized or regional accrediting agencies. The Commission consults with institutional and program administrators to determine whether a coordinated visit can meet the accreditation needs of each agency involved in the visit. If so, a coordinated visit is scheduled. In order to protect the confidentiality of information gathered during the review, the cooperating agencies usually specify in advance the degree of access each will have to the other’s site visit documents and reports. Each visiting committee may develop its own report or certain sections of the report may meet the needs of the cooperating agencies.

The institution that sponsors the accredited program must request that a coordinated site visit be conducted. An offer to try to work cooperatively with other agencies is routinely included in the initial letter that announces an upcoming scheduled site visit by the Commission. If a request is received from the institution, the Commission contacts the other accrediting agencies. The agencies work together with the institution to attempt to develop a schedule or protocol that will meet the needs of both accrediting agencies and the institution.

The Commission requests the members of the visiting committees from other agencies sign the Commission’s Statement of Confidentiality in order to participate in interviews conducted by the Commission’s site visitors.

A reminder about the Commission’s willingness to conduct coordinated site visit is included periodically in the *CODA Communicator* e- newsletter.

Revised: 8/14; Reaffirmed: 8/19; 8/13; 8/10, 7/07, 7/01, 10/94, 6/92; CODA: 05/92:1, 2; 12/92:5

5. Policy On Special Site Visits: Special site visits are conducted when it is necessary for the Commission to review information about the program that can only be obtained or documented on-site. When necessary, special site visits are conducted to ensure the quality of the educational program, but are

used selectively in order to avoid perceived harassment of programs. A special site visit may be either focused, limited to specified standards, or comprehensive, covering all accreditation standards. In making recommendations to the Commission for a special site visit, the Review Committee will indicate the specific standards or required accreditation policy in question. The Commission will communicate these concerns to the program in the letter transmitting the action related to a special site visit. If a comprehensive special visit will be conducted, the program must prepare a self-study prior to the visit. If a focused visit will be conducted, the program will be required to complete some portions of the self-study and/or to develop some other materials related to the specific standards or required policies that have been identified as areas of concern. With the exception of a special site visit due to falsification of information, all costs related to special site visits are borne by the program, including an administrative special focused site visit fee. (See Invoicing Process for Special Focused Site Visits)

The Commission may conduct a special site visit for any of the following reasons:

- a. Failure to document compliance: A special site visit may be directed for an accredited program when, six (6) months prior to the time period allowed to achieve compliance through progress reports (eighteen (18) months if the program is between one and two years in length or two years if the program is at least two years in length), the program has not adequately documented compliance with the accreditation standards. The special site visit will be focused on the recommendations contained in the site visit report. Recommendations for which supplemental information or documentation is submitted after the last progress report or special site visit report is reviewed by the appropriate Review Committee or the Commission and that in the Commission's opinion requires on-site verification, shall be considered as not met for purposes of accreditation. Following the special site visit, if compliance is not demonstrated, the Commission will withdraw the program's accreditation unless the Commission extends the period for achieving compliance for good cause.
- b. Change within a program: A special site visit may be directed for an accredited program when a report of program change, review of annual survey data, or information received in other ways, indicates that changes in a program may have affected its ability to maintain compliance with the accreditation standards. The Commission may also request a special report from the involved program prior to conducting a special site visit. The Commission's Policy on Reporting Program Changes in Accredited Programs found in Section V.C of this manual provides details.
- c. Investigating complaints: A special site visit may be directed for an accredited program to investigate a complaint raising questions about the program's compliance with the accreditation standards. The Commission's Policy and Procedure Regarding Investigation of Complaints Against Educational Programs found in Section V.D of this manual provides details.
- d. Falsifying information: A special site visit may be directed for an accredited program to investigate the possible intentional falsification of information provided to the Commission. The Commission's policy on Integrity found in Section I.G provides details. The cost of such a special site visit is shared by the Commission and the program.
- e. Sites Where Educational Activity Occurs: The Commission's Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs found in Section V.R provides details.
- f. Other reasons: A special site visit may, on occasion, be directed for an accredited program to respond to a request to the Commission from the chief executive officer or program administrator. The Commission may also direct that a focused site visit is necessary for just cause if it determines that a program may be unable to maintain compliance with the accreditation standards.

Revised: 8/19

Invoicing Process for Special Focused Site Visits

In advance of the special focused site visit, the program must remit payment for the Administrative Fee (\$5,000 in 2020 and 2021) plus \$1,500 per site visitor/staff attending visits up to two (2) days in length.

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Site visits that are three (3) or more days will be billed an additional \$500 per site visitor/staff for each additional day; further, if additional airfare or transportation expenses are incurred, these will be assessed to the program. Failure to submit the special focused site visit fee in advance of the visit may result in a delay of the visit and additional rescheduling cost to the program, and may impact the program's accreditation status. See Program Fee Policy.

Revised: 1/20; 8/19; 2/19; 2/18; 2/17; 8/16; 2/16; 8/14; 8/13; 1/00, 1/99, 1/98; Reaffirmed: 8/13; 8/10, 7/06;
Adopted: 7/96

J. SITE VISITORS

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

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

During the term of service as a commissioner, these individuals may not independently consult with a CODA-accredited program or a program applying for CODA accreditation. In addition, site visitors serving on the Commission may not serve on a site visit team during their terms.

All other active site visitors who independently consult with educational programs accredited by CODA or applying for accreditation must identify all consulting roles to the Commission and must file with the Commission a letter of conflict acknowledgement signed by themselves and the institution/program with whom they consulted. All conflict of interest policies as noted elsewhere in this document apply. Contact the CODA office for the appropriate conflict of interest declaration form.

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

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

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

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

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

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

1. Appointments: All site visitor appointments are made annually for one year terms for a maximum of six consecutive years. Following the maximum appointment period of six consecutive years, the site visitor may reapply for appointment after one year. In exceptional circumstances the Review Committee may recommend that the Commission alter an individual's term limits. Site visitors assist the Commission in a number of ways, including: developing accreditation standards, serving on special committees, and serving as site visitors on visits to predoctoral, advanced dental and allied dental education programs.

The Commission reviews nominations received from its communities of interest, including discipline-specific sponsoring organizations and certifying boards. Individuals may also self-nominate. In addition to the mandatory subject expertise, the Commission always requests nominations of potentially under-represented ethnic groups and women, and makes every effort to achieve a pool of site visitors with broad geographic diversity to help reduce site visit travel expenses.

Site visitors are appointed/reappointed annually and required to sign the Commission's Conflict of Interest Statement, the Agreement of Confidentiality, the Copyright Assignment, Licensure Attestation, and the ADA's Professional Conduct Policy and Prohibition Against Harassment. Site visitors must also complete annual training and will receive periodic updates on the Commission's policies and procedures related to the Health Insurance Portability and Accountability Act (HIPAA). The Commission office stores these forms for seven (7) years. In addition, site visitors must comply with training requirements, the ADA's travel policy and other CODA Rules and Regulations. The Commission may remove a site visitor for failing to comply with the Commission's policies and procedures, continued, gross or willful neglect of the duties of a site visitor, or other just cause as determined by the Commission.

Subsequent to appointment/reappointment by the Commission, site visitors receive an appointment letter explaining the process for appointment, training, and scheduling of Commission site visitors.

Revised: 8/19; 8/18; 8/14; 7/08; Reaffirmed: 8/10, 1/98, 8/02; CODA: 07/94:9, 01/95:10

2. Criteria For Nomination Of Site Visitors: For predoctoral dental education programs, the Commission solicits nominations for site visitors from the American Dental Education Association to serve in five of six roles on dental education program site visits. The site visitor roles are Chair, Basic Science, Clinical

Science, Curriculum, and Finance. Nominations for the sixth role, national licensure site visitor, are solicited from the American Association of Dental Boards.

For advanced dental education programs, the Commission solicits nominations for site visitors from the discipline-specific sponsoring organizations and their certifying boards.

For allied dental education programs, the American Dental Education Association is an additional source of nominations that augments, not supersedes, the nominations from the Commission's other participating organizations, American Dental Assistants Association (ADAA), American Dental Hygienists' Association (ADHA) and National Association of Dental Laboratories (NADL)

Revised: 8/18; 8/15; 8/14; 8/12; Reaffirmed: 8/19; 8/10, 7/07, 7/01; CODA: 05/93:6-7

The Commission requests all agencies nominating site visitors to consider regional distribution, gender and minority representation and previous experience as a site visitor. Although site visitors are nominated by a variety of sources, the Commission carefully reviews the nominations and appoints site visitors on the basis of need in particular areas of expertise. The pool of site visitors is utilized for on-site evaluations, for special consultations and for special or Review Committees.

All site visitors are appointed for a one-year term and may be re-appointed annually for a total of six consecutive years. Appointments are made at the Winter (January/February) Commission meeting and become effective with the close of the ADA annual session in the Fall.

Revised: 1/20; 8/19; 8/18; 8/14; 8/12, 7/09, 7/07, 7/01; Reaffirmed: 8/10; Adopted: 7/98

A. Predoctoral Dental Education: The accreditation of predoctoral dental education programs is conducted through the mechanism of a visiting committee. Membership on such visiting committees is general dentistry oriented rather than discipline or subject matter area oriented. The composition of such committees shall be comprised, insofar as possible, of site visitors having broad expertise in dental curriculum, basic sciences, clinical sciences, finance, national licensure (practitioner) and one Commission staff member. The evaluation visit is oriented to an assessment of the educational program's success in training competent general practitioners.

Although a basic science or clinical science site visitor may have training in a specific basic science or discipline-specific advanced dental education area, it is expected that when serving as a member of the core committee evaluating the predoctoral program, the site visitor serves as a general dentist. Further, it is expected that all findings, conclusions or recommendations that are to be included in the report must have the concurrence of the visiting committee team members to ensure that the report reflects the judgment of the entire visiting committee.

In appointing site visitors, the Commission takes into account a balance in geographic distribution as well as representation of the various types of educational settings and diversity. Because the Commission views the accreditation process as one of peer review, predoctoral dental education site visitors, with the exception of the national licensure site visitor, are affiliated with dental education programs.

The following are criteria for the six roles of predoctoral dental education site visitors:

Chair:

- Must be a current dean of a dental school or have served as dean within the previous three (3) years.

- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission and as a previous site visitor.

Basic Science:

- Must be an individual who currently teaches one or more biomedical science courses to dental education students or has done so within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission or as a previous site visitor.

Clinical Science:

- Must be a current clinical dean or an individual with extensive knowledge of and experience with the quality assurance process and overall clinic operations.
- Has served in the above capacity within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission or as a previous site visitor.

Curriculum:

- Must be a current academic affairs dean or an individual with extensive knowledge and experience in curriculum management.
- Has served in the above capacity within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission or as a previous site visitor.

Finance:

- Must be a current financial officer of a dental school or an individual with extensive knowledge of and experience with the business, finance and administration of a dental school.
- Has served in the above capacity within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission or as a previous site visitor.

National Licensure:

- Should be a current clinical board examiner or have served in that capacity within the previous three (3) years.
- Should have an interest in the accreditation process.

Revised: 8/18; 2/18; 2/16; 8/14; 1/99; Reaffirmed: 8/19; 8/10, 7/07, 7/01; CODA: 07/05, 05/77:4

- B. Advanced Dental Education: In the disciplines of dental public health, dental anesthesiology, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, oral medicine, orofacial pain, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics and prosthodontics, sponsoring organizations are advised that candidates recommended to serve as site visitors be board certified and/or have completed or participated in a CODA-accredited advanced dental education program in the discipline and must have experience in advanced dental education as teachers or administrators. Each applicable Review Committee will determine if board certification is required. Some sponsoring organizations have established additional criteria for their nominations to the Commission.

- C. Allied Dental Education in Dental Hygiene: In appointing site visitors, the Commission takes into account a balance in geographic distribution, representation of the various types of educational settings, and diversity. Because the Commission views the accreditation process as one of peer review, the dental hygiene education site visitors are affiliated with dental hygiene education programs.

The following are criteria for selection of dental hygiene site visitors:

- a full-time or part-time appointment with a dental hygiene program accredited by the Commission on Dental Accreditation;
- a baccalaureate or higher degree;
- background in educational methodology;
- accreditation experience through an affiliation with a dental hygiene education program that has completed a site visit; and
- accreditation experience within the previous three (3) years.

Revised: 8/21; 8/18; 8/16; 8/14; Reaffirmed: 8/19; 8/10; Adopted: 7/09

- D. Allied Dental Education in Dental Assisting: The following are criteria for selection of dental assisting site visitors:

- certification by the Dental Assisting National Board as a dental assistant;
- full-time or part-time appointment with a dental assisting program accredited by the Commission on Dental Accreditation;
- equivalent of three (3) years full-time dental assisting teaching experience;
- baccalaureate or higher degree;
- demonstrated knowledge of accreditation; and
- current background in educational methodology.

Revised: 8/18; 8/16; 8/14; 2/13, 1/08, 1/98, 2/02; Reaffirmed: 8/19; 8/10, 7/08; CODA: 07/95:5

- E. Allied Dental Education in Dental Laboratory Technology: The following are criteria for selection of dental laboratory technology site visitors:

- background in all five (5) dental laboratory technology specialty areas: complete dentures, removable dentures, crown and bridge, dental ceramics, and orthodontics;
- background in educational methodology
- knowledge of the accreditation process and the Accreditation Standards for Dental Laboratory Technology Education Programs;
- Certified Dental Technician (CDT) credential through the National Board of Certification (NBC); and
- full or part-time appointment with a dental laboratory technology education program accredited by the Commission on Dental Accreditation or previous experience as a Commission on Dental Accreditation site visitor.

Revised: 8/18; 8/14; Reaffirmed: 8/19; 8/10; Adopted: 07/09

- F. Allied Dental Education in Dental Therapy: The following are criteria for selection of dental therapy site visitors:

- a full-time or part-time appointment with a predoctoral dental or allied dental education program accredited by the Commission on Dental Accreditation or an accredited (or recognized) dental therapy program;
- a baccalaureate or higher degree;
- background in educational methodology;

- accreditation experience through an affiliation with a dental therapy, allied, or predoctoral dental program that has completed a site visit;*
- accreditation experience within the previous three (3) years;*
- must either be a licensed dentist educator (general dentist) or licensed dental therapist educator; and
- the “licensed dentist educator” may be predoctoral dental educator site visitors (*i.e., a general dentist educator who serves as curriculum or clinical predoctoral site visitor*) or allied dental educator site visitors.

*temporarily waived for dental therapist educator position until after CODA accredits a minimum of three (3) dental therapy education programs.

Dental therapy site visit team consist of three (3) members as follows: one (1) dental therapist educator, one (1) predoctoral dentist educator (curriculum or clinical site visitor), and one (1) additional site visitor that could be either a second dental therapist educator, second predoctoral dentist educator, or an allied dentist educator. If needed due to lack of dental therapy educator availability, such that if a dental therapy educator cannot be identified in accordance with Commission policy then the three-person site visit team may be composed of predoctoral educators and allied dentists, three (3) people total in any combination.

Revised: 2/21; 8/18; 8/16; Reaffirmed: 8/19; Adopted: 02/16

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

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

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

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

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

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

4. Job Descriptions For Predoctoral Dental Education Visiting Committee Members:

A. Chair:

- Will conduct a briefing session with the entire visiting committee relative to the philosophy of the Commission on the approach, purpose and methodology of the conduct of the site visit on the evening prior to the first day of the site visit;
- Will be responsible for the continual reinforcement of the above concepts during the course of the site visit and for monitoring continually the conduct of the site visit;
- Will brief visiting committee members as to their role as a fact-finding and reporting committee and the appropriate protocol during the course of the site visit; including what is expected of each member in terms of kinds of activities and relative to the report of findings and conclusions and recommendations, with adequate background rationale for making recommendations and enumerating strengths and weaknesses in the education program being evaluated;
- Will lead all assigned conferences and executive sessions;
- Will serve as liaison between the visiting committee members and the dental administration and the executive administrators of the institution;
- Will make specific and special assignments to individual visiting committee members relative to evaluating and reporting on specific matters and sections of the site visit report, e.g. administrative organization, faculty, library facilities and resources, research program, facilities and equipment, admission process, hospital program(s), student achievement;
- Will be responsible for ensuring that site visitors fully understand their responsibility for reporting adequately, but succinctly, in their area of expertise (finance, curriculum, basic sciences, clinical sciences and national licensure);
- Will consult with the dental administration at regular intervals to discuss progress of the visit;
- Will be responsible, during executive sessions with visiting committee members, for the separation of recommendations from suggestions—focusing upon the recommendations which are to be included in the site visit report which are considered to be major, critical and essential to the conduct of the education program(s); suggestions for program enhancement are to be included as part of the narrative of the report;
- Will be responsible for the preparation of a written summary of the visiting committee's conclusions, findings, perceptions and observations of the program(s) in the form of suggestions and recommendations, as appropriate, for oral presentation during the exit interview with the Dean, and for presentation of an abbreviated summary during the exit interview with the institution's executive administrators.
- Will assess institutional effectiveness including:
 - Assessment of the school's mission statement;
 - Assessment and evaluation of the school's planning, and achievement of defined goals related to education, patient care, research and service;
 - Assessment of the school's outcomes assessment process; and
 - Evaluation of the school's interaction with other components of higher education, health care education or health care delivery systems.
- Will assess the effectiveness of faculty and staff including:
 - Assessment of the number and distribution of faculty in meeting the school's stated objectives;
 - Assessment of the school's faculty development process;
 - Assessment of the school's faculty governance;
 - Assessment of the school's measurement of faculty performance in teaching, patient care, scholarship and service; and
 - Assessment of the school's promotion and tenure process.

- B. Financial Site Visitor: Will confer with the sponsoring institution's chief financial officer(s) and the dental administration and its financial manager to assess the adequacy of the full spectrum of finance as it relates to the dental school including:
- Assessment of the operating budget and budgeting process;
 - Assessment of all sources of revenue (state, federal, tuition and fees, practice plans, etc.);
 - Evaluation of the maintenance of the facilities and learning resources to support the school's mission and goals;
 - Assessment of the school's compliance with applicable regulations;
 - Assessment of the resources for planned and/or future renovations and/or new construction; and
 - Assessment of the school's resources as they relate to its mission and goals.
- C. Curriculum Site Visitor: Will examine the education program and the education support services including:
- Admissions
 - Instruction
 - Curriculum Management
 - Behavioral Sciences
 - Practice Management
 - Ethics and Professionalism
 - Information Management and Critical Thinking
 - Student Services
- D. Basic Science Site Visitor: Will work closely with curriculum site visitor to ensure consistency of evaluation and assessment. During the formal and informal evaluation of the basic sciences, the site visitor will conduct personal interviews with students, faculty and departmental Chairs and during the assessment will focus on:
- Biomedical Sciences
 - Research Program
- E. Clinical Sciences Site Visitor: Within the limitations imposed by the length of the site visit, will examine and evaluate the preclinical and clinical portions of the predoctoral dental education program and activities in terms of the details of what is occurring in these areas and assess the quality of the education and experiences provided to students to prepare them for dental practice. Will work closely with curriculum site visitor to ensure consistency of evaluation and assessment. During the formal and informal evaluation of the preclinical and clinical sciences, will conduct personal interviews with students, faculty and departmental chairs and during the assessment will focus upon:
- Clinical Sciences
 - Patient Care Services
 - During the formal and informal evaluation of the clinical program, will conduct personal interviews with students, faculty and departmental chairs and during the assessment will focus upon:
 - stated objectives;
 - adequacy of instruction;
 - appropriateness of subject matter;
 - intra/extra-mural experiences;
 - student clinic requirements;
 - student performance evaluation mechanisms;
 - sterilization of instruments;
 - patient care policies;
 - laboratory tests for patients;

- patient physical examinations; and
- clinic administration.

F. National Licensure (Practitioner) Site Visitor: Will serve in the same capacity as the clinical sciences site visitor on the visiting committee.

Revised: 8/14; 7/07; Reaffirmed: 8/19; 8/10, 7/05; Adopted: 7/96; CODA: 01/99:1

5. Job Description For Advanced Dental Education Site Visitors: Dental Public Health, Endodontics, Oral and Maxillofacial Pathology, Oral and Maxillofacial Radiology, Oral and Maxillofacial Surgery (Residency and Fellowship), Orthodontics and Dentofacial Orthopedics (Residency and Fellowship), Pediatric Dentistry, Periodontics, Prosthodontics (Combined and Maxillofacial), and Advanced Education in General Dentistry, General Practice Residency, Oral Medicine, Orofacial Pain, and Dental Anesthesiology. Advanced dental education program site visitors will utilize the site visitors' evaluation report form for their respective area, conduct personal interviews with Program Directors, faculty and students, and assess the advanced dental education program focusing upon:

- administration and staff;
- admissions procedures;
- physical facilities and equipment;
- didactic program (biomedical, lecture, seminar and conference program)
- clinical program;
- evaluation of residents;
- research activities and requirements;
- library resources;
- intra/extra-mural experiences;
- hospital program; and
- teaching conducted by residents.

An assessment of the strengths and weaknesses of the advanced dental education program is based upon the published accreditation standards for each respective program.

Revised: 8/18; 8/14; 7/07, 7/99, 7/00; Reaffirmed: 8/19; 8/10, 7/01; CODA: 11/87

6. Job Description For Allied Dental Education Site Visitors:

A. Site Visit Chair

- Will function as chair/staff representative of visiting committee of site visitors evaluating the allied dental education programs in dental assisting, dental hygiene, dental therapy and dental laboratory technology;
- Will be responsible for the continual reinforcement of the Commission's procedures to be used for the site visit and for monitoring continually the conduct of the visit;
- Will brief site visitors as to their role as a fact finding and reporting committee and the appropriate protocol during the course of the site visit; including what is expected of each site visitor in terms of kinds of activities and relative to the report of findings and conclusions and recommendations, with adequate background rationale for making recommendations and enumerating strengths and weaknesses in the education program being evaluated;
- Will chair all conferences and meetings of the allied dental visiting committee, as well as those which occur during the visiting committee's executive sessions;
- Will be responsible for maintaining closely the site visit evaluation schedule;

- Will serve as liaison between the visiting committee and the allied dental visiting committee members;
- Will make specific and special assignments to individual visiting committee members relative to evaluating and reporting on specific matters and sections of the site visit report, e.g. administrative organization, faculty, library facilities and resources, research program facilities and equipment, admissions process, hospital program(s), student achievement;
- Will be responsible for ensuring that site visitors fully understand their responsibility for reporting adequately, but succinctly, in their area of expertise;
- Will consult with the allied dental administration at regular intervals to discuss progress of the visit;
- Will be responsible, during executive sessions with visiting committee members, for the separation of recommendations from suggestions – focusing upon the recommendations which are to be included in the site visit report which are considered major, critical and essential to the conduct of the education program(s). Suggestions for program enhancement are to be included as part of the narrative of the report; and
- Will be responsible for the preparation of a written summary of the visiting committee’s conclusions, finding, perceptions and observations of program(s) strengths, weaknesses, recommendations and suggestions for oral presentation during the exit interview with the dean, and for presentation of an abbreviated summary during the exit interview with the institution’s executive administrators.

B. Dentist: A dentist is also included, when at all possible, on site visits to dental assisting and dental hygiene programs in settings other than dental schools. An additional dentist site visitor will be added to dental school visiting committees when multiple programs are to be reviewed.

The role of the dentist team member during allied site visits includes the following responsibilities:

- Take notes during conferences;
- Conduct meeting with advisory committee, when applicable;
- Ensure confidentiality by waiting to begin the meeting until all affiliated school personnel have left the room;
- Introduce the visiting committee to the advisory committee members;
- Thank the members of the committee for meeting with the team and for their interest in and commitment to the specific allied program(s);
- Explain the purpose of the site visit;
- Discuss the Commission’s policy on confidentiality as it applies to the meeting and the entire site visit;
- Begin discussion of the following topics/questions:
 - a. How often the committee meets and the purpose or goals of the committee
 - b. Strengths/weaknesses of the students
 - c. Specific current committee activities and future goals or anticipated activities
- Ensure that all of the questions in the Site Visit Evaluation Report form under Standard 1. Institutional Effectiveness, Community Resources are answered during the meeting;
- Assist Curriculum site visitor in review of science courses;
- Review clinical courses and clinical evaluation mechanisms;
- Review learning resources – library & audiovisual materials/equipment (It is usually most efficient for this review to be conducted by the dentist site visitor only.);
- Review documentation in the self-study prior to visit;
- Conduct preclinical, clinical, and/or laboratory observations (on/off campus) with Curriculum site visitor;

- a. Extended campus laboratory facilities
 - b. Extramural clinical facilities
 - Review equipment and instruments using Site Visit Evaluation Report Checklist under Standard 4. Educational Support Services;
 - Formulate recommendations and suggestions; and
 - After the visit, review and critique preliminary draft of the site visit report.
- Revised: 2/16; 8/14; 7/07, 7/00, 7/99; Reaffirmed: 8/19; 8/10, 7/01; Adopted: 10/94, 11/87; CODA: 05/86:10

7. Role Of Observers On A Site Visit: Commissioners, Review Committee members, and public members of the Commission or Review Committees that have not participated as a site visitor are encouraged to participate on site visits as observers in order to become familiar with the accreditation process. The observer must not have a conflict of interest with the institution. This individual must be approved to participate in the site visit by the institution, receives all self-study materials from the institution and background information from the Commission prior to the site visit. This individual participates during all site visit conferences and executive sessions as a non-voting member of the site visit committee. As a participant of the site visit, it is expected that this individual will remain with the designated site visit team members at all times during the visit. The chairperson of the site visit committee has the right to excuse and/or exclude the observer from any or all aspects of the site visit for improper and/or unprofessional behavior.

Reaffirmed: 8/19; Adopted: 8/10

K. POLICY ON SILENT OBSERVERS ON SITE VISITS

In order to facilitate a better understanding of the accreditation and site visit processes, any dental education program scheduled for a site visit of its program, may request the opportunity to send one administrator or faculty member as a silent observer to a Commission site visit. Representatives of international programs may also participate as a silent observer on a Commission site visit. The silent observer visit will be scheduled one to two years before the scheduled site visit of the observer's program. The program being observed has the right to approve the designated observer. Requests for a faculty member or administrator to observe the site visit of another program are managed according to when the observer's site visit is scheduled. Requests for the opportunity to have a faculty member or administrator observe a site visit are made through a letter from the chief administrative officer (dean, chair, chief of dental service) of the program. While the observer may request to observe a specific site visit, Commission staff will make the final determination based upon the site visit schedule and availability of observation opportunities. Generally, a program is provided one opportunity to send an observer to a site visit. The observer's program pays all expenses for such an observer.

The observer receives all self-study materials and is allowed to observe all interviews and meetings, but does not attend the briefing at the end of each day. The observer must remain silent during all sessions where university and/or program officials, faculty, staff or students are present at the site visit. The observer is encouraged to ask questions of the visiting committee during executive session meetings only but does not participate in decision-making discussions. As an observer of the site visit, it is expected that this individual will remain with the designated site visit team members at all times during the visit.

All observers must sign the Commission's Agreement of Confidentiality prior to the site visit. The chair of the site visit committee has the right to excuse and/or exclude the observer from any or all aspects of

the site visit for improper and/or unprofessional behavior. The chair's decision to remove or exclude an observer from the site visit cannot be appealed.

A representative of the state dental society may attend a comprehensive dental school site visit as a silent observer, if requested by the society and approved by the institution.

Revised: 2/16; 8/14; 8/13; 2/13, 07/98:2, 01/94:2, 05/93:1-2, 12/92:3; Reaffirmed: 8/19; 8/10, 7/07, 7/01

L. POLICY ON STATE BOARD PARTICIPATION DURING SITE VISITS

It is the policy of the Commission on Dental Accreditation that the state board of dentistry is notified when an accreditation visit will be conducted in its jurisdiction. The Commission believes that state boards of dentistry have a legitimate interest in the accreditation process and, therefore, strongly urges institutions to invite a current member of the state board of dentistry to participate in Commission site visits. The Commission also encourages state boards of dentistry to accept invitations to participate in the site visit process.

If a state has a separate dental hygiene examining board, that board will be contacted when a dental hygiene program located in that state is site visited. In addition, the dental examining board for that state will be notified.

The following procedures are used in implementing this policy:

1. Correspondence will be directed to an institution notifying it of a pending accreditation visit and will include a copy of Commission policy on state board participation. The institution is urged to invite the state board to send a current member. The Commission copies the state board on this correspondence.
2. The institution notifies the Commission of its decision to invite/not invite a current member of the state board. If a current member of the state board is to be present, s/he will receive the same background information as other team members.
3. If it is the decision of the institution to invite a member of the state board, Commission staff will contact the state board and request the names of at least two of its current members to be representatives to the Commission.
4. The Commission provides the names of the two state board members, to the institution. The institution will be able to choose one of the state board members. If any board member is unacceptable to the institution, the Commission must be informed in writing.
5. The state board member, if authorized to participate in the site visit by the institution, receives the self-study document from the institution and background information from the Commission prior to the site visit.
6. The state board member must participate in all days of the site visit, including all site visit conferences and executive sessions.
7. In the event the chair of the site visit committee determines that a vote is necessary to make a recommendation to the Commission, only team members representing the Commission will be allowed to vote.
8. The state board reimburses its member for expenses incurred during the site visit.

The following statement was developed to assist state board members by clearly indicating their role while on-site with an accreditation team and what they may and may not report following a site visit. The statement is used on dental education, advanced dental education and allied dental education site visits.

The state board member participates in an accreditation site visit in order to develop a better understanding of the accreditation site visit process and its role in ensuring the competence of graduates for the protection of the public. The dental, advanced dental and allied dental education programs are evaluated utilizing the Commission's approved accreditation standards for each respective discipline.

The state board member is expected to be in attendance for the entire site visit, including all scheduled conferences and during executive sessions of the visiting committee. While on site the state board member:

- provides assistance in interpreting the state's dental practice act and/or provides background on other issues related to dental practice and licensure within the state.
- on allied dental education visits: assists the team in assessing the practice needs of employer-dentists in the community and in reviewing those aspects of the program which may involve the delegation of expanded functions.
- on dental school visits: functions primarily as a clinical site visitor working closely with the clinical specialist member(s) who evaluate the adequacy of the preclinical and clinical program(s) and the clinical competency of students.

Following the site visit, state board members may be asked to provide either a written or oral report to their boards. Questions frequently arise regarding what information can be included in those reports while honoring the Agreement of Confidentiality that was signed before the site visit. The following are some general guidelines:

- What You May Share:
 - Information about the Commission's accreditation standards, process and policies.
- What You May Not Share:
 - The school's self-study;
 - Previous site visit reports and correspondence provided to you as background information;
 - Information revealed by faculty or students/residents during interviews and conferences;
 - The verbal or written findings and recommendations of the visiting committee; and
 - Any other information provided in confidence during the conduct of an accreditation visit.

The Commission staff is available to answer any questions you may have before, during or after a site visit.

Revised: 7/09, 1/00; Reaffirmed: 8/19; 8/10, 7/07, 7/04, 7/01, 12/82, 5/81, 12/78, 12/75; Adopted: 8/86

M. SITE VISIT PROCEDURES

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

The Commission recognizes that there is considerable latitude in determining procedures and methodology for site visits. Experience has shown that the conference method for conducting a site visit

is widely favored and effective. Conferences are scheduled with identified administrators, faculty and students at specified times.

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

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

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

Oral comments made by site visit team members during the course of the site visit are not to be construed as official site visit findings unless documented within the site visit report and may not be publicized. Further, publication of site visit team members' names and/or contact information is prohibited.

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

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

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

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

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

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

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

During these conferences, the committee presents the findings it will submit to the Commission. These findings address both program strengths and weaknesses. The committee also informs individuals in

charge of the program(s) about the Commission's procedures for processing and acting on the report. In keeping with the Commission's policy on Public Disclosure and Confidentiality, these final conferences are not recorded on tape or by stenographer. Note taking, however, is permitted and encouraged.

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

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

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

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

4. Enrollment Requirement For Site Visits For Fully Developed Programs: Site visit evaluations of dental, allied dental and advanced dental education programs will be conducted at the regularly established intervals, provided that students are enrolled in at least one year of the program. If no students are enrolled on the established date for the site visit, the visit will be conducted when students are enrolled, preferably in the latter part of the final year prior to graduation. (Refer to the Policy on Non-enrollment of First Year Students)

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

5. Post-Site Visit Evaluation: After each site visit, electronic evaluation forms are completed by the visited program and the participating site visitors to give the Commission feedback on the effectiveness of its processes and procedures. In addition, site visitors electronically evaluate their fellow site visitors and the visited programs electronically evaluate the individual site visitors.

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

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: 8/10, 7/07, 7/01, 4/83

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Reaffirmed: 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 (for all dental and advanced dental education programs)
 - Policy and Guidelines for Reporting Program Changes In Accredited Programs

- Policy and Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs
- Policy and Guidelines for Preparing a Teach-Out Report
- Policy and Guidelines for Transfer of Sponsorship
- Policy and Guidelines for Interruption of Education
- 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 (for all dental and advanced dental education programs)
 - Policy and Guidelines for Reporting Program Changes In Accredited Programs
 - Policy and Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs
 - Policy and Guidelines for Preparing a Teach-Out Report
 - Policy and Guidelines for Transfer of Sponsorship
 - Policy and Guidelines for Interruption of Education
 - 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: 8/21; 8/20; 2/16; 8/15; 2/15; Reaffirmed: 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: 8/10, 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 and Guidelines for Reporting Enrollment Increases in Advanced Dental Education Programs are available from the Commission office.

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

approval prior to the program change may result in further review by the Commission and/or a special site visit, and may jeopardize the program's accreditation status.

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

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

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

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

- Addition of advanced standing opportunity, part-time track or multi-degree track, or other track offerings;
- Expansion of a developing dental hygiene or assisting program which will only be considered after the program has demonstrated success by graduating the first class, measured outcomes of the academic program, and received approval without reporting requirements; and/or
- Implementation of changes in the use of distance education that could affect the ability of the program to meet the standards (see reporting requirements found in the Policy on Distance Education).

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

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

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

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

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

Revised: 8/21; 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: 8/20; 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 deadlines may be returned to the program, which could affect the accreditation status of the program.

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

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

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

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

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

F. POLICY ON MISSED DEADLINES

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

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

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 mail with required signature.

Revised: 8/15; Reaffirmed: 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: 8/15; 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: 8/20; 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 accreditation status of programs within the purview of the Commission on Dental Accreditation will be discontinued when all first-year positions remain vacant for two (2) consecutive years. Exceptions to this policy may be made by the Commission upon receipt of a formal request from the institution stating reasons why the accreditation of the program should not be discontinued. Exceptions to this policy may also be made by the Commission for programs in Oral and Maxillofacial Pathology with “initial accreditation” status upon receipt of a formal request from the institution stating reasons why the accreditation of the program should 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: 2/21; 8/20; 8/16; 2/15; Reaffirmed: 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 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 of any such disruption. The institution must provide a comprehensive plan for how the loss of instructional time will be addressed. 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.

Revised: 8/15; 8/10, 5/91, 1975; Reaffirmed: 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.

The following advanced dental education disciplines do not have authorized enrollment: advanced education in general dentistry, general practice residency, dental anesthesiology, oral medicine, and orofacial pain. However, approval of an increase in enrollment in these advanced dental education programs must be reported to the Commission if the program’s total enrollment increases beyond the enrollment at the last site visit or prior approval of enrollment increase. Programs must use the discipline-specific Guidelines to

request an increase in enrollment prior to implementing the increase. Upon submission of the program change report, a substantial increase in program enrollment as determined by preliminary review by the discipline-specific Review Committee Chair, will require prior approval by CODA.

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

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

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

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

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

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

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.

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 1/20; 8/19; Reaffirmed: 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: 8/20; 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 plans for the entire Teach-Out period, during which students/residents are enrolled, including a detailed explanation of any significant changes relative to retention of qualified faculty and support

personnel, student/resident enrollment by class, the didactic and clinical teaching programs (including curriculum, extramural experiences and facilities), and financial support that will be provided. During the period of Teach-Out, the program may not enroll additional students/residents in any year of the program.

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

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

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

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

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

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

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 or at 211 East Chicago Avenue, Chicago, IL 60611-2678. The Commission's web address is: <http://www.ada.org/en/coda>.

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: 8/18; 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: 8/10, 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: 8/15; 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: 8/20; 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 prior approval before utilization but 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*
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 June 1 or December 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.

*sites used for community service and service learning are exempt

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

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

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

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

Discipline-specific Exemptions:

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

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

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

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

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 June 1 or December 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: 8/18; 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/residents'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/residents'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/residents's/fellow's academic engagement and success and ensuring that an instructor is responsible for promptly and proactively engaging in substantive interaction with the student/resident/fellow when needed on the basis of such monitoring, or upon request by the student/resident/fellow.

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

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

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: 8/15; 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.

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

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

V. POLICY ON COMBINED CERTIFICATE AND DEGREE PROGRAMS IN ADVANCED DENTAL EDUCATION

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

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

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

W. QUALIFICATIONS OF A PROGRAM DIRECTOR FOR A COMBINED ADVANCED DENTAL EDUCATION PROGRAM

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

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

X. POLICY ON REGARD FOR DECISIONS OF STATES AND OTHER ACCREDITING AGENCIES

The Commission takes into account decisions made by other recognized accrediting or state agencies. If the Commission determines that an institution sponsoring an accredited program or a program seeking accreditation is the subject of an interim action or threatened loss of accreditation or legal authority to 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: 8/20; 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: 8/20; 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: 8/20; 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: 8/20; 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; 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.

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

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Revised: 2/21; 1/20; Reaffirmed: 8/20; Adopted: 8/18

VI. COMPLAINTS

A. DEFINITION

A complaint is defined by the Commission on Dental Accreditation as one alleging that a Commission-accredited educational program, a program which has an application for initial accreditation pending, or the Commission may not be in substantial compliance with Commission standards or required accreditation procedures.

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 Avenue, Chicago, IL 60611-2678 or by calling 1-312-440-4653.

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: 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

C. COMMISSION LOG OF COMPLAINTS

A log is maintained of all complaints received by the Commission. A central log related to each complaint is maintained in an electronic data base. Detailed notes of each complaint and its disposition are also maintained in individual program files.

Revised: 8/10, 7/06, 7/02, 7/00, 7/96; Reaffirmed: 8/21; 8/15; CODA: 01/95:5

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

The following policy and procedures have been developed to handle the investigation of "formal" complaints and "anonymous" comments/complaints about an accredited program, or a program which has a current application for initial accreditation pending, which may not be in substantial compliance with Commission standards or established accreditation policies.

The Commission will consider formal, written, signed complaints using the procedure noted in the section entitled “Formal Complaints.” Unsigned comments/complaints will be considered “anonymous comments/complaints” and addressed as set forth in the section entitled “Anonymous Comments/Complaints.” Oral comments/complaints will not be considered.

Formal Complaints

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

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

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

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

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

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

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

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

required accreditation procedures. Submission of documentation which supports the noncompliance is strongly encouraged.

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

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

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

Revised: 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 appropriate sections of the self-study to provide guidance on the compliance issues to be addressed in the report and on any documentation required to demonstrate compliance. Additional guidance on how to best demonstrate compliance may also be provided to the program.
 - b. For policy(ies) or procedure(s)-related complaints, the Commission provides the program with the appropriate policy or procedural statement from the Commission's Evaluation and Operational Policies and Procedures Manual. Additional guidance on how to best demonstrate compliance will be provided to the program. The Chair of the appropriate Review Committee and/or legal counsel may assist in developing this guidance.
4. Receipt of the program's written compliance report, including documentation, is acknowledged.
5. The appropriate Review Committee and the Commission will investigate the issue(s) raised in the

complaint and review the program's written compliance report at the next regularly scheduled meeting. In the event that waiting until the next meeting would preclude a timely review, the appropriate Review Committee(s) will review the compliance report in a telephone conference call(s). The action recommended by the Review Committee(s) will be forwarded to the Commission for mail ballot approval in this later case.

6. The Commission may act on the compliance question(s) raised by the complaint by:
 - a. determining that the program continues to comply with the policy(ies), procedure(s) or standard(s) in question and that no further action is required.
 - b. determining that the program may not continue to comply with the policy(ies), procedure(s) or standard(s) in question and going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
 - i. If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
 - ii. If by on-site review: The Commission will describe the scope and nature of the problem and determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a 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.
 - c. determining that a program does not comply with the policy(ies), procedure(s) or standards(s) in question and:
 - i. changing a fully-operational program's accreditation status to "approval with reporting requirements"
 - ii. going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
 - If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
 - If by on-site review: The Commission will describe the scope and nature of the problem and determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a 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: 8/17; 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 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, or those 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 be added to the respective program’s file for evaluation during the program’s next scheduled accreditation site visit. At the time of the site visit, the program and site visit team will be informed of the anonymous comment/complaint. The program will have an opportunity to respond to the anonymous comment/complaint; the response will be considered during the site visit evaluation. Anonymous comments/complaints will be assessed to determine trends in compliance with Commission standards, policies, and procedures. The assessment of findings related to the anonymous comments/complaint will be documented in the site visit report.

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

E. POLICY AND PROCEDURES ON COMPLAINTS DIRECTED AT THE COMMISSION ON DENTAL ACCREDITATION

Interested parties may submit an appropriate, signed complaint to the Commission on Dental Accreditation regarding Commission policy(ies), procedure(s) or the implementation thereof. The Commission will determine whether the information submitted constitutes an appropriate complaint and will follow up according to the established procedures.

Procedures:

1. Within two (2) weeks of receipt, the Commission will acknowledge the received information and provide the complainant with the policy(ies) and procedure(s).
2. The Commission will collect additional information internally, if necessary, and then conduct an initial screening to determine whether the complaint is appropriate. The initial screening is completed within thirty (30) days.

3. The Commission will inform the complainant of the results of the initial screening.
4. If the complaint is determined to be appropriate, the Commission and appropriate committees will consider the complaint at its next regularly scheduled meeting. The complaint will be considered in closed session if the discussion will involve specific programs or institutions; otherwise, consideration of the complaint will occur in open session. In the event that waiting until the next meeting would preclude a timely review, the appropriate committee(s) will review the complaint in a telephone conference call(s). The action recommended by the committees will be forwarded to the Commission for mail ballot approval in this later case.
5. The Commission will consider changes in its policies and procedures, if indicated.
6. The Commission will inform the complainant of the results of consideration of the complaint within two (2) weeks following the meeting or mail balloting of the Commission.

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

VII. DUE PROCESS

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

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

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

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

Revised: 8/16; Reaffirmed: 8/21

A. DUE PROCESS RELATED TO SITE VISIT REPORTS

The most frequent way in which the Commission's policies and procedures provide due process to an institution is the opportunity that is always provided to an institution to review and to respond to the site visit report prior to the Commission on Dental Accreditation taking an accreditation action. Due process related to site visit reports is provided in the following three stages:

First, the institution is provided with a copy of the draft site visit report. The site visit committee approves the draft site visit report which is then forwarded to the institution for review and comment.

Second, the institution is provided with an opportunity to respond to the draft report. The institution may respond in three ways. The response may address:

- factual inaccuracies;
- differences in perception with the visiting committee; and/or
- progress made subsequent to the site visit to implement recommendations cited in the report.

This institutional response must be transmitted to the Commission within the specified time, up to thirty (30) days from the time the report is sent to the institution. Factual inaccuracies noted in the report are corrected. In addition, the Commission considers any responses related to differences in perception and any reported progress in implementing recommendations contained in the report before it grants the accreditation status.

A third opportunity for due process may occur after the institution has submitted its initial response to the site visit report. An institution may provide supplemental information regarding implementation of recommendations in the site visit report. Any supplemental information must be submitted prior to December 1 for consideration at the winter Commission meeting and June 1 for consideration at the summer Commission meeting. Such supplemental information is also considered by the Commission prior to reaching an accreditation decision.

Reaffirmed: 8/21; 8/16; 8/10

B. DUE PROCESS RELATED TO PROGRESS REPORTS

Another due process option is available to a program when an accreditation status of “approval with reporting requirements” has been granted. The option involves further consideration at a subsequent regularly scheduled meeting of the Commission.

The institution/program must submit a progress report at the time specified in the Commission’s transmittal letter, i.e., the following meeting six months later. All reported progress is considered by the Commission in determining the accreditation status. When a progress report is submitted, the specific instructions for preparing the report must be followed. The signature of the chief administrative officer of the sponsoring institution must be included with the report.

Reaffirmed: 8/21; 8/16; 8/10

C. DUE PROCESS RELATED TO REVIEW COMMITTEE SPECIAL APPEARANCES

If the Commission, at its prior meeting, granted the status of “approval with reporting requirements,” “approval with reporting requirements, intent to withdraw,” or denied a requested program change, and the program submits a subsequent program change report, the program may request a special appearance (hearing) at the next meeting of the Review Committee in order to supplement the written information which has already been provided to the appropriate Review Committee. A representative of the institution would be permitted to appear in person before the Review Committee to present this additional information. Generally, such appearances occur prior to the Review Committee’s consideration of the program’s accreditation classification. When such a special appearance is desired, a written request must be made to the Director of the Commission thirty (30) days prior to the meeting. The Chair and Director of the Commission will determine the disposition of the request and inform the requestor of the date, hour and amount of time that will be allocated for the appearance.

If the requestor wishes to submit additional written materials, these materials should be provided by the requestor to the Commission office at least one (1) week prior to the meeting, absent documented extraordinary circumstances.

The Commission and its Review Committees permit special appearances using the following guidelines:

- The Review Committee will discuss the report of the program/institution prior to the appearance of the representative(s).
- The Review Committee Chair will introduce members of the Review Committee to the program/institutional representative.
- The Chair will restate to the representative(s) the amount of time allocated for the hearing.
- The representative is invited to make an opening statement.
- Following the presentation by the representative, the Chair allows members of the Review Committee to ask questions. Although primary and secondary reviewers are assigned primary responsibility for questioning, all Review Committee members have the opportunity to participate in the discussion.
- The Chair thanks the representative for appearing before the Review Committee and the representative leaves.
- The Review Committee discusses the recommended action.
- The Review Committee Chair and Commission staff notifies the representative of the Review Committee's recommendation. If the Review Committee's recommendation is to deny or withdraw accreditation, the institution's representation has the opportunity to have a hearing with the Commission on a subsequent day.
- In general, special appearances before the Commission also follow the process listed above.

Revised: 8/21; 2/18; 8/16; 7/06, 1/00, 5/93, 1991, 1983; Reaffirmed: 8/10; Adopted: 1977

D. DUE PROCESS RELATED TO APPEAL OF ACCREDITATION STATUS DECISIONS

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

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

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

If the Commission determines the program accreditation status is "approval with reporting requirements," "approval with reporting requirements, intent to withdraw," or denies a requested program change, and the institution/program believes that the Commission has made an error in judgment regarding accreditation status or action, a special appearance (hearing) before the Commission may be requested sixty (60) days prior to the Commission meeting. The special appearance (hearing) before the Commission would be held at the next regularly scheduled meeting. At the hearing, representatives of the institution may present arguments that the Commission, based on the information available when the

decision was made, made an error in judgment in determining the accreditation status of the program. The Director of the Board of Commissioners must receive any written evidence or argument at least thirty (30) days prior to the hearing. Under these circumstances, no new information regarding correction of deficiencies subsequent to the site visit and previous Commission meeting may be presented. The institution's representative(s) may attend the Commission meeting only during the time assigned for the hearing.

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

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

E. DUE PROCESS RELATED TO DENIAL OF INITIAL ACCREDITATION

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

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

If the Review Committee recommendation to the Commission is to grant initial accreditation and the Commission subsequently denies initial accreditation, reasons for the denial are provided. Because denial of accreditation is defined as an adverse action, notice of such decisions occurs within fourteen (14) days and is sent by tracked mail. Within thirty (30) days after receipt of such notice, the educational program may, in writing, request a hearing before the Board of Commissioners at its next meeting. Within fifteen (15) days after receipt of the request, the Board of Commissioners shall schedule a hearing and notify the educational program of the date, time and place of such hearing. A request for a hearing due to the Board of Commissioner's decision to deny for the first time, accreditation to a new program, shall automatically stay the decision to deny accreditation. In the event the educational program that has been denied initial accreditation for the first time does not make a timely request for a hearing, the Board of Commissioners' findings and proposed decision to deny accreditation shall become final.

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

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

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

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

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

F. DUE PROCESS RELATED TO WITHDRAWAL OF ACCREDITATION

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

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

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

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

Revised: 2/19; 8/18; 2/18; 8/16; Reaffirmed: 8/21; 8/10

G. FUNCTION AND PROCEDURES OF THE APPEAL BOARD

The principal function of the Appeal Board is to determine whether the Commission on Dental Accreditation, in arriving at a decision regarding the withdrawal or denial of accreditation for a given program, has properly applied the facts presented to it. In addition, the Commission's *Rules* stipulate that the Appeal Board shall provide the educational program filing the appeal the opportunity to be represented by legal counsel and shall give the program the opportunity to offer evidence and argument in writing and/or orally to try to refute or overcome the findings and decision of the Commission.

Reaffirmed: 8/21; 8/16; 8/10

1. Appeal Board: The four (4) permanent members of the Appeal Board include: one (1) representative selected by the American Dental Association, one (1) representative selected by the American Association of Dental Boards, one (1) representative selected by the American Dental Education Association and one (1) consumer representative selected by the Commission on Dental Accreditation. Representatives from allied or advanced dental education areas would also be included on the Appeal Board, depending on the nature of the appeal. Appeal Board members do not concurrently serve on the Commission. (See Rules of the Commission, Article III, Section 2. Appeal Board Composition, p. 5)

The Appeal Board is an autonomous body, separate from the Commission. Costs related to appeal procedures will be underwritten, whenever possible, by the institution and the Commission on an equally shared cost basis.

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

2. Selection Criteria For Appeal Board Members: The Appeal Board Member shall not be:

- a current member of a dental or allied dental faculty*;
- an employee, member of the governing board, owner, shareholder of, or independent consultant to, a program that either is accredited by the Commission on Dental Accreditation or has applied for initial accreditation*; and
- spouse, parent, child, or sibling of an individual identified above;
- current member of the Commission; and/or
- an individual who has participated in any step of the process leading up to the decision that is being appealed (e.g. member of the visiting committee, member of Review Committee, etc.).

The Appeal Board Member shall:

- be willing to participate as a member of the appellate body should it be convened; and
- be willing to comply with all Commission policies and procedures (e.g., Agreement of Confidentiality; Conflict of Interest Policy; and Professional Conduct Policy and Prohibition Against Harassment).

*Discipline-specific representatives from allied or advanced dental education areas and the ADEA representative can be a program director, faculty member or practitioner.

Revised: 8/18; 2/16; 8/14; 2/13; Reaffirmed: 8/21; 8/16; 8/10

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

1. Within fourteen (14) days after the institution's receipt of notification of the Commission on Dental Accreditation's decision to deny or withdraw accreditation, the program may file a written request of

- appeal to the Director of the Commission. If a request of appeal is not made, the Commission's proposed decision will automatically become final and the appropriate announcement will be made.
2. If a request of appeal is received, the Director of the Commission shall acknowledge receipt of the request and notify the program of the date of the appeal hearing. The appeal date shall be within sixty (60) days after the appeal has been filed.
 3. The program filing the appeal may be represented by legal counsel in addition to the program administrator and other program representatives and shall be given the opportunity at such hearing to offer evidence and argument in writing or orally or both tending to refute or overcome the findings and decision of the Board of Commissioners. The educational program need not appear in person or by its representative at the appellate hearing.
 4. Legal counsel of the American Dental Association will be available to members of the Appeal Board upon request.
 5. No new information regarding correction of the deficiencies may be presented with the exception of review of new financial information if all of the following conditions are met: (i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made. (ii) The financial information is significant and bears materially on the financial deficiencies identified by the Commission. The criteria of significance and materiality are determined by the Commission. (iii) The only remaining deficiency cited by the Commission in support of a final adverse action decision is the institution's or program's failure to meet the Commission's standard pertaining to finances. An institution or program may seek the review of new financial information described in this section only once and any determination by the Commission made with respect to that review does not provide a basis for an appeal.
 6. The Appeal Board may make the following decisions: to affirm, amend, or remand the adverse actions of the Commission. A decision to affirm, or amend the adverse action is implemented by the Commission. In a decision to remand the adverse action for further consideration, the Appeal Board will identify specific issues that the Commission must address. The Commission must act in a manner consistent with the Appeal Board's decisions or instructions.
 7. No change in the accreditation status of the program will occur pending disposition of the appeal.
 8. Within ten (10) days of the hearing, the applicant shall be notified by tracked mail of the Appeal Board's decision. The decision may be to sustain the decision of the Commission or to remand the matter back to the Commission for reconsideration. Notice shall include a statement of the specifics on which the decision is based.
 9. The decision rendered by the Appeal Board shall be final and binding.
 10. In the event the educational program does not file a timely appeal of the Board of Commissioner's findings and decisions, the Board of Commissioner's decision shall become final.

In accord with due process measures, the Appeal Board will, when appropriate, review substantive procedural issues raised by the appellants. To this end, the Appeal Board is limited in its inquiry to the factual determinations up to the time of the Commission on Dental Accreditation's decision regarding the status of the program at issue.

It is not proper for the Appeal Board to either receive or consider facts not previously presented to the Commission on Dental Accreditation since it does not sit as an initial reviewing body. Similarly, it is not the function of the Appeal Board to determine whether the facts, singularly or cumulatively, justify the decision of the Commission on Dental Accreditation unless it can be shown that the Commission's decision was clearly against the manifest weight of the evidence. Further, the Appeal Board will not hear testimony relative to the reasonableness of previously determined requirements for accreditation since this is clearly outside the scope of authority of this reviewing body.

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

4. Mechanism For The Conduct Of The Appeal Hearing:

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

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

VIII. INTERNATIONAL PREDOCTORAL POLICIES AND PROCEDURES

Dental accreditation in the United States is a voluntary quality evaluation system that includes a standard setting and review process to promote the goal of continuous quality improvement in dental education. Additional goals are to provide public protection and accountability and to assure prospective students and state licensing agencies that educational programs provide appropriate education, training and experience to adequately prepare individuals for dental licensure and practice in the U.S. International dental education programs may seek consultation and/or accreditation services from the Commission on Dental Accreditation for the purpose of obtaining an independent, external review, for benchmarking or to serve the needs of graduates who may wish to demonstrate their preparedness for licensure in a state in the U.S.

International consultation and accreditation fee-based services are available to international predoctoral dental education programs, upon request. Once an international dental education program meets the established criteria, consultation and accreditation services will be provided in accord with Commission policies and procedures. Eligibility criteria and Commission policies, standards and procedures are subject to change and will be periodically reviewed and updated. It is the responsibility of programs to keep informed of changes in accreditation policies and procedures, and abide by all current policies and procedures.

An international dental education program is defined as a program located and sponsored by an institution whose primary location is outside of the United States and Canada. The Commission will only accept requests for consultation and accreditation fee-based services from established international dental education programs. The international dental education program must be:

- accepted in its country of origin;
- officially chartered/recognized in its country of origin; and
- recognized or accredited by the country's relevant government or non-governmental agency.

International predoctoral dental education program seeking accreditation by the Commission must meet the same Accreditation Standards for Dental Education Programs as the United States-based programs and follow the same process and procedures.

All correspondence, written documents and conversation with the Commission must be in English. If any portion of the consultation and accreditation program is conducted in a language other than English, and translation is required, the Commission will employ a translator of its choosing. The cost of translation will be charged to the international dental education program.

Revised: 8/16; Reaffirmed: 8/21; 8/10

A. THE CONSULTATION PROCESS FOR PREDOCTORAL INTERNATIONAL PROGRAMS

International consultation and accreditation fee-based services are available to international predoctoral dental education programs, upon request. Attainment of accreditation from the Commission on Dental Accreditation is a multi-step process that involves self-study, observation of the Commission's accreditation process, and consultation with Commission staff, site reviewers, and the Standing Committee on International Accreditation. To begin the process, the Dean of the International Education Program or International University President/Provost requests, in writing, information from the Commission regarding its fee-based consultation and accreditation services.

The consultation process includes the following steps:

1. Completion of the Preliminary Accreditation Consultation Visit (PACV) survey.
2. Observation of a Commission dental school site visit and individual consultation
3. Completion of a PACV self-study and consultation visit
4. Application for accreditation from the Commission on Dental Accreditation.

At each step of the process a report is submitted to the Standing Committee on International Accreditation. The Committee's findings are communicated to the international dental education program and the Commission. If the consensus of the Standing Committee is that the international program has the potential to achieve U.S. accreditation, the program may elect to submit an application for accreditation. A positive determination from the Standing Committee at any step in the process does not guarantee that an application for accreditation will be successful. An international program may elect to withdraw from the consultation and or accreditation process at any time; however, the chief academic officer should inform the Standing Committee in writing of the program's intent.

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

B. INTERNATIONAL PREDOCTORAL DENTAL EDUCATION SITE VISITS

Three types of site visits may be conducted to international dental education programs.

FOCUSED CONSULTATION VISIT: Focused, fee-based programmatic consultation services are available for programs requesting less than comprehensive consultation services or for programs that the Standing Committee has determined would benefit from a focused consultation. Trained content experts will provide the consultation services.

In preparation for the consultation visit, the international dental school will prepare a written document describing its policies and procedures related to the focused topics. The written material will be submitted ninety (90) days prior to an on-site focused consultation visit. All documents and communications will be in English.

Two site visitors (Commission staff and/or volunteers) selected for their expertise in the focused topic areas will make up the visiting committee that provides the focused consultation services and carries out

the visit. The trip may be seven days in length, allowing ample time for the committee to adjust to any time change and to access lower airfares. The program will receive a written report summarizing the review and recommendations within sixty (60) days.

COMPREHENSIVE CONSULTATION VISIT: A comprehensive, fee-based site visit with programmatic consultation by trained content experts regarding topics such as:

- Institutional effectiveness/outcomes assessment
- Curriculum content and scope
- Competency-based curriculum
- Faculty and staff qualifications and numbers
- Type and adequacy of facilities
- Patient care services and policies
- Student policies and services
- Research for both faculty and staff
- Readiness for accreditation
- Quality assurance
- Comprehensive patient care
- Relationship of dental school to the university and government
- Standards of care

In preparation for a comprehensive consultative site visit, the international dental schools will prepare a written document describing its policies and procedures related to the above topics. All documents and communications will be in English. Four site visitors (curriculum specialist, basic science specialist, clinician educator, and clinician practitioner representing the American Dental Association) and one Commission staff will make up the visiting committee that will conduct the PACV.

The visit will involve several interviews with the identified stakeholders of the international dental education program and the institution's administration. Interviews will be conducted with the appropriate administrators, faculty, staff and students. The visiting committee will also provide consultation regarding the facilities. A written report summarizing the evaluation will be provided to the program within sixty (60) days.

ACCREDITATION SITE VISIT: The Commission's accreditation service for international dental education programs is the same as the process and procedures of the accreditation program for U.S.-based dental education programs. The application process for accreditation of fully-operational international programs will not be modified. For fully-operational programs, one site visit would occur upon application and, if successful, subsequent visits would occur on the usual seven-year cycle established for U.S. predoctoral dental education programs.

Programs that are successful in the PACV may submit an application for accreditation and an application fee for accreditation. The program will also be responsible for all site visit expenses (actual expenses) for all site visits during the application process and regular site visit schedule. International programs will pay an administrative fee of 25% of the total site visit cost to the program for coordination of each site visit. Accredited programs also pay an annual fee. All fees must be paid in advance in United States dollars and include any bank or other transaction fees. See CODA Policy on Fees and contact the Commission office for current fee schedule.

Commission site visitors will then be selected to evaluate the written application and determine whether the application is complete and the program is ready for an accreditation site visit. Once the Commission determines that the program has submitted sufficient information to determine the program's potential for complying with the accreditation standards, a site visit will be scheduled.

A visiting committee consists of six (6) Commission trained volunteer site visitors and one Commission staff. The committee includes a chair, basic scientist, curriculum site visitor, clinical science site visitor, finance site visitor, and a national licensure site visitor.

The accreditation visit, following the process established for U.S.-based programs, will involve several interviews with the identified stakeholders of the international dental program and the institution's administration. Interviews are conducted with the appropriate administrators, faculty, staff and students. The accreditation site visit committee also verifies that the written application accurately represents the program through multiple interviews, observations, on-site documentation review and facility inspection.

Following the site visit, the visiting committee writes a preliminary draft site visit report that will be considered by the Review Committee on Predoctoral Dental Education and the Commission. The Commission then determines whether to grant the program the appropriate accreditation status.

Revised: 8/21; 8/16; 2/16; 8/14; 1/14; Reaffirmed: 8/10; Adopted: 7/06

C. BROAD ELIGIBILITY CRITERIA FOR PRELIMINARY ACCREDITATION CONSULTATION VISIT (PACV)

The PACV survey will be evaluated by the Standing Committee on International Accreditation using the following broad criteria. These criteria are subject to change and will be periodically reviewed and updated.

- Information from the U.S. State Department confirms that no conditions (war, threat of terrorism, etc.) exist that might put the safety of a visiting committee at risk.
- There are no cultural restrictions or legal restrictions which would make site visits by U.S. citizens problematic.
- The PACV survey responses in English are appropriate and understandable.
- The dental school or program has a sponsoring university.
- There is an accreditation and/or approval process within the country for higher education and the sponsoring university or dental school is accredited/approved within the country.
- A letter of support from the accreditation/approval agency has been submitted to the Commission.
- The university or institution that sponsors the dental program has been determined to meet the requirements for equivalency to U.S. regional accreditation.
- The school or program is degree granting.
- It appears the program has adequate financial support.
- The dental school or program has been in existence long enough to have had several graduating classes.
- The education model is essentially similar to that in the U.S. and Canada.
- Pre-requisites for admission to the dental school are appropriate and adequate.
- The number of full-time and part-time faculty appears to be adequate based on the number of students enrolled.

- There appears to be a developed curriculum plan with adequate clock hours in:
 - Basic Sciences
 - Preclinical laboratory
 - Clinical sciences
- Clinical treatment of patients is an essential part of the educational program.
- There appears to be developed facilities for dental education.
- Health care standards and standards of care for dentistry support the practice of dentistry in essentially the same manner as in the U.S.

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

D. POLICY ON PLANNING AND IMPLEMENTING PRELIMINARY ACCREDITATION CONSULTATION VISIT (PACV) AND INTERNATIONAL ACCREDITATION SITE VISITS

The Commission on Dental Accreditation has developed the following policy and procedures for use in planning and implementing international Preliminary Accreditation Consultation Visit (PACV) and Commission accreditation site visits. (See the policy on Staff Consulting Services).

Prior to staff and volunteer travel, travel warnings from the US Department of State, US Department of Health and Human Services, and the Centers for Disease Control and Prevention will be continuously monitored. Additionally, the Commission will ensure there are no cultural restrictions or legal restrictions which would make PACV or accreditation site visits in any international location by Commission staff and volunteers problematic. Volunteers will be identified and invited to attend with the full knowledge of travel warnings. Prior to travel, the Commission Director in consultation with the Commission Chair will determine whether CODA volunteers and staff require additional security, which would be the responsibility of the international dental education program to which the Commission is traveling.

The Commission reserves the right to change travel plans due to safety, health, or similar concerns, as warranted by the Commission Director in consultation with the Commission Chair. The Commission also reserves the right to cancel international travel when US State Department or other concerns discourage travel due to potential threats to safety or health (war, terrorism, health, etc.). All costs incurred by the Commission and/or its volunteers will be borne by the international program.

Site visits may be rescheduled within the same calendar year without prior approval by the full Commission. Site visits rescheduled in the following calendar year must be approved by the Commission (See Rescheduling Dates of Site Visits). Accreditation decisions for programs whose site visit has been rescheduled or cancelled due to circumstances beyond the control of the Commission and/or program will be made on a case-by-case basis.

Reaffirmed: 8/21; Adopted: 8/17

IX. COMMISSION HISTORY AND BACKGROUND

The American Dental Association (ADA) authorized the Council on Dental Education to accredit dental schools in 1938; however, the *Requirements for the Approval of a Dental School* did not go into effect until the 1941-42 academic year. The Council's initial accrediting activities were confined to dental schools. As the dental profession developed and grew, however, the scope of accrediting activities also grew. Current activities include accreditation of educational programs for dental assisting, dental hygiene and dental laboratory technology and accreditation of advanced dental education programs, in addition to predoctoral dental education programs.

In 1973, the House of Delegates of the American Dental Association approved the establishment of a Commission on Accreditation of Dental and Dental Auxiliary Educational Programs. In 1979 this body's name was officially changed to the Commission on Dental Accreditation. The twenty (20) member Commission included the twelve (12) Council on Dental Education members, four of whom represented the American Dental Association (ADEA), four the American Association of Dental Boards and four the American Dental Education Association. The additional eight (8) Commission representatives included two (2) dental specialists selected by specialty organizations having certifying boards recognized by the Association, one (1) representative selected by the American Dental Assistants Association, one (1) representative selected by the American Dental Hygienists' Association, one (1) certified dental laboratory technician selected by the National Association of Dental Laboratories, one (1) student representative selected jointly by the American Student Dental Association and the Council of Students of the American Dental Education Association and two (2) public representatives selected by the Council on Dental Education.

In 1979 the Commission on Accreditation of Dental and Dental Auxiliary Education Programs was renamed the Commission on Dental Accreditation.

In 1996, the ADA House of Delegates adopted two resolutions (84H-1996 and 142H-1996) calling for the restructuring of the ADA's Council on Dental Education and the Commission on Dental Accreditation. Specifically, members of the Council on Dental Education would no longer serve concurrently as members of the Commission. The Council and Commission became two distinct agencies with separate memberships, at the adjournment of the 1997 House of Delegates.

In August 1997, the Commission adopted revised *Rules of the Commission on Dental Accreditation* to complement the resolutions adopted by the 1996 House of Delegates. In October 1997, the ADA House of Delegates approved the Commission's revised *Rules*. The members of the Commission now includes: four (4) dentists appointed by the American Dental Association, four (4) dentists appointed by the American Dental Education Association, four (4) dentists appointed by the American Association of Dental Boards, one (1) dentist for each ADA recognized specialty appointed by the respective specialty sponsoring organization, one (1) dentist to represent postdoctoral general dentistry jointly appointed by the ADEA and the American Association of Hospital Dentists, one (1) certified dental assistant selected by the American Dental Assistants Association, 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 jointly selected by ADEA and the American Student Dental Association, and four (4) consumers. Language was also added to clarify that when assigned by the ADA Board of Trustees, a member of the Standing Committee on the New Dentist is an ex-officio member of the Commission without the right to vote (in accord with Chapter VII, Section 150 of the *ADA Bylaws*.)

In July 2004, the Commission adopted the Request to Establish a Process of Accreditation for Programs in Areas of Advanced Training in General Dentistry (currently called Policies and Procedures for Accreditation of Programs in Areas of Advanced Education in General Dentistry).

In January 2005, the Commission directed that a process of accreditation be established for advanced general dentistry programs in the area of dental anesthesiology and in the area of oral medicine.

In January 2006, the Commission adopted the revised Review Committee Composition which was implemented in January 2007.

In July 2006, the Commission discontinued the use of commendations in written site visit reports.

In July 2006, the Commission adopted CODA: International Policies and Procedures for accreditation of international predoctoral dental education programs.

In January 2008, the Commission directed that a process of accreditation be established for advanced general dentistry programs in the area of orofacial pain.

In August 2010, the Commission adopted the Principles and Criteria Eligibility of Allied Dental Programs for Accreditation by the Commission on Dental Accreditation.

In August 2015, the Commission directed that a process of accreditation be established for dental therapy education programs.

In February 2018, the Commission directed that all accreditation standards and supporting documents, the Commission website, and other accreditation policies and procedures eliminate terminology that unintentionally dictates which advanced dental education program is a dental specialty.

In October 2018, sole authority to revise the *Rules* of the Commission on Dental Accreditation was granted to the Commission on Dental Accreditation by the ADA House of Delegates.

In January 2020, the Commission adopted a comprehensive review and revision of the *Rules* of the Commission in accordance with recent ADA Governance changes.

In February 2021, the Commission directed the establishment of three (3) Review Committees, one (1) each for dental anesthesiology, oral medicine, and orofacial pain, effective January 1, 2022. The Commission directed the appointment of three (3) Commissioners, one (1) each for dental anesthesiology, oral medicine, and orofacial pain, effective January 1, 2022. The Commission directed the appointment of three (3) Appeal Board members, one (1) each for dental anesthesiology, oral medicine, and orofacial pain, effective January 1, 2022.

X. NON-GOVERNMENTAL RECOGNITION OF POSTSECONDARY ACCREDITATION

Since 1952, the Commission on Dental Accreditation has been recognized by the Secretary of the United States Department of Education (USDE) as the agency responsible for the accreditation of dental and dental-related educational programs. In addition, the Commission has sought and received recognition from a non-governmental recognition agency since the 1960's. These non-governmental agencies have included the National Commission on Accrediting (NCA), the Council on Postsecondary Accreditation (COPA) and the Commission on Recognition of Postsecondary Accreditation (CORPA).

COPA was formed in 1975. The Commission received full recognition for the maximum period when evaluated in 1977 by COPA. In 1984 and again in 1989, the Commission submitted re-recognition materials to COPA and was awarded full recognition each time. In April 1993, the COPA Board voted to dissolve the Council on Postsecondary Accreditation, effective at the end of 1993. The Commission on Recognition of Postsecondary Accreditation (CORPA) was formed and took over the recognition function from COPA, effective January 1, 1994.

The Commission on Dental Accreditation submitted re-recognition materials for review by CORPA at its February 1996 meeting. In March 1996, the Commission received notification that CORPA had granted the Commission re-recognition for the maximum period of five years and cited no areas of noncompliance. The Commission's next re-recognition review by CORPA was conducted in 2001.

On December 31, 1996, CORPA filed Articles of Dissolution, as voted by CORPA at its August 1996 meeting. The Commission was informed that CORPA recognition function would become a responsibility of the newly-established Council on Higher Education Accreditation (CHEA). In February 1997, the accrediting community was informed about recent actions of the CHEA Board of Directors. The letter stated that for an accrediting agency to be eligible for CHEA recognition, it must have a majority of degree granting programs or institutions. In early March 1997 the Commission was informed that CHEA had accepted the Commission's CORPA recognition status.

In January 1999, the Commission on Dental Accreditation considered a report on the recently established Council on Higher Education Accreditation (CHEA) and its newly approved *Recognition of Accrediting Organizations Policy and Procedures*, effective January 1999. The Commission noted that accreditation agencies were eligible to apply for recognition of CHEA if the majority of the accredited programs were degree granting. At that time, 41.3% of Commission-accredited programs were granting degrees. Thus, the Commission was not eligible for CHEA recognition and would have to pursue an exemption from the eligibility requirements if CHEA recognition were to be sought. At that time, the Commission determined not to request an exemption for the Eligibility Policy, but to continue to monitor issues being addressed by the higher education community through attendance at CHEA conferences. The Commission may pursue CHEA recognition in the future.

XI. RECOGNITION CHRONOLOGY - - DENTISTRY

- 1840 The first dental school was established and the first state statute requiring a license to practice dentistry was passed.
- 1847 The American Medical Association was founded to advance the profession through state licensing and improving educational quality.
- 1859 The American Dental Association (ADA) was founded. At the time of the Civil War, it divided into two organizations, the ADA and the Southern Dental Association. In 1897, these two groups merged into the National Dental Association. In 1921, the NDA changed its name back to the ADA.
- 1867 The Office of Education was established to collect statistics, including data on the numbers of schools and colleges.
- 1906 The nine-member Dental Educational Council of America was established with its membership equally representing education, licensure and practice.
- 1934 The Dental Educational Council of America issued its last listing of dental schools using the A, B, C terminology (*Reports* 1958:59). There were 39 dental schools at this time.
- 1937 The nine-member ADA Council on Dental Education was established, retaining the tripartite structure of the earlier Dental Educational Council of America (educators, examiners, practitioners); the Council membership expanded to 12 members in 1974, again retaining the tripartite structure.

- 1937 Educational standards for dental schools were approved by the ADA House of Delegates for implementation in 1941-42.
- 1949 The National Commission on Accrediting (NCA) began operating, taking over responsibilities and files of the Joint Committee on Accrediting which had been established in 1938 to control proliferation of accrediting entities.
- 1952 Public Law 82-250 tries to correct abuses in the G.I. Bill by requiring the U.S. Commissioner of Education to publish a list of nationally recognized accrediting agencies.
- 1952 The Council on Dental Education is recognized by the U.S. Office of Education as the national accrediting agency for dentistry (*Trans.*1954:26).
- 1963 The first reference to the National Commission on Accrediting (NCA) occurs in the Council's annual report (*Reports* 1963:11)
- 1964 The Council received recognition from NCA as the "official accrediting agency in the area of dental hygiene education" and had previously received similar recognition for accreditation of dental education programs (*Reports* 1964:10)
- 1964 The Federation of Regional Accrediting Agencies for Higher Education (FRACHE) replaces the National Commission of Regional Accrediting Agencies (NCRAA) which was formed in 1947 by the American Council on Education (ACE).
- 1968 The NCA recognized the Council for its accreditation of dental assisting and dental laboratory technology education programs (*Trans.*1968:37)
- 1972 The Council's recognition by NCA was continued for five years; the U.S. Office of Education criteria were being revised (*Reports* 1972:19; see also pp.17-20 for discussion of federal influence on education)
- 1973 The ADA House of Delegates transferred dentistry's accreditation program from the Council on Dental Education to the new 20-member Commission on Accreditation of Dental and Dental Auxiliary Education Programs (effective January 1975). Support for the tripartite membership of the Council was reaffirmed (*Reports* 1973:21). The Council reported to the House that it would jeopardize its recognition were to use accreditation sanctions to enforce Association policy (*Reports* 1973:25).
- 1973 The Council on Postsecondary Accreditation (COPA) formed; NCA and FRACHE dissolved.
- 1974 The Council membership expanded to 12 members, again retaining the tripartite structure originated when the Dental Educational Council of America was formed in 1906.
- 1975 The Commission on Accreditation of Dental and Dental Auxiliary Education Programs began to accredit educational programs. There were 59 dental schools at this time.
- 1975 After several years of effort, the National Commission on Accrediting and the Federation of Regional Accrediting Commission of Higher Education merged on January 1, 1975 to become the Council on Postsecondary Accreditation (COPA). For the first time, representatives from the

- Council of Specialized Accrediting Agencies (the group representing all recognized specialized accrediting agencies) had a voice within COPA in policy and decision-making processes.
- 1977 The Commission received full recognition for the maximum period when evaluated in 1977 (by both COPA and the U.S. Office of Education) (*Reports* 1982:40; 1977:25)
- 1979 The Commission on Accreditation of Dental and Dental Auxiliary Education Programs was renamed the Commission on Dental Accreditation (*Reports* 1979:67); the U.S. Office of Education became the U.S. Department of Education and its first Secretary was sworn in on December 6, 1979.
- 1980 The Commission presented testimony to a subcommittee of the U.S. Department/Office of Education against the 1979 petition of the Accrediting Bureau of Health Education Schools (ABHES) to expand its scope in 14 additional areas of education in the proprietary sector, including the two Commission-accredited areas of dental assisting and dental laboratory technician. In 1980 this ABHES petition was denied (*Reports* 1980:43).
- 1981 The Accrediting Bureau of Health Education Schools (ABHES) petitioned USDE to expand its accreditation scope to include institutional accreditation of private, postsecondary institutions offering allied health education programs. The Commission did not support or oppose the institutional expansion of scope, but did express concern about how the public might interpret ABHES' institutional accreditation where DA and DLT programs are concerned. In late 1982, the Department approved the petition, despite the Commission's concern to ABHES (*Reports* 1982:45; 1983:38).
- 1984 The Commission submitted one application/petition to the Council on Postsecondary Accreditation (COPA) and the U.S. Department of Education (USDE) and received full recognition for the maximum terms (5 and 4 years) from each agency. The Commission's accreditation of advanced and specialty education programs was now recognized by COPA, as well as by USDE.
- 1988- The Commission submitted re-recognition materials to COPA and USDE; COPA granted
1989 the Commission the maximum period of five years, citing no specific areas of noncompliance, but required an annual progress report until revision of the dental hygiene accreditation standards was completed; USDE granted the Commission the maximum period of five years and cited no areas of noncompliance.
- 1993 In April 1993, the COPA Board voted to dissolve the Council on Postsecondary Accreditation, effective the end of 1993. Partially in response to the anticipated dissolution of COPA, the Association of Specialized and Professional Accreditors (ASPA) was incorporated in August 1993. In June 1993, nine regional and seven national higher education associations formed the National Policy Board on Higher Education Institutional Accreditation (NPB).
- 1994 The Commission on Recognition of Postsecondary Accreditation (CORPA) was formed and took over the recognition function from COPA, effective January 1, 1994.
- 1995- The Commission submitted re-recognition materials to the U.S. Department of Education in
1996 November, 1995, using *Criteria* effective on July 1, 1994. USDE granted the Commission re-recognition for the maximum period of five years, but required submission of a progress report to ensure compliance with several new USDE criteria for recognition.

- 1995-1996 The Commission submitted re-recognition materials for review by the Commission on Recognition of Postsecondary Accreditation (CORPA) at its February 1996 meeting based on the *Provisions* revised by COPA during its last year of operation. The *Provisions* were adopted by CORPA when it was formed and went into effect in January 1994. CORPA granted the Commission re-recognition for the maximum period of five years and cited no areas of noncompliance.
- 1996 On December 31, 1996 CORPA filed Articles of Dissolution. The Commission on Dental Accreditation was informed that the CORPA recognition function would be assumed by the Council on Higher Education Accreditation (CHEA).
- 1997 In March 1997 the Commission was informed that because the Commission was recognized by CORPA, CHEA was extending that recognition until new recognition standards can be developed.
- 1997 In June 1997 the USDE considered the Commission's progress report demonstrating strengthened compliance with several of the new recognition criteria. The USDE accepted the report and requested an interim report by June 1, 1998 demonstrating full compliance with four cited criteria.
- 1998 In December 1998, the USDE considered the Commission's interim report on compliance with the four cited criteria. The USDE determined that the Commission was in full compliance with §602.21(b)(2); §602.26(c)(3); and §602.27(f), but needed to take additional action to come into full compliance with criterion §602.26(c)(4). The USDE requested that another report be submitted by December 9, 1999 demonstrating full compliance with criterion §602.26(c)(4).
- 1998 On September 28, 1998, the CHEA Board of Directors approved the CHEA *Recognition of Accrediting Organizations Policy and Procedures*, effective January 1999. CHEA's *Institutional Eligibility and Recognition Policy* stated that organizations which accredit programs were eligible to apply for recognition by CHEA if the majority of the accredited programs are degree-granting. CHEA reserved the right to amend its eligibility criteria for an ineligible accrediting agency.
- 1999 At its January 1999 meeting, the Commission noted that 545 of the Commission's 1321 accredited programs (41.3%) grant degrees and concluded that the Commission was not eligible for recognition by CHEA. The Commission determined not to seek a waiver in pursuit of CHEA recognition at that time, but to monitor the success of the newly established recognition program for accrediting agencies, and continue participation in CHEA activities.
- 1999 In December 1999, the USDE considered the Commission's interim report on compliance with criterion §602.26(c)(4). The USDE Secretary found the Commission to be in compliance with the requirement and accepted the interim report.
- 2002 On November 15, 2000, the Commission submitted its application to the Secretary of the United States Department of Education (USDE) for continued recognition as the accrediting agency for dental and dental-related education programs. The Secretary's National Advisory Committee on Institutional Quality and Integrity reviewed the USDE Staff Analysis of the application and the Commission's response at its May 2001 meeting. The Commission received the Secretary's final transmittal letter, dated December 17, 2001, granting recognition to the Commission for the maximum period of five years at its February 2002 meeting.

- 2005 In November 2005, the Commission submitted its application to the Secretary of the United States Department of Education (USDE) for continued recognition as the accrediting agency for dental and dental-related education programs. The Secretary's National Advisory Committee on Institutional Quality and Integrity reviewed the USDE Staff Analysis of the application and the Commission's response at its June 2006 meeting.
- 2006 The Commission's petition for continued recognition by the United States Department of Education (USDE) received a favorable review by the National Advisory Committee on Institutional Quality and Integrity (NACIQI) at its meeting on June 5, 2006. The Secretary of the USDE granted recognition to the Commission for the maximum period of five years starting December 12, 2006.
- 2012 On January 9, 2012, the Commission submitted its application to the Secretary of the United States Department of Education (USDE) for continued recognition as the accrediting agency for dental and dental-related education programs. The Secretary's National Advisory Committee on Institutional Quality and Integrity reviewed the USDE Staff Analysis of the application and the Commission's response at its June 2012 meeting.
- 2012 In August 2012, the Commission received confirmation that the U.S. Secretary of Education accepted the National Advisory Committee on Institutional Quality and Integrity recommendation that recognition be continued to permit the Commission an opportunity to, within a 12 month period, bring itself into compliance with three criteria.
- 2013 In January 2013, the Commission submitted documentation that it is in compliance with the three criteria cited in the final report. The Commission's petition for continued recognition by the United States Department of Education (USDE) received a favorable review by the National Advisory Committee on Institutional Quality and Integrity (NACIQI) at its meeting on June 6, 2013. In July 2013 the Secretary of the USDE Office of Postsecondary Education granted recognition to the Commission for the maximum period of four years.
- 2017 On January 5, 2017, the Commission submitted its application to the Secretary of the United States Department of Education (USDE) for continued recognition as the accrediting agency for dental and dental-related education programs. The Secretary's National Advisory Committee on Institutional Quality and Integrity (NACIQI) reviewed the USDE Staff Analysis of the application and the Commission's response at its June 20, 2017 meeting. On September 20, 2017 the Assistant Secretary of the USDE Office of Management granted recognition to the Commission for the maximum period of five years.

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