

MINUTES

COMMISSION ON DENTAL ACCREDITATION AMERICAN DENTAL ASSOCIATION ADA HEADQUARTERS BUILDING, CHICAGO

THURSDAY, JULY 31, 2014 (CLOSED SESSION)

Call to Order: The Chair, Dr. John Williams, called a regular meeting of the Commission on Dental Accreditation to order at 1:00 P.M. on Thursday, July 31, 2014, in the Executive Board Room of the ADA Headquarters Building, Chicago, in closed session for the purpose of reviewing educational programs.

Roll Call: Dr. Byron “Pete” Benson, Ms. Kristi Schmitt Burr, Dr. Stephen Campbell, Dr. Thomas Cangialosi, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Mr. Robert Giasolli, Dr. Milton Glicksman, Dr. Henry Greenwell, Dr. Richard Kahn, Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. William Leffler, Dr. Harold Livingston, Dr. Ana Karina Mascarenhas, Dr. Brad Neville, Dr. Charlotte Royeen, Dr. William Schindler, Ms. Kathi Shepherd, Dr. Robert Sherman, Dr. James Sherrard, Dr. Steven Schonfeld (vice-chair), Dr. Stanley Surabian, Dr. B.D. Tiner, Dr. Ivan Torres-Nazario, Dr. Perry Tuneberg, Dr. Karen West and Dr. John Williams (chair).

Dr. William Schindler was unable to attend. Dr. Milton Glicksman participated by telephone.

Trainee Commissioners (Observers): Dr. Patricia Blanton, Dr. Mark Lerman, Dr. William Lobb, Dr. Michael Mills, Ms. Cindy Stergar and Dr. Matthew Wheeler.

Guests: Dr. Claude Lamarche, Chair, and Ms. Susan Matheson, Director, Commission on Dental Accreditation of Canada.

Trustee Liaison: Dr. Joseph Hagenbruch, ADA Trustee Liaison, Eighth District.

CODA Staff: Dr. Sherin Tooks, *ex-officio*, and Ms. Alyson Ackerman, Ms. Cathy Baumann, Dr. Catherine Horan, Ms. Patrice Renfrow, Ms. Peggy Soeldner and Ms. Jennifer Snow were in attendance. Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, was also in attendance.

Adoption of the Agenda: The agenda of the meeting was adopted.

Commissioner Fiduciary Duties and Conflict of Interest Obligations: Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, reminded the Commission of its fiduciary responsibilities and the Conflict of Interest policy.

Policy Reminder of Confidentiality: Dr. John Williams, CODA Chair, read the Commission’s Reminder of Confidentiality, noting the confidential nature of the Commission’s materials and deliberations related to the accreditation of programs.

Accreditation Mail Ballots Since Last Commission Meeting: The Commission approved for the record, seven (7) mail ballots related to program accreditation actions, which had been considered since the Winter 2014 Commission meeting.

Consideration of Consultant Nominations: Consultants are appointed annually for one-year terms but for no more than six (6) consecutive years. Members of the Commission's Review Committees are also considered consultants; they serve one four-year term. The Commission considered the names of individuals recommended by the Review Committee on Predoctoral Dental Education (National Licensure), Review Committee on Postdoctoral General Dentistry Education (Oral Medicine), Review Committee on Oral and Maxillofacial Radiology Education, and Review Committee on Oral and Maxillofacial Surgery Education for a one-year appointment as consultants for 2014-2015.

Commission Action: The Commission approves the education consultant appointments for 2014-2015 (**Appendix 1**).

Consideration of Matters Relating to Accreditation Actions: The Commission reviewed site visit evaluations, progress reports, and other requested reports on predoctoral dental education programs, advanced general dental education programs, advanced specialty education programs, and allied dental education programs.

Commission Action: Accreditation status was granted to programs evaluated since the Winter 2014 meeting. Accreditation actions are summarized in the "Report on the Accreditation Statuses of Educational Programs" (**Appendix 2**).

Commissioner Participation on Standing Committees: The Commission discussed the difficulty with establishing a quorum for standing committee meetings, resulting in meetings in which no official decisions can be made. It was reiterated that service as a Commissioner requires a substantial time commitment, which may not be fully reflected in current policy on appointment of Commissioners. The Commission discussed enhancements to its process for the conduct of meetings, which might address this issue. Potential modifications to the standing committee meeting process could include: 1) increasing online discussion of meeting materials with shortened meetings for the sole purpose of voting on issues, 2) conducting mail ballots on items that may not require significant committee discussion; 3) establishing a "CODA Committee Day" which is agreed upon by Commissioners for the specific work of the Commission (for example, Thursday afternoons). Following discussion, the Commission believed that Commissioner input on this topic should be received as part of the post-meeting survey.

Commission Action: The Commission directs staff to collect information from Commissioners on ways in which meeting participation could be enhanced, through the post-Commission meeting survey.

New Business:

Discussion on Programs with Off-Campus Sites: The Commission discussed the changing landscape of dental education whereby programs are increasingly establishing off-campus

clinical training sites for student/resident educational experiences. The Commission discussed expectations related to the level of oversight of the clinical training site(s) by the program director. The Commission noted that the Task Force on Off-Campus Sites and Standing Committee on Documentation and Policy Review studied this issue and presented findings at the Commission meetings in Summer 2012 and Winter 2013, respectively. It was further noted that programs could be structured in a number of different ways while maintaining compliance with the current Accreditation Standards. Accreditation Standards for each discipline specify the requirements for program director administrative oversight of a program.

In addition, the Commission discussed its long-term financial model related to assessment of fees to programs with off-campus sites. The Commission noted that the Standing Committee on Finance is reviewing the Commission's financial model related to fees (for example annual fees and special focused site visit fees) and will present a report for the Commission's review at a future meeting.

Commission Action: See Commission Action under New Business in Open Session.

Communication Between Review Committees and Site Visit Teams: A Commissioner questioned whether the Review Committee could consult with the Site Visit Team during the time of the Review Committee meeting, in instances where the Review Committee believed there was a gross discrepancy in the site visit report; for example, the number of procedures documented in a site visit report does not appear to satisfy the standards although no recommendation was written. It was noted that the Commission has historically not permitted communication between Review Committee members and Site Visit Teams. Following discussion, the Commission believed that the Standing Committee on Documentation and Policy Review should conduct a review of the Commission's current policy and practice related to communication between Review Committee members and Site Visit Teams to determine if a change to the current policy and practice is warranted. If the Documentation and Policy Committee suggests a change in practice to permit communication between the Review Committees and Site Visit Teams, the Standing Committee should propose a policy to define the parameters of communication between these groups.

Commission Action: The Commission directs the Standing Committee on Documentation and Policy Review to review the Commission's current policy and practice related to communication between Review Committee members and Site Visit Teams to determine if a change to the current policy and practice is warranted.

Commission Action: The Commission further directs that if the Standing Committee on Documentation and Policy Review believes a change in the Commission's practice to permit communication between the Review Committees and Site Visit Teams is warranted, a proposed policy be submitted to define the parameters of communication between these groups for review at the Commission's Winter 2015 meeting.

Adjournment: The Commission adjourned the closed session at 6:15 P.M.

MINUTES

COMMISSION ON DENTAL ACCREDITATION AMERICAN DENTAL ASSOCIATION ADA HEADQUARTERS BUILDING, CHICAGO

August 1, 2014 (OPEN SESSION)

Call to Order: The Chair, Dr. John Williams, called a regular meeting of the Commission on Dental Accreditation to order at 8:00 A.M. on Friday, August 1, 2014, in the Executive Board Room of the ADA Headquarters Building, Chicago, in open session.

Roll Call: Dr. Byron “Pete” Benson, Ms. Kristi Schmitt Burr, Dr. Stephen Campbell, Dr. Thomas Cangialosi, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Mr. Robert Giasolli, Dr. Milton Glicksman, Dr. Henry Greenwell, Dr. Richard Kahn, Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. William Leffler, Dr. Harold Livingston, Dr. Ana Karina Mascarenhas, Dr. Brad Neville, Dr. Charlotte Royeen, Dr. William Schindler, Ms. Kathi Shepherd, Dr. Robert Sherman, Dr. James Sherrard, Dr. Steven Schonfeld (vice-chair), Dr. Stanley Surabian, Dr. B.D. Tiner, Dr. Ivan Torres-Nazario, Dr. Perry Tuneberg, Dr. Karen West and Dr. John Williams (chair).

Dr. Milton Glicksman participated by telephone.

Trainee Commissioners (Observers): Dr. Patricia Blanton, Dr. Mark Lerman, Dr. William Lobb, Dr. Michael Mills, Ms. Cindy Stergar and Dr. Matthew Wheeler.

Guests: Dr. Claude Lamarche, Chair, and Ms. Susan Matheson, Director, Commission on Dental Accreditation of Canada.

Trustee Liaison: Dr. Joseph Hagenbruch, ADA Trustee Liaison, Eighth District.

CODA Staff: Dr. Sherin Tooks, *ex-officio*, and Ms. Alyson Ackerman, Ms. Cathy Baumann, Dr. Catherine Horan, Ms. Patrice Renfrow, Ms. Peggy Soeldner and Ms. Jennifer Snow were in attendance. Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, was also in attendance.

Adoption of Agenda: The agenda of the meeting was adopted.

Conflict of Interest Statement: Ms. Cathryn Albrecht, ADA/CODA Senior Associate General Counsel, reminded the Commissioners of their fiduciary responsibilities and the Commission’s Conflict of Interest policy.

Accept for the Record the Minutes of the Winter 2014 Meeting: The minutes of the Winter 2014 Commission meeting were accepted for the record. Since the last meeting, the minutes had been approved via mail ballot of the Commission.

Consent Calendar: The following reports in their entirety were placed on the consent calendar and were adopted as received:

Review Committee Reports:

- Report of the Review Committee on Dental Laboratory Technology Education (**Appendix 3**)
- Report of the Review Committee on Dental Public Health Education (**Appendix 4**)
- Report of the Review Committee on Endodontics Education (**Appendix 5**)
- Report of the Review Committee on Oral and Maxillofacial Pathology Education (**Appendix 6**)
- Report of the Review Committee on Oral and Maxillofacial Radiology Education (**Appendix 7**)
- Report of the Review Committee on Oral and Maxillofacial Surgery Education (**Appendix 8**)
- Report of the Review Committee on Orthodontics and Dentofacial Orthopedics (**Appendix 9**)

Miscellaneous Affairs – Matters for the Commission as a Whole:

- Report of the Joint Advisory Committee on International Accreditation (**Appendix 10**)

Mail Ballots Approved Since Last Commission Meeting:

- 2014 Winter CODA Minutes (**Appendix 11**)
- Commission on Dental Accreditation of Canada Request for Comment on Revisions to Specialty Standards (**Appendix 12**)
- 2014 Commission on Dental Accreditation Self-Assessment (**Appendix 13**)

Report of the Review Committee on Predoctoral Dental Education: Committee Chair: Dr. John Williams. Committee Members: Dr. Joseph D’Ambrosio, Dr. Nicolaas Geurs, Dr. Sally Mauriello, Dr. Charlotte Royeen and Dr. Stephanie Oberhaus. Dr. Marshall Titus was unable to attend. Commissioner Trainees: Dr. William Lobb. Dr. Patricia Blanton was unable to attend. Guests: Dr. Anthony Palatta, senior director, Educational Program Development (for entire Open Session) and Dr. Gwen Garrison, Senior Vice President for Educational Research & Analysis (for Open Session, Day One), American Dental Education Association (ADEA). Dr. Peter Polverini, immediate past – president and Dr. Christopher Fox, executive director, the American Association of Dental Research (AADR) (for presentation during Open Session, Day One). Staff: Dr. Catherine Horan, manager, Predoctoral Dental Education, Ms. Marjorie Hooper, senior project assistant, Predoctoral Dental Education and Dr. Sherin Toops, director, CODA. A two-day meeting of the Review Committee on Predoctoral Dental Education was held at ADA Headquarters in Chicago on July 7-8, 2014.

Informational Report on the Frequency of Citings of Accreditation Standards for Dental Education Programs (Implemented February 1, 2008): The Commission reviewed the annual report on the Frequency of Citings of Accreditation Standards for Dental Education Programs (Implemented February 1, 2008), noting that this is the final report on the Accreditation Standards adopted in January 2007. Citings suggest that most dental education programs (DDS/DMD) have been in full compliance with the Standards. Measurement of student competency in the clinical sciences continues to be the area with the highest number of citations.

Commission Action: This report is informational in nature and no action was taken.

Informational Report on the Frequency of Citings of Accreditation Standards for Dental Education Programs (Implemented July 1, 2013): The Commission reviewed the first annual report on the Frequency of Citings of Accreditation Standards for Dental Education Programs (implemented July 1, 2013), and noted that, with limited data from seven (7) programs, the two (2) most frequently cited areas of non-compliance are: Standard 5-3, regarding a formal system of continuous quality improvement for patient care and Standard 2-23, the clinical competency standard, with three (3) citings. The latter area was the most frequently cited area in the previous accreditation standards (implemented February 1, 2008).

Commission Action: This report is informational in nature and no action was taken.

Consideration of Proposed Revisions to the Accreditation Standards for Dental Education Programs and Related Documents: The Commission considered the report of the Predoctoral Dental Education Review Committee (PREDOC RC), noting that proposed changes to the Accreditation Standards had been submitted through a letter from the past president of the American Dental Association (ADA), Dr. Robert Faiella, the ADA House of Delegates (Resolution 57H-2013), and a letter and supporting documents from the Healthy People Curriculum Task Force. The PREDOC RC determined that no changes to the Accreditation Standards were warranted based upon the communications from Dr. Faiella and the Healthy People Curriculum Task Force. The Commission focused its discussion on Resolution 57H-2013, and the proposed revision to the Accreditation Standards based upon the public concern for student debt management. The PREDOC RC recommended the proposed revision, as follows (addition is underlined; deletion is ~~stricken~~):

- 4-~~6~~7 Student services **must** include the following:
- a. personal, academic and career counseling of students;
 - b. assuring student participation on appropriate committees;
 - c. providing appropriate information about the availability of financial aid and health services;
 - d. developing and reviewing specific written procedures to ensure due process and the protection of the rights of students;
 - e. student advocacy; and
 - f. maintenance of the integrity of student performance and evaluation records;
 - g. instruction on personal debt management and financial planning.

Commission Action: The Commission directs circulation, for one year, the addition of “g. instruction on personal debt management and financial planning” to renumbered Standard 4-7 (prior Standard 4-6) of the Accreditation Standards for Dental Education Programs (Student Services), as presented above, with Open Hearings to be conducted at the Fall 2014 American Dental Association (ADA) and Spring 2015 American Dental Education Association (ADEA) annual meetings with comment to be considered by the Predoctoral Dental Education Review Committee and Commission in Summer 2015.

Consideration of a Request from the American Association of Dental Research on the Research Standards of the Accreditation Standards for Dental Education Programs: The Commission reviewed the PREDOC RC's report related to a request by the American Association of Dental Research (AADR). Representatives of the AADR made a presentation to the PREDOC RC on the Accreditation Standards related to research and ways in which the AADR could further engage with the Commission. It was noted that the current standards had strengthened the requirements for research with an additional standard; however, complementary statement of intent or examples of evidence could also serve in support of the effort to heighten the awareness of research in Commission-accredited predoctoral dental education programs. The PREDOC RC encouraged the AADR to strengthen engagement with the Commission through nomination of basic science site visitors and to propose changes to the Accreditation Standards, which could be considered by the PREDOC RC at a future meeting.

Commission Action: This report is informational in nature and no action was taken.

Consideration of the Use of Private Practices for Community-Based Education: At its Summer 2013 and Winter 2014 meetings, the Commission on Dental Accreditation discussed the use of private practices in predoctoral dental education programs. The PREDOC RC and Commission believed that private offices could be used in dental education; however, there were no requirements in the Accreditation Standards for Dental Education Programs regarding affiliated institutions, including private offices, to monitor such clinical sites. At this meeting, the Commission considered the work of a subcommittee of the PREDOC RC, which had reviewed examples of accreditation standards of other disciplines related to this concept and proposed the addition of two new standards.

The Commission discussed the intent of the word “any” in proposed Standard 4-6, noting the expectation is that all extramural sites used by the dental education program, not owned by the educational sponsoring institution, are required to comply with this standard to ensure the sustained quality of the experience at the training site and to document all sites used by the program. The Commission also noted that many dental education programs have a number of affiliation agreements in place, citing the potential impact to dental education programs related to existing affiliation agreements, which would require modification if the proposed Standards were implemented. As such, the Commission amended proposed Standard 4-6 to include “established or renewed after January 1, 2016” to reduce the burden of renewing all affiliation agreements at one time. The Commission also discussed the requirement for calibration of faculty at the clinical sites (proposed Standard 4-6, d), noting that while this may be challenging to some programs because of the number of sites used and distance of the sites from the main program location, it is important that the Commission ensure that faculty are calibrated at all clinical training sites.

The Commission took action on the proposed standards below, with modification (additions are underlined):

New Proposed Standard 1-8

The sponsoring institution of the educational program **must** accept full responsibility for the quality of education provided in all affiliated sites.

New Proposed Standard 4-6

Any clinical practice model, established or renewed after January 1, 2016, including but not limited to private practice or community-based practice, not owned by an educational sponsoring institution, **must** have a written agreement, which is held with the sponsoring institution regarding off-campus learning experiences that meet accreditation standards or program requirements, and covers the following items of agreement:

- a. A contingency plan developed by the sponsoring institution should an agreement be terminated;
- b. Inactive sites maintain resources as approved initially;
- c. Designation of the dean, or another person to whom the dean has delegated the responsibility of monitoring the supervision of the instruction and scheduling;
- d. Clinical assessment (formative and summative) and calibration of the program faculty, to ensure that all predoctoral dental students receive comparable instruction across sites and specialties;
- e. A location, equipment and facilities, and time available for use of the equipment and facilities are compatible with the instructional needs of the program; and
- f. Policies and procedures of the facility compatible with the goals and instructional needs of the predoctoral dental education program.

(For the addition of new off-campus sites, refer to the relevant Commission Policy and Guidelines.)

Commission Action: The Commission directs for circulation, for one year, the proposed new Standards 1-8 and 4-6 (Facilities and Resources) of the Accreditation Standards for Dental Education Programs, as presented above, with Open Hearings to be conducted at the Fall 2014 American Dental Association (ADA) and Spring 2015 American Dental Education Association (ADEA) annual meetings with comment to be considered by the Predoctoral Dental Education Review Committee and Commission in Summer 2015.

Consideration of Guidelines for Reporting Enrollment Increase in Predoctoral Dental Education Programs: At its Winter 2014 meeting, the Commission directed further review and revision of the *Guidelines for Reporting Enrollment Increase in Predoctoral Dental Education Programs*, noting the need for additional clarification of the reporting requirements related to the threshold for reporting student enrollment increases. At this meeting, the Commission reviewed the PREDOC RC's proposed changes to the *Guidelines*, particularly the areas of "Timing of Requests and Responses" and "Rationale for the Guidelines," which were modified to provide clarification of the Commission's expectation. The Commission discussed the threshold which would require reporting and emphasized that the intent was to ensure adequate resources to the program, not to control nationwide student enrollment in dental education programs. The Commission amended the "Timing of Requests and Responses" to clarify that the dental program's request must be made prior to the implementation of the increase "if the increase would result in an increase in total enrollment."

Commission Action: The Commission adopts as amended the proposed *Guidelines for Reporting Enrollment Increase in Predoctoral Dental Education Programs* (**Appendix**

14), with immediate implementation, as complement to the established Commission Policy on Program Change.

Report of the Joint Advisory Committee on Dental Education Information: The Commission considered the report of the PREDOC RC, related to the activities of the Joint Advisory Committee on Dental Education Information (JACDEI). Recommendations were presented regarding revision and updating of the descriptive questions and the revision of clock-hour categories in the 2014-15 Curriculum Survey. It was noted that the Commission previously indicated its desire to retain some level of institutional reporting of curriculum clock hours, where appropriate. In further review, the PREDOC RC recommended that the Commission add “Small Group (TBL/PBL)” as a category for which clock hours should be collected.

Commission Action: The Commission directs the revised Part I – Descriptive Questions of the Curriculum Survey be implemented in the 2014-15 cycle.

Commission Action: The Commission further directs that the revised clock-hour categories of the Curriculum Survey, as amended in **Appendix 15**, be implemented in the 2014-15 cycle.

Report of the Joint Advisory Committee on International Accreditation: The Commission noted that the PREDOC RC reviewed the report of the Joint Advisory Committee on International Accreditation (JACIA), focusing on the actions of the JACIA. The report of the JACIA is noted elsewhere in these minutes.

Commission Action: This report is informational in nature and no action was taken.

Report of the Review Committee on Postdoctoral General Dentistry Education: Committee chair: Dr. Harold “Mark” Livingston. Committee members: Dr. Michael Brennan, Dr. Sebastian Ciancio, Dr. John Coke, Dr. Kenneth Fedor, Ms. Marlene Futterman, Dr. Jeffery Hicks, Dr. Henry Gremillion, Dr. Timothy Halligan, Dr. James Tom, Dr. Stephen Young, and Dr. Allen Wong. Guests (open portion only): Dr. Anthony Palatta, Senior Director, Educational Program Development Policy Center, American Dental Education Association; Ms. Kristen Dee, Executive Director, Special Care Dentistry Association; Dr. Carol Stewart, American Academy of Oral Medicine (via telephone). Commission Staff: Ms. Peggy Soeldner, manager, Postdoctoral General Dentistry Education and Dr. Sherin Tooks, director, CODA. The meeting of the Postdoctoral General Dentistry Review Committee (PGD RC) was held July 10-11, 2014 in the Association Headquarters Building.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced Education Programs in General Dentistry: The Commission reviewed the report on frequency of citings for advanced education programs in general dentistry. There were 119 citings of non-compliance and of these, 8 (7%) were related to Standard 1 – Institutional and Program Effectiveness; 78 (66%) were related to Standard 2 – Educational Program; 5 (4%) were related to Standard 3 – Faculty and Staff; 4 (3%) were related to Standard 4 – Educational Support Services, and 24 (20%) were related to Standard 5 – Patient Care Services.

Commission Action: This report is informational in nature and no action was taken.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced Education Programs in General Practice Residency: The Commission reviewed the report on frequency of citings for advanced education programs in general practice residency. There were 474 citings of non-compliance and of these, 67 (14%) were related to Standard 1 – Institutional and Program Effectiveness; 297 (63%) were related to Standard 2 – Educational Program; 31 (7%) were related to Standard 3 – Faculty and Staff; 15 (3%) were related to Standard 4 – Educational Support Services, and 64 (13%) were related to Standard 5 – Patient Care Services.

Commission Action: This report is informational in nature and no action was taken.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced General Dentistry Education Programs in Dental Anesthesiology: The Commission reviewed the report on frequency of citings for advanced general dentistry education programs in dental anesthesiology. An analysis showed that a total of ten (10) citings of non-compliance were noted in the nineteen (19) site visit reports. Data indicated that the most frequently cited standard is Standard 1-5, written agreements, with four (4) citations.

Commission Action: This report is informational in nature and no action was taken.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced General Dentistry Education Programs in Oral Medicine: The Commission reviewed the report on frequency of citings for advanced general dentistry education programs in oral medicine. An analysis of the site visit reports showed that a total of six (6) citings of non-compliance were made in the oral medicine site visit reports. Due to the limited number of site visits, a trend in the data cannot be identified.

Commission Action: This report is informational in nature and no action was taken.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced General Dentistry Education Programs in Orofacial Pain: The Commission reviewed the report on frequency of citings for advanced general dentistry education programs in orofacial pain. An analysis of the site visit reports showed that two (2) citings of non-compliance were made in the eight (8) site visit reports of the advanced general dentistry education programs in orofacial pain. Due to the limited number of site visits, a trend in the data cannot be identified.

Commission Action: This report is informational in nature and no action was taken.

Consideration of Proposed Revisions to Accreditation Standard 1-1 for Advanced Education in General Dentistry (AEGD) Programs: The Commission considered a report from the Postdoctoral General Dentistry Education Review Committee (PGD RC) related to a proposed revision to Standard 1-1 of the Accreditation Standards for Advanced Education Programs in General Dentistry. The request to modify Standard 1-1 was submitted by the Chief of Graduate Education/Dean of the Army Postgraduate Dental School, and the Dean of the Naval Postgraduate Dental School/Director of the Navy Medicine Professional Development Center.

The Commission noted that Standard 1-1 requires the program sponsor and each co-sponsor, when applicable, to be accredited by an agency recognized by the U.S. Department of Education or by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). It was believed by the requestors that this requirement places some military programs in jeopardy of being unable to satisfy the requirement, although both branches of the military believe appropriate oversight is currently provided by each military service and provides the same assurances as institutional sponsorship of civilian programs.

In discussion of this issue, some Commissioners were concerned that the Commission should not modify its standards for one particular program or cohort of programs. Further, there were questions raised about the appropriateness of allowing the military programs to satisfy “institutional accreditation” through an internal oversight process performed by their own branch of service. Other Commissioners believed that the Commission’s previous standard that required “Joint Commission or its equivalent” allowed for such an oversight, and that upon changing this standard to its current language the Commission unintentionally created a hardship for some accredited programs.

Commission Action: The Commission directs the proposed revision to Standard 1-1 of the Accreditation Standards for Advanced Education Programs in General Dentistry (**Appendix 16**) be circulated to the communities of interest until December 1, 2014 with an Open Hearing at the Annual Session of the American Dental Association in October 2014 and consideration at the Winter 2015 meetings of the Review Committee and Commission.

New Business: Consideration of Proposed Revisions to Accreditation Standard 1-1 for Advanced Education Programs in General Practice Residency and Advanced Education Programs in Dental Anesthesiology, Oral Medicine and Orofacial Pain: The Commission considered this report concurrently with the proposed revision to Standard 1-1 for advanced education in general dentistry. Comments are noted above.

Commission Action: The Commission directs the proposed revision to Standard 1-1 of the Accreditation Standards for Advanced Education Programs in General Practice Residency and Advanced General Dentistry Education Programs in Dental Anesthesiology, Oral Medicine and Orofacial Pain as noted in **Appendix 16** be circulated to the communities of interest until December 1, 2014 with an Open Hearing at the Annual Session of the American Dental Association in October 2014 and consideration at the Winter 2015 meetings of the Review Committee and Commission.

Report of the Review Committee on Dental Assisting Education: Committee chair: Dr. Lorraine Gagliardi. Committee members: Ms. Ethel Campbell, Ms. Cynthia Cronick, Dr. Fady Faddoul, Dr. Paula Friedman, Dr. Gene Kelber, Dr. Connie Kracher, Ms. Donna Lepkoski, Ms. Cathy Roberts, and Dr. Deanna Stentiford. Guests (Open Portion Only): Ms. Rebecca Anderson, director, Marketing and Communications, Dental Assisting National Board, Ms. Ann Battrell, executive director, and Ms. Pamela Steinbach, director, Education and Research, American Dental Hygienists’ Association, Ms. Jennifer Blake, director, Education and Professional Relations, American Dental Assistants Association, and Ms. Tami Grzesikowski,

senior director, Allied Dental Education, American Dental Education Association. Commission Staff: Ms. Patrice Renfrow, manager, Allied Dental Education, Ms. Alyson Ackerman, coordinator, Allied Program Reviews. The meeting of the Review Committee on Dental Assisting Education (DA RC) was held on July 10-11, 2014 at the ADA Headquarters Building.

Informational Report on Frequency of Citings of Accreditation Standards for Dental Assisting Education Programs: The Commission reviewed the report on frequency of citings for dental assisting education programs. The four components of Standard 1-1 that pertain to program planning and outcomes processes received a total of 83 citations and comprise 93% of all citations made within Standard 1-Institutional Effectiveness. The four components of Standard 2-6 that specify required course documentation components, were cited a total of 195 times and account for over 31% of all citations made within Standard 2-Educational Programs. The most frequent citings in Standard 3-Administration, Faculty and Staff occurred in Standards related to documentation of faculty qualifications. Standards 3-7 through 3-9 were cited a total of 118 times or approximately 59% of all Standard 3 citations. A trend may be developing whereby programs are unable to maintain qualified faculty.

Commission Action: This report is informational in nature and no action was taken.

New Business: Consideration of Dental Assisting Standard 2-5 Intent Statement Revision: The Commission considered a request from the Dental Assisting Review Committee (DA RC) to add the words “critical thinking” to the intent statement of Standard 2-5, to emphasize that the curriculum content allow assimilation of foundational knowledge and critical thinking.

Commission Action: The Commission adopts, with immediate implementation, the addition of the term “critical thinking” to the intent statement of Dental Assisting Standard 2-5 (**Appendix 17**).

Report of the Review Committee on Dental Hygiene Education: Committee chair: Ms. Kathi Shepherd. Committee members: Dr. Lynn Austin, Dr. Carolyn Breen, Ms. Barbara Dixon, Dr. Susan Duley, Dr. Ellen Grimes, Ms. Karen Haldemann, Dr. James Jones, Dr. Melanie Peterson, Mr. Alan Rogalski, Dr. Perry Tuneberg. Guests (Open Session): Ms. Michelle Smith, manager, Dental Hygiene Education and Ms. Pamela Steinbach, director, Education and Research, American Dental Hygienists’ Association, and Ms. Tami Grzesikowski, senior director, Allied Dental Education, American Dental Education Association attended the policy portion of the meeting. Commission Staff: Ms. Patrice Renfrow, manager, Allied Dental Education, Ms. Alyson Ackerman, coordinator, Allied Dental Education, CODA. Dr. Sherin Tooks, director, CODA, attended a portion of the meeting. The meeting of the Review Committee on Dental Hygiene Education (DH RC) was held July 8-9, 2014, at the ADA Headquarters Building.

Informational Report on Frequency of Citings of Accreditation Standards for Dental Hygiene Education Programs: The Commission reviewed the report on frequency of citings for dental hygiene education programs. A total of 454 areas of non-compliance were cited; 7.2% (88) related to Standard 1-Institutional Effectiveness; 50.4% (614) related to Standard 2-Educational Program; 18.1% (221) related to Standard 3-Administration, Faculty and Staff; 9% (110) related to Standard 4-Educational Support Services; 5.5% (67) related to Standard 5-Health and Safety

Provisions; and 9.7% (118) related to Standard 6-Patient Care Services. Analysis of the data indicated that the most frequently cited areas of non-compliance were in Standard 2. The greatest number of citations was 151, associated with the subsets of Standard 2-16 regarding graduates' competency in providing dental hygiene care for the child (27 citations), adolescent (34 citations), adult (22 citations), geriatric (33 citations) and patients with special needs (35 citations).” Standard 2-7, which refers to written course documentation provided to students, had 143 areas of cited non-compliance. Standard 3-7 was cited 39 times for non-compliance with required faculty educational methodology.

Commission Action: This report is informational in nature and no action was taken.

Ad Hoc Committee to Study Dental Hygiene Standards 2-7 Through 2-12: The Commission considered a report from the Dental Hygiene Review Committee (DH RC) related to an ad hoc committee which studied problems associated with interpretation and application of Dental Hygiene Standards 2-7 through 2-12. The DH RC's ad hoc committee carefully studied the Accreditation Standards and determined that sufficient information related to the interpretation and application of Standards 2-7 through 2-12 is provided with no further modification warranted. While the DH RC concurred with the ad hoc committee, the Review Committee proposed to the Commission changes in the numbering of Standards 2-9 through 2-12 to clarify that these requirements are subsets of Standard 2-8 and to provide additional interpretation and application of the standards.

Commission Action: The Commission adopts, with immediate implementation, renumbering Dental Hygiene Standards 2-9 through 2-12 as subsections of Dental Hygiene Standard 2-8 (**Appendix 18**).

New Business: Ad Hoc Committee to Study Dental Hygiene Standard 2-1: The DH RC identified inconsistency in degree award within Dental Hygiene Standard 2-1. The DH RC noted the standard requires two-year colleges to award an associate degree yet four-year colleges can award an associate degree, certificate, or baccalaureate degree. The committee identified the minimum award for entry-level dental hygiene program graduates is the associate degree at this time, and determined clarification regarding certificate award within four-year colleges is warranted. As such, the DH RC believed an ad hoc committee should study DH Standard 2-1 for possible clarification and/or revision. The ad hoc committee would summarize its findings and present a report to the DH RC and Commission at their Winter 2015 meetings. The activities of the ad hoc committee pose no financial implications for the Commission.

Commission Action: The Commission directs the formation of an ad hoc committee of the Dental Hygiene Review Committee to study inconsistency in degree award in Dental Hygiene Standard 2-1 through a conference call meeting, with a summary report of its findings for consideration by the Review Committee and Commission at their Winter 2015 meetings.

Report of the Review Committee on Pediatric Dentistry Education: Committee Chair: Dr. Kevin Donly. Committee Members: Dr. Brenda Bohaty, Dr. Renee DeVries, Dr. Jeffrey Hochstein, Dr. Man Wai Ng, and Dr. Richard Udin. Guests (Open Portion Only): Dr. Anthony

Palatta, senior director for educational program development, American Dental Education Association and Mr. Scott Dalhouse, manager of educational affairs, American Academy of Pediatric Dentistry. Staff Members: Ms. Catherine Baumann, manager, Advanced Specialty Education and Ms. Sheron Parkman, senior project assistant, CODA. The meeting of the Review Committee on Pediatric Dentistry Education was held via telephone conference call on Tuesday, July 8, 2014.

Informational Report of Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry: The Commission reviewed the report on frequency of citings for advanced specialty education programs in pediatric dentistry. The Commission noted that the Standards were approved in July 1998 and implemented on January 1, 2000. Since implementation, 176 pediatric dentistry site visits have been conducted by the visiting committees of the Commission utilizing the January 2000 Standards. An analysis of the data showed that 83 (55%) of the 151 areas have been cited for non-compliance at least once. The most notable finding is that the four (4) most frequently cited areas of non-compliance are among those common to all specialties and are all within Standard 1. The most frequently cited pediatric dentistry-specific standards are Standard 2-2.3 related to ongoing evaluation of program goals, objectives and content, and outcomes assessment, Standard 2-3.5, related to clinical faculty availability for all clinical sessions, Standard 4-3.3.b related to clinical experiences that ensure competency in diagnosis or abnormalities in the developing dentition and treatment of those conditions, and Standard 6-1a, 6-1b and 6-1c, related to students/residents engaging in scholarly research. Revised Accreditation Standards were adopted in February 2012, with implementation July 1, 2013; the citings related to site visits occurring July 1, 2013 through October 31, 2013 were noted in a separate report. The Commission noted that this report served as the final report on the Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry adopted July 1998.

Commission Action: This report is informational in nature and no action was taken.

Informational Report of Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Pediatric Dentistry: The Commission reviewed the report on frequency of citings for advanced specialty education programs in pediatric dentistry. The current standards were adopted on February 1, 2012 and implemented by the Commission on July 1, 2013. Since implementation of the standards, three (3) pediatric dentistry site visits have been conducted by the visiting committees of the Commission utilizing the February 2012 Standards. Since only three (3) pediatric dentistry program site visits occurred during the period covered in this report, an analysis of finding could not be provided at this time.

Commission Action: This report is informational in nature and no action was taken.

New Business: Advanced Standing Students/Residents in Advanced Specialty Education Programs: The Commission considered a new business item submitted by the Pediatric Dentistry Education Review Committee (PED RC), which discussed the concept of “advanced standing” as it related to requests for increases in enrollment. The PED RC noted that programs may enroll students/residents with a modified program track under “advanced standing” policies of the institution/program and in accordance with the requirements of the Accreditation

Standards. However, the PED RC noted that without a definition for advanced standing there could be concerns related to whether a modified program track meets the CODA Standards. The PED RC believed the Commission should consider developing a definition for “advanced standing” and provide clarification through guidelines and reporting criteria for review of program tracks based upon acceptance of advanced standing students/residents. The guidelines could include concepts such as: didactic requirements, grades, extramural requirements such as the GRE/TOEFL examinations, and previous curriculum that would allow for advanced standing. Further, the PED RC believed the Commission should discuss whether advanced standing would apply to international students/residents who have to remain in the program for a specific period of time, or whether advanced standing included students/resident who have already completed a specialty degree in a CODA-accredited institution. In discussion of this matter, the Commission noted that “advanced standing” is included the Accreditation Standards of all disciplines under the Commission’s purview; therefore, this topic would have broad impact for the Commission.

Commission Action: The Commission directs the Standing Committee on Documentation and Policy to review “advanced standing,” as it relates to all disciplines under the Commission’s purview, and determine whether a definition of advanced standing and guidelines for reporting criteria should be developed with a report to the Commission in Winter 2015.

Report of the Review Committee on Periodontics Education: Committee Chair: Dr. Henry Greenwell. Committee Members: Drs. David Kerns, Michael Mills, David Paquette, and Mr. John Rheinberger. Dr. Diane Talentowski participated by conference call. Guests (Open Session only): Ms. Cheryl Parker and Ms. Shana Berezin, American Academy of Periodontology (AAP); Dr. Kent Palcanis, American Board of Periodontology (ABP) participated via conference call; and Ms. Tami J. Grzesikowski, American Dental Education Association (ADEA). Staff Members: Ms. Jennifer E. Snow, manager, Advanced Specialty Education, Commission on Dental Accreditation (CODA). Dr. Sherin Took, director, and Ms. Cathryn Albrecht, legal counsel, CODA attended a portion of the meeting. The meeting of the Review Committee on Periodontics Education was held at the ADA Headquarters Building on July 10, 2014.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Periodontics: The Commission reviewed the report on frequency of citings for advanced specialty education programs in periodontics and noted that no citings occurred for the 39 periodontics programs site visited during the period covered by this report (January 2009 through October 2013).

Commission Action: This report is informational in nature and no action was taken.

Consideration of the American Dental Association Council on Dental Education and Licensure Proposed Revisions to the ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students: The Commission considered a new business item submitted by the Review Committee on Periodontics Education (PERIO RC) related to the American Dental Association (ADA) Council on Dental Education and Licensure’s (CDEL) proposed revisions to the ADA

Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students that were circulated for public comment through July 31, 2014. The PERIO RC noted that Accreditation Standard 4-11 requires periodontics programs accredited by the Commission to follow the *ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*. It was the belief of the PERIO RC that the proposed revision to require that a capnograph be used to monitor exhaled carbon dioxide, unless precluded, will create an immediate financial and logistical burden and difficulty in complying with the Standards for the Commission-accredited periodontics programs, assuming the revision is adopted and implemented immediately following the ADA Annual Meeting in October 2014. Since it is unlikely that all accredited periodontics programs will be ready to meet the proposed requirement for capnography if the proposed changes were immediately implemented, the PERIO RC believed that the Commission should provide comment to CDEL recommending that a statement be added that capnography must be implemented by January 1, 2016 to provide advanced specialty education programs in periodontics adequate time to comply with a new requirement.

Commission Action: The Commission directs that written comment be submitted to the ADA's Council on Dental Education and Licensure on the proposed revisions to the *ADA Guidelines for Teaching Pain Control and Sedation*, noting that if the proposed capnography requirement is adopted there should be a reasonable implementation period for compliance by advanced specialty education programs in periodontics (suggested implementation January 1, 2016), since this revision will have a direct impact on periodontics education programs through the Accreditation Standards for Advanced Specialty Education Programs in Periodontics.

Report of the Review Committee on Prosthodontics Education: Committee Chair: Dr. Stephen Campbell. Committee Members: Dr. David Felton, Dr. Lily Garcia, Dr. Julie Holloway, Dr. Martin Rutt, and Dr. James Sherrard. Guests (Open Portion Only): Dr. Anthony Palatta, senior director for educational program development, American Dental Education Association, Dr. John Agar, president, American College of Prosthodontists, and Ms. Nancy Deal Chandler, executive director, American College of Prosthodontists. Staff Members: Ms. Cathy Baumann, manager, Advanced Specialty Education and Ms. Sheron Parkman, senior project assistant, (CODA). Dr. Sherin Tooks, director, CODA attended a portion of the meeting. The meeting of the Review Committee on Prosthodontics Education was held on Wednesday, July 9, 2014 at the American Dental Association Headquarters Building.

Informational Report of Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics: The Commission reviewed the report on frequency of citings for advanced specialty education programs in prosthodontics. The Commission noted that the current standards were approved and implemented by the Commission on February 1, 2008; since that date, 42 prosthodontic site visits have been conducted by the visiting committees of the Commission. Findings indicated that 38 of the 42 programs of this study (90%) received no citings. In total, five (5) areas of non-compliance were cited during the period of the study. The three (3) areas cited, with one (1) citing each, are Standard 2-2.1c related to the program director devoting sufficient time to maintaining a current copy of the curriculum's goals, objectives, and content outlines; Standard 3 related to continuous recognition/certification in basic life support including cardiopulmonary resuscitation for students/residents, faculty and

staff involved in direct patient care; and Standard 4-6 related to instruction at the familiarity level in craniofacial growth and development. The two (2) areas, with two (2) citing each, are Standard 4-4.1 related to written goals and objectives for all instruction in the curriculum; and Standard 4-4.2 related to content outlines for all didactic portions of the program. There were no citations for Standard 1- Institutional Commitment/Program Effectiveness, Standard 5 – Advanced Education Students/Residents and Standard 6 – Research.

Commission Action: This report is informational in nature and no action was taken.

Consideration of Proposed Revisions to the Accreditation Standards for Advanced Specialty Education Programs in Prosthodontic Education: The Commission considered the proposed Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics, which was submitted by the Review Committee on Prosthodontics Education (PROS RC) following review of comments received during the second comment period of February 1, 2014 through June 2, 2014 and further modification to the proposed Accreditation Standards. The PROS RC discussed the comments, noting there appeared to be a theme with most objections in many of the written comments, which suggested in Standard 4- Curriculum and Program Duration the words “sole provider” and “comprehensive” should be removed from the Standards. The Committee also discussed the letter from the American Dental Association’s Council on Dental Education and Licensure (CDEL) noting the Council’s determination that the approved definition of prosthodontics does not exclude the placement of implants from the scope of practice for prosthodontics.

There was significant discussion of the proposed Accreditation Standard 4-22 on the placement of implants. The Prosthodontics Commissioner reminded the Commission that it is the responsibility of each specialty to define the educational experience to prepare its graduates. Further, it was pointed out that dental students and general practitioners place implants and that residents in the vast majority of prosthodontic education programs have been placing dental implants since the last revision of the prosthodontics accreditation standards in 2008. Therefore, the PROS RC believed that the Standards revisions reflect current practice in prosthodontic programs and the revisions have the support of 97% of prosthodontic program directors.

Some Commissioners believed that sufficient time has not been added to the program length within the Standards to gain competence in the placement of dental implants as proposed in Standard 4-22. Additionally, some believed that Standards 4-12, 4-13, and 4-14 were not adequate to support surgical placement because these Standards were only taught to the understanding level, not the in-depth level. Some Commissioner maintained that the proposed Standards should be rejected because training at the appropriate level to ensure patient safety had not been mandated. The Commission was reminded that dentists are held to one standard of care and competency level.

Other Commissioners were supportive of the revisions, citing that the proposed Accreditation Standards had been circulated twice and appear to address all of the comments from the communities of interest. Further, without guidelines, there is no educational accountability for programs, which is not in the best interest of the public. Finally, since prosthodontists place implants, the expectation within the Accreditation Standards should reflect the current practice.

Following discussion, the proposed revisions to the Accreditation Standards were not adopted by the Commission.

Miscellaneous Affairs- Consideration of Matters Relating to More than One Review Committee:

Informational Report on Review Committee and Commission Meeting Dates: The Commission reviewed the meeting dates of the 2015 and 2016 meetings. The Commission also considered a recommendation based on the 2014 CODA Self-Assessment (Resolution 1H-2013) that Commission meetings be scheduled for two full days to allow the Commission ample time to discuss accreditation matters, policy reports, and strategic planning, and to address the increased workload and complexity of issues before the Commission. The Commission discussed various scenarios for the expansion of the open and closed sessions of the Commission meeting to a two-day format.

Commission Action: The Commission directs that beginning in 2015, and for all future meetings, the Commission begin its Closed Session at 10 A.M. on the first assigned meeting day and the Open Session at 8 A.M. on the second assigned meeting day.

Consideration of Reporting Apprentice/Preceptor/Internship Programs:

Commission Action: See report of the Standing Committee on Documentation and Policy Review elsewhere in this document.

Consideration of Proposed Revision to Accreditation Standard 1 for Advanced Specialty Education Programs:

Commission Action: See report of the Standing Committee on Documentation and Policy Review elsewhere in this document.

Miscellaneous Affairs- Matters for the Commission as a Whole:

Report of the Standing Committee on Finance:

Review of Charge to the Finance Committee: The Commission considered a recommendation from the Standing Committee on Finance proposing an addition to the Standing Committee's charge regarding oversight responsibility for the Commission's Research and Development Fund. The proposed addition to the charge is noted below (addition is underlined):

The Finance Committee's charge is to:

- Monitor, review and make recommendations to the Commission concerning the annual budget and provide administrative oversight of the research and development fund.

Commission Action: The Commission directs revision of the charge to the Standing Committee on Finance (noted above) to include the administrative oversight of the Commission's Research and Development Fund, with immediate implementation.

Update on 2014 Budget Activity: The Commission noted the Finance Committee's report on 2014 budget activities, including data on year-to-date revenue and expenses through May 2014. The Finance Committee believed there could be a potential negative impact on the Commission related to unpaid invoices, particularly annual fee and special focused site visit invoices. The Commission noted the Finance Committee was most concerned with the potential to conduct a special focused site visit resulting in a substantial cost impact to the Commission, which may not be recovered should a program not remit payment for the visit. To mitigate the potential burden to the Commission, the Finance Committee believed that the best business practice is to collect a portion of the special focused site visit fee in advance of the visit. The Finance Committee recommended the Commission adopt an invoicing structure with two invoices, as follows (addition is underlined):

Invoicing Process for Special Focused Site Visits:

Invoice #1: In advance of the site visit, the program will remit payment for the Administrative Fee (\$4,000) plus 75% of the remaining estimated actual expenses (calculated as an estimate, 75% of \$1200 per site visitor or staff).

Invoice #2: Following the site visit, the program will remit payment for the remaining balance of actual expenses to the Commission.

The Finance Committee further recommended that the above practice be reflected in Commission policy and implemented with all special focused site visits beginning Summer 2014. It was recommended that special focused visits directed by the Commission prior to Summer 2014 not be subject to this new process.

Commission Action: The Commission directs adoption of the proposed "Invoicing Process for Special Focused Site Visits" (noted above), with immediate implementation in the Commission's Evaluation and Operational Policies and Procedures Manual.

Commission Action: The Commission further directs that the invoicing process be implemented with all special focused site visits conducted by the Commission beginning Summer 2014; special focused visits planned prior to Summer 2014 are not be subject to this process.

Update on 2015 Budget Approval Process: Through the report of the Standing Committee on Finance, the Commission received an update on the 2015 budget approval process, noting that the Commission plans to add one full-time equivalent staff position in 2015. Further, the Commission expects to assume 100% of its direct expenses and 84% of its indirect expenses next year. It was noted that indirect expenses of the Commission are currently calculated at a standards rate of 37.5% of direct expenses; however Commission staff has been working with ADA staff to assess whether the 37.5% of direct expenses accurately reflects the indirect costs of the Commission. Estimates suggest that if indirect expenses for shared services are calculated based on the Commission's actual use of the shared services, then there would be significant cost

savings for the Commission. The Commission noted that the Finance Committee will discuss a definitive analysis of the indirect shared services at its next meeting. The Finance Committee also believed the Commission should monitor direct and indirect expenses and discuss retention of year-end revenue as part of its operating budget, once the Commission can fund both direct and indirect expenses. The Finance Committee will further discuss these topics at a future meeting with a report to the Commission following its deliberations.

Commission Action: This report is informational in nature and no action was taken.

Winter 2014 New Business on Potential Revenue Sources: In Winter 2014, the Commission directed that staff investigate other potential revenue sources for the Commission, with further discussion by the Finance Committee and a report to the Commission in Winter 2015. The Standing Committee on Finance began its work to identify several potential revenue sources, including:

- a recalculation of indirect expenses (see above),
- a charge-back to the ADA for services provided by the Commission (such as CODA staff support for the Joint Advisory Committee on International Accreditation),
- a re-consideration of the “Seat Fee,”
- potential grant funding opportunities for accrediting agencies,
- implementation of a late fee for invoices not paid by the deadline, and
- a potential revision to the annual fee financial model based on a number of factors such as
 - program size,
 - number of enrollees,
 - number of off-campus sites, or
 - an analysis of the specific resources (actual costs) required to support the activities of the discipline.

Commission staff will gather more information on this subject for review at future Finance Committee meetings, with a report to the Commission in Winter 2015.

Commission Action: This report is informational in nature and no action was taken.

2014 CODA Self-Assessment Directive to Finance Committee: The Finance Committee reviewed the results of the Commission’s 2014 Self-Assessment, noting the Finance Committee and the Quality Assurance and Strategic Planning Committee were directed to review the Commission’s *Rules* and budget administration process, with the findings of the self-assessment and Commission’s long-term strategic plan as guidelines for the review. CODA directed the Committees to report back to the Commission on the analysis conducted, including any proposed changes to the Commission’s *Rules* and/or budget administrative process related to the structure and management of the Commission. The Finance Committee noted that further review and recommendations related to this directive may result from the findings of the indirect expense analysis, and review of the CODA budget oversight process. The Finance Committee will continue its work on this directive at its next meeting, with a future report of its findings to the Commission.

The Finance Committee noted the finding of the self-assessment study, which suggested that the Commission meeting should be extended to 2 full days to provide additional time for strategic planning and discussion of key issues of the Commission. The Finance Committee believed the cost impact to extend the Commission meeting could be managed within the proposed 2015 budget.

Research and Development Fund: The Finance Committee reviewed the account balance for the Research and Development (R & D) Fund for funds collected in 2014. The Commission was reminded that each accredited program was assessed a fee of \$25 for the R & D Fund, in addition to the program's 2014 annual fee. The Finance Committee also informed the Commission about the creation of two documents to manage the R & D Fund: the R & D Fund Request Form will be required by any committee of the Commission seeking research and development funds, while the R & D Disbursement Tracking Sheet will be used by the Finance Committee to clearly and accurately account for all projects funded with the R & D Fund.

Commission Action: This report is informational in nature and no action was taken.

Consideration of CODA-Sponsored Workshops on Calibration Training for Consultants on New and Revised Accreditation Standards: In Winter 2014, the Commission considered a new business item from the Review Committee on Predoctoral Dental Education related to ongoing calibration training on the Accreditation Standards. The Commission discussed its commitment to on-going calibration training of Commission-appointed site visitors. Acknowledging the cost of site visitor training, the Commission discussed whether there was a method by which training can occur in a cost-effective manner. The Commission directed that staff develop a plan for CODA-sponsored workshops on calibration training for site visitors during 2015 on new and revised Accreditation Standards, for review by the Commission at the Summer 2015 meeting.

At this meeting, the Commission considered the report on site visitor training, noting that the Commission utilizes the volunteer services of 620 site visitors, representing the dental, advanced dental, and allied dental education disciplines accredited by the Commission. Of the total number of site visitors (N=620), 70 are in dental assisting and 95 are in predoctoral dental education, the two (2) disciplines that voiced a request for on-site training during the Winter 2014 Commission meeting. The Commission considered the cost differential between in-person training and webinar training, noting the Commission would incur expenses estimated to be \$154,375 and \$113,750 for predoctoral and dental assisting on-site training, respectively. Additionally, in accordance with the Commission's ongoing effort to enhance webinar training, it was identified that a number of webinar training programs could be developed for all site visitors (contingent upon number of attendees and length of the webinar) with an estimated cost of \$8,400.

The Commission noted that dental assisting site visitors and review committee members recently received webinar training on the revised Accreditation Standards for Dental Assisting Education Programs, with 100% attendance. Feedback on the dental assisting webinar was favorable and there has been a reduction in the number of questions received from site visitors.

From the perspective of predoctoral training, the Commission noted that site visitors received training in 2012 through a face-to-face meeting on the revised Accreditation Standards for Dental Education Programs that were implemented in July 2013. The proposed predoctoral training would be the second of its kind, as was requested by attendees during the time of initial training of site visitors. The Commission discussed whether the 2015 predoctoral training should be conducted in-person or through a webinar, given the success of the dental assisting webinar training. The Commissioners suggested that consideration be given to reduce cost when planning the predoctoral training activity in 2015, keeping in mind the length of meeting and options for training.

The Commission also discussed deferring the dental assisting training until 2016, if needed, as follow-up to the webinar training related to the implementation of the dental assisting standards. The Commission was supportive of expending funds related to webinar training in 2015.

Commission Action: The Commission approves expenditure of up to \$154,375 for training in support of predoctoral training in 2015; expenditure of up to \$113,750 for training in support of dental assisting site visitors and review committee member training in 2016; and expenditure of up to \$8,400 for webinar training in 2015.

Report of the Standing Committee on Documentation and Policy Review:

Consideration of Including Apprentice/Preceptor/Internship Programs in Policy on Reporting Program Changes in Accredited Programs: In Winter 2014, the Commission discussed the potential impact that Apprentice/Preceptor/Internship programs at an institution which sponsors Commission-accredited programs might have on the Commission-accredited program. The Standing Committee on Documentation and Policy Review was directed to study this issue with a report back to the Commission.

The Standing Committee collected and analyzed comments and recommendations of the advanced education Review Committees of the Commission. It was noted that the ENDO, DPH, OMP, OMR, ORTHO, PED, and PROS review committees agreed that apprentice/preceptor/internship programs should be reported to the Commission and that the Policy on Reporting Program Changes should be revised to reflect this requirement. The OMP RC, however, believed the term “apprentice” was an inappropriate term and should not be used in professional dental education. The PERIO, OMS, and PGD review committees believed this should not be a reportable change. Based upon its analysis of the data collected, the Standing Committee believed it would be beneficial to gather more information about the existence of preceptor/fellowship programs and the impact these programs might have on CODA-accredited programs.

The Commission noted that a policy exists related to institutions that sponsor accredited and unaccredited dental education programs. Additionally, the Commission discussed mechanisms through which it may become aware of preceptor/fellowship programs, including notification through the annual survey related to student/resident enrollment numbers, and during the course of a site visit. It was believed that development of a short survey on this topic, for circulation to all advanced education programs in Fall 2014 with further consideration by the Standing

Committee and Commission in Winter 2015, will provide more information for the Commission to consider prior to making any further changes to policy or procedure.

Commission Action: The Commission directs staff to work with the Standing Committee on Documentation and Policy Review to develop a short survey related to the impact of preceptor/fellowship programs on accredited programs for circulation to the CODA-accredited advanced education programs in the fall of 2014. The Commission further directs that data from the preceptor/fellowship survey be provided to the Standing Committee for review, with a report to the Commission at the Winter 2015 meeting.

Consideration of Proposed Revision to Accreditation Standard 1 for Advanced Specialty Education Programs: The Commission received a request to modify Standard 1 of the language common to all advanced specialty education programs, which was submitted by the Chief of Graduate Education/Dean of the Army Postgraduate Dental School, and the Dean of the Naval Postgraduate Dental School/Director of the Navy Medicine Professional Development Center.

Standard 1 requires advanced specialty education programs to be sponsored by institutions, which are properly chartered and licensed to operate and offer instruction leading to degrees, diplomas or certificates with recognized education validity. Hospitals that sponsor advanced specialty education programs must be accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). Educational institutions that sponsor advanced specialty education programs must be accredited by an agency recognized by the United States Department of Education. It was believed by the requestors that this requirement places some military programs in jeopardy of being unable to satisfy the requirement, although both branches of the military believe appropriate oversight is currently provided by each military service and provides the same assurances as institutional sponsorship of civilian programs.

The Commission noted that each of the nine (9) specialty education Review Committees reviewed this request and made recommendations that were considered by the Standing Committee on Documentation and Policy Review. The Standing Committee believed that the documentation provided by the U.S. Army Dental Corp provided sufficient evidence to suggest that the oversight provided would ensure the same institutional accreditation required in Standard 1 and believed the proposed revision should be circulated for comment (addition is underlined):

Advanced specialty education programs **must** be sponsored by institutions, which are properly chartered, and licensed to operate and offer instruction leading to degrees, diplomas or certificates with recognized education validity. Hospitals that sponsor advanced specialty education programs **must** be accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). Educational institutions that sponsor advanced specialty education programs **must** be accredited by an agency recognized by the United States Department of Education. The bylaws, rules and regulations of hospitals that sponsor or provide a substantial portion of advanced specialty education programs **must** ensure that dentists are eligible for medical staff membership and privileges including the right to vote, hold office, serve on medical staff committees and admit, manage and discharge patients.

United States military programs not sponsored or co-sponsored by military medical treatment facilities, United States-based educational institutions, hospitals or health care organizations accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS) must demonstrate successful achievement of Service-specific organizational inspection criteria.

Commission Action: The Commission directs the proposed revision to Accreditation Standard 1 for all advanced specialty education programs be circulated to the communities of interest until December 1, 2014 with an Open Hearing at the Annual Session of the American Dental Association in October 2014, with comments received to be considered at the Winter 2015 meetings of the Advanced Specialty Education Review Committees, the Standing Committee on Documentation and Policy Review, and the Commission.

Clarification of Conflict of Interest Policy: The Commission discussed the Conflict of Interest Policy in an effort to further clarify the Commission's expectations regarding conflicts of interest as it applies to Appeal Board Members, Review Committee members, and site visitors. It was suggested by the Standing Committee that an Appeal Board member should not serve as a site visitor or as an independent consultant during their term of service with the Commission and the policy should be revised to reflect this clarification. Additionally, the Standing Committee proposed that Review Committee members may continue to serve as a site visitor in his/her discipline, if serving on a review committee not in their discipline. Further, the Standing Committee believed it would be acceptable for a site visitor to serve on a program's visiting committee after at least 10 years have passed since previously serving as a site visitor to the program. Finally, it was identified that confusion exists when the terms "site visitor" and "consultant" are used interchangeably within the Commission's policies and procedures and that the Commission's policies should use consistent terminology.

The Commission noted the proposed modification to the Visiting Committee Members section, whereby it is considered a conflict of interest if a site visitor served on the program's visiting committee within the last 10 years. Commissioners discussed whether the same criteria (10 years) should apply for former employees of the institution or program under the requirements for Commissioners, Review Committee Members and members of the Appeal Board. Based upon discussion, the Commission believed that the section on Commissioners, Review Committee members and members of the Appeal Board should be amended to identify that a conflict of interest exists if the individual is "no longer a current employee of the institution or program, but has been employed there within the past 10 years."

Commission Action: The Commission adopts, as amended and with immediate implementation, the proposed revisions to the Conflict of Interest Policy in **Appendix 19**.

Commission Action: The Commission directs that the terms used in EOPP be revised to clarify "site visitor" when referring to individuals participating in a CODA site visit, as a Commission volunteer, and "independent consultant" when addressing independent consulting services not affiliated with the Commission.

Periodic Review of Commission Policies and Clarification of Language in Review Committee Structure Section of EOPP: The Commission reviewed recommendations of the Standing Committee on a number of proposed changes to policies and procedures that were due for periodic review, based upon the Commission’s policy review timeline. In addition, policies identified by staff which required periodic updates or clarification were also considered.

Through discussion, the Commission accepted an amendment to change the header “Review Committees” to “Review Committees and Review Committee Meetings.” The Commission also amended the “Nomination Criteria for All Nominees” to identify a commitment of “10-20 days per year” rather than “5-10 days per year” and ensure the appropriate group is identified (Review Committee or Commissioner), depending upon the section referenced in the policy manual, in all instances where this information is presented.

The Commission also had a lengthy discussion about a proposed change to the section on “Role of Observers On A Site Visit” and a request by some Commissioners to allow Commissioners, Review Committee members, and public members of the Commission and Review Committees to participate in multiple site visits as observers in order to stay current with the accreditation process. The Commission was reminded of the policy that new members to the Review Committee and Commission already observe one site visit as part of their training and orientation experience. Concern was expressed that allowing Commissioners and Review Committee members to attend multiple site visits during their terms may impact the availability of content experts and voting members during Review Committee and Commission meetings. In addition, there is a financial implication associated with increasing the number of observational site visits for Commissioners and Review Committee members that is not accounted for in the 2015 budget. Following lengthy discussion, the Commission adopted the language under the section “Role of Observers On A Site Visit” as presented by the Standing Committee on Documentation and Policy Review.

Commission Action: The Commission adopts, as amended and with immediate implementation, the proposed revisions to policies found in **Appendix 20**, including updates to the Commission’s EOPP.

Report of the Standing Committee on Quality Assurance and Strategic Planning:

Training of CODA Volunteers During Implementation of New or Revised Accreditation Standards: The Commission discussed training of volunteers, as well as the programs themselves, during the period of Commission-approved implementation of new or revised accreditation standards. The Commission noted that following an on-site evaluation of a program, the program personnel and site visit team members receive a survey on the effectiveness of the process. Data of the survey are used to make enhancements to the Commission’s processes, as an outcomes measure for the Commission. The Quality Assurance and Strategic Planning Committee (QASP) proposed additional questions supplemental to the Post Site Visit Surveys, to assess the effectiveness of CODA training and potential need for further training of CODA volunteers and CODA-accredited educational programs related to revision of accreditation standards.

Commission Action: The Commission adopts and directs immediate implementation of the questionnaire (**Appendix 21**) as supplement to the Post Site Visit Survey instruments to assess the need for training of CODA volunteers and CODA-accredited educational programs.

Development of a Policy on Initiation of New Review Committees and Commissioner Positions: In Winter 2014, the Commission directed CODA staff to collect resources on CODA actions related to balancing discipline-specific and non-discipline-specific experts; an update to a 2008 study on the restructuring of the Commission; and an update to a 2010 benchmarking study on structure models and cost implications to the Commission, for review and development of a policy on the initiation of new review committees and Commissioner positions. The Commission considered the draft policy of the QASP, which was believed to address future requests for establishment of new Review Committee or Commissioner positions. It was noted that the policy provides guidance on circumstances under which changes to the Board of Commissioners or Review Committees may be considered as well as the procedure for making such a request.

Commission Action: The Commission adopts the Policy on Changes to the Composition of Review Committees and the Board of Commissioners, as presented in **Appendix 22**, with immediate implementation and placement in the Commission's Evaluation and Operational Policies and Procedures (EOPP) manual.

Continued Review of the CODA 2012-2016 Strategic Plan: At the Winter 2014 meeting, the Commission directed the continued development of a white paper by the QASP, with an update for the Summer 2014 CODA meetings. The QASP also continued its work related to Goal #2 of the Strategic Plan (research benchmarking studies on comparative analysis with similar accrediting agencies and technology needs assessment), which will be supported by the new Research and Development Fund. Further, the QASP reviewed its 2012-2016 Strategic Plan and updated the plan with progress, further action items toward achievement of goals, and deadlines.

The Commission reviewed the *White Paper: Transition to an Operational Structure for Independent Authority*, which provides information about the Commission's role and responsibilities, the history of the Commission and relationship to the American Dental Association (ADA), and a re-examination of the ADA-Commission relationship. The Commission believed the White Paper should be circulated to the ADA Board of Trustees and posted on the Commission's website.

Commission Action: The Commission adopts the *Commission on Dental Accreditation White Paper: Transition to an Operational Structure for Independent Authority*, as presented in **Appendix 23**, to implement its concepts for the strategically-driven work of the Commission. The Commission further directs that the White Paper be forwarded to the American Dental Association's Board of Trustees and posted to the Commission's website.

Report of the Standing Committee on Communication and Technology:

Summer 2013 Directives: At its Summer 2013 meeting, the Commission directed the Standing Committee on Communication and Technology continue its work related to five (5) initiatives. At this meeting, the Commission discussed progress and recommendations on each initiative.

Initiative 1: The first initiative directed that Commission staff meet with ADA Communications Department staff regarding an editorial calendar framework for the CODA Communicator Electronic Newsletter. Upon review of the draft editorial calendar, the Standing Committee determined that a recurring educational column in each Communicator that addresses the basic mission and goals of CODA would be beneficial in aiding the communities of interests' understanding of how the Commission functions. The Standing Committee also discussed the frequency of the Communicator, which is currently disseminated following the Commission's two (2) meetings per year and suggested that two (2) issues of the Communicator each year is sufficient in light of the number and variety of other critical communications from CODA throughout the calendar year.

Commission Action: The Commission directs CODA staff to maintain the frequency of the CODA Communicator Newsletter at two (2) issues per year. The Commission further directs CODA staff to add an educational column in each issue of the newsletter to discuss CODA's mission and goals to enhance the communities of interests' understanding of the Commission.

Initiative 2: Initiative two related to development of a Commission website separate from the American Dental Association (ADA) site, with Commission branding and information. The Commission noted that its logo had been rebranded from green to purple; this rebranding had been repeated on all Commission documents. Further, the new Commission website launched in late April 2014 and includes many new features that enhance transparency and accountability and draw the reader to need-to-know updates. In particular, it was noted that information regarding training, fees, HIPAA and the annual survey is easily retrievable from the site. The Commission was informed that the redesigned website has been well received, based on anecdotal feedback from the communities of interest, and that the site provides easier access to the Commission's information and documents.

While the Commission supported the move to an independent Commission-branded website, the Commissioners believed that the URL web address for the site should also be separate from the American Dental Association. The Commission believed the top-level domain for its site should be exclusively the Commission's. Since establishing a top-level Commission-specific domain may have financial implications related to webhosting, the Commissioners requested more information for consideration at a future meeting.

Commission Action: The Commission directs staff to continue to monitor the usage of the Commission's website and continue to build its content and functionality. The Commission further directs staff to pursue with the ADA Information Technology department a top-level domain name exclusive to the Commission, with a report on this issue, including financial impact, for consideration at the next meeting of the Standing

Committee on Communication and Technology and a final report to the Commission in Summer 2015.

Initiative 3: Initiative 3 directed CODA staff to work with the Communications Department to redesign the CODA Communicator to ensure a reader-friendly layout, with general and discipline-specific sections and a practitioner section, as appropriate; and further directed that staff include information in the Communicator to allow permission to reprint or distribute the newsletter to extend the educational reach of the publication, including sharing the newsletter with students/residents. The Commission noted the completed reorganization of the Communicator, including language providing permission to reprint or distribute the document. It was also identified that the current e-mail delivery method is preferred and allows the reader to click on a hyperlink to the full story content.

Commission Action: The Commission directs CODA staff to maintain the CODA Communicator in its current reorganized format and electronic distribution method.

Initiatives 4 and 5: Initiative four directed Commission staff to work with the Communications Department on Commission “touch points,” while initiative five directed staff to explore ways to expand and promote Commission events, beyond those currently provided. Additionally, staff was directed to add to the Commission’s distribution list the 885 individuals/groups who identified through the 2013 Communications Survey an interest in partnering with CODA to enhance communication to the CODA community of interest.

Regarding “touch points,” the Commission noted that CODA staff have suggested a number of enhancements to the “Training Resources” website section and plan to build out the tab content designated for students. These suggestions include webinars on topics such as enrollment increase requests, orientation for site visits, on-line resources, how to write a site visit report, how to report program changes, how to respond to a site visit report, and general CODA information. Additional topics of interest could be identified through an informal survey to the Communities of interest. It was suggested that an informational webinar about the Commission’s mission, goals, and process of accreditation would be ideal for the broader communities of interest, and webinars geared to students (e.g., why accreditation is important, what accreditation status definitions mean, and how to file a complaint) could also be meaningful. Announcing the development of webinars to communities of interest could extend the Commission’s reach. For example, it may be helpful to inform the American Dental Education Association or the American Student Dental Association (ASDA) about new content.

Commission Action: The Commission directs CODA staff to build “Training Resources” website content and explore webinar topics suited to programs undergoing accreditation, the broader communities of interest and students.

Winter 2014 New Business: The Commission considered the Standing Committee’s report on the Winter 2014 new business item related to digitizing accreditation site visit documents. Specifically, challenges for site visitors and programs were identified when attempting to complete the Commission’s current electronic documents. Since 2011, the Standing Committee

has been committed to monitoring enhancements in technology for the purpose of streamlining the self-study and accreditation process. The Commission learned that CODA staff was in communication with the ADA Information Technology department to construct a web-based platform (Aptify) that will serve the business needs of the Commission. In Spring 2014, CODA staff again met with Information Technology staff about the Commission's business needs related to electronic self-study and accreditation process enhancements. The Commission reviewed favorably the utilization of an electronic platform (like Aptify) to address the Commission's technology needs, including digital accreditation site visit documents, and believed Commission staff should work with Information Technology Staff to develop the Aptify business plan by early Fall 2014.

Commission Action: The Commission directs CODA staff to meet with ADA Information Technology staff to determine the feasibility of using Aptify as a business tool within the Commission and to develop an Aptify business plan by early Fall 2014, with a report for the Standing Committee's next meeting.

Re-Consideration of Resolution 55: The Commission re-considered "Resolution 55–Dedicated Staff to Sustain Implementation of CODA Communications Plan" based upon the development of the CODA communications plan. At this meeting, the Commission noted that CODA staff has submitted a 2015 budget that includes one (1) additional full-time staff person, for which the Commission is awaiting final approval. The Standing Committee believes the Communications Plan would benefit from additional CODA staff support, which would require a considerable amount of dedicated time for communications, technology, and document management, if the proposed full-time position is approved.

Commission Action: The Commission endorses the concept of an additional staff position within the Commission that would, in part, have a considerable commitment to communication and technology, recognizing that not all of the staff's time would be focused on these activities.

Report of the Standing Committee on Nominations: The Commission considered the report of the Standing Committee on Nominations, including the nominations of qualified consumer/public members for the Review Committees and Commission, and nominations to vacant positions on Review Committees. After careful consideration of the nominees' qualifications, the Committee proposed the following candidates:

Commission Action: The Commission appoints the nominees identified by the Standing Committee on Nominations to the open positions on the appropriate Review Committees and Commission.

Dental Assisting Educator (one (1) vacancy) for the Dental Assisting Review Committee (DA RC)

- Dr. Cynthia Baker
- Alternate: Ms. Teresa Bailey

Dental Hygiene Educator (two (2) vacancies) for the Dental Hygiene Review Committee (DH RC)

- Ms. Michele Carr
- Ms. JoAnn Nyquist

Alternates:

1. Ms. Ann O'Kelley Wetmore
2. Ms. Susan Ellis

Allied Educator (one (1) vacancy) for the Predoctoral Review Committee (PREDOC RC)

- Dr. Liz Kaz

Alternate: Dr. Ann McCann

Dental Assisting Practitioner (one (1) vacancy) for the Dental Assisting Review Committee (DA RC)

- Ms. Natalie Kawecky

Alternate: Ms. Colleen Kirby-Banas

Dental Hygiene Practitioner (one (1) vacancy) for the Dental Hygiene Review Committee (DH RC)

- Ms. Carolyn Jackson

Alternate: Ms. Vicki Brett

General Dentist (five (5) vacancies- one (1) ENDO RC, one (1) OMS RC, one (1) PEDO RC, one (1) PERIO RC, one (1) PREDOC RC)

- Dr. Steven Lepowksy
- Dr. Lucinda (Cindy) Lyon
- Dr. Robert Miller
- Dr. Reuben Pelot
- Dr. Deborah Weisfuse

Alternates:

1. Dr. Kenneth Coy
2. Dr. Steven London

Higher Education Administrator (two (2) vacancies- one (1) DH RC, one (1) POSTDOC RC)

- Mr. Joseph Kerr
- Mr. Joseph Thompson

Alternates:

1. Mr. David Squire
2. Ms. Sri Koduri

Public Member (six (6) vacancies – one (1) POSTDOC RC, one (1) DA RC one (1) DLT RC, one (1) OMR RC, and two (2) Commission)

- Dr. Stephen Dusza
- Dr. Stephen Feit
- Dr. David Weigle

- OPEN
- OPEN
- OPEN

Alternates:

1. Ms. Margaret Bowman-Pensel
2. Ms. Sarbari Bhattacharjee

Specialty Dentist (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

- Dr. Robert Strauss

Alternate: Dr. Theresa Gonzales

Commission Action: The Commission appoints the following individuals, nominated by sponsoring organizations and/or boards and identified by the Standing Committee on Nominations to the open positions on the relevant review committees to fill discipline-specific vacancies.

Representative of the American Academy of Periodontology and American Board of Periodontology (one (1) vacancy) for the Periodontics Review Committee (PERIO RC)

- Dr. James Katancik

Alternate: Dr. Joe Krayner

Representative of the American Board of Periodontology (one (1) vacancy) for the Periodontics Review Committee (PERIO RC)

- Dr. Steven Blanchard

Alternate: Dr. Clark Barco

Representative of the American Board of Prosthodontics (one (1) vacancy) for the Prosthodontics Review Committee (PROS RC)

- CAPT. Robert Taft

Alternate: Dr. Dean Morton

Dental Anesthesiology Educator Nominated by the American Society of Dental Anesthesiologists (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

- Dr. Ralph Epstein

Alternate: Dr. Cynthia Fukami

Dental Laboratory Owner Nominated by the National Association of Dental Laboratories (one (1) vacancy) for the Dental Laboratory Technology Review Committee (DLT RC)

- Mr. Charles McClemens

Alternate: Mr. Gary Iocco

Oral Medicine Educator Nominated by the American Academy of Oral Medicine (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

- Dr. Mahnaz Fatahzadeh

Alternate: Dr. Nathaniel Treister

Orofacial Pain Educator Nominated by the American Academy of Orofacial Pain (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

- Dr. Jeffrey Shaefer

Alternate: Dr. Joseph Cohen

Interprofessional Education: Formation of the Health Professions Accreditors

Collaborative (HPAC): Building on several years of discussions related to their respective activities in the accreditation of programs in the health professions, the chief staff officers of the Liaison Committee for Medical Education (LCME), Commission on Osteopathic College Accreditation (COCA), Commission on Collegiate Nursing Education (CCNE), Commission on Dental Accreditation (CODA), Council on Education for Public Health (CEPH), and the Accreditation Council for Pharmacy Education (ACPE) agreed on the desire to form the Health Professions Accreditors Collaborative (HPAC). The Commission discussed HPAC's purpose to provide an ongoing forum for the chief staff officers of the member accrediting agencies for discussion, opportunities, identification, and implementation of collaborative projects, including but not limited to those involving interprofessional education (IPE). The Commission believed that membership in the HPAC would formalize dentistry's commitment to interprofessional education. Noting a limited financial impact to the Commission to host periodic meetings of the HPAC, the Commission believed CODA should endorse membership in the HPAC.

Commission Action: The Commission approves participation in the establishment and ongoing activities of the Health Professions Accreditors Collaborative (HPAC).

Report of the Commission on Dental Accreditation of Canada: Dr. Claude LaMarche, Chair of the Commission on Dental Accreditation of Canada (CDAC), provided an update on CDAC activities as presented in the CDAC report to the Commission.

Commission Action: This report is informational in nature and no action was taken.

Request from the New Zealand Dental Council on Revalidation of Requirements and the Potential for a Reciprocal Agreement:

Revalidation of Existing Prescribed Qualifications in New Zealand: The Commission learned that since 2005 the Dental Council of New Zealand (DCNZ) has recognized dental education (DDS/DMD) and dental hygiene education programs accredited by the Commission on Dental Accreditation as meeting the prescribed qualifications for scope of practice in New Zealand. As part of its responsibility, the DCNZ periodically verifies the process and standards of the accrediting organizations in jurisdictions it formally recognizes. Commissioners noted that the DCNZ met with the Commission Director in May 2014 to conduct a review of each agencies accreditation process and the accreditation standards for dental education programs. The DCNZ requested that a similar review be conducted for the dental hygiene accreditation standards. Further, the Dental Council requested that CODA permit a Council representative(s) to observe an accreditation site visit, preferably where both a dental and dental hygiene program are reviewed, and the subsequent consideration of the accreditation report, as further verification of

CODA's accreditation process in light of the DCNZ's recognition for scope of practice in New Zealand.

Commission Action: The Commission directs CODA staff to assist the Dental Council of New Zealand with a similar review for dental hygiene education standards as was conducted for dental education standards, given the Council's prescribed qualifications and validation requirements for this discipline, with a report to the Commission in Winter 2015.

Commission Action: The Commission directs CODA staff to invite the Dental Council of New Zealand to observe a dental and dental hygiene program site visit(s), and associated Review Committee and Commission meetings in 2015.

Mutual Recognition of Programs (Reciprocal Agreement): The Dental Council of New Zealand noted that educational programs and scopes of practice common to both countries include: dental, dental hygiene, dental laboratory technology, endodontics, orthodontics, periodontics, dental public health, pediatric dentistry, prosthodontics, and oral and maxillofacial surgery. As such, the DCNZ requested that CODA consider an in-principle agreement to: 1) further explore mutual recognition of the accredited programs for the two professions already recognized by the Council (dental and dental hygiene education) and 2) extend recognition to all programs common to the two agencies.

The Commission learned that the Commission on Dental Accreditation of Canada has a reciprocal agreement for dental education programs with New Zealand and Australia. It was identified that New Zealand and Australia share accreditation processes, standards, and a joint accreditation committee, while maintaining independent dental councils. Therefore, movement toward a reciprocal agreement with the DCNZ may have implications to a relationship with Australia. Additionally, the Commission believed that there could be substantial cost implications to the Commission depending upon the number of disciplines for which the Commission would engage with the DCNZ; it was noted that the Council proposed an in-principle agreement to pursue reciprocity for 10 disciplines. The Commission believed a full analysis of this request related to the potential for recognition of all programs common between the Commission and the DCNZ, and a comprehensive budget impact analysis, is warranted prior to moving forward with an in-principle engagement with the DCNZ.

Commission Action: The Commission directs the Standing Committee on Quality Assurance and Strategic Planning review the request for a reciprocal agreement with the Dental Council of New Zealand with a report, including financial implications related to potential recognition of all common disciplines, to the Commission in Winter 2015.

Report on Appointment of Commissioners and Appeal Board Members: The Commission reviewed information on the Commissioners and Appeal Board Members whose terms will end at the American Dental Association (ADA) Annual Meeting and their replacements whose terms will begin at the ADA Annual Meeting. The Commission also reviewed information on the 2015 Commissioner Trainees whose terms will begin in 2016. See Appendix 24.

Commission Action: This report is informational in nature and no action was taken.

Election of Chair and Vice Chair of the Commission: The Commission elected by acclamation Dr. Perry Tuneberg as chair of the Commission and Dr. Karen West as vice-chair of the Commission for 2014-2015.

Commission Update of Reauthorization of Higher Education Act: Dr. Sherin Tooks provided an update on important national topics related to education and accreditation that could have an impact on the Commission, including the Reauthorization of the Higher Education Act, transparency in accreditation and the movement toward competency education.

Commission Action: This report is informational in nature and no action was taken.

Presentation of Plaques: The following Commissioners received a plaque acknowledging their service on the Commission:

Ms. Kristi Burr
Mr. Robert Giasolli
Dr. Henry Greenwell
Dr. William Leffler; completed a partial term due to a vacancy
Dr. Brad Neville
Dr. Steven Schonfeld; Vice Chair 2013-2014
Dr. John Williams; Chair 2013-2014

Survey of Meeting: Dr. Sherin Tooks reminded Commissioners to complete the survey that will be sent via Survey Monkey following the meeting. The survey is important for determining whether the Commission is meeting its goals for the year.

New Business:

Oral Report on ADA/CODA Workgroup Meeting of July 30, 2014: The Commission received an oral report on the ADA/CODA workgroup which met on Wednesday, July 30, 2014. The Commission was represented by Drs. Kassebaum, Tuneberg, Schonfeld, and Williams. ADA Board members included Drs. Hagenbruch, Jeffers, Zenk, and Kiesling. Topics discussed included:

- The history of CODA funding, including the “shared services” (aka indirect expenses) model. The shared service model until now has been assessed at 37.5% of direct expenses. There are plans to fine tune the shared services model by assessing, as reasonably possible, the actual costs for services provided by each agency to the other.
- The Joint Advisory Committee on International Accreditation and the future of this Committee as a CODA/ADA Committee, including whether it might best be housed as a committee of the Commission.
- The parameters of the CODA Research and Development Fund, particularly the disbursement requirements, which state that: 1) any balance fund in excess of the \$100,000 cap will be contributed to the ADA Foundation, and 2) the Fund expenditures will be submitted by CODA to the Board of Trustees for approval prior to disbursement.

- Related to CODA governance, the Workgroup discussed the ADA Bylaws, Standing Rules for Councils and Commissions, and CODA Rules. The discussion focused on how CODA functions as an agency, related to the governance requirements of the Association. Topics of discussion included: CODA's ability to govern its Board of Commissioners, governance oversight within the Standing Rules, and the role of the ADA Liaison.

Commission Action: The Commission directs that a resolution be submitted to the September 2014 meeting of the ADA Board of Trustees for modification to the administrative process of the CODA Research and Development Fund to eliminate the requirement that if the fund balance exceeds \$100,000, any excess will be contributed to the ADA Foundation. The Commission further directs that the Commission contact the Joint Commission on National Dental Examinations to determine this agency's interest in a collaborative request to the Board in September.

Commission Action: The Commission directs that a resolution be submitted to the September 2014 meeting of the ADA Board of Trustees for modification to the administrative process of the CODA Research and Development Fund, to eliminate the requirement that expenditures from the Fund will be proposed by the Commission for ADA Board of Trustees approval. The Commission further directs that the Commission contact the Joint Commission on National Dental Examinations to determine this agency's interest in a collaborative request to the Board in September.

Commission Action: The Commission directs the Quality Assurance and Strategic Planning Committee to review the ADA Bylaws, Standing Rules for Councils and Commissions, and CODA Rules to assess the impact of these governance documents on the Commission related to the Commission's strategic plan, with a report noting any proposed changes to these documents for consideration in Winter 2015.

Request to Consider Revision to the Conflict of Interest Policy to Allow Public Members of the Commission and Review Committees to Observe Multiple Site Visits: A new business item was presented related to the Commission's Conflict of Interest Policy as it relates to the public member serving on the Commission. Specifically, the request was made to allow the public Commissioner to have the option to observe site visits, if necessary more than once, to gain experience in the Commission's process while serving on the Commission. It was believed that public members might wish to attend various types of visits, representing various disciplines, to gain insight into the Commission's process of accreditation. The Commission noted that policy exists, which supports the public member's observation of one site visit as part of the Commission's accreditation training program. The Commission places public members on an appropriate site visit, irrespective of the discipline, since the intent of the exercise is to familiarize the public member about the Commission's accreditation process and since this individual is not a peer. Through discussion, it was suggested that the public Review Committee members should also have an opportunity to observe multiple site visits, though the training policy is also in place for these individuals.

The Commission discussed the financial and operational implications in addressing this request. A number of suggestions were made related to the financial and operational structure, including

a dollar amount restriction or restriction of three trips total beyond training. It was believed that further investigation of this request should occur through the Standing Committee on Documentation and Policy Review, including financial implications, with a report in Winter 2015.

Commission Action: The Commission refers to the Standing Committee on Documentation and Policy Review the request to allow public Commissioners and Review Committee members to observe multiple site visits, with a report including financial implications at the Winter 2015 meeting.

Discussion on Programs with Off-Campus Sites: The Commission continued its discussion of the day prior related to programs with off-campus sites. The Commission noted that a study of expectations related to the level of oversight of clinical training site(s) by the program director had been considered through past reviews by the Task Force on Off-Campus Sites and the Standing Committee on Documentation and Policy Review. It was believed that the Commission should obtain a better understanding of financial and managerial implications that multi-location programs have on the Commission's resources, as the landscape of dental education changes. To that end, the Finance Committee is reviewing the Commission's financial model related to fees for programs with off-campus sites, based upon this developing model of dental education. The Commission also believed the 2012 and 2013 Task Force on Off-Campus Sites and Standing Committee on Documentation and Policy Reviews reports, respectively, should be considered in Winter 2015, with further discussion of this topic.

Commission Action: The Commission approves circulating the 2012 Task Force on Off-Campus Sites and 2013 Standing Committee on Documentation and Policy Review reports for further review of the topic of programs with off-campus sites during the Winter 2015 meeting.

Adjourn: The Commission adjourned the open session at 4:27 P.M.