

## **REPORT OF THE STANDING COMMITTEE ON DOCUMENTATION AND POLICY REVIEW**

**Background:** The Standing Committee on Documentation and Policy Review met via a virtual meeting on January 16, 2024. Committee members in attendance included: Ms. Lisa Mayer (chair), Dr. Carolyn Brown, Dr. Scott DeRossi, Dr. Paul Luepke, Dr. Monica Nenad, Dr. Nancy Rosenthal, and Dr. Glenn Sameshima. Dr. Cherae Farmer Dixon attended a portion of the meeting. Dr. Frank Licari, vice-chair, Commission on Dental Accreditation (CODA), *ex officio*, also attended. Dr. Sherin Tooks, senior director, and Ms. Jamie Asher Hernandez, Ms. Kathleen Navickas, Ms. Peggy Soeldner, Ms. Yesenia Ruiz, and Ms. Kelly Stapleton, managers, CODA, and Ms. Samara Schwartz, senior associate general counsel, CODA, also attended.

The Committee began its meeting with a review of the Committee's charge. The Committee discussed the following items:

**Consideration of Proposed Revisions to Miscellaneous Policies:** On occasion, outside of the regular policy review process, policies that may warrant revision are identified for discussion and possible revision by the Standing Committee. These policies include the following: Conflict of Interest Policy, Site Visitors, Policy on Silent Observers on Site Visits, Policy on State Board Participation During Site Visits, Policy on Preparation and Submission of Documents to the Commission. Policy on Enrollment Increases in Advanced Dental Education Programs, Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program, Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs, and Function and Procedures of the Appeal Board.

The Standing Committee considered proposed revisions to the *Conflict of Interest Policy* related to visiting committee members, which were proposed to provide clarification regarding whether being a graduate of any program at the institution, including an undergraduate education program, constitutes a conflict of interest.

The Standing Committee also considered proposed revisions to the *Conflict of Interest Policy* related to Commission Staff Members, which were proposed to provide further clarification regarding situations which constitute a conflict of interest for Commission staff members.

The Standing Committee also discussed and considered proposed revision to the *Site Visitor* policy. The Committee discussed the section of the policy related to Appointments, specifically as it relates to maximum appointment period of six (6) consecutive years, followed by the opportunity to reapply for appointment after one year. The Committee learned there continues to be a need for site visitors and discussed whether the one (1) year off between the maximum appointment period is necessary. The Committee noted that the policy, as written, includes a provision for altering term limits in exceptional circumstances. Therefore, as needed, site visit terms could be altered, or extended to ensure an adequate site visitor pool. The Committee concluded the policy is appropriate as written and believed no revisions are warranted at this time.

The Standing Committee also discussed the proposed deletion of the section on Role of Observers on a Site Visit in the *Site Visitor* policy. The Committee was reminded of recent policy revisions that eliminated the requirement for Review Committee and Commission members who have not been on a site visit to observe a site visit. Instead, the Commission now requires new Review Committee and Commission members to attend the Commission's site visitor training workshop within their first year of service. Therefore, it was believed that this portion of the policy is no longer necessary and should be deleted.

The Standing Committee discussed the Commission's *Policy on State Board Participation During Site Visits*. The Committee learned of questions related to the appropriate level of participation of the State Board Member on site visits. The Committee was reminded that, in accordance with current policy, State Board Members participate in all site visit conferences and executive sessions, and, if a vote is required, the State Board Member does not vote. Additionally, policy does not require the State Board Member to be silent. The Committee discussed the fact that because the State Board Member is exempt from the restriction that a member of the site visit team cannot reside in the same state as the program, it is possible that the State Board Member could be a graduate of the institution being visited, which could be perceived as a conflict. Further, the Committee learned that State Board Members are not required to participate in site visitor training like other CODA site visitors. Following discussion, the Committee agreed the proposed revision to require State Board Members to be silent in all sessions except executive sessions with the site visit team is warranted to diminish the possibility of a conflict of interest, real or perceived. The Committee also believed the proposed revision may encourage more educational programs to request participation by State Boards of Dentistry.

Proposed revisions to the Commission's *Policy on Preparation and Submission of Documents to the Commission* were also considered by the Standing Committee. Through review, the Standing Committee noted the proposed revisions are updated language related to the Health Insurance Portability and Accountability Act (HIPAA) and editorial in nature.

Through review of the Commission's *Policy on Enrollment Increases in Advanced Dental Education Programs* and *Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program*, the Standing Committee noted the revisions are proposed to provide clarification as well as to remind programs that program resources must be maintained even during times when a full complement of students, residents, or fellows is not enrolled in the program.

The Standing Committee considered a proposed revision to the *Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs*, noting the proposed deletion of an asterisk and reference related to sites for community service and service learning in the Supplemental Activity Sites column of the policy. The Committee learned there have been questions seeking clarification of the asterisk and statement as it relates to Supplemental Activity Sites, specifically clarification regarding the specific exemption for community service and service learning sites. Following discussion, the Standing Committee agreed the specific exemption for sites for

community service and service learning is not clear and believed the proposed deletion is warranted. The Committee also believed that the proposed addition in the policy provides further clarification that the use of service-learning/community service sites are exempt from reporting requirements.

The Standing Committee also considered a revision to the Commission's *Function and Procedures of the Appeal Board* policy, which proposes temporary appointment of a public member from a Review Committee in the absence of a public member on the Appeal Board at the time of an appeal. The Committee learned that CODA appoints a public member on the Appeal Board; however, if the public Appeal Board member is unavailable or resigns prior to an Appeal, there may be a need to temporarily and expeditiously appointment a public Review Committee member, from an appropriate alternative Review Committee not involved in the appealing program's review, to temporarily serve on the Appeal Board. It was noted that public Review Committee members are more familiar with the CODA policies and procedures that may have led to an appeal because of their role on a review committee, which could benefit the appeal process.

Following discussion of the policies, the Standing Committee determined that the revisions to policies, as noted in **Appendix 1**, are warranted and recommended they be adopted.

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

**Commission Action:**

1 Underline indicates addition; ~~Strikethrough~~ indicates deletion

2  
3 D. CONFLICT OF INTEREST POLICY

4  
5 Evaluation policies and procedures used in the accreditation process provide a system of checks and  
6 balances regarding the fairness and impartiality in all aspects of the accreditation process. Central to the  
7 fairness of the procedural aspects of the Commission's operations and the impartiality of its decision  
8 making process is an organizational and personal duty to avoid real or perceived conflicts of interest. The  
9 potential for a conflict of interest arises when one's duty to make decisions in the public's interest is  
10 compromised by competing interests of a personal or private nature, including but not limited to  
11 pecuniary interests.

12  
13 Conflict of interest is considered to be: 1) any relationship with an institution or program, or 2) a partiality  
14 or bias, either of which might interfere with objectivity in the accreditation review process. Procedures  
15 for selection of representatives of the Commission who participate in the evaluation process reinforce  
16 impartiality. These representatives include: Commissioners, Review Committee members, site visitors,  
17 and Commission staff.

18  
19 In addition, procedures for institutional due process, as well as strict guidelines for all written documents  
20 and accreditation decisions, further reinforce adherence to fair accreditation practices. Every effort is  
21 made to avoid conflict of interest, either from the point of view of an institution/program being reviewed  
22 or from the point of view of any person representing the Commission.

23  
24 On occasion, current and former volunteers involved in the Commission's accreditation process (site  
25 visitors, review committee members, commissioners) are requested to make presentations related to the  
26 Commission and its accreditation process at various meetings. In these cases, the volunteer must make it  
27 clear that the services are neither supported nor endorsed by the Commission on Dental Accreditation.  
28 Further, it must be made clear that the information provided is based only on experiences of the individual  
29 and not being provided on behalf of the Commission.

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

31  
32 **1. Visiting Committee Members:** Conflicts of interest may be identified by either an  
33 institution/program, Commissioner, site visitor or Commission staff. An institution/program has the right  
34 to reject the assignment of any Commissioner, site visitor or Commission staff because of a possible or  
35 perceived conflict of interest. The Commission expects all programs, Commissioners and/or site visitors  
36 to notify the Commission office immediately if, for any reason, there may be a conflict of interest or the  
37 appearance of such a conflict.

38  
39 All active site visitors who independently consult with educational programs accredited by CODA or  
40 applying for accreditation must identify all consulting roles to the Commission and must file with the  
41 Commission a letter of conflict acknowledgement signed by themselves and the institution/program with  
42 whom they consulted. All conflict of interest policies as noted elsewhere in this document apply.

43 Contact the CODA office for the appropriate conflict of interest declaration form.

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

45

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

14  
15 Note: Because of the nature of their positions, a state board representative will be a resident of the state  
16 in which a program is located and may be a graduate of the institution/program being visited. These  
17 components of the policy do not apply for state board representatives, although the program retains the  
18 right to reject an individual’s assignment for other reasons.

19  
20 If an institutional administrator, faculty member or site visitor has doubt as to whether or not a conflict of  
21 interest could exist, Commission staff should be consulted prior to the site visit. The Chair, Vice-Chair  
22 and a public member of the Commission, in consultation with Commission staff and legal counsel, may  
23 make a final determination about such conflicts.

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

25  
26 **2. Commissioners, Review Committee Members And Members Of The Appeal Board:** The  
27 Commission firmly believes that conflict of interest or the appearance of a conflict of interest must be  
28 avoided in all situations in which accreditation recommendations or decisions are being made by  
29 Commissioners, Review Committee members, or members of the Appeal Board. No Commissioner,  
30 Review Committee member, or member of the Appeal Board should participate in any way in accrediting  
31 decisions in which he or she has a financial or personal interest or, because of an institutional or program  
32 association, has divided loyalties and/or has a conflict of interest on the outcome of the decision.

33  
34 During the term of service as a Review Committee member, these individuals should not serve as site visitors  
35 for an actual accreditation site visit to an accredited or developing program, unless deemed necessary. Two  
36 instances when a review committee member could serve on a site visit include: 1) an inability to find a site  
37 visitor from the comprehensive site visitor list, or 2) when the review committee believes a member should  
38 attend a visit for consistency in the review process. This applies only to site visits that would be considered  
39 by the same review committee on which the site visitor is serving. Review committee members may not  
40 independently consult with a CODA-accredited program or a program applying for CODA accreditation. In  
41 addition, review committee members may not serve as a site visitor for mock accreditation purposes. These  
42 policies help avoid conflict of interest in the decision making process and minimize the need for recusals.

43  
44 During the term of service as a commissioner or appeal board member, these individuals may not

1 independently consult with a CODA-accredited program or a program applying for CODA accreditation. In  
2 addition, Commissioners or appeal board may not serve on a site visit team during their terms.

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

- 5
- 6 • close professional or personal relationships or affiliation with the institution/program or key personnel in  
7 the institution/program which may create the appearance of a conflict;
  - 8 • serving as an independent consultant or mock site visitor to the institution/program;
  - 9 • being a graduate of the institution/program;
  - 10 • being a current employee or appointee of the institution/program;
  - 11 • previously applied for a position at the institution within the last five (5) years;
  - 12 • being a current student at the institution/program;
  - 13 • having a family member who is employed by or affiliated with the institution;
  - 14 • manifesting a professional or personal interest at odds with the institution or program;
  - 15 • key personnel of the institution/program having graduated from the program of the Commissioner,  
16 Review Committee member, or member of the Appeal Board;
  - 17 • having served on the program's visiting committee within the last seven (7) years; and/or
  - 18 • no longer a current employee of the institution or program but having been employed there within the past  
19 ten (10) years.
- 20

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

29

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

38

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

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

5  
6 This provision refers to the concept of conflict of interest in the context of accreditation decisions. The  
7 prohibitions and limitations are not intended to exclude participation and decision-making in other areas,  
8 such as policy development and standard setting.

9  
10 Commissioners are expected to evaluate each accreditation action, policy decision or standard adoption  
11 for the overall good of the public. The American Dental Association (ADA) Constitution and Bylaws  
12 limits the involvement of the members of the ADA, the American Dental Education Association and the  
13 American Association of Dental Boards in areas beyond the organization that appointed them. Although  
14 Commissioners are appointed by designated communities of interest, their duty of loyalty is first and  
15 foremost to the Commission. A conflict of interest exists when a Commissioner holds appointment as an  
16 officer in another organization within the Commission's communities of interest. Therefore, a conflict of  
17 interest exists when a Commissioner or a Commissioner-designee provides simultaneous service to the  
18 Commission and an organization within the communities of interest. (Refer to Policy on Simultaneous  
19 Service)

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

21  
22 **3. Commission Staff Members:** Although Commission on Dental Accreditation staff does not  
23 participate directly in decisions by volunteers regarding accreditation, they are in a position to influence  
24 the outcomes of the process. On the other hand, staff provides equity and consistency among site visits  
25 and guidance interpreting the Commission's policies and procedures.

26  
27 For these reasons, Commission staff adheres to the guidelines for site visitors, within the time limitations  
28 listed and with the exception of the state residency, including:

- 29
- 30 • graduation from a dental program at the institution within the last five (5) years;
  - 31 • service as a site visitor, employee or appointee of the institution within the last five (5) years; and/or
  - 32 • close personal or familial relationships with key personnel in the institution/program which would,  
from the standpoint of a reasonable person, create the appearance of a conflict.

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

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35  
36 **J. SITE VISITORS**

37  
38 The Commission uses site visitors with education and practice expertise in the discipline or areas being  
39 evaluated to conduct its accreditation program. Nominations for site visitors are requested from national  
40 dental and dental-related organizations representing the areas affected by the accreditation process. Self-  
41 nominations are accepted. Site visitors are appointed by the Commission annually and may be re-appointed.

42  
43 During the term of service as a Review Committee member, these individuals should not serve as site visitors  
44 for an actual accreditation site visit to an accredited or developing program, unless deemed necessary. Two

1 instances when a review committee member could serve on a site visit include: 1) an inability to find a site  
2 visitor from the comprehensive site visitor list, or 2) when the review committee believes a member should  
3 attend a visit for consistency in the review process. This applies only to site visits that would be considered  
4 by the same review committee on which the site visitor is serving. Review committee members are  
5 prohibited from serving as independent consultants for mock accreditation purposes. These policies help  
6 avoid conflict of interest in the decision making process and minimize the need for recusals.

7  
8 During the term of service as a commissioner, these individuals may not independently consult with a CODA-  
9 accredited program or a program applying for CODA accreditation. In addition, site visitors serving on the  
10 Commission may not serve on a site visit team during their terms.

11  
12 All other active site visitors who independently consult with educational programs accredited by CODA or  
13 applying for accreditation must identify all consulting roles to the Commission and must file with the  
14 Commission a letter of conflict acknowledgement signed by themselves and the institution/program with  
15 whom they consulted. All conflict of interest policies as noted elsewhere in this document apply. Contact the  
16 CODA office for the appropriate conflict of interest declaration form.

17  
18 Prior to a site visit, a list of site visitors and other participants is reviewed by the institution/program for  
19 conflict of interest or any other potential problem. The program/institution being site visited will be permitted  
20 to remove individuals from the list if a conflict of interest, as described in the Commission's Conflict of  
21 Interest Policy, can be demonstrated. Information concerning the conflict of interest must be provided in  
22 writing clearly stating the specifics of the conflict.

23  
24 Site visitors are appointed by the Chair and approved by the institution's administration, i.e. dental school  
25 dean or program director. The visiting committee conducts the site visit and prepares the report of the site  
26 visit findings for Commission action. The size and composition of a visiting committee varies with the  
27 number and kinds of educational programs offered by the institution, and will include, whenever possible, at  
28 least one (1) educator and one (1) practitioner. All visiting committees will include at least one person who is  
29 not a member of a Review Committee of the Commission or a Commission staff member. Two dental  
30 hygiene site visitors shall be assigned to dental school-sponsored dental hygiene site visits.

31  
32 When appropriate, a generalist representative from a regional accrediting agency may be invited by the chief  
33 executive officer of an institution to participate in the site visit with the Commission's visiting committee. A  
34 generalist advises, consults and participates fully in committee activities during a site visit. The generalist's  
35 expenses are reimbursed by the institution. The generalist can help to ensure that the overall institutional  
36 perspective is considered while the specific programs are being reviewed.

37  
38 The institution is encouraged to invite the state board of dentistry to send a current member to participate in  
39 the site visit. If invited, the current member of the state board receives the same background materials as  
40 other site visit committee members and participates in all site visit conferences and executive sessions. The  
41 state board of dentistry reimburses its member for expenses incurred during the site visit.

42  
43 In addition to other participants, Commission staff member may participate on the visiting committee for  
44 training purposes. It is emphasized that site visitors are fact-finders, who report committee findings to the  
45 Commission. Only the Commission is authorized to take action affecting the accreditation status.

1 Revised: 2/23; 4/22; 8/19; 2/16; 8/14; 1/14; 1/03, 1/00, 7/97; Reaffirmed: 8/10, 7/09, 7/07, 7/06, 7/01; CODA:  
2 07/96:10, 12/83:4  
3

4 **1. Appointments:** All site visitor appointments are made annually for one year terms for a maximum of  
5 six consecutive years. Following the maximum appointment period of six consecutive years, the site  
6 visitor may reapply for appointment after one year. In exceptional circumstances the Review Committee  
7 may recommend that the Commission alter an individual's term limits. Site visitors assist the  
8 Commission in a number of ways, including: developing accreditation standards, serving on special  
9 committees, and serving as site visitors on visits to predoctoral, advanced dental and allied dental  
10 education programs.  
11

12 The Commission reviews nominations received from its communities of interest, including discipline-  
13 specific sponsoring organizations and certifying boards. Individuals may also self-nominate. In addition to  
14 the mandatory subject expertise, the Commission always requests nominations of potentially under-  
15 represented ethnic groups and women, and makes every effort to achieve a pool of site visitors with broad  
16 geographic diversity to help reduce site visit travel expenses.  
17

18 Site visitors are appointed/reappointed annually and required to sign the Commission's Conflict of  
19 Interest Statement, the Agreement of Confidentiality, the Copyright Assignment, Licensure Attestation,  
20 and the ADA's Professional Conduct Policy and Prohibition Against Harassment. Site visitors must also  
21 complete annual training and will receive periodic updates on the Commission's policies and procedures  
22 related to the Health Insurance Portability and Accountability Act (HIPAA). The Commission office  
23 stores these forms for seven (7) years. In addition, site visitors must comply with training requirements,  
24 the ADA's travel policy and other CODA Rules and Regulations. The Commission may remove a site  
25 visitor for failing to comply with the Commission's policies and procedures, continued, gross or willful  
26 neglect of the duties of a site visitor, or other just cause as determined by the Commission.  
27

28 Subsequent to appointment/reappointment by the Commission, site visitors receive an appointment letter  
29 explaining the process for appointment, training, and scheduling of Commission site visitors.  
30

31 Revised: 8/19; 8/18; 8/14; 7/08; Reaffirmed: 8/10, 1/98, 8/02; CODA: 07/94:9, 01/95:10  
32

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

44 Reaffirmed: 8/19; Adopted: 8/10  
45

1 K. POLICY ON SILENT OBSERVERS ON SITE VISITS

2  
3 In order to facilitate a better understanding of the accreditation and site visit processes, any dental  
4 education program scheduled for a site visit of its program, may request the opportunity to send one  
5 administrator or faculty member as a silent observer to a Commission site visit. Representatives of  
6 international programs may also participate as a silent observer on a Commission site visit. The silent  
7 observer visit will be scheduled one to two years before the scheduled site visit of the observer's program.  
8 The program being observed has the right to approve the designated observer. Requests for a faculty  
9 member or administrator to observe the site visit of another program are managed according to when the  
10 observer's site visit is scheduled. Requests for the opportunity to have a faculty member or administrator  
11 observe a site visit are made through a letter from the chief administrative officer (dean, chair, chief of  
12 dental service) of the program. While the observer may request to observe a specific site visit,  
13 Commission staff will make the final determination based upon the site visit schedule and availability of  
14 observation opportunities. Generally, a program is provided one opportunity to send an observer to a site  
15 visit. The observer's program pays all expenses for such an observer.

16  
17 The observer receives all self-study materials and is allowed to observe all interviews and meetings, ~~but~~  
18 ~~does not attend the briefing at the end of each day.~~ The observer must remain silent during all sessions  
19 where university and/or program officials, faculty, staff or students are present at the site visit. The  
20 observer is encouraged to ask questions of the visiting committee during executive session meetings only  
21 but does not participate in decision-making discussions. As an observer of the site visit, it is expected  
22 that this individual will remain with the designated site visit team members at all times during the visit.

23  
24 All observers must sign the Commission's Agreement of Confidentiality prior to the site visit. The chair  
25 of the site visit committee has the right to excuse and/or exclude the observer from any or all aspects of  
26 the site visit for improper and/or unprofessional behavior. The chair's decision to remove or exclude an  
27 observer from the site visit cannot be appealed.

28  
29 A representative of the state dental society may attend a comprehensive dental school site visit as a silent  
30 observer, if requested by the society and approved by the institution.

31 Revised: 2/24; 2/16; 8/14; 8/13; 2/13, 07/98:2, 01/94:2, 05/93:1-2, 12/92:3; Reaffirmed: 8/19; 8/10, 7/07,  
32 7/01  
33

34 L. POLICY ON STATE BOARD PARTICIPATION DURING SITE VISITS

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

40  
41 If a state has a separate dental hygiene examining board, that board will be contacted when a dental  
42 hygiene program located in that state is site visited. In addition, the dental examining board for that state  
43 will be notified.  
44

1 The following procedures are used in implementing this policy:

- 2 1. Correspondence will be directed to an institution notifying it of a pending accreditation visit and will  
3 include a copy of Commission policy on state board participation. The institution is urged to invite  
4 the state board to send a current member. The Commission copies the state board on this  
5 correspondence.
- 6 2. The institution notifies the Commission of its decision to invite/not invite a current member of the  
7 state board. If a current member of the state board is to be present, s/he will receive the same  
8 background information as other team members.
- 9 3. If it is the decision of the institution to invite a member of the state board, Commission staff will  
10 contact the state board and request the names of at least two of its current members to be  
11 representatives to the Commission.
- 12 4. The Commission provides the names of the two state board members, to the institution. The  
13 institution will be able to choose one of the state board members. If any board member is  
14 unacceptable to the institution, the Commission must be informed in writing.
- 15 5. The state board member, if authorized to participate in the site visit by the institution, receives the  
16 self-study document from the institution and background information from the Commission prior to  
17 the site visit.
- 18 6. The state board member must participate in all days of the site visit, including all site visit  
19 conferences and executive sessions.
- 20 7. The state board member serves as a silent observer in all sessions except executive sessions with the  
21 site visit team.
- 22 ~~7.~~ 8. In the event the chair of the site visit committee determines that a vote is necessary to make a  
23 recommendation to the Commission, only team members representing the Commission will be  
24 allowed to vote.
- 25 ~~8.~~ 9. The state board reimburses its member for expenses incurred during the site visit.

26  
27 The following statement was developed to assist state board members by clearly indicating their role  
28 while on-site with an accreditation team and what they may and may not report following a site visit. The  
29 statement is used on dental education, advanced dental education and allied dental education site visits.  
30 The state board member participates in an accreditation site visit in order to develop a better  
31 understanding of the accreditation site visit process and its role in ensuring the competence of graduates  
32 for the protection of the public. The dental, advanced dental and allied dental education programs are  
33 evaluated utilizing the Commission's approved accreditation standards for each respective discipline.  
34

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

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

1  
2 Following the site visit, state board members may be asked to provide either a written or oral report to  
3 their boards. Questions frequently arise regarding what information can be included in those reports  
4 while honoring the Agreement of Confidentiality that was signed before the site visit. The following are  
5 some general guidelines:  
6

- 7 • What You May Share:
  - 8 • Information about the Commission’s accreditation standards, process and policies.
  - 9
- 10 • What You May Not Share:
  - 11 • The school’s self-study;
  - 12 • Previous site visit reports and correspondence provided to you as background information;
  - 13 • Information revealed by faculty or students/residents during interviews and conferences;
  - 14 • The verbal or written findings and recommendations of the visiting committee; and
  - 15 • Any other information provided in confidence during the conduct of an accreditation visit.
  - 16

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

18 Revised: 2/24; 7/09, 1/00; Reaffirmed: 8/19; 8/10, 7/07, 7/04, 7/01, 12/82, 5/81, 12/78, 12/75; Adopted:  
19 8/86  
20  
21

## 22 E. POLICY ON PREPARATION AND SUBMISSION OF DOCUMENTS TO THE COMMISSION

23

24 All institutions offering programs accredited by the Commission are expected to prepare documents that  
25 adhere to guidelines set forth by the Commission on Dental Accreditation, including required verification  
26 signatures by the institution’s chief executive officer, the institution’s chief academic officer, and  
27 program director. These documents may include, but are not limited to, self-study, responses to site  
28 visit/progress reports, initial accreditation applications, reports of program change, and transfer of  
29 sponsorship and exhibits. The Commission’s various guidelines for preparing and submitting documents,  
30 including electronic submission, can be found on the Commission’s website or obtained from the  
31 Commission staff.  
32

33 In addition, all institutions must meet established deadlines for submission of requested information. Any  
34 information that does not meet the preparation or submission guidelines or is received after the prescribed  
35 deadlines may be returned to the program, which could affect the accreditation status of the program.  
36

37 **Electronic Submission of Accreditation Materials:** All institutions will provide the Commission with  
38 an electronic copy of all accreditation documents and related materials, which conform to the  
39 Commission’s Electronic Submission Guidelines. Electronic submission guidelines can be found on the  
40 Commission’s website or obtained from the Commission staff. Accreditation documents and related  
41 materials must be complete and comprehensive.  
42

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

1  
2 **Compliance with Health Insurance Portability and Accountability Act (HIPAA).** HIPAA is the  
3 federal law that governs how “Covered Entities” handle the privacy and security of patients’ protected  
4 health information (PHI). HIPAA Covered Entities include health care providers that send certain  
5 information electronically as well as certain health plans and clearinghouses. The Commission may be  
6 deemed a “Business Associate” of institutions that are HIPAA Covered Entities. A Business Associate is  
7 an individual or entity, other than a workforce member of the Covered Entity, that performs a function or  
8 activity on behalf of a HIPAA Covered Entity that involves creating, receiving, maintaining, or  
9 transmitting protected health information, involving the use or disclosure of individually identifiable  
10 health information. Business Associates must comply with certain provisions of the HIPAA Security,  
11 Privacy and Breach Notification Rules provisions and implement training programs. The Commission  
12 “HIPAA Policy and Procedure Manual” is updated periodically. All Commission site visitors, Review  
13 Committee members, Commissioners, and staff are required to complete a CODA HIPAA training  
14 exercise on a yearly basis.

15  
16 The program’s documentation for CODA must not contain any patient protected health information (PHI)  
17 or sensitive personal personally identifiable information (SPIPH). If the program submits documentation  
18 that does not comply with the policy on PHI or SPI PH, CODA will assess an administrative processing  
19 fee of \$4,000 per program submission to the institution; a program’s resubmission that continues to  
20 contain PHI or SPI PH will be assessed an additional \$4,000 administrative processing fee.

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

#### 25 26 27 L. POLICY ON ENROLLMENT INCREASES IN ADVANCED DENTAL EDUCATION PROGRAMS 28

29 An advanced dental education program considering or planning an enrollment increase, or any other  
30 substantive change, should notify the Commission early in the program’s planning. Such notification will  
31 provide an opportunity for the program to seek consultation from Commission staff regarding the  
32 potential effect of the proposed change on the accreditation status and the procedures to be followed.  
33

34 The following advanced dental education disciplines have authorized total complement enrollment: dental  
35 public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and  
36 maxillofacial surgery (per year enrollment is authorized), orthodontics and dentofacial orthopedics,  
37 pediatric dentistry, periodontics, and prosthodontics. Programs with authorized enrollment must use the  
38 discipline-specific Guidelines to request and obtain approval for an increase in enrollment prior to  
39 implementing the increase.

40  
41 Programs may, from time to time, require a temporary, one-time only increase in enrollment to permit a  
42 student/resident/fellow to complete a program, which was extended beyond the program’s regular  
43 completion date. A program must use the discipline-specific Guidelines to request a temporary, one-time  
44 only increase in enrollment prior to implementing the increase. Upon submission of the program change  
45 report, a temporary, one-time only increase in program enrollment of up to a maximum of six (6) months

1 may be reviewed and approved by the Review Committee Chair, if the program provides evidence of  
2 sufficient resources and procedures to support the temporary increase. If the temporary, one-time only  
3 increase in enrollment may not be adequately supported, as determined by preliminary review by the  
4 discipline-specific Review Committee Chair, prior approval by CODA will be required and the report will  
5 be considered at the next regularly scheduled Commission meeting.

6  
7 Programs are reminded that resources must be maintained even when the full complement of  
8 students/residents/fellows is not enrolled in the program.  
9

10 The following advanced dental education disciplines do not have authorized enrollment: advanced education  
11 in general dentistry, general practice residency, dental anesthesiology, oral medicine, and orofacial pain.  
12 However, approval of an increase in enrollment in these advanced dental education programs must be  
13 reported to the Commission if the program's total enrollment increases beyond the enrollment at the last site  
14 visit or prior approval of enrollment increase. Programs must use the discipline-specific Guidelines to  
15 request an increase in enrollment prior to implementing the increase. Upon submission of the program  
16 change report, a substantial increase in program enrollment as determined by preliminary review by the  
17 discipline-specific Review Committee Chair, will require prior approval by CODA.

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

23  
24 Requests for *retroactive permanent* increases in enrollment will not be considered. The Commission may  
25 consider retroactive temporary enrollment increases due to special circumstances on a case-by-case basis,  
26 including, but not limited to:

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

32  
33 If a program has enrolled beyond the approved number of students/residents without prior approval by the  
34 Commission, the Commission may or may not retroactively approve the enrollment increase without a  
35 special focused site visit at the program's expense.

36  
37 If the focused visit determines that the program does not have the resources to support the additional  
38 student(s)/resident(s), the program will be placed on "intent to withdraw" status and no additional  
39 student(s)/resident(s) beyond the previously approved number may be admitted to the program until the  
40 deficiencies have been rectified and approved by the Commission. Student(s)/Resident(s) who have  
41 already been formally accepted or enrolled in the program will be allowed to continue.

42 Revised: 2/24; 8/23; 2/22; 8/20; 1/20; 8/18; 8/16; 2/16; 8/15; 8/10; Reaffirmed: 7/07; CODA: 08/03:22  
43  
44

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

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

8  
9 A program considering or planning an enrollment increase, or any other substantive change, should notify  
10 the Commission early in the program's planning. Programs are reminded that resources must be  
11 maintained even when the full complement of students is not enrolled in the program.

12  
13 Approval of an increase in enrollment in predoctoral dental education programs must be reported to the  
14 Commission if the program's total enrollment increases beyond the enrollment at the last site visit or prior  
15 approval of enrollment increase. Upon submission of the enrollment increase report, a substantial increase  
16 in program enrollment as determined by preliminary review by the discipline-specific Review Committee  
17 Chair will require prior approval by CODA. Programs should be cognizant of the impending need for  
18 enrollment increases through short- and long-term planning and proactively request permission for the  
19 increase. The Commission will not consider retroactive permanent requests, nor will it consider inter-  
20 cycle requests unless there are documented extenuating circumstances.

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

22  
23 S. POLICY STATEMENT ON REPORTING AND APPROVAL OF SITES WHERE EDUCATIONAL  
24 ACTIVITY OCCURS

25  
26 The Commission on Dental Accreditation recognizes that students/residents may gain educational  
27 experiences in a variety of settings and locations.

28  
29 An accredited program may use one or more than one setting or location to support student/resident  
30 learning and meet Commission on Dental Accreditation standards and/or program requirements. The  
31 Commission expects programs to follow the EOPP guidelines and accreditation standards when developing,  
32 implementing and monitoring activity sites used to provide educational experiences.

33  
34 **Reporting Requirements:**

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

40

1

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

2  
3

~~\*sites used for community service and service learning are exempt~~

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

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

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

20  
21 When conducting a review of the program, the Commission's site visit team will identify the sites to be  
22 visited based upon educational experiences at the site (for example based upon length of training at the site,  
23 educational experience or evaluation/competencies achieved). After the initial visit or review, each  
24 educational activity site may be visited during the regularly scheduled CODA evaluation visit to the program.

25  
26 **Discipline-specific Exemptions:**

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

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

41  
42 The Commission recognizes that advanced dental education programs in dental anesthesiology utilize  
43 numerous mobile ambulatory settings and rotations to provide residents with opportunities to gain  
44 required clinical experiences. The program will provide a list of all currently used settings and rotations  
45 in the self-study document. The visiting committee will randomly select and visit several settings and

1 rotation locations during the site visit to the program to evaluate compliance with Commission on Dental  
2 Accreditation standards. Prior Commission approval of these settings and rotations will not be required.

3  
4 For predoctoral dental education programs, when primary program faculty travel with student(s) to a site  
5 and competency is assessed, the site may be treated as a minor site for reporting purposes.

6 The use of service-learning/community-service sites are exempt from reporting.

7 Expansion of a developing dental hygiene program and/or current or developing dental assisting program  
8 will only be considered after the program has demonstrated success by graduating the first class, measured  
9 outcomes of the academic program, and received approval without reporting requirements.

10  
11 **Fees Related to the Use of Educational Activity Sites:**

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

15  
16 **Commission on Dental Accreditation Consideration of Educational Activity Sites:**

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

- 20  
21 1. Depending upon the type of educational activity site established, a program administrator submits either:  
22 (1) the major educational activity site report **by May 1 or November 1** or (2) the minor educational  
23 activity site report at least thirty (30) days prior to planned implementation of educational activity site.  
24 2. Commission staff reviews the report to assess its completeness and to determine whether the change  
25 could impact the program's potential ability to comply with the accreditation standards. If this is the  
26 case, whether the site is major or minor, the report is reviewed by the appropriate Review Committee  
27 for the discipline and by the Commission.  
28 3. Receipt of the educational activity site report and accompanying documentation is acknowledged in  
29 one of the following ways:  
30 a. The program administrator is informed that the report will be reviewed by the appropriate Review  
31 Committee and by the Commission at their next regularly scheduled meeting. Additional  
32 information may be requested prior to this review if the change is not well-documented; or  
33 b. The program administrator is informed that the reported change will be reviewed during the next  
34 site visit.  
35 4. If the report will be considered by a Review Committee and by the Commission, the report is added  
36 to the appropriate agendas. The program administrator receives notice of the results of the  
37 Commission's review.

38  
39 The following alternatives may be recommended by Review Committees and/or be taken by the  
40 Commission in relation to the review of reports of addition of educational activity sites received from  
41 accredited educational programs.

- 42 • *Approve the addition of the educational activity site:* If the Review Committees or Commission does  
43 not identify any concerns regarding the program's continued compliance with the accreditation

1 standards, the transmittal letter should advise the institution that the change has been noted and will  
2 be reviewed at the next regularly-scheduled site visit to the program.

- 3 • *Approve the addition of the educational activity site and request additional information:* If the  
4 Review Committees or Commission does not identify any concerns regarding the program's  
5 compliance with the accreditation standards, but believes follow up reporting is required to ensure  
6 continued compliance with accreditation standards, additional information will be requested for  
7 review by the Commission. Additional information could occur through a supplemental report or a  
8 focused site visit. Use of the educational site is permitted.
- 9 • *Postpone action and continue the program's accreditation status, but request additional information:*  
10 The transmittal letter will inform the institution that the report of the addition of the educational  
11 activity site has been considered, but that concerns regarding continued compliance with the  
12 accreditation standards have been identified. Additional specific information regarding the identified  
13 concerns will be requested for review by the Commission. The institution will be further advised  
14 that, if the additional information submitted does not satisfy the Commission regarding the identified  
15 concerns, the Commission reserves the right to request additional documentation, conduct a special  
16 focused site visit of the program, or deny the request. Use of the educational activity site is not  
17 permitted until Commission approval is granted.
- 18 • *Deny the request:* If the submitted information does not indicate that the program will continue to  
19 comply with the accreditation standards, the Commission will deny the request for the addition of  
20 educational activity sites. The institutions will be advised that they may re-submit the request with  
21 additional information if they choose.

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

## 23 24 G. FUNCTION AND PROCEDURES OF THE APPEAL BOARD

25  
26 The principal function of the Appeal Board is to determine whether the Commission on Dental  
27 Accreditation, in arriving at a decision regarding the withdrawal or denial of accreditation for a given  
28 program, has properly applied the facts presented to it. In addition, the Commission's *Rules* stipulate that  
29 the Appeal Board shall provide the educational program filing the appeal the opportunity to be  
30 represented by legal counsel and shall give the program the opportunity to offer evidence and argument in  
31 writing and/or orally to try to refute or overcome the findings and decision of the Commission.

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

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

40  
41 The Appeal Board is an autonomous body, separate from the Commission. Costs related to appeal  
42 procedures will be underwritten, whenever possible, by the institution and the Commission on an equally  
43 shared cost basis.

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

1  
2 **2. Selection Criteria For Appeal Board Members:** The Appeal Board Member shall not be:

- 3 • a current member of a dental or allied dental faculty\*;  
4 • an employee, member of the governing board, owner, shareholder of, or independent consultant to, a  
5 program that either is accredited by the Commission on Dental Accreditation, has applied for initial  
6 accreditation, or is not-accredited\*; and  
7 • spouse/partner, parent, child, or sibling of an individual identified above;  
8 • current member of the Commission; and/or  
9 • an individual who has participated in any step of the process leading up to the decision that is being  
10 appealed (e.g. member of the visiting committee, member of Review Committee, etc.).

11  
12 In addition to the criteria noted above, the public/consumer member of the Appeal Board shall not be:

- 13 • a dentist or member of an allied dental discipline,  
14 • a member or employee of any professional/trade association, licensing/regulatory agency or  
15 membership organization related to, affiliated with or associated with the Commission, dental  
16 education or dentistry, or  
17 • spouse/partner, parent, child, or sibling of an individual identified above.

18  
19 The Appeal Board Member shall:

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

24  
25 In the absence of a public member on the Appeal Board, a public member from a review committee not  
26 involved in the discipline-specific appeal may be temporarily appointed to the Appeal Board.

27  
28 \*Discipline-specific representatives from allied or advanced dental education areas and the ADEA  
29 representative can be a program director, faculty member or practitioner.

30 Revised: 2/24; 4/22; 8/18; 2/16; 8/14; 2/13; Reaffirmed: 8/21; 8/16; 8/10

31  
32 **3. Appeal Procedures:** If a program has been denied accreditation or if its accreditation has been  
33 withdrawn, the following appeal procedures are followed:

- 34  
35 1. Within fourteen (14) days after the institution's receipt of notification of the Commission on Dental  
36 Accreditation's decision to deny or withdraw accreditation, the program may file a written request of  
37 appeal to the Director of the Commission. If a request of appeal is not made, the Commission's  
38 proposed decision will automatically become final and the appropriate announcement will be made.  
39 2. If a request of appeal is received, the Director of the Commission shall acknowledge receipt of the  
40 request and notify the program of the date of the appeal hearing. The appeal date shall be within sixty  
41 (60) days after the appeal has been filed.  
42 3. The program filing the appeal may be represented by legal counsel in addition to the program  
43 administrator and other program representatives and shall be given the opportunity at such hearing to  
44 offer evidence and argument in writing or orally or both tending to refute or overcome the findings

1 and decision of the Board of Commissioners. The educational program need not appear in person or  
2 by its representative at the appellate hearing.

- 3 4. Legal counsel of the American Dental Association will be available to members of the Appeal Board  
4 upon request.
- 5 5. No new information regarding correction of the deficiencies may be presented with the exception of  
6 review of new financial information if all of the following conditions are met: (i) The financial  
7 information was unavailable to the institution or program until after the decision subject to appeal was  
8 made. (ii) The financial information is significant and bears materially on the financial deficiencies  
9 identified by the Commission. The criteria of significance and materiality are determined by the  
10 Commission. (iii) The only remaining deficiency cited by the Commission in support of a final  
11 adverse action decision is the institution's or program's failure to meet the Commission's standard  
12 pertaining to finances. An institution or program may seek the review of new financial information  
13 described in this section only once and any determination by the Commission made with respect to  
14 that review does not provide a basis for an appeal.
- 15 6. The Appeal Board may make the following decisions: to affirm, amend, or remand the adverse  
16 actions of the Commission. A decision to affirm, or amend the adverse action is implemented by the  
17 Commission. In a decision to remand the adverse action for further consideration, the Appeal Board  
18 will identify specific issues that the Commission must address. The Commission must act in a  
19 manner consistent with the Appeal Board's decisions or instructions.
- 20 7. No change in the accreditation status of the program will occur pending disposition of the appeal.
- 21 8. Within ten (10) days of the hearing, the applicant shall be notified by tracked electronic  
22 communication of the Appeal Board's decision. The decision may be to sustain the decision of the  
23 Commission or to remand the matter back to the Commission for reconsideration. Notice shall  
24 include a statement of the specifics on which the decision is based.
- 25 9. The decision rendered by the Appeal Board shall be final and binding.
- 26 10. In the event the educational program does not file a timely appeal of the Board of Commissioner's  
27 findings and decisions, the Board of Commissioner's decision shall become final. The Commission's  
28 notice of final adverse actions will be reported as described in the Commission's Procedure For  
29 Disclosure Notice Of Adverse Actions.

30  
31 In accord with due process measures, the Appeal Board will, when appropriate, review substantive  
32 procedural issues raised by the appellants. To this end, the Appeal Board is limited in its inquiry to the  
33 factual determinations up to the time of the Commission on Dental Accreditation's decision regarding the  
34 status of the program at issue.

35  
36 It is not proper for the Appeal Board to either receive or consider facts not previously presented to the  
37 Commission on Dental Accreditation since it does not sit as an initial reviewing body. Similarly, it is not  
38 the function of the Appeal Board to determine whether the facts, singularly or cumulatively, justify the  
39 decision of the Commission on Dental Accreditation unless it can be shown that the Commission's  
40 decision was clearly against the manifest weight of the evidence. Further, the Appeal Board will not hear  
41 testimony relative to the reasonableness of previously determined requirements for accreditation since this  
42 is clearly outside the scope of authority of this reviewing body.

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