#### **MINUTES**

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

### **AUGUST 8, 2013 (CLOSED SESSION)**

<u>Call to Order</u>: The Chair, Dr. Kent Knoernschild, called a regular meeting of the Commission on Dental Accreditation to order at 1:00 P.M. on Thursday, August 8, 2013, 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, Dr. Michael Biermann, Ms. Kristi Schmitt Burr, Dr. Thomas Cangialosi, Dr. Eric Carlson, Ms. Elizabeth Curran, Dr. Geri Ann DiFranco, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Mr. Robert Giasolli, Dr. Milton Glicksman, Dr. Henry Greenwell, Dr. Richard Kahn, Dr. Kent Knoernschild (chair), Dr. William Leffler, Dr. Ana Karina Mascarenhas, Dr. Judith Messura (vice-chair), Dr. Brad Neville, Dr. Yilda Rivera-Nazario, Dr. Ivan Torres-Nazario, Dr. Charlotte Royeen, Dr. William Schindler, Dr. Steven Schonfeld, Ms. Kathi Shepherd, Dr. James Sherrard, Dr. Perry Tuneberg, Dr. Karen West, and Dr. John Williams.

Dr. Joseph Eliason, was unable to attend. Dr. John Williams participated by telephone.

**Trainee Commissioners (Observers)**: Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. Harold "Mark" Livingston, Dr. Stanley Surabian, and Dr. B.D Tiner attended. Dr. Steven Campbell and Dr. Robert Sherman were unable to attend.

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

**Trustee Liaison**: Dr. Dennis Engel, ADA Trustee Liaison, was unable to attend.

Staff of the Commission were in attendance.

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

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

<u>Policy on Confidentiality</u>: Dr. Kent Knoernschild, 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.

<u>Accreditation Mail Ballots Since Last Commission Meeting</u>: The Commission approved five (5) mail ballots related to program accreditation actions, which had been considered since the Winter 2013 Commission meeting.

<u>Consideration of Consultant Nominations</u>: 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 and Review Committee on Dental Hygiene Education for a one-year appointment as consultants for 2013-2014.

<u>Commission Action</u>: The Commission approves the predoctoral and dental hygiene education consultant appointments for 2013-2014 (Appendix 1).

<u>Consideration of Matters Relating to Accreditation Actions</u>: 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.

<u>Commission Action</u>: Accreditation status was granted to programs evaluated since the Winter 2013 meeting. Accreditation actions are summarized in the "Report on the Accreditation Statuses of Educational Programs" (Appendix 2).

**Adjournment:** The Commission adjourned the closed session at 3:30 P.M.

#### **MINUTES**

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

### August 9, 2013 (OPEN SESSION)

<u>Call to Order</u>: The Chair, Dr. Kent Knoernschild, called a regular meeting of the Commission on Dental Accreditation to order at 8:00 A.M. on Friday, August 9, 2013, in the Executive Board Room of the ADA Headquarters Building, Chicago, in open session.

Roll Call: Dr. Byron "Pete" Benson, Dr. Michael Biermann, Ms. Kristi Schmitt Burr, Dr. Thomas Cangialosi, Dr. Eric Carlson, Ms. Elizabeth Curran, Dr. Geri Ann DiFranco, Dr. William Dodge, Dr. Kevin Donly, Dr. Lorraine Gagliardi, Mr. Robert Giasolli, Dr. Milton Glicksman, Dr. Henry Greenwell, Dr. Richard Kahn, Dr. Kent Knoernschild (chair), Dr. William Leffler, Dr. Ana Karina Mascarenhas, Dr. Judith Messura (vice-chair), Dr. Brad Neville, Dr. Yilda Rivera-Nazario, Dr. Ivan Torres-Nazario, Dr. Charlotte Royeen, Dr. William Schindler, Dr. Steven Schonfeld, Ms. Kathi Shepherd, Dr. James Sherrard, Dr. Perry Tuneberg, Dr. Karen West, and Dr. John Williams.

Dr. Joseph Eliason attended a portion of the meeting by telephone.

**Trainee Commissioners (Observers)**: Dr. Denise Kassebaum, Mr. James Kolstad, Mr. Dennis Lanier, Dr. Harold "Mark" Livingston, Dr. Stanley Surabian, and Dr. B.D Tiner attended. Dr. Steven Campbell and Dr. Robert Sherman were unable to attend.

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

**Trustee Liaison**: Dr. Dennis Engel, ADA Trustee Liaison, was in attendance.

Staff of the Commission were in attendance.

Adoption of Agenda: A motion was made and seconded to move the Proposed Revisions to Policy on Accreditation of Off-Campus Sites from the Report of the Standing Committee on Documentation and Policy Review section under Miscellaneous Affairs to the New Business section of the Report of the Dental Assisting Review Committee, since the dental assisting new business report included information on the proposed policy revision.

Following the discussion and action to reposition on the agenda the Proposed Revisions to Policy on Accreditation of Off-Campus Sites, the Commission voted to adopt the agenda as amended.

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

<u>Approval of Minutes From Winter 2013 Meeting</u>: The minutes of the Winter 2013 Commission meeting were adopted.

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

- Report of the Review Committee on Dental Public Health Education (Appendix 3)
- Report of the Review Committee on Endodontics Education (Appendix 4)
- Report of the Review Committee on Oral and Maxillofacial Pathology Education (Appendix 5)
- Report of the Review Committee on Pediatric Dentistry Education (Appendix 6)
- Report of the Review Committee on Periodontics Education (Appendix 7)
- Mail Ballot since last Commission Meeting for American College of Prosthodontists Complaint Against CODA Regarding Policy and Procedure (Appendix 8)
- Mail Ballot since last Commission Meeting for CODA Comment on the Proposed Standards Revisions for the Commission on Dental Accreditation of Canada (Appendix 9)

Report of the Review Committee on Predoctoral Dental Education: Committee Chair: Dr. John Williams. Committee Members: Dr. Cecile Feldman, Dr. Nicolaas Geurs, Dr. Sally Mauriello, Dr. Charlotte Royeen, and Dr. Marshall Titus. Dr. Gerald Ferretti was unable to attend. CODA Staff: Dr. Catherine Horan, manager, Predoctoral Dental Education; Dr. Sherin Tooks, director; CODA Legal Staff: Ms. Cathryn Albrecht. Guests: Dr. Eugene Anderson, chief policy officer and managing vice-president; and Dr. Bryan Cook, senior vice-president, Institutional Capacity Building, American Dental Education Association (ADEA).

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Dental Education Programs</u>: The Commission reviewed the annual report on the Frequency of Citings of Accreditation Standards for Dental Education Programs, and noted that most dental education programs (DDS/DMD) are 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.

Consideration of Proposed Revisions to the Accreditation Standards for Dental Education Programs and Related Documents: The Commission reviewed a letter from American Dental Association President, Dr. Robert A. Faiella, dated May 16, 2013, providing suggested modifications to the Accreditation Standards for Dental Education Programs implemented July 1, 2013. The Commission believed it was premature to review the suggested modifications at this time, since the Accreditation Standards had only recently been implemented and limited data were available on the outcomes of the new Standards. The Predoctoral Dental Education Review Committee believed that an additional day should be added to its Winter 2014 meeting for a more in-depth discussion on the letter and related issues, including the increased complexity of predoctoral education with increases in enrollment and utilization of off-campus sites.

<u>Commission action</u>: The Commission directs an additional day be added to the Commission's Predoctoral Dental Education Review Committee Winter 2014 meeting to discuss the letter received from the ADA and related issues. Further, the Commission directs that future two-day meetings of the Predoctoral Dental Education Review Committee may be scheduled based upon workload.

Review of Commission Policies and Procedures Related to International Accreditation of Predoctoral Dental Education Programs: The Commission discussed whether a phased-in implementation would apply to international programs seeking CODA accreditation. The Commission noted that international applications may be submitted for existing programs rather than developing programs; therefore, some modification of the application process may be needed. The Commission believed that staff should investigate timelines used by other accrediting agencies regarding international program accreditation, for discussion at the Winter 2014 Predoctoral Dental Education Review Committee and Commission meetings. Additionally, it was noted the Predoctoral Dental Education Review Committee would like to review a fee schedule associated with international accreditation, proposed by the Standing Committee on Finance.

<u>Commission action</u>: The Commission directs staff to investigate timelines for international accreditation established by other accrediting agencies, with a report by the Predoctoral Review Committee for the Winter 2014 meeting. The Commission further directs the Standing Committee on Finance to consider an international accreditation fee schedule, with an opportunity for comment by the Predoctoral Dental Education Review Committee and a report to the Commission for the Winter 2014 meeting.

Consideration of the Use of Private Practices for Community Based Education: The Commission discussed the use of private practices in predoctoral dental education programs. The Commission noted that there are about six (6) states that permit the usage of these facilities for the training of fourth-year dental students and only four (4) of these states have a predoctoral dental education program. It was also noted that the dental specialty standards include language excluding training in private offices, unless the discipline has specific language stipulating the circumstances under which the usage could occur. The Predoctoral Dental Education Review Committee believed private practices could be used; however, certain monitoring mechanisms and criteria should be placed within the Accreditation Standards. Examples of mechanisms and criteria include, but are not limited to: whether faculty or non-faculty would supervise the student at the private practice; whether faculty would have an appropriate background for teaching; the necessity for the implementation of a strong calibration program; and the establishment of a rigorous pedagogy in teaching and conducting assessments of competencies. Further, the usage of these settings could be tracked through site visit reports, adding consistency to, and overall enhancement of, the site visit data collection efforts in the broad sense. The Predoctoral Dental Education Review Committee believed additional work was needed to develop a standard, either through a Commission policy or an Accreditation Standard, that would monitor the use of private practices for community-based education. The Commission noted that this issue could apply to other disciplines beyond predoctoral dental education.

<u>Commission action</u>: The Commission directs that the Predoctoral Dental Education Review Committee continue its work toward development of a standard or policy for the use of private practices for community-based education, with a report to the Commission in Winter 2014.

Consideration of Guidelines for Reporting Enrollment Increase in Predoctoral Dental Education Programs: The Commission noted that the Policy on Reporting Program Changes in Accredited Programs currently addresses "substantial" increases in enrollment. The Predoctoral Dental Education Review Committee has been calibrated, as a norm, that an increase of 5% or greater in predoctoral programs would require Commission approval prior to implementation. Additionally, it was noted that enrollment increase reports submitted by programs are inconsistent in the type of information presented. The Review Committee and Commission believed there should be consistency in report format and content related to requests for increase in enrollment. As a result, the Predoctoral Review Committee developed proposed Guidelines for Reporting Enrollment Increase in Predoctoral Dental Education Programs and recommended the guidelines be circulated to the relevant communities of interest, including the American Dental Education Association Council of Deans.

• <u>Commission action</u>: The Commission directs the proposed Guideline for Reporting Enrollment Increase in Predoctoral Dental Education Programs (Appendix 10) be circulated to the relevant communities of interest, including the American Dental Education Association Council of Deans, with comment by December 1, 2013 and a report to the Commission at the Winter 2014 meeting.

<u>New Business: Authorization for Additional Meeting Day in Winter 2014 for Predoctoral Dental Education Review Committee</u>: The Commission considered a new business item submitted by the Predoctoral Dental Education Review Committee, related to expansion of the committee's meeting dates in Winter 2014. As noted previously in this report, the Commission directed an additional day be added to the Winter 2014 meeting of the Predoctoral Dental Education Review Committee. The Commission further noted that the Review Committee's request would allow the Committee to assess current trends in dental education and discuss the recent Supreme Court ruling related to the diversity component of the predoctoral Accreditation Standards.

<u>Commission action</u>: The Commission directs an additional day be added to the Commission's Predoctoral Dental Education Review Committee meeting in Winter 2014 to include a discussion by the Committee on issues of the accreditation standards and current trends as they may impact compliance with the newly implemented standards.

Report of the Review Committee on Postdoctoral General Dentistry Education: Committee chair: Dr. Judith Messura. Committee members: Dr. Michael Brennan, Dr. Sebastian Ciancio, Dr. John Coke, Dr. Kenneth Fedor, Ms. Marlene Futterman, Dr. Henry Gremillion, Dr. Timothy Halligan, Dr. Agnes Lau, Dr. Miriam Robbins, Dr. James Tom, and Dr. Stephen Young. Commission Staff: Ms. Peggy Soeldner, manager, Postdoctoral General Dentistry Education and Dr. Sherin Tooks, director, CODA. Guests (Commissioner Trainees): Dr. Harold "Mark" Livingston, Dr. Stanley Surabian. Guests (open portion only): Dr. Anthony Palatta, Senior Director, Educational Program Development Policy Center; Ms. Kristen Dee, Executive

Director, American Association of Hospital Dentists. The meeting of the Postdoctoral General Dentistry Review Committee (PGD RC) was held July 11-12, 2013 in the Association Headquarters Building.

Progress Report on the Validity and Reliability Study of the Accreditation Standards for Advanced General Dentistry Education Programs in Oral Medicine: The Commission discussed the progress that the Postdoctoral General Dentistry Education Review Committee had made with regard to the validity and reliability study for oral medicine standards. The Commission noted that based on the data collected, the Review Committee had suggested changes to the standards, including replacing the terms "proficient" and "proficiencies" with "competent" and competencies." The oral medicine community was consulted regarding the proposed revisions; therefore, the Postdoctoral General Dentistry Education Review Committee recommended circulation of the proposed revisions until December 1, 2013, with an open hearing at the 2013 Annual Session of the American Dental Association. The Review Committee and Commission will consider comments at the Winter 2014 meetings.

<u>Commission action</u>: The Commission directs that the proposed revisions to the Accreditation Standards for Advanced General Dentistry Education Programs in Oral Medicine (Appendix 11), be circulated to the communities of interest for review and comment until December 1, 2013. The Commission further directs that an open hearing be held at the 2013 Annual Meeting of the American Dental Association, with comments reviewed at the Winter 2014 meetings of the Postdoctoral General Dentistry Education Review Committee and the Commission.

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Advanced</u>
<u>Education Programs in General Dentistry</u>: The Commission considered the frequency of citings report for advanced education programs in general dentistry. The data indicated that a total of the 106 citings of non-compliance were made. Of these, 8 (8%) were related to Standard 1 – Institutional and Program Effectiveness; 70 (66%) were related to Standard 2 – Educational Program; 4 (3%) were related to Standard 3 – Faculty and Staff; 4 (3%) were related to Standard 4 – Educational Support Services, and 20 (19%) were related to Standard 5 – Patient Care Services.

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

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Advanced</u>
<u>Education Programs in General Practice Residency</u>: The Commission considered the frequency of citings report for advanced education programs in general practice residency. Analysis of the data indicated that a total of 420 citings of non-compliance were made. Of these, 58 (14%) were related to Standard 1 – Institutional and Program Effectiveness; 267 (64%) were related to Standard 2 – Educational Program; 26 (6%) were related to Standard 3 – Faculty and Staff; 14 (3%) were related to Standard 4 – Educational Support Services, and 55 (13%) were related to Standard 5 – Patient Care Services.

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

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Advanced</u> <u>General Dentistry Education Programs In Dental Anesthesiology</u>: The Commission considered the frequency of citings report for advanced general dentistry education programs in dental anesthesiology. An analysis of the site visit reports showed that nine (9) citings of noncompliance were made in the nineteen (19) site visit reports of the advanced general dentistry education programs in dental anesthesiology. Further, analysis of the data indicates that the most frequently cited standard is Standard 1-5, written agreements, with three (3) citations.

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

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Advanced</u>
<u>General Dentistry Education Programs In Oral Medicine</u>: The Commission considered the frequency of citings report for advanced general dentistry education programs in oral medicine. An analysis of the site visit reports shows that 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.

<u>Informational Report on the Frequency of Citings of Accreditation Standards for Advanced</u>
<u>General Dentistry Education Programs In Orofacial Pain</u>: The Commission considered the frequency of citings report for advanced general dentistry education programs in orofacial pain. An analysis of the site visit reports showed that two (2) citings of non-compliance was 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.

New Business: Review of Accreditation Standard Requiring Basic Life Support: The Commission considered a new business item submitted by the Postdoctoral General Dentistry Education Review Committee, related to the Accreditation Standards requiring basic life support (BLS). It was noted programs may have been cited regarding because there is confusion regarding the substitution of advanced cardiovascular life support (ACLS) for BLS. The Commission determined that ACLS is not a substitute for BLS because the training for ACLS is not exactly the same as BLS. The Commission believed that the intent statement regarding BLS should be revised in the advanced education in general dentistry and general practice residency standards, and the advanced general dentistry in orofacial pain, oral medicine, and dental anesthesiology standards.

<u>Commission action</u>: The Commission approves revision to the intent statement related to BLS in the Accreditation Standards for Advanced General Dentistry Education Programs in Dental Anesthesiology and Orofacial Pain (Appendix 12), with immediate implementation. The Commission also approves revision to the intent statement related to BLS in the proposed Standards for Advanced General Dentistry Education Programs in Oral Medicine (Appendix 12) recommended for circulation to the communities of interest. Finally, the Commission approves that proposed revision to the intent statement

related to BLS in the Accreditation Standards for Advanced Education Programs in General Dentistry and General Practice Residency (Appendix 12) be included in proposed revisions made, if any, following review of comments received and considered by the Postdoctoral General Dentistry Education Review Committee and the Commission at its Winter 2014 meeting.

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, Ms. Donna Lepkoski, Ms. Cathy Roberts, Ms. Deanna Stentiford. Guests: Dr. Carolyn Breen, President, American Dental Assistants Association, Ms. Cynthia Durley, Executive Director, Dental Assisting National Board, Ms. Tami Grzesikowski, Senior Director for Allied Dental Education, American Dental Education Association. Commission Staff: Ms. Patrice Renfrow, manager, Allied Dental Education, Ms. Alyson Ackerman, coordinator, Allied Program Reviews. Dr. Sherin Tooks, director attended a portion of the meeting. The meeting of the Review Committee on Dental Assisting Education (DA RC) was held on July 11-12, 2013 at the ADA Headquarters Building.

<u>Informational Report on Frequency of Citings of Accreditation Standards for Dental Assisting</u>
<u>Education Programs</u>: The Commission considered the frequency of citings report for dental assisting education programs. An analysis of the citings in Appendix 1 indicated that 7.4% (72) related to Standard 1 – Institutional Effectiveness; 57% (557) related to Standard 2 – Educational Program; 17.1% (166) related to Standard 3 – Administration, Faculty and Staff; 5.9% (57) related to Standard 4 – Educational Support Services; 11.5% (112) related to Standard 5 – Health and Safety Provisions; and 0.72% (7) related to Standard 6 – Patient Care Services.

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

Consideration of Policy and Guidelines for Authorized Enrollment in Dental Assisting Education Programs: The Commission considered a follow-up report from the Dental Assisting Review Committee related to the Winter 2013 request to develop a policy on authorized enrollment with corresponding guidelines for dental assisting. It was noted that, following circulation of the draft policy and guidelines for comment from the dental assisting community, there was great variance in the interpretation of questions on the administrative aspects of the policy. Further, due to the recent revision to the Policy on Program Change, there appeared to be sufficient direction to dental assisting programs regarding the requirement for reporting increases in enrollment. The Dental Assisting Review Committee requested that the original proposal for a policy and guidelines on authorized enrollment be rescinded.

<u>Commission action</u>: The Commission rescinds the proposed Policy on Authorized Enrollment and related guidelines for dental assisting education programs, noting that the Commission's Policy on Program Change provides sufficient guidance and oversight to monitor enrollment changes in dental assisting education programs.

<u>New Business: Policy on Off-Campus Sites</u>: The Commission considered a new business item submitted by the Dental Assisting Review Committee with a proposed addition to the Commission's Policy on Off-Campus Sites. Dental laboratory technology was also included in

the proposed additional language as part of the dental assisting recommendation. Additionally, in response to the action to modify the agenda, the Policy on Off-Campus Sites was reviewed, in total, with the new business item. It was noted that the Standing Committee on Documentation and Policy Review had made modifications to the Policy on Off-Campus Sites (see Documentation and Policy report), which were considered in this discussion.

The Commission noted that dental assisting programs may use off-campus sites as educational sites to deliver the program's curriculum. Additionally, off-campus private dental offices are used to provide clinical work experience for dental assisting students. In submitting this new business item, the Dental Assisting Review Committee felt that the use of private dental offices should be exempt from reporting to the Commission and approval prior to implementation under the Commission's Policy on Off-Campus Sites. The Dental Assisting Review Committee believed that given the framework of dental assisting education, the Policy on Off-Campus Sites would create an undue burden on the Commission's volunteers who would be responsible for reviewing the off-campus sites for all dental assisting programs. Proposed language for inclusion into the policy was provided and discussed by the Commission.

The Commission discussed the proposed dental assisting addition and the suggested modifications proposed by the Documentation and Policy Committee, related to the Policy on Off-Campus Sites. The Commission discussed the level of oversight that would be maintained within dental assisting programs, noting that private dental offices used by dental assisting programs are under the oversight of the program and therefore Commission oversight was not necessary. Concerns were raised related to patient safety and the need for Commission oversight of program requirements and the sites used for educational training. The Commission was informed that the Documentation and Policy Committee felt that if the rotation was a requirement of the standards or the program, then the Commission should have oversight of the off-campus site. Following discussion, the Commission approved the proposed language to exempt dental assisting and dental laboratory technology programs from reporting and receiving prior approval for use of private practice off-campus sites.

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

The Commission also approved modification to the Policy on Off-Campus Sites suggested by the Standing Committee on Documentation and Policy Review, noting that sites used to meet the accreditation standards or program requirements will require Commission approval prior to recruiting students/residents and initiating use of the sites. Enrichment or observational sites do not require Commission approval.

<u>Commission action</u>: The Commission approves revisions to the Policy on Off-Campus Sites (Appendix 13), with immediate implementation.

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: Ms. Pamela Steinbach, Director of Education and Research, American Dental Hygienists' Association and Ms. Tami Grzesikowski, Senior Director for 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, and Ms. Cathryn Albrecht, legal counsel, CODA, attended a portion of the meeting. The meeting of the Review Committee on Dental Hygiene Education (DH RC) was held on July 9-10, 2013 at the ADA Headquarters Building.

<u>Informational Report on Frequency of Citings of Accreditation Standards for Dental Hygiene</u> <u>Education Programs</u>: The Commission considered the frequency of citings report for dental hygiene education programs. An analysis of the citings indicated that a total of 454 areas of noncompliance were cited; 6.7% (58) related to Standard 1-Institutional Effectiveness; 47.3% (411) related to Standard 2-Educational Program; 19.6% (170) related to Standard 3-Administration, Faculty and Staff; 10.2% (89) related to Standard 4-Educational Support Services; 5.5% (48) related to Standard 5-Health and Safety Provisions; and 10.7% (93) related to Standard 6-Patient Care Services.

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

<u>Consideration of Policy and Guidelines for Authorized Enrollment in Dental Hygiene Education Programs</u>: The Commission considered a follow-up report from the Dental Hygiene Review Committee related to the Winter 2013 request to develop a policy on authorized enrollment with corresponding guidelines. Due to the recent revision to the Policy on Program Change, there appeared to be sufficient direction to dental hygiene programs regarding the requirement for reporting increases in enrollment. Therefore, the Dental Hygiene Review Committee requested that the original proposal for a policy and guidelines on authorized enrollment be rescinded.

<u>Commission action</u>: The Commission rescinds the proposed Policy on Authorized Enrollment and related guidelines for dental hygiene education programs, noting that the Commission's Policy on Program Change provides sufficient guidance and oversight to monitor enrollment changes in dental hygiene education programs.

Consideration of Accreditation for Master's Degree Level Dental Hygiene Programs: The Commission reviewed a follow-up report from the Dental Hygiene Review Committee related to data which had been collected on the feasibility of accrediting master's degree level dental hygiene programs. The Commission had received 13 comments and core competencies from the dental hygiene community, the American Dental Education Association, and the American Dental Hygienists' Association. It was determined that dental hygiene master's programs are not clinical in nature but prepare graduates in areas such as education, program and public health administration, research and business. It was noted that the Dental Hygiene Review Committee did not believe accreditation of master's degree dental hygiene programs was warranted at this time.

<u>Commission action</u>: The Commission directs that the feasibility study on the accreditation of master's degree dental hygiene programs be discontinued.

<u>Proposed Changes to Accreditation Standards</u>: The Commission considered a new business item submitted by the Dental Hygiene Review Committee with proposed revisions to Dental Hygiene Standards 2-20 and 3-7. The revisions did not impact the nature of the standards but provided clarification of the intent of the standards. As these revisions did not change the intent of the standards, it was believed that the revisions can be implemented immediately.

<u>Commission action</u>: The Commission adopts, with immediate implementation, revisions to Dental Hygiene Standards 2-20 and 3-7 (Appendix 14).

Proposal to Form Subcommittee to Revise Support Documents: The Commission considered a new business item submitted by the Dental Hygiene Review Committee requesting that a subcommittee be appointed for the purpose of reviewing, revising, and finalizing dental hygiene accreditation support documents such as the self-study and related exhibits, site visitor evaluation report, and related site visit materials. The request was made based upon ten (10) major and minor revisions to the Accreditation Standards since they were first adopted in 2007. These changes included revision to the 'must' statements for Standards 2-16, 2-17, 2-19, 2-22, 2-25, 3-3, 3-7, 4-3, 4-5, and 4-7, Intent Statements, Definitions of Terms and Usage, and policy additions and revisions. It was believed that the Commission's support documents needed to be reviewed and revised to support the standards revisions. During discussion it was noted that two Dental Hygiene Review Committee members have initially reviewed the documents. The Review Committee requested that one Review Committee member be approved to spend one day with Commission staff to finalize the changes to the documents.

<u>Commission action</u>: The Commission directs that one Dental Hygiene Review Committee member spend one day with Commission staff at the Commission's office to finalize revisions to the support documents for dental hygiene based on revisions to the dental hygiene standards.

Report of the Review Committee on Dental Laboratory Technology Education: Committee chair: Ms. Elizabeth Curran. Committee members: Mr. Dennis Lanier, Ms. Betty Mitchell, and Dr. Steven Bender. Guests: Ms. Tami Gzresikowski, senior director, Allied Dental Education, American Dental Education Association attended the policy portion of the meeting. Commission Staff: Ms. Patrice Renfrow, manager, Allied Education, Ms. Alyson Ackerman, coordinator, Allied Program Reviews. The meeting of the Review Committee on Dental Laboratory Technology Education (DLT RC) was held on July 8, 2013 at the ADA Headquarters Building.

<u>Informational Report on Frequency of Citings of Accreditation Standards for Dental Laboratory Technology Education Programs</u>: The Commission considered the frequency of citings report for dental laboratory technology education programs. The data indicates that 4.17% (1) related to Standard 1 – Institutional Effectiveness; 95.8% (23) related to Standard 2 – Educational Program; 0% (0) related to Standard 3 – Administration, Faculty and Staff; 0% (0) related to

Standard 4 – Educational Support Services; and 0% (0) related to Standard 5 – Health and Safety Provisions.

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

<u>Consideration of Proposed Revisions to the Accreditation Standards for Dental Laboratory</u>
<u>Technology Education Programs</u>: The Commission reviewed the proposed revisions to the Accreditation Standards for Dental Laboratory Technology Education Programs. It was noted that the proposed revisions had been circulated for comment by the communities of interest since Summer 2012. Two written comments were received; no comments were received during the American Dental Association and American Dental Education Association Annual Sessions. Slight revisions were made to correct inconsistencies in terminology; replace bullets in the Examples of Evidence with letters; and adjust formatting. The Review Committee proposed adoption of the revised standards with an implementation date of January 1, 2014.

<u>Commission action</u>: The Commission adopts revisions to the Accreditation Standards for Dental Laboratory Technology Education Programs (Appendix 15) with an implementation date of January 1, 2014.

## Report of the Review Committee on Oral and Maxillofacial Radiology Education:

Committee Chair: Dr. Byron "Pete" Benson. Committee Members: Dr. Debra Gander, Mr. Paul Lemont, Dr. Sanjay Mallya, and Dr. Charles Massler. Guests: (Open Portion Only) Dr. Muralidhar Mupparapu, secretary/treasurer, American Board of Oral and Maxillofacial Radiology (ABOMR) and Dr. Mansur Ahmad, president, ABOMR. Staff Members: Ms. Catherine Baumann, manager, Advanced Specialty Education, CODA, Ms. Sheron Parkman, senior project assistant, CODA and Dr. Sherin Tooks, director, CODA attended a portion of the meeting. The meeting of the Review Committee on Oral and Maxillofacial Radiology Education was held via telephone conference call on Monday, July 8, 2013.

<u>Informational Report of Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Radiology</u>: The Commission considered the frequency of citings report for oral and maxillofacial radiology education programs. The data indicates that two (2) citings occurred for the seven (7) oral and maxillofacial radiology programs visited during the period of this report. One (1) citation occurred in Standard 5, Advanced Education Students/Residents, related to providing students/residents with an assessment of their performance at least semiannually. One (1) citation occurred in Standard 6, Research, related to the requirement that graduates have an understanding of epidemiology.

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

<u>Consideration of Proposed Revisions to the Accreditation Standards for Advanced Specialty</u>
<u>Education Programs in Oral and Maxillofacial Radiology</u>: The Commission reviewed the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Radiology. It was noted that the proposed revisions had been circulated for comment by the communities of interest since Summer 2012. No comments were received during the open hearings at the American Dental Education Association and American

Dental Association Annual Meetings. Three written comments were received and carefully considered by the Review Committee. The proposed revised standards are recommended for adoption with an implementation date of July 1, 2014.

<u>Commission action</u>: The Commission adopts revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Radiology (Appendix 16) with an implementation date of July 1, 2014.

Report of the Review Committee on Oral and Maxillofacial Surgery Education: Committee Chair: Dr. Eric Carlson. Committee Members: Drs. Jeffery Bennett and Mary Ellen Cuccaro, Mr. Robert Giasolli, and Drs. Alan Herford, B.D. Tiner (Commissioner Trainee) and Paul S. Tiwana. Guests (Open Session only): Drs. William Nelson, Brett Ferguson, Arthur C. Jee, Ms. Randi V. Andresen, and Ms. Mary Allaire-Schnitzer, American Association of Oral and Maxillofacial Surgeons (AAOMS); and Dr. Anthony Palatta, American Dental Education Association (ADEA). Staff Members: Ms. Jennifer E. Snow, manager, Advanced Specialty Education, Commission on Dental Accreditation (CODA). Dr. Sherin Tooks, director, and Ms. Cathryn Albrecht, legal counsel, CODA, attended a portion of the meeting. The meeting of the Review Committee on Oral and Maxillofacial Surgery Education was held at the ADA Headquarters Building on July 9, 2013.

Informational Report on Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery: The Commission considered the frequency of citings report for oral and maxillofacial surgery education programs. The data indicates that the most frequently cited areas of non-compliance include: Standard 4-9, on adequate training in both general anesthesia and deep sedation for outpatient oral and maxillofacial surgery procedures on pediatric patients, with 26 citings; Standard 2-2.2, on teaching staff size and time commitment, with 22 citings; and Standard 4-9.1, on volume of general anesthesia/deep sedations and Standard 6 on Research, with 17 and 18 citings, respectively.

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

Informational Report on Frequency of Citings of Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery: The Commission considered the frequency of citings report for clinical fellowship training programs in oral and maxillofacial surgery. Four (4) "must" statements (or 10 areas of non-compliance) were cited as a result of the 22 fellowship site visits that occurred during the period of time covered by this report. In the area of affiliation agreements five of the six areas of non-compliance, identified in the supporting appendix, were cited three times, which was the most frequent. There were no citings for Standards 2, 3, 4 and 7.

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

<u>Consideration of Change to Resident Surgical Log Requirements in the Accreditation Standards</u> <u>for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery</u>: The Commission considered a new business item submitted by the Oral and Maxillofacial Surgery

Review Committee (OMS RC). The new business initiated from a request made by the American Association of Oral and Maxillofacial Surgeons (AAOMS) to mandate use of a standardized resident surgical log within the Accreditation Standards for the purpose of continuous data monitoring. It was noted that the Standards currently require the use of a surgical log, but do not specify that a particular log must be used. It was believed that a single log would ensure consistent and accurate collection of information regarding procedural counts. While CODA cannot release confidential programmatic data to any outside organization, it was suggested by the OMS RC that additional aggregate data could be available to continuously monitor programs and to provide AAOMS with national aggregate statistics on OMS programs, through the publicized yearly report of survey data. The OMS RC believed restructuring and enhancement of portions of the annual survey where procedural counts are collected could elicit more consistent and reliable self-reporting of data. The procedural section of the survey could correlate with the Accreditation Standards requirements, whereby a program with insufficient procedural counts would be flagged by CODA staff and reviewed through the continuous monitoring process by the OMS RC, as with other benchmarked areas. Further, the expectation of confidentiality of data collected throughout the Commission's accreditation process, Annual Survey, and Standards requirements was emphasized. The OMS RC recommended formation of an ad hoc committee, in consultation with the Survey Center staff, in order to carry out the task of developing a new resident surgical log as part of the Commission's annual survey. A report and final recommendation could be provided to the Commission at a future meeting. Following discussion about the financial implications, the Commission believed that the ad hoc committee should be fully funded by the Commission, since this is a Commission activity and the data collected through the new resident log would be the property of the Commission.

Commission action: The Commission appoints a subcommittee of the Oral and Maxillofacial Surgery Review Committee to explore the feasibility of adding a new procedure log to the existing Annual Survey for oral and maxillofacial surgery programs that would allow confidential, regular benchmarking of programmatic data. The Commission directs that the subcommittee consist of two (2) to three (3) current Oral and Maxillofacial Surgery Review Committee members, the outgoing Review Committee Chair, as an ex-officio member, and two (2) representatives from the American Association of Oral and Maxillofacial Surgeons, in consultation with the ADA Survey Center. The Commission directs that funding of all ad hoc committee members be borne by the Commission, with a report and final recommendations submitted for consideration by the Commission at a future meeting.

Report of the Review Committee on Orthodontics and Dentofacial Orthopedics: Committee Chair: Dr. Thomas Cangialosi. Committee Members: Drs. Eladio DeLeon, H. Garland Hershey, James Kiser, Leslie Will, and Ms. Bonnie Konowitch. Guests (Open Session only): Ms. Anita B. Craig; director of education and membership development, American Association of Orthodontists (AAO) and Dr. Anthony Palatta, senior director for educational program development, American Dental Educators Association (ADEA) (via telephone). Staff Members: Ms. Jennifer E. Snow, manager, Advanced Specialty Education; Dr. Sherin Tooks, director; and Ms. Cathryn Albrecht, legal counsel, Commission on Dental Accreditation (CODA). The meeting of the Review Committee on Orthodontics and Dentofacial Orthopedics Education was held at the ADA Headquarters Building on July 15, 2013.

<u>Informational Report on Frequency of Citings of Accreditation Standards for Advanced</u>
<u>Specialty Education Programs in Orthodontics and Dentofacial Orthopedics</u>: The Commission considered the frequency of citings report for orthodontics and dentofacial orthopedics education programs. The data indicates that of the citings for the 36 orthodontic and dentofacial orthopedics programs site visited during the period covered by this report, the areas of professional development for full-time orthodontic program faculty and formal and ongoing outcomes assessment were cited most frequently; each area was cited twice.

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

Informational Report on Frequency of Citings of Accreditation Standards for Clinical Fellowship Training Programs in Craniofacial and Special Care Orthodontics: The Commission considered the frequency of citings report for clinical fellowship training programs in craniofacial and special care orthodontics. The data indicates that two (2) citings occurred in CODA-accredited orthodontic clinical fellowship training programs. The citings were in the same standard, Standard 6-2.2, covering the area of clinical experience for additional exposure to management of craniofacial anomalies and special care patients (6-2.2i), and supervised participation of fellows in craniofacial team activities (6-2.2j). Due to the small number of programs and citings, no further analysis could be made.

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

Consideration of Request to Mandate the Postdoctoral Dental Matching Program (PDMP) in the Accreditation Standards for Advanced Specialty Education Programs in Orthodontics and Dentofacial Orthopedics: The Commissioner for Orthodontics and Dentofacial Orthopedics withdrew the new business item, noting that the Review Committee will consider this item at a future meeting with a report to the Commission at that time.

**Commission action:** No action was taken; the new business item was withdrawn.

Report of the Review Committee on Prosthodontics Education: Committee Chair: Dr. Kent Knoernschild. Committee Members: Dr. David Felton, Dr. Lily Garcia, Dr. Julie Holloway, Dr. Martin Rutt, and Dr. James Sherrard. Guests: Dr. Steven Campbell, commissioner trainee, Dr. Anthony Palatta, senior director for educational program development, American Dental Education Association, and Ms. Nancy Deal Chandler, executive director, American College of Prosthodontists. Staff Members: Ms. Cathy Baumann, manager, Advanced Specialty Education, CODA, Ms. Sheron Parkman, senior project assistant, and Dr. Sherin Tooks, director, CODA attended a portion of the meeting. The meeting of the Review Committee on Prosthodontic Education was held on Wednesday, July 10, 2013 at the American Dental Association Headquarters Building.

<u>Informational Report of Frequency of Citings of Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics:</u> The Commission considered the frequency of citings report for prosthodontic education programs. 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; Standard 4-4.2 related to content outlines for all didactic portions of the program. There were no citings 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 Prosthodontics: The Commission reviewed the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics. It was noted that the proposed revisions had been circulated for comment by the communities of interest since Summer 2012. The Commission was notified that a comment had been submitted by email a few days prior to the Commission meeting. The sender of the email indicated this was a resubmission of a comment that was first submitted during the designated comment period; however, Commission staff had no way to verify the date of original submission, as the Commission has no record of the original submission and the resubmitted email was not forwarded with an original submission date stamp. The Commission determined that it would not review the letter, so as not to set a precedent for reviewing comments received after the Commission's deadlines, particularly because there appeared to be no evidence of the original submission date of the letter.

It was noted that no comments were received at the 2012 American Dental Association Annual Meeting Open Hearing. Five (5) oral comments were received at the 2013 American Dental Education Association Annual Meeting Open Hearing. Forty-eight (48) written comments were received in the Commission office. All comments were reviewed in detail by the Prosthodontics Education Review Committee and revisions were made to the proposed standards to address the comments received. The Prosthodontics Review Committee believed the revisions were aligned with the Council on Dental Education and Licensure's definition of prosthodontics and reflects the standard of care for prosthodontists.

Some Commissioners believed that the proposed prosthodontics standards did not provide enough guidance on the students' training in surgical placement of implants. It was noted that the surgical placement of implants was not specified to the level of competence. Several Commissioners maintained that surgical implant placement should be taught to the level of competency, and that there should be in-depth didactic training in surgical anatomy, surgical principles, wound healing and surgical complications. Other Commissioners noted that the length of periodontics programs increased when surgical implant placement was added to the scope of practice for periodontics. It was noted that Standard 4-22 did not include any measure of competence for student/resident placement of surgical implants; however, several other Standards (4-19, 4-20, 4-21, 4-23, and 4-24) all require competence. Additionally, it was identified that background in wound healing, pharmacology, and management was expected to

the level of understanding rather than the level of in-depth knowledge (Standard 4-12). It was suggested more time may need to be added to the curriculum to adequately prepare students/residents to perform these procedures. Some Commissioners suggested that they did not oppose teaching implant placement in prosthodontic programs; however, they believed required levels of knowledge and competence should be increased.

The Commission was informed that prosthodontics programs currently provide students/residents with patient care experiences in the placement of implants. Further, a prosthodontic standard currently exists that requires students/residents to participate in all phases of implant treatment including implant placement.

<u>Commission action</u>: The Commission refers the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Prosthodontics to the Prosthodontic Review Committee for further review and development.

# <u>Miscellaneous Affairs- Consideration of Matters Relating to More than One Review Committee</u>

<u>Informational Report on Review Committee and Commission Meeting Dates</u>: The Commission reviewed the meeting dates of the 2014 to 2016 meetings. The Commission noted the revised dates of the Predoctoral Dental Education Review Committee based on earlier actions of the Commission.

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

<u>Consideration of Revisions to Initial Accreditation Criteria to Add Feasibility Criteria</u>: The report was considered by the Commission's Review Committees with a final recommendation by the Standing Committee on Documentation and Policy Reviews. The Commission's action on this item is noted elsewhere in this report.

## Miscellaneous Affairs- Matters for the Commission as a Whole

American College of Prosthodontists Complaint Against CODA Regarding Policy and Procedure: The Commission considered a formal complaint against the Commission dated March 14, 2013 from the American College of Prosthodontists (ACP) expressing concern about how the Commission addressed a previous ACP formal complaint against the Commission (December 13, 2012 ACP communication) at the January 31, 2013 CODA meeting. In addition, the ACP letter outlined further questions about the application of the Commission's conflict of interest policy. The Commission reviewed the letter of complaint, the Commission's Conflict of Interest Policy, and the Commission's Policy and Procedures on Complaints Directed at the Commission. The key issues raised within the complaint were: 1) explicit guidelines on responsibility for accurate versions of documents, 2) a clear process by which all external organizations must abide and follow, 3) delineation of due process, and 4) enforcement of Conflict of Interest Policy violations.

In regard to issue #1 of the complaint, the Commission discussed the current policy and guidelines related to versioning of documents. The Commission believed that proposed changes should always be to the original document version, not any subsequent versions under circulation. While a versioning policy exists, the Commission felt that the Standing Committee on Documentation and Policy Revisions should further review this issue. Related to complaint issues #2 and #3, the Commission was unclear on the intent and allegations of the complaint. The Commission noted that until the issues of the complaint are made clear, it will be difficult to respond to the complaint. The Commission believed staff should further investigate, with the American College of Prosthodontists, the specific concerns surrounding complaint issues #2 and #3. In review of complaint issue #4, the Commission was unsure if the complaint was referring to the conflict of interest policy or a specific Commissioner. The Commission believed that further investigation of complaint issue #4 was warranted.

<u>Commission action</u>: The Commission directs the Standing Committee on Documentation and Policy Review to review the Commission's policy on versioning of documents, with recommendations to the Commission at a future meeting. The Commission further directs CODA staff to seek clarification from the American College of Prosthodontists of the intent and allegations regarding the following, as outlined in the ACP formal complaint: a clear process by which all external organizations must abide and follow; a delineation of due process; and enforcement of Conflict of Interest Policy violations.

American Dental Education Association Request for CODA Consideration of Consultant Policy on Conflict of Interest: The Commission considered a request from the American Dental Education Association related to the Commission's current application of the Conflict of Interest Policy. The American Dental Education Association believes that the current enforcement rules of the Commission with regard to conflict of interest could negatively impact dental education and the spirit of continuing quality improvement. Currently, all Commission volunteers are advised that during their term with the Commission, the volunteer may not engage in any other consulting services with any accredited dental or dental-related program, or a program that may be preparing to apply for accreditation. The reason for this policy is to avoid the appearance of a conflict of interest that could arise should a program, correctly or incorrectly, perceive that the program engaging the consultant has an unfair advantage in the accreditation process over others that do not engage Commission volunteers as consultants. Following discussion of the request, the Commission believed that the Standing Committee on Documentation and Policy Review should evaluate this request with a report to the Commission at a future meeting.

<u>Commission action</u>: The Commission directs the Standing Committee on Documentation and Policy Review to review the Commission's policy on Conflict of Interest in response to the request made by the American Dental Education Association, with recommendations to the Commission at a future meeting.

**Report of the Standing Committee on Nominations:** The Commission considered the report of the Standing Committee on Nominations regarding 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:

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

• Dr. Connie Kracher

Alternate: Ms. Joleen VanBibber

Dental Laboratory Technology Educator (one (1) vacancy) for the Dental Laboratory Technology Review Committee (DLT RC)

• Ms. Renata Budny

Alternate: Ms. Robin Gornto

General Dentist (AEGD or GPR Graduate) (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

• Dr. Jeffery Hicks

Alternate: Dr. Philip Rinaudo

Predoctoral Educator (two (2) vacancies) for the Predoctoral Review Committee (PREDOC RC)

- Dr. Joseph D'Ambrosio (DDS)
- Dr. Stephanie Oberhaus (Ph.D.)

Alternates:

- 1. Dr. Lawrence Garetto (Ph.D.)
- 2. Dr. Ronald Hunt (DDS)

The Nomination Committee believed that individuals with doctoral degrees could provide meaningful input on the predoctoral dental education review committee. The Commission concurred that the dental educator could be an individual with a doctoral degree who is qualified by education and experience, and who is involved in predoctoral dental education, but is not a dentist.

Public Member (Four (4) vacancies – one (1) PERIO RC, one (1) DLT RC and two (2) Commission)

- Dr. John Rheinberger
- Ms. Cindy Stergar
- Dr. Walter Brown
- OPEN

Alternates:

- 1. OPEN
- 2. OPEN

Representative of the American Association of Endodontists (one (1) vacancy) for the Endodontics Review Committee (ENDO RC)

• Dr. Brian Bergeron

Alternate: Dr. James Kulild

Representative of the American Association of Oral & Maxillofacial Surgeons (one (1) vacancy) for the Oral & Maxillofacial Surgery Review Committee (OMS RC)

• Dr. Vincent Perciaccante Alternate: Dr. Kirk Fridrich

Representative of the American Board of Dental Public Health (one (1) vacancy) for the Dental Public Health Review Committee (DPH RC)

Dr. Scott Tomar
 Alternate: Dr. Donald Altman

Representative of the American Board of Orthodontics (one (1) vacancy) for the Orthodontics & Dentofacial Orthopedics Review Committee (ORTHO RC)

• Dr. Scott Jamieson Alternate: Dr. Valmy Pangrazio-Kulbersh

Representative of the American Board of Oral & Maxillofacial Radiology (one (1) vacancy) for the Oral & Maxillofacial Radiology Review Committee (OMR RC)

• Dr. Vijay Parashar Alternate: Dr. Jeffery Price

Representative of the American Board of Pediatric Dentistry (one (1) vacancy) for the Pediatric Dentistry Review Committee (PEDO RC)

• Dr. Man Wai Ng Alternate: Dr. Rochelle Lindemeyer

Advanced Education in General Dentistry Educator Nominated by the American Dental Education Association (one (1) vacancy) for the Postdoctoral General Dentistry Review Committee (POSTDOC RC)

• Dr. Allen Wong Alternate: Dr. Dexter Woods

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

Representative of the American Academy of Oral and Maxillofacial Pathology (one (1) vacancy) for the Oral and Maxillofacial Pathology Review Committee (OMP RC)

• Dr. Kurt Summersgill Alternate: Dr. Robert Kelsch

<u>Commission action</u>: The Commission appoints the nominees identified by the Standing Committee on Nominations to the open positions on the appropriate Review Committees and Commission.

Report of the Joint Advisory Committee on International Accreditation: The Commission reviewed the informational report of the Joint Advisory Committee on International Accreditation. The Commission noted that the Joint Advisory Committee made changes to the Guidelines for International Accreditation to: 1) address requests for extension in the consultative component of the process, 2) ensure specificity for language used in the consultative report, and 3) reflect the current annual fee when international predoctoral programs become Commission accredited. Additionally, the Joint Advisory Committee updated the Guidelines requiring predoctoral programs to acknowledge receipt of the consultative report by notifying the JACIA within 60 days as to whether it will submit a response and a timeline, including an expected due date of submission of the response(s).

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

Report of the Standing Committee on Quality Assurance and Strategic Planning: The Commission considered the report of the Standing Committee on Quality Assurance and Strategic Planning. In Summer 2012, the Commission approved the Strategic Plan 2012-2016. The Commission reviewed several action items in support of the five (5) defined goals of the Strategic Plan and their objectives. In order of priority, the Commission believed that there were three items that should be addressed first: (1) a white paper, describing the rationale for transitioning CODA to an operational structure where there will be an independent authority to meet the Commission's mission (Goal #1) consistent with most other professional accrediting bodies; (2) a draft Memorandum of Understanding (MOU) between the Commission and the ADA, outlining agreed upon duties and expectations of each party (Goal #1) requested by the ADA Board of Trustees; and (3) financial implications of enhancing and improving the operations of the Commission, keeping in mind the increase in program fees for 2014 (Goal #2). In order to achieve the goals of the strategic plan, it was noted that the Standing Committee proposed a meeting schedule every six weeks, with the start date following the Commission meeting.

The Commission considered a draft Memorandum of Understanding (MOU) between the Commission and the American Dental Association, which would provide further clarification of the duties and expectations of each party. Following discussion, the Commission believed that the MOU should be submitted to the American Dental Association Board of Trustees for review and approval..

In further discussion of the white paper, the Commission concluded the paper should consist of, but not be limited to, the rationale for Goal #1; the significance of independence as an accrediting body; the structure of other accrediting organizations with regard to the relationship of their sponsoring organization; the cost and other implications for the communities of interest engagement should CODA become independent; and a governance process for a more flexible business action on personnel and technology issues, based on the needs of the CODA. In addition to the financial resources necessary to formulate the white paper, the Commission also identified financial implications to funding two large projects (Goal #2, Objectives #1 and #2) – a comparative analysis to benchmark financial and operating ratios and a technology needs assessment – each of which is expected to require funding of \$20,000 (total \$40,000).

In lieu of a funding request to the ADA House of Delegates for two specific \$20,000 requests to engage consultants to assist the work of the Quality Assurance and Strategic Planning Committee with financial and technology needs studies, the Commission believed it would be more appropriate to develop an ongoing Research and Development Fund to establish a long-term funding source to support the many initiatives of the Commission. Currently, the Commission has no mechanism to accumulate or allocate funds for long term activities or enhancements that may be outside the day to day operations of the Commission, or which may span over multiple years.

The Commission believed potential uses of the Research and Development Fund could be:

- Commission studies related to quality assurance and strategic planning activities
- Conduct of business through newly formed ad hoc or sub-committees not previously budgeted; engagement of consultants to gain unique expertise
- Ongoing review and enhancement of business resources, human resources, and technology resources in various aspects of the CODA accreditation program

A Research and Development Fund was preferred over submitting requests to the House of Delegates on a case-by-case basis each time the Commission has a request for funds that are outside the day-to-day operations of the accreditation program. As such, the Commission determined a Research and Development Fund should be established with a maximum (capped) funding of \$100,000. In 2014, each educational program should be assessed a \$25 administrative fee to fund the Research and Development budget. The Commission discussed the positive and negative impact of the \$25 fee on educational programs, noting the Commission's action in Winter 2013 to substantially raise annual fees in 2014. The majority of Commissioners believed the \$25 fee was reasonable to implement, but believed that the significant increases in annual fees over the past two years should be considered when determining the annual fees for 2015. It was believed the Standing Committee on Finance should develop criteria and operational guidelines for the administration and use of the Research and Development Fund.

<u>Commission action</u>: The Commission directs the Standing Committee on Quality Assurance and Strategic Planning to meet every six (6) weeks to monitor progress on and operationalize the Commission's strategic plan.

The Commission approves the Memorandum of Understanding outlined in Appendix 17 and further directs the Memorandum of Understanding be submitted to the American Dental Association Board of Trustees for approval.

The Commission directs the rationale of Goal #2 in the CODA Strategic Plan (Appendix 18) be amended and rescinds the remaining portions of recommendation #3 from the Quality Assurance and Strategic Planning Committee report.

The Commission approves development of a Commission Research and Development Fund, which will be capped at \$100,000 through a \$25 program administration fee beginning in 2014.

The Commission directs that the Research and Development Fund be submitted to the American Dental Association Board of Trustees for approval.

The Commission directs that the Standing Committee on Finance develop criteria and operational guidelines for the administration and use of the Research and Development Fund, with a report to the Commission at the Winter 2014 meeting.

Report of the Standing Committee on Communication and Technology: The chair of the Communication and Technology Committee reviewed data collected though the communications survey to the Commission's communities of interest. It was noted that the sample size of the study included nearly 2,800 individuals identified as members of the Commission's communities of interest (COI) and another 5,000 American Dental Association members. The response rate of community of interest members was 62%, while the response rate of American Dental Association members was 10%, with a 31% abandonment rate. Survey data indicated that the Commission's communities of interest are much more engaged in Commission communications than the rank and file American Dental Association members. Data suggests that both community of interest and American Dental Association members lack knowledge on the relationship between the Commission and the American Dental Association. Additionally, it was identified that ADA.org is the primary source of information for the communities of interest to receive updates on Commission policy, though both the communities of interest and American Dental Association groups preferred to receive email as the mechanism for communication of Commission updates. Beyond review of the survey data, the Commission considered a communications plan and action items that was developed with the assistance of the Communications Department. Following review of the draft communications plan, the Commission took action on numerous initiatives to help bolster communication with its communities of interest.

<u>Commission action</u>: The Commission directs staff to increase the frequency of the CODA Communicator Newsletter to three issues per year and to develop an editorial calendar framework related to topics for each issue in consultation with the Communications Department staff.

The Commission directs staff to work with the ADA Information Technology and the ADA Communications Divisions to develop a CODA website separate from the ADA site, with Commission branding and information. The Commission further directs staff to review web sites of other accrediting organizations as models for the redesign, to ensure that information is clearly presented and easily accessible through the new CODA site.

The Commission directs staff to work with the ADA Communications Division to redesign the CODA Communicator to ensure a reader-friendly layout, with general and discipline-specific sections and a practitioner section, as appropriate. The Commission further directs 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 directs staff to work with the ADA Communications Division on Commission on Dental Accreditation "touch points" to communicate to communities of interest.

The Commission directs staff to explore ways to expand and promote Commission events, beyond those currently provided. The Commission further directs staff to add the 885 individuals/groups to the Commission's community of interest distribution list (if not already included) to foster continued communication.

Request from American Society of Dentist Anesthesiologists: The Commission considered a request from the American Society of Dentist Anesthesiologists asking the Commission to appoint a discipline-specific Review Committee for dental anesthesiology and to include a dentist anesthesiologist Commissioner on the current 30-member Commission. The Commission reviewed notes from a conference call held between the Commission chair, vice-chair, and staff, and several representatives of the American Society of Dentist Anesthesiologists. One reason for the request to establish a dental anesthesiology review committee was the move to a mandatory three-year training requirement, which the American Society of Dentist Anesthesiologists felt justified its own review committee and commissioner. Additionally, the American Society of Dentist Anesthesiologists felt there were not enough content experts to evaluate dental anesthesiology programs under the current review committee structure.

The Commission noted that a restructure of the Review Committees occurred several years ago related to regulations of the United States Department of Education, which increased the diversity of membership on review committees. For example, general dentists and public members were placed on all review committees, with the belief that broad-based input was better for the public and the accreditation process. The Department of Education has no specific requirements on review committee membership based on the number of educational programs in a discipline, other than requiring a sufficient number of appropriate content experts to evaluate the programs.

The Commissioners noted that dental anesthesiology is not a recognized specialty of dentistry as defined by the American Dental Association and that there are 10 programs currently accredited in dental anesthesiology. Further, the Commission is expected to maintain appropriate representation of all disciplines, and dental anesthesiology is represented as a discipline in general dentistry under the Postdoctoral General Dentistry Education Review Committee. This is similar to fellowship programs in oral and maxillofacial surgery programs which are reviewed by the oral and maxillofacial review committee. To date, there has never been a situation where an additional peer in dental anesthesiology was needed to conduct program reviews at the Review Committee. All programs and disciplines under the purview of the Postdoctoral General Dentistry Education Review Committee have received a fair and full review. Additionally, there appeared to be no evidence that the Postdoctoral General Dentistry Education Review Committee is overburdened with workload because of its oversight of dental anesthesiology.

Several Commissioners believed that guidelines and policies, including criteria, should be established to identify when and how the Commission would establish a review committee or increase the number of Commissioners. Specifically, the Commission should consider whether a

change based on number of programs, importance of the discipline, or some other factor(s) are important criteria for establishing new review committees and commissioner positions. The Commission noted that data should be reviewed to identify workload, number of programs and type of review, the time commitment needed for review, financial implications, staff implications, and other information regarding the impact of dental anesthesiology on the Postdoctoral General Dentistry Education Review Committee. Additionally, the *Standing Rules* of the Commission would require a change that must be approved by the American Dental Association's House of Delegates. The Commission believed that the Standing Committees on Quality Assurance and Strategic Planning, Documentation and Policy, and Finance may all need to provide input into this request, though the Quality Assurance and Strategic Planning Committee should first consider this issue.

<u>Commission action</u>: The Commission directs that the Standing Committee on Quality Assurance and Strategic Planning identify need, evaluate and develop applicable policy related to initiation of new review committees and Commissioner positions, with a report to the Commission at the Winter 2014 meeting.

<u>Report of the Standing Committee on Documentation and Policy Review:</u> The Commission considered the report of the Standing Committee on Documentation and Policy Review.

<u>Proposed Re visions to Policy on Reporting Program Change</u>: The Commission considered review committee input and the recommendations of the Standing Committee related to the Policy on Reporting Program Change.

<u>Commission action</u>: The Commission adopts, with immediate implementation, revisions to the Policy on Reporting Program Change and related Guideline document. (Appendix 19)

<u>Proposed Revisions to Policy on Accreditation of Off-Campus Sites</u>: See Dental Assisting New Business Report.

Feasibility of Changes in Process Used to Appoint Postdoctoral General Dentistry Education Review Committee Chair/Commissioner: The Commission considered the recommendations of the Standing Committee regarding appointment of the Postdoctoral General Dentistry Education Review Committee Chair. It was noted that the Commissioner is a joint appointment through the American Dental Education Association and the American Association of Hospital Dentists. Since the Review Committee includes the disciplines of Advanced General Dentistry Education in Dental Anesthesiology, Oral Medicine and Orofacial Pain, it was believed that sponsoring organizations in those disciplines may wish to have input in the appointment of the Commissioner. However, the Commission identified that the coordination efforts required to obtain feedback and consensus from the five dental organizations could be difficult to manage. It was also noted that any change in the appointment process would involve a Rules change and approval by the ADA House of Delegates, which the Commission did not feel was necessary at this time.

<u>Commission action</u>: The Commission directs that a formal letter be sent to the American Dental Education Association and the American Association of Hospital Dentists reminding these organizations of the change in Postdoctoral General Dentistry Education Review Committee structure and encouraging these organizations to consider soliciting input from the other organizations represented on the committee (Dental Anesthesiology, Orofacial Pain, and Oral Medicine) in the appointment process for the Postdoctoral General Dentistry Chair/Commissioner.

<u>Consideration of Policy on Assignment of Peers to Review Committee for Discipline-Specific Recusals</u>: Based on a recommendation from the Subcommittee on ADA Report and Recommendations, the Standing Committee and Commission considered whether to implement a policy to allow review committees to assign a former peer committee member when recusal of an individual with content expertise diminishes the quorum of content experts on the review committee. The Standing Committee and Commission considered the following items for addition to the review committee section of the Evaluation and Operational Policies and Procedures Manual in an attempt to resolve situations where discipline-specific members are diminished due to recusals.

- a. Review committee members may not serve as site visitors or consultants for an actual or mock accreditation site visit (to an accredited or developing program) to avoid conflict of interest in the decision-making process and to preclude the need for recusal.
- b. In the case of an inadequate number of discipline-specific experts available to constitute a quorum for a review committee meeting, the Review Committee Chair may temporarily appoint an additional discipline-specific expert(s) for a single meeting with the approval of the CODA Director. The substitute should be a previous Review Committee member or an individual approved by both the Review Committee Chair and the CODA Director. The substitute would have the privileges of speaking, introducing business, making motions and voting.
- c. Consent agendas may be used by Review Committees, when appropriate; however, more than 50% of the discipline-specific members must be present to evaluate the consent agenda.

Following discussion, it was determined that information should be collected from the Review Committees to identify whether the issue of peer recusals is a problem and, if so, to provide comment on the three items presented above, with review by the Standing Committee in Winter 2014 and a report to the Commission at that time.

Commission action: The Commission directs all review committees, at their January 2014 meetings, to provide input into whether the recusal of content experts from review committee meetings is problematic and, if so, consider if any of the three items presented in (Appendix 20) could contribute to resolving the issue and should be added to Commission's policy and procedure manual. The Commission further directs staff to query other accrediting agencies about how they handle recusal situations. Information gathered would be considered at the Winter 2014 meeting of the Commission, through the Standing Committee on Documentation and Policy Review.

Review Committee on Dental Assisting Proposal for Non-Enrollment for Programs on Intent to Withdraw: The Commission considered the Standing Committee's report on the feasibility of mandating a period of non-enrollment for programs with the accreditation status of "intent to withdraw." The initial request for review of this issue was brought forward by the Dental Assisting Review Committee in Winter 2013. The Commission reviewed suggested language from the Dental Assisting Review Committee. Additionally, it was noted that the Standing Committee had reviewed information collected from various specialized accreditors related to the practice of prohibiting enrollment when a program is granted the status of intent to withdraw. The Commission determined that the final sentence in the definition of "intent to withdraw" should state: "The Commission reserves the right to require a period of non-enrollment for programs that have been issued the Intent to Withdraw warning." The Commission noted that it would be up to the individual review committees to provide the appropriate rationale and justification for the non-enrollment penalty to the Commission when making the recommendation. Based on the rationale from the Review Committee, the Commission would decide whether to mandate non-enrollment for programs on "intent to withdraw."

<u>Commission action</u>: The Commission directs adoption of the revised accreditation status definition for "Intent to Withdraw" as presented in Appendix 21, with immediate implementation.

<u>Periodic Review of Selected Evaluation and Operational Policy and Procedure (EOPP)</u>
<u>Items</u>: Based upon the established schedule for periodic review of current policy, the Commission considered the Standing Committee's recommendations for affirmation and revision of policies found in the Commission's Evaluation Policies and Procedures manual. It was noted that policy II.M., Guidelines for Managing Program Files, related to the Commission's document retention policy, requires further staff and legal review.

<u>Commission action</u>: The Commission directs that the revisions of Commission policies identified through regular review of policies, found in Appendix 22, be approved for immediate implementation. The Commission further directs review of policy II.M, Guidelines for Managing Program Files by CODA staff and legal, with a report to the Documentation and Policy Review Committee at its next meeting.

Consideration of Revisions to Initial Accreditation Criteria to Add Feasibility Criteria: In Winter 2013, the Predoctoral Dental Education Review Committee reviewed American Dental Association Board of Trustees Resolution B-51-2012 requesting the Commission to consider a formal needs assessment and feasibility study for all predoctoral dental education programs applying for initial accreditation. In response to Resolution B-51-2012, the Predoctoral Dental Education Review Committee believed a formal needs assessment should be mandated for all disciplines, not just predoctoral programs. The proposed needs assessment criteria developed by the Predoctoral Dental Education Review Committee was circulated to all 14 Review Committees, with comment considered by the Standing Committee on Documentation and Policy Review.

At its Summer 2013 meeting, the Commission reviewed the final report of the Documentation and Policy Committee including the comments of the Commission's 14 Review Committees, noting a great deal of variance among the Review Committees. The Documentation and Policy Committee had serious concerns about the use of the needs assessment; the Committee noted that: 1) gathering feasibility data was not within the purview of the Commission, 2) the needs assessment should not serve as a measure to determine whether a program is granted accreditation, and 3) use of the feasibility data in making accreditation decisions could potentially pose legal risk for the Commission.

In consideration of the Documentation and Policy Review Committee's recommendation, the Commission noted that many areas addressed in the proposed feasibility study (needs assessment) are already included in the predoctoral dental education application. The current application for development of a dental education program includes a "Description of Program Initiation" section that requires the institution to provide documentation of program development, description of any feasibility study conducted, and discussion of how the projected class size was determined. Other elements of the current application that are typically elements of a feasibility study include documentation of financial resources (institutional, financial, and facility) that will support the dental school's stated purpose/mission, goals and objectives; financial support from outside entities, as applicable; local patient demographics and an assessment of patient treatment needs; and recruitment and retention plans for faculty. Based upon this information, the Commission determined it would be inappropriate to adopt a feasibility criteria in the Initial Accreditation Criteria.

<u>Commission action</u>: The Commission directs that revisions to the Initial Accreditation Criteria to add feasibility criteria not be approved. The Commission further directs that the Commission inform the ADA Board of Trustees of its decision related to Board Resolution B-51-2012.

Best Practices Regarding PHI/PII: Since implementation of the policies and procedures on Protected Health Information (PHI) and Personally Identifiable Information (PII), the Commission has continued to receive accreditation materials, such as self-study documents and reports from accredited programs that contain PHI and PII. Receipt of information containing PHI or PII necessitates swift action on the part of Commission staff to appropriately redact and secure the information and to notify the institution/program and Commission volunteers of the required corrective action. As such, Commission staff must review all program documentation submitted to the Commission and its volunteers to ensure that all materials received are compliant. An informal staff survey suggests that staff spends a considerable amount of time reviewing documentation and addressing issues where programs have not complied with Commission policies and procedures with regard to document submission. The Commission believed that the policies related to Accreditation Materials and Conversion Fees, and Policies and Procedures Related to Compliance with the Health Insurance Portability and Accountability Act (HIPAA) should be updated to reflect the Commission

expectations on document submission, including the imposition of a fine when programs do not comply with the Commission's policies and procedures.

<u>Commission action</u>: The Commission directs that the policy revisions related to document management of Protected Health Information (PHI) and Personally Identifiable Information (PII) found in Appendix 23 be approved for immediate implementation.

Report of the Commission on Dental Accreditation of Canada: Dr. Claude LaMarche, Chair of the Commission on Dental Accreditation of Canada (CDAC), reported that it had approved revisions to accreditation requirements for Oral Medicine and Oral Pathology programs. Additionally, the CDAC approved signing a Memorandum of Understanding with the Irish Dental Council to mutually recognize graduates in general dentistry, effective December 5, 2012. The Commission on Dental Accreditation of Canada now had reciprocal agreements with the United States, New Zealand, Australia and Ireland.

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

Commission Update on USDE Re-Recognition: On July 23, 2013, the Commission received a letter from Brenda Dann-Messier, U.S. Department of Education, Office of Postsecondary Education, notifying the Commission that the agency had been recognized for a period of four (4) years with the following scope of recognition: Scope of recognition: The accreditation of predoctoral dental education programs (leading to the D.D.S. or D.M.D. degree), advanced dental education programs, and allied dental education programs that are fully operational or have attained "Initial Accreditation" status, including programs offered via distance education.

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

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 Session and their replacements whose terms will begin at the ADA Annual Session. The Commission also reviewed information on the 2014 Commissioner Trainees whose terms will begin in 2015. See Appendix 24.

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

<u>Election of Chair and Vice Chair of the Commission</u>: The Commission elected Dr. John Williams as chair of the Commission and Dr. Steven Schonfeld as vice-chair of the Commission for 2013-2014.

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

Dr. Michael Biermann

Dr. Eric Carlson

Ms. Elizabeth Curran

Dr. Geraldine Ann "GeriAnn" DiFranco

Dr. Joseph Eliason

Dr. Kent Knoernschild

Dr. Judith Messura

Dr. Yilda Rivera Nazario

<u>Survey of Meeting</u>: Dr. Sherin Tooks reminded Commissioners to complete the survey sent via Survey Monkey following the meeting. The survey is important for determining whether the Commission is meetings its goals for the year.

#### **New Business**

<u>Financial Feasibility of Conducting In-Person Meetings of CODA Standing Committees</u>: A new business item was presented requesting that the Commission assess the feasibility of conducting standing committee meetings of the Commission in person rather than by telephone. It was suggested that face-to-face meetings may allow more thorough discussion of issues that come before the Commission.

<u>Commission action</u>: The Commission directs the Standing Committee on Finance to review the frequency of face-to-face meetings of the Commission's Standing Committees, including budgetary implications, with a report to the Commission at the Winter 2014 meeting.

**Adjourn:** The Commission adjourned the open session at 3:50 P.M.