MINUTES

COMMISSION ON DENTAL ACCREDITATION ADA HEADQUARTERS BUILDING, CHICAGO

THURSDAY, FEBRUARY 2, 2017 (CLOSED SESSION)

<u>Call to Order</u>: The Chair, Dr. Harold Mark Livingston, called a regular meeting of the Commission on Dental Accreditation (CODA) to order at 10:00 A.M. on Thursday, February 2, 2017, in the Executive Board Room of the American Dental Association Headquarters Building, Chicago, in closed session for the purpose of reviewing educational programs by the Commission.

Roll Call: Dr. Susan Callahan Barnard, Dr. Stephen Campbell, Mr. David Cushing, Dr. Loren Feldner, Dr. Catherine Flaitz, Dr. Steven Friedrichsen, Dr. James Geist, Dr. Joseph Hagenbruch, Ms. Alexandra Hebert, Dr. H. Garland Hershey, Jr., Dr. Tariq Javed, Dr. Arthur Jee, Dr. Bradford Johnson, Dr. Denise Kassebaum, Dr. Bruce Kinney, Mr. Dennis Lanier, Dr. William Leffler (vice-chair), Dr. Mark Lerman, Dr. Harold Livingston (chair), Dr. William Lobb, Dr. Michael Mills, Dr. Robert Sherman, Dr. David Stanton, Ms. Deanna Stentiford, Ms. Cindy Stergar, Dr. Stanley Surabian, Mr. Glenn Unser, and Dr. Matthew Wheeler.

Dr. Ralph Attanasi was not in attendance.

Trustee Liaison: Dr. Raymond Cohlmia, Twelfth District Trustee, American Dental Association (ADA).

Guest: Ms. Valerie Lefor, Accreditation Group, Office of Postsecondary Education, United States Department of Education (USDE).

CODA Staff: Dr. Sherin Tooks, *ex-officio*, director, CODA, Ms. Cathy Baumann (by telephone), Dr. Catherine Horan, Mr. Gregg Marquardt, Ms. Michelle Smith, Ms. Jennifer Snow, and Ms. Peggy Soeldner, managers, CODA were in attendance. Ms. Cathryn Albrecht, Senior Associate General Counsel, ADA/CODA was also in attendance. Ms. Patrice Renfrow, manager, CODA was not in attendance.

<u>Adoption of the Agenda</u>: The agenda of the meeting was adopted, to include correction sheets within the materials provided on Matters Relating to Accreditation Actions.

<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 Reminder of Confidentiality</u>: Dr. Harold Mark Livingston, 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 for the record, four (4) mail ballots related to program accreditation actions, which had been considered since the Summer 2016 Commission meeting.

<u>Consideration of Site Visitor Nominations</u>: Site Visitors 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 site visitors; they serve one (1) four-year term. The Commission considered the names of individuals recommended by the 14 Review Committees for a one-year appointment as site visitors for 2016-2017.

The Commission received an update on the December 2016 dental therapy site visitor training. The Commission noted the continuing need for dental therapy educators to serve on dental therapy site visits. The Commission also learned that CODA staff continues to provide guidance among the education community related to CODA's expectation that dental therapy programs be three (3) academic years in length with focus on dental therapy, although advanced standing may be used when admitting students.

Three (3) corrections were made to affiliations of site visitors.

<u>Commission Action</u>: The Commission on Dental Accreditation approves the site visitor appointments for 2017-2018 (**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 Summer 2016 meeting. Accreditation actions are summarized in the "Report on the Accreditation Statuses of Educational Programs" (**Appendix 2**).

New Business/General Discussion:

History of the Commission's Accreditation Cycle: The Commission discussed the history of the interval of CODA's seven (7) year site visit schedule, given that in a dental school setting almost two (2) full classes of students and in an advanced education setting multiple classes of students/residents could graduate between site visits. The Commission noted that its current frequency of site visits is aligned with many accreditors as a standard practice. However, the Commission also noted that risk-based accreditation is a current topic in higher education accreditation. Using risk-based accreditation, a program deemed "at risk" may have a shortened accreditation cycle. It was noted that the Commission once discussed an eight (8)-year cycle with an interim report; however, the Commission did not move in this direction. The Commission also learned that some accreditors are increasing the interval between site visits with additional, detailed interim reporting between cycles. The Commission took no action on this discussion.

Adjournment: The Commission adjourned the closed session at 2:28 P.M

MINUTES

COMMISSION ON DENTAL ACCREDITATION ADA HEADQUARTERS BUILDING, CHICAGO

FRIDAY, FEBRUARY 3, 2017 (OPEN SESSION)

<u>Call to Order:</u> The Chair, Dr. Harold Mark Livingston, called a regular meeting of the Commission on Dental Accreditation to order at 8:00 A.M. on Friday, February 3, 2017, in the Executive Board Room of the ADA Headquarters Building, Chicago, in open session.

Roll Call: Dr. Susan Callahan Barnard, Dr. Stephen Campbell, Mr. David Cushing, Dr. Loren Feldner, Dr. Catherine Flaitz, Dr. Steven Friedrichsen, Dr. James Geist, Dr. Joseph Hagenbruch, Dr. H. Garland Hershey, Jr., Dr. Tariq Javed, Dr. Arthur Jee, Dr. Bradford Johnson, Dr. Denise Kassebaum, Dr. Bruce Kinney, Mr. Dennis Lanier, Dr. William Leffler (vice-chair), Dr. Mark Lerman, Dr. Harold Livingston (chair), Dr. William Lobb, Dr. Michael Mills, Dr. Robert Sherman, Dr. David Stanton, Ms. Deanna Stentiford, Ms. Cindy Stergar, Dr. Stanley Surabian, Mr. Glenn Unser, and Dr. Matthew Wheeler.

Dr. Ralph Attanasi and Ms. Alexandra Hebert were not in attendance.

Trustee Liaison: Dr. Raymond Cohlmia, Twelfth District Trustee, American Dental Association (ADA).

Guest: Ms. Valerie Lefor, Accreditation Group, Office of Postsecondary Education, USDE.

CODA Staff: Dr. Sherin Tooks, *ex-officio*, director, CODA, Ms. Cathy Baumann (by telephone), Dr. Catherine Horan, Mr. Gregg Marquardt, Ms. Michelle Smith, Ms. Jennifer Snow, and Ms. Peggy Soeldner, managers, CODA were in attendance. Ms. Cathryn Albrecht, Senior Associate General Counsel, ADA/CODA was also in attendance. Ms. Patrice Renfrow, manager, CODA was not in attendance.

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

Conflict of Interest Statement, Fiduciary Reminder, and Reminder of Professional Conduct Policy and Prohibition Against Harassment: Dr. Sherin Tooks, director, CODA, reminded the Commissioners of their fiduciary responsibilities and the CODA Conflict of Interest policy. The Commissioners were also reminded of the Professional Conduct Policy and Prohibition Against Harassment.

<u>Approve the Minutes from Summer 2016 and September 2016 Meetings</u>: The minutes of the Summer 2016 and September 2016 Commission meetings were approved.

<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 Postdoctoral General Dentistry Education (**Appendix 3**).
- Report of the Review Committee on Dental Public Health Education (**Appendix 4**).
- Report of the Review Committee on Oral and Maxillofacial Pathology Education (**Appendix 5**).
- Report of the Review Committee on Oral and Maxillofacial Radiology Education (Appendix 6).
- Report of the Review Committee on Prosthodontics Education (Appendix 7)
- Mail Ballots Since the Last Commission Meeting:
 - a. Report of the Standing Committee on Nominations Closed 10/17/2016
 - b. CODA Summer 2016 Meeting Minutes Closed 10/18/2016
 - c. CODA September 2016 Meeting Minutes Closed 10/18/2016

Report of the Review Committee on Predoctoral Dental Education (PREDOC RC):

<u>Committee Chair</u>: Dr. William Lobb. <u>Committee Members</u>: Drs. Carla Evans, Liz Kaz, Thomas McConnell, Stephanie Oberhaus, Charlotte Royeen, Karl Self, Robert Trombly and Deborah Weisfuse. <u>Guest (Open Session Only)</u>: Dr. Anthony Palatta, chief learning officer, American Dental Education Association (ADEA) attended the policy portion of the meeting. <u>CODA Staff</u>: Dr. Catherine Horan, manager, Predoctoral Dental Education, Commission on Dental Accreditation (CODA) and Dr. Sherin Tooks, director, CODA.

A meeting of the Review Committee on Predoctoral Dental Education (PREDOC RC) was held at ADA Headquarters in Chicago on January 9-10, 2017. The PREDOC RC also met by telephone conference call on January 25, 2017. The PREDOC RC report is found in **Appendix 8**.

<u>Consideration of Proposed Revision to the Accreditation Standards for Dental Education</u>
<u>Programs</u>: The Commission noted that the proposed revision to Dental Standard 2-23 was circulated for a period of comment. Based on the comments received, the PREDOC RC recommended that the proposed revision to Dental Standard 2-23p not be adopted. Instead, an alternate proposed revision to Dental Standard 2-23e (noted below) was considered by the Commission.

- **2-23** At a minimum, graduates **must** be competent in providing oral health care within the scope of general dentistry, as defined by the school, including:
 - a. patient assessment, diagnosis, comprehensive treatment planning, prognosis, and informed consent;
 - b. screening and risk assessment for head and neck cancer;
 - c. recognizing the complexity of patient treatment and identifying when referral is indicated;
 - d. health promotion and disease prevention;
 - e. local anesthesia, and pain and anxiety control, <u>including consideration of the</u> impact of prescribing practices and substance abuse;
 - f. restoration of teeth;

- g. communicating and managing dental laboratory procedures in support of patient care;
- h. replacement of teeth including fixed, removable and dental implant prosthodontic therapies;
- i. periodontal therapy;
- j. pulpal therapy;
- k. oral mucosal and osseous disorders;
- 1. hard and soft tissue surgery;
- m. dental emergencies;
- n. malocclusion and space management;
- o. evaluation of the outcomes of treatment, recall strategies, and prognosis

Intent:

Graduates should be able to evaluate, assess, and apply current and emerging science and technology. Graduates should possess the basic knowledge, skills, and values to practice dentistry, independently, at the time of graduation. The school identifies the competencies that will be included in the curriculum based on the school's goals, resources, accepted general practitioner responsibilities and other influencing factors. The comprehensive care experiences provided for patients by students should be adequate to ensure competency in all components of general dentistry practice. Programs should assess overall competency, not simply individual competencies in order to measure the graduate's readiness to enter the practice of general dentistry.

<u>Commission Action</u>: The Commission on Dental Accreditation directs that CODA not adopt the proposed Dental Education Standard 2-23p.

The Commission on Dental Accreditation further directs that the proposed revision to Dental Education Standard 2-23e be circulated to the communities of interest for six (6) months, with a Hearing conducted at the Spring 2017 ADEA annual meeting, and review of received comments and possible adoption by the Commission, through its PREDOC RC, at the Summer 2017 meeting.

Consideration of Proposed Revisions to Accreditation Standard 2-23 for Dental Education Programs: The Commission considered an item from the Prosthodontics Education Review Committee, which requested that CODA incorporate a digital dentistry standard within the Dental Education Standards. The PREDOC RC recommended there be no further consideration of a new dental standard (2-23i) regarding digital dentistry. The Commission discussed the PREDOC RC's recommendation and noted that digital dentistry impacts all areas of dentistry. The Commission also noted a need to be proactive within the educational requirements related to technology developments in dentistry, including digital dentistry. The Commission noted that the PREDOC RC was not opposed to digital dentistry; in fact, many dental education programs are incorporating digital dentistry into the curriculum. However, the PREDOC RC believed the

proposed revision to Dental Standard 2-23i was too specific given that the concept of digital dentistry, and technology in general, is already addressed within the Dental Standards. Additionally, it was noted that there are many areas of technological advancements in dentistry not only in the area or digital dentistry. Following discussion by the Commission, a substitute motion was presented and approved to refer the concept of technology and digital dentistry back to the PREDOC RC for further consideration. Under new business, the Commission modified its action to request a report on this matter for consideration during the Summer 2017 meeting.

<u>Commission Action</u>: The Commission on Dental Accreditation directs the Predoctoral Dental Education Review Committee to reconsider the concept of technology and digital dentistry for development of a standard that ensures a broad-based application of these concepts in dental education, with a report to the Commission in Summer 2017.

<u>Informational Report on Predoctoral Dental Education Annual Survey Curriculum Data:</u> The Commission noted the PREDOC RC's recommendation that the annual survey curriculum survey be biennial (every two years), which was a typographical error in the Committee's report.

<u>Commission Action</u>: The Commission on Dental Accreditation directs staff to transmit the CODA/PREDOC RC perspective to the Joint Advisory Committee on Dental Education Information (JACDEI) related to frequency of survey data collection and need for trending data on educational methods used by programs.

Consideration of a New Accreditation Standard on Faculty Qualifications: The Commission considered the PREDOC RC's proposed revision to Dental Standard 3-1 (below), and recommendation that the revision be circulated to the communities of interest in response to the letter received from several ADA-recognized specialty organizations pertaining to faculty qualifications. The Commission discussed the example in the proposed intent statement, noting concern by some Commissioners that predoctoral students should be educated by individuals trained in the respective discipline in which they provide instruction. The PREDOC RC's opinion was that it should be the dental education program's responsibility to assure its faculty are qualified to teach in the program. Some Commissioners believed that credentialing of faculty within dental education programs may be an appropriate approach to ensuring the qualifications of faculty.

3-1 The number, and distribution and qualifications of faculty and staff must be sufficient to meet the dental school's stated purpose/mission, goals and objectives.

Intent: Faculty should have knowledge at an appropriate level for the curriculum areas for which they are responsible (e.g., the faculty member responsible for endodontics is not required to be an endodontist. Instead, it could be someone with knowledge and appropriate level of experience in endodontics). The faculty, collectively, should have competence in all areas of dentistry covered in the program.

<u>Commission Action</u>: The Commission on Dental Accreditation directs that the proposed revision to Dental Standard 3-1 and complementary statement of intent (noted above) be circulated to the communities of interest for one year, with Hearings conducted at the

Spring 2017 ADEA and Fall 2017 ADA annual meetings, and review of received comments, through its PREDOC RC, and possible adoption by the Commission at the Winter 2018 meeting.

<u>Consideration of Revision to Dental Therapy Accreditation Standards to Address Areas of Oversight at Sites Where Educational Activity Occurs:</u> The Commission reviewed proposed revisions to the Dental Therapy Standards related to sites where educational activity occurs. The process to develop standards addressing sites where educational activity occurs has been conducted for all other discipline educational standards, as necessary.

<u>Commission Action</u>: The Commission on Dental Accreditation directs the proposed new and revised dental therapy education standards, aligned with the Commission policy on sites where educational activity occurs, be circulated to the communities of interest for one year, with Hearings conducted at the Spring 2017 ADEA and Fall 2017 ADA annual meetings, and review of received comments, through its PREDOC RC, and possible adoption by the Commission at its Winter 2018 meeting.

<u>Report of the Standing Committee on International Accreditation:</u> There was no discussion on this report.

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

<u>New Business: Site Visitor Calibration</u>: The Commission noted that the deans of dental programs who serve as Commission site visit chairs discussed site visitor calibration of chairs of comprehensive dental education program site visits. The deans, as a group, are interested in ensuring calibration through a training calibration exercise. The Commission noted that a webinar training mechanism to further the calibration issue is currently under development by Commission staff.

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

Report of the Review Committee on Dental Assisting Education (DA RC): Committee Chair: Ms. Deanna Stentiford. Committee Members: Ms. Teresa Bailey, Dr. Cynthia Baker, Ms. Julie Bera, Ms. Margaret Bowman-Pensel, Dr. James Day, Dr. Loren Feldner, Dr. Connie Kracher and Ms. Joleen VanBibber. Ms. Jennifer Filcheck attended the January 12-13, 2017 meeting via conference call. Guests (Open Session Only): Ms. Cindy Durley, executive director, Dental Assisting National Board, Ms. Tami Grzesikowski, senior director, Allied Dental Education, American Dental Education Association and Dr. John Kasper, executive director, American Dental Assistants Association, attended the policy portion of the meeting. Commission Staff: Ms. Patrice Renfrow and Ms. Michelle Smith, managers, Allied Dental Education. Dr. Sherin Tooks attended a portion of the meeting.

The meeting of the Review Committee on Dental Assisting Education (DA RC) was held on January 12-13, 2017 at the ADA Headquarters Building. The DA RC also met by telephone conference call on January 19 and January 25, 2017. The Report of the DA RC is found in **Appendix 9**.

<u>Report On Dental Assisting Programs Annual Survey Curriculum Section:</u> The Commission considered the DA RC's recommendations on proposed revisions to the Dental Assisting Annual Survey Curriculum Section found within the DA RC's report.

<u>Commission Action</u>: The Commission on Dental Accreditation adopts the proposed revisions to the Dental Assisting Education Annual Survey Curriculum Section and directs implementation of the revised Curriculum Section for use in the Fall 2017 Annual Survey of accredited programs.

<u>Consideration of Accreditation Standards for Dental Assisting Education Programs Related to Program Closures:</u> The Commission discussed the DA RC's recommendations for revision of the dental assisting Accreditation Standards related to abrupt closure of programs. The DA RC believed that the proposed revision to Dental Assisting Standard 2-1, noted below, would enhance the Commission's oversight of programs.

Admissions

2-1 Admission of students must be based on specific published criteria, procedures and policies that include a high-school diploma or its equivalent, or post-secondary degree.

Previous academic performance or other predictors of scholastic aptitude and ability must be utilized as criteria in selecting students with the potential to successfully complete the program. Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability, scope of practice and employment opportunities for dental assistants.

Intent:

The dental assisting program is based on a science-oriented program of study and skill development offered at the post-secondary level that requires critical thinking, psychomotor skills, and ethical reasoning.

The program administrator and faculty, in cooperation with appropriate institutional personnel establish admissions criteria and procedures which are non-discriminatory, contribute to the quality of the program, and allow selection of adult post-secondary students with the potential to successfully complete the program to be successful. Because enrollment is limited by facility, capacity, and special program admissions criteria and procedures are necessary to ensure that students are selected based on a demonstrated potential for completing the program. Published promotional materials and website information related to student recruitment and admissions comply with the Commission's "Policy on Principles of Ethics in Programmatic Advertising and Student Recruitment".

Examples of evidence to demonstrate compliance may include:

Criteria and Selection Process:

- There is an established admissions committee which includes the program administrator, representatives of the program faculty, general education faculty who teach dental assisting students and counseling staff.
- Previous college academic performance and/or performance on standardized national scholastic tests are utilized for criteria in selecting students.
- High school class rank
- Cumulative grade point averages in previous education with particular attention given to grades in science subjects
- Copies of catalogs, program brochures, admissions packets, or other published materials

Academic Strengthening:

- If academic strengthening is needed to meet basic admission criteria or to proceed satisfactorily through the curriculum, the institution and program should have the resources necessary to assist students.
- Academic strengthening occurs prior to entry into the program courses.

<u>Commission Action</u>: The Commission on Dental Accreditation directs that the proposed revision to Dental Assisting Standard 2-1 be circulated to the communities of interest for one year, with Hearings conducted at the March 2017 ADEA and October 2017 ADA annual meetings, and review of received comments and possible adoption by the Commission, through its DA RC, at the Winter 2018 meeting.

Report of the Review Committee on Dental Hygiene Education (DH RC): Committee Chair: Dr. Susan Callahan Barnard. Committee Members: Ms. Laura Baus, Ms. Michele Carr, Dr. Sebastian Ciancio, Dr. Chester Evans, Ms. Carolyn Jackson, Dr. Susan Kass, Dr. Ronald Kosinski, Ms. Jo Ann Allen Nyquist, and Dr. Sally Mauriello. Ms. Barbara Krieg was unable to participate in the meeting. Guests (Open Session Only): Ms. Tami Grzesikowski, senior director, Allied Dental Education, American Dental Education Association and Ms. Ann Lynch, director, Governmental Affairs, American Dental Hygienists' Association attended the policy portion of the meeting. Commission Staff: Ms. Patrice Renfrow and Ms. Michelle Smith, managers, Allied Dental Education. Dr. Sherin Tooks attended a portion of the meeting.

The meeting of the Review Committee on Dental Hygiene Education (DH RC) was held on January 10-11, 2017 at the ADA Headquarters Building. The DH RC also met via telephone conference call on January 20, 2017. The Report of the DH RC is found in **Appendix 10**.

<u>Report On Dental Hygiene Programs Annual Survey Curriculum Section:</u> The Commission considered the DH RC's recommendations on proposed revisions to the Dental Hygiene Annual Survey Curriculum Section found within the DH RC's report.

<u>Commission Action</u>: The Commission on Dental Accreditation adopts the proposed revisions to the Dental Hygiene Education Annual Survey Curriculum Section and directs

implementation of the revised Curriculum Section for use in the Fall 2017 Annual Survey of accredited programs.

<u>Consideration of Accreditation Standards for Dental Hygiene Education Programs Related to Program Closures:</u> The Commission discussed the DH RC's recommendations to address abrupt closures of programs. The DH RC believed that revision to the Commission's support documents related to course transferability, within Dental Hygiene Standard 2-3, would ensure programs report and site visitors verify how programs inform applicants about course transferability. The Commission also considered the recommendation that additional training of site visitors on the Commission's intent would enhance evaluation of Dental Hygiene Standard 2-3.

<u>Commission Action</u>: The Commission on Dental Accreditation directs CODA staff to review and revise the support documentation related to course transferability within Dental Hygiene Standard 2-3 to ensure programs adequately report on, and site visitors verify, the manner in which programs inform applicants about course transferability.

The Commission on Dental Accreditation further directs CODA staff to include additional training on the intent and evaluation of Dental Hygiene Standard 2-3 within CODA site visitor training and site visitor update sessions in 2017.

New Business: Proposed Revisions to Dental Hygiene Standards 2-8b and 4-4b: The Commission considered the DH RC's proposed revisions to Dental Hygiene Standard 2-8b and 4-4b. The revision to Standard 2-8b was proposed to ensure use of contemporary terminology. The revision to Standard 4-4b was proposed to allow for either a two year notice or a contingency plan, since some dental hygiene programs find it difficult to have two year contractual notice. The proposed revisions are noted below.

Curriculum

2-8b Biomedical science content must include content in anatomy, physiology, chemistry, biochemistry, microbiology, immunology, general and maxillofacial pathology and/or pathophysiology, nutrition and pharmacology.

Intent: These subjects provide background for dental and dental hygiene sciences. The subjects are to be of the scope and depth comparable to college transferable liberal arts course work. The program should ensure that biomedical science instruction serves as a foundation for student analysis and synthesis of the interrelationships of the body systems when making decisions regarding oral health services within the context of total body health.

Biomedical science instruction in dental hygiene education ensures an understanding of basic biological principles consisting of a core of information on the fundamental structures, functions and interrelationships of the body systems. The biomedical knowledge base emphasizes the orofacial complex as an

important anatomical area existing in a complex biological interrelationship with the entire body.

Dental hygienists need to understand abnormal conditions to recognize the parameters of comprehensive dental hygiene care. The program should ensure that graduates have the level of understanding that assures that the health status of the patient will not be compromised by the dental hygiene interventions.

Extended Campus Facilities

- 4-4 The educational institution must provide physical facilities and equipment which are sufficient to permit achievement of program objectives. If the institution finds it necessary to contract for use of an existing facility for basic clinical education and/or distance education, then the following conditions must be met in addition to all existing Standards:
 - a) a formal contract between the educational institution and the facility;
 - b) a two-year notice for termination of the contract stipulated to ensure that instruction will not be interrupted or;
 - c) a contingency plan developed by the institution should the contract be terminated;
 - d) location and time available for use of the facility compatible with the instructional needs of the dental hygiene program;
 - e) the dental hygiene program administrator retains authority and responsibility for instruction and scheduling of student assignments;
 - f) clinical instruction is provided and evaluated by calibrated dental hygiene program faculty;
 - g) all dental hygiene students receive comparable instruction in the facility;
 - h) the policies and procedures of the facility are compatible with the goals of the educational program.

Examples of evidence to demonstrate compliance may include:

- contract with extended campus facility
- formal written contingency plan
- course and faculty schedules for clinical programs
- affiliation agreements and policies/objectives for all off-campus sites

<u>Commission Action</u>: The Commission on Dental Accreditation adopts the proposed revisions to Dental Hygiene Standards 2-8b and 4-4b, with immediate implementation.

Report of the Review Committee on Dental Laboratory Technology Education (DLT RC):

<u>Committee Chair</u>: Mr. Dennis Lanier. <u>Committee Members</u>: Ms. Renata Budny, Dr. Stan Frohlinger, Dr. Gene Kelber and Mr. Charles McClemens. <u>Guests (Open Session Only)</u>: Ms. Tami Grzesikowski, senior director, Allied Dental Education, American Dental Education Association and Mr. Bennett Napier, chief staff executive, National Association of Dental Laboratories attended the policy portion of the meeting. <u>Commission Staff</u>: Ms. Patrice Renfrow and Ms. Michelle Smith, managers, Allied Dental Education.

The meeting of the Review Committee on Dental Laboratory Technology Education (DLT RC) was held on January 9, 2017 via telephone conference call. The Report of the DLT RC is found in **Appendix 11**.

<u>Report On Dental Laboratory Technology Programs Annual Survey Curriculum Section:</u> The Commission considered the DLT RC's recommendations that the Dental Laboratory Technology Annual Survey Curriculum Section be retained with no changes.

<u>Commission Action</u>: The Commission on Dental Accreditation directs the Dental Laboratory Technology Annual Survey Curriculum Section be retained with no changes for use in the Fall 2017 Annual Survey of accredited programs.

Report of the Review Committee on Endodontics Education (ENDO RC): Committee Chair: Dr. Bradford Johnson. Committee Members: Dr. Brian Bergeron, Dr. John Hatton (substitute as needed for discipline specific program review), Dr. James Johnson, Dr. William Johnson, Dr. Robert Miller, and Ms. Diane Neefe. Guests (Open Session Only): Ms. Beverly Albert, assistant executive director for education, American Association of Endodontists (AAE) and Dr. Jeffery Stewart, senior director, institutional innovation and development, American Dental Education Association (ADEA) attended the policy portion of the meeting. Staff Members: Ms. Jennifer Snow, manager, Advanced Specialty Education and Ms. Marcia McKinney, senior project assistant, Commission on Dental Accreditation (CODA). Dr. Sherin Tooks, director, CODA attended a portion of the meeting.

The meeting of the Review Committee on Endodontics Education (ENDO RC) was held on January 9, 2017 via telephone conference call. The Report of the ENDO RC is found in **Appendix 12**.

<u>Informational Report on Endodontics Programs Annual Survey Curriculum Data:</u> There was no discussion on this report.

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

<u>New Business: Consideration of a Proposed Endodontics Accreditation Standard Requiring a Standard Program Acceptance Date</u>: The Commission learned of the ENDO RC's discussion related to dissimilar program acceptance dates among endodontics education programs.

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

Report of the Review Committee on Oral and Maxillofacial Surgery Education (OMS RC): Committee Chair: Dr. David Stanton. Committee Members: Dr. Steven Lepowsky, Dr. Gregory Ness, Dr. Vincent Perciaccante, Dr. Martin Steed, and Ms. Cindy Stergar. Guests (Open Session Only): Ms. Mary Allaire-Schnitzer, associate executive director; Ms. Laurie Oddo, staff; Dr. Douglas Fain, president; Dr. Brett Ferguson, president-elect; Dr. Thomas Indresano, vice president; Dr. David Johnson, treasurer; and Dr. Louis Rafetto, immediate past president; American Association of Oral and Maxillofacial Surgeons (AAOMS); Mr. Lance

Hoxie, executive vice president, American Board of Oral and Maxillofacial Surgery (ABOMS); and Ms. Tami Grzesikowski, senior director for allied dental education, American Dental Education Association (ADEA) attended the policy portion of the meeting. <u>Staff Members</u>: Ms. Jennifer Snow, manager, Advanced Specialty Education, Commission on Dental Accreditation (CODA). Dr. Sherin Tooks, director, CODA attended a portion of the meeting.

The meeting of the Review Committee on Oral and Maxillofacial Surgery Education (OMS RC) was held on January 10, 2017 at the ADA Headquarters, Chicago, Illinois. The Report of the OMS RC is found in **Appendix 13**.

<u>Report on Oral and Maxillofacial Surgery Programs (Residency and Fellowship) Annual Survey Curriculum Sections:</u> The Commission considered the OMS RC's recommendations on proposed revisions to the Annual Survey Curriculum Section of the Residency and Fellowship surveys found within the OMS RC's report.

<u>Commission Action</u>: The Commission on Dental Accreditation directs the Oral and Maxillofacial Surgery Annual Survey Curriculum Section for residency programs be revised for use in Fall 2017.

The Commission on Dental Accreditation further directs the Oral and Maxillofacial Surgery Annual Survey Curriculum Section for fellowship programs be revised for use in Fall 2017.

<u>Consideration of Proposed Revisions to the Accreditation Standards for Advanced Specialty</u>
<u>Education Programs in Oral and Maxillofacial Surgery:</u> The Commission considered proposed revision to the oral and maxillofacial surgery standards, and comments received.

<u>Commission Action</u>: The Commission on Dental Accreditation adopts the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery, including proposed new Standards 3-6 and 4-19 regarding diagnostic imaging facilities and interpretation of diagnostic imaging, and the grammatical and editorial changes, with an implementation date of August 4, 2017.

<u>Consideration of Proposed Revisions to the Accreditation Standards of Advanced Specialty</u>
<u>Education Programs and Clinical Fellowship Training Programs in Oral and Maxillofacial</u>
<u>Surgery:</u> The Commission considered proposed revision to the oral and maxillofacial surgery standards, residency and fellowship, including clarification of surgical experiences, strengthening standards related to anesthesia, modification of evaluation of residents, enhancement of research in residency standards, and modification of cleft craniofacial standards in the fellowship standards.

<u>Commission Action</u>: The Commission on Dental Accreditation directs circulation of the proposed revisions to the Accreditation Standards for Advanced Specialty Education Programs in Oral and Maxillofacial Surgery to the communities of interest for review and comment, with Hearings conducted at the March 2017 American Dental Education

Association and October 2017 American Dental Association annual meetings, with comments reviewed at the Commission's Winter 2018 meetings.

The Commission on Dental Accreditation further directs circulation of the proposed revisions to the Accreditation Standards for Clinical Fellowship Training Programs in Oral and Maxillofacial Surgery, to the communities of interest for review and comment, with Hearings conducted at the March 2017 American Dental Education Association and October 2017 American Dental Association annual meetings, with comments reviewed at the Commission's Winter 2018 meetings.

Report of the Review Committee on Orthodontics and Dentofacial Orthopedics (ORTHO RC): Committee Chair: Dr. H. Garland Hershey. Committee Members: Dr. G. Frans Currier, Mr. David Cushing, Dr. James Hartsfield, Dr. Scott Jamieson, and Dr. Wendy Woodall. Guest (Open Session Only): Dr. Anthony Palatta, chief learning officer, American Dental Education Association attended the policy portion of the meeting. Staff Members: Ms. Jennifer Snow, manager, Advanced Specialty Education, and Ms. Marcia McKinney, senior project assistant, Commission on Dental Accreditation (CODA).

The meeting of the Review Committee on Orthodontics and Dentofacial Orthopedics Education (ORTHO RC) was held on January 13, 2017 via telephone conference call. The Report of the ORTHO RC is found in **Appendix 14**.

<u>Informational Report on Orthodontics and Dentofacial Orthopedics Programs (Residency)</u> <u>Annual Survey Curriculum Data:</u> There was no discussion on this report.

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

<u>Report on Orthodontics and Dentofacial Orthopedics Programs (Fellowship) Annual Survey Curriculum Section:</u> The Commission considered the ORTHO RC's recommendation to conduct the Craniofacial and Special Care Orthodontics Annual Survey Curriculum Section on a biennial schedule rather than annually.

Commission Action: The Commission on Dental Accreditation directs the Clinical Fellowship Training Program in Craniofacial and Special Care Orthodontics Annual Survey Curriculum Section be conducted in alternate years, with its next distribution in August/September 2018.

Report of the Review Committee on Pediatric Dentistry Education (PED RC): Committee Chair: Dr. Catherine Flaitz. Committee Members: Dr. Martin Donaldson, Dr. Man Wai Ng, Dr. Reuben Pelot, Mr. Gerald Phipps, and Dr. Janice Townsend. Dr. Brenda Bohaty substituted as needed for a discipline specific program review. Guests (Open Portion Only): Mr. Scott Dalhouse, manager of educational affairs, American Academy of Pediatric Dentistry (AAPD) and Ms. Tami Grzeskowski, senior director for allied dental education, American Dental Education Association (ADEA) attended the policy portion of the meeting. Ms. Valerie Lefor, accreditation group, Office of Postsecondary Education, United States Department of Education (USDE) attended the open and closed portions of the meeting. Staff Members: Ms. Catherine

Baumann, manager, Advanced Specialty Education, CODA, attended. Ms. Peggy Soeldner, manager, Advanced Specialty Education, CODA and Ms. Jennifer Snow, manager, Advanced Specialty Education, CODA were also present for portions of the meeting. Dr. Sherin Tooks, director, CODA, Ms. Cathryn Albrecht, senior association general counsel, and Dr. Harold Mark Livingston, chair, CODA were also in attendance for portions of the meeting.

The meeting of the Review Committee on Pediatric Dentistry Education was held via telephone conference call on Tuesday, January 10, 2017. The Report of the PED RC is found in **Appendix** 15.

<u>Informational Report on Pediatric Dentistry Program Annual Survey Curriculum Data:</u> The Commission learned that the PED RC will further consider the annual survey curriculum section questions based on a perception that some questions could be clarified to enhance accuracy in program reporting.

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

<u>Consideration of Proposed Revisions to the Accreditation Standard 4-6 for Advanced Specialty Education Programs in Pediatric Dentistry:</u> The Commission noted the PED RC's proposed revision to Standard 4-6, noted below, to clarify the intent of "primary operator." The Commission noted that there are quantitative measures for anesthesia experience, and data on programs is collected through the annual survey. Additionally, programs and residents maintain procedure logs.

Proposed Revision to Pediatric Dentistry Standard 4-6:

- 4-6 Clinical Experiences: Clinical experiences in behavior guidance **must** enable students/residents to achieve competency in patient management using behavior guidance:
 - a. Experiences **must** include infants, children and adolescents including patients with special health care needs, using:
 - 1. Non-pharmacological techniques;
 - 2. Sedation; and
 - 3. Inhalation analgesia.
 - b. Students/Residents **must** perform adequate patient encounters to achieve competency:
 - 1. Students/Residents **must** complete 20 nitrous oxide analgesia patient encounters as primary operator; and
 - 2. Students/Residents **must** complete a minimum of 50 patient encounters in which sedative agents other than nitrous oxide (but may include nitrous oxide in combination with other agents) are used. The agents may be administered by any route.

- a. Of the 50 patient encounters, each student/resident **mus**t act as <u>sole</u> <u>primary</u> operator in a minimum of 25 sedation cases.
- b. Of the remaining sedation cases (those not performed as the primary operator), each student/resident must gain clinical experience, which can be in a variety of activities or settings, including individual or functional group monitoring and human simulation.
- c. All sedation cases must be completed in accordance with the recommendations and guidelines of AAPD/AAP, the ADA's Teaching of Pain Control and Sedation to Dentists and Dental Students, and relevant institutional policies.

Intent: Programs will provide patients or make available adequate opportunities to meet the above requirements which are consistent with those experiences required by most jurisdictions with policies regulating pediatric sedation in dental practice. The numbers of encounters cited in the Standard represents the minimal number of experiences required for a student/resident. In the primary operator role, the student/resident is expected to provide the assessment, drug delivery, treatment, monitoring, discharge and emergency prevention/management.

In the remaining sedation cases, where the student/resident is not the primary operator, the supplemental cases provide the learner with:

- (1) <u>direct clinical participation in patient care in an observational, datagathering, monitoring, and/or recording capacity,</u>
- (2) <u>simulation experiences with direct clinical application to elements of the AAP/AAPD sedation guidelines, or</u>
- (3) participation in activities related to specific patient care episodes such as Morbidity & Mortality conferences, and rounds that review essential elements of an actual patient sedative visit.

These experiences require documentation and inclusion in the student/resident clinical log. It is not an appropriate learning experience for groups of students/residents to passively observe a single sedative treatment being performed. The intent of this standard is not for multiple operators to provide limited treatment on the same sedated patient in order to fulfill the sedation requirement. Documentation will be available demonstrating adherence to guidelines and these procedures will be tracked in the resident clinical log.

<u>Commission Action:</u> The Commission on Dental Accreditation directs circulation of the proposed revision to Pediatric Dentistry Standard 4-6 - Behavior Guidance to the communities of interest until June 1, 2017, with a Hearing at the March 2017 American Dental Education Association (ADEA) annual meeting, with comment to be considered

at the Summer 2017 meetings of the Pediatric Dentistry Review Committee and Commission.

Report of the Review Committee on Periodontics Education (PERIO RC): Committee Chair: Dr. Michael Mills. Committee Members: Dr. James Katancik, Dr. Lucinda (Cindy) Lyon, Dr. Bryan Pearson, Dr. Charles Powell, and Mr. John Rheinberger. Guests (Open Session Only): Ms. Jasmine Alkhatib, manager, Academic Programs, American Academy of Periodontology (AAP); Dr. Kent Palcanis, executive director, American Board of Periodontology (ABP); and Ms. Tami J. Grzesikowski, senior director for allied dental education, American Dental Education Association (ADEA) attended the policy portion of the meeting. Staff Members: Ms. Jennifer Snow, manager, Advanced Specialty Education and Ms. Marcia McKinney, senior project assistant, Commission on Dental Accreditation (CODA).

The meeting of the Review Committee on Periodontics Education (PERIO RC) was held on January 12, 2017 via telephone conference call. The Report of the PERIO RC is found in **Appendix 16**.

Informational Report on Periodontics Programs Annual Survey Curriculum Data: There was no discussion on this report.

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

<u>New Business: Consideration of Revisions to the Accreditation Standards for Advanced</u>
<u>Specialty Education Programs in Periodontics:</u> The PERIO RC believed strengthening Standard 2-5 was important to ensure the intended interpretation regarding who is responsible for teaching in periodontics education programs.

Proposed Revision to Periodontics Standard 2-5

Faculty **must** be assigned for all clinical sessions and immediately available for consultation with students/residents and patients. There **must** be direct <u>faculty</u> supervision <u>by periodontists</u> of students/residents who are performing <u>periodontal and dental implant related</u> surgical procedures.

<u>Commission Action</u>: The Commission on Dental Accreditation directs circulation of the proposed revision to Periodontics Standard 2-5, as written above, to the communities of interest for review and comment, with Hearings conducted at the March 2017 American Dental Education Association and October 2017 American Dental Association annual meetings, with comments reviewed at the Commission's Winter 2018 meetings.

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

<u>Informational Report of Review Committee and Commission Meeting Dates:</u> The Commission reviewed the meeting dates of the 2017 and 2018 meetings.

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

<u>Reminder of Professional Conduct Policy and Prohibition Against Harassment:</u> The Commission reviewed the Reminder of Professional Conduct Policy and Prohibition Against Harassment.

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

Consideration of Resolutions Adopted by the ADA House of Delegates and the ADA Board of Trustees Related to the Commission on Dental Accreditation and Dental Education: The Commission reviewed the resolutions adopted by the ADA House of Delegates, noting that 83H-2016 related to revision of the Commission's *Rules* to amend its Mission statement.

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

Miscellaneous Affairs-Matters for the Commission as a Whole

Report of the Standing Committee on Finance: The report of the Standing Committee on Finance can be found in **Appendix 17**. Below are actions taken by the Commission related to the Report of the Standing Committee on Finance.

<u>CODA Survey on Operational Structure for Independent Authority:</u> The Commission reviewed the Finance Committee's report on the survey, without comment.

<u>Commission Action</u>: The Commission on Dental Accreditation directs there be no assessment of a monetary grant to nominating or appointing organizations at this time.

<u>Establishing a Shared Services (Indirect Expenses) Formula with the ADA:</u> The Commission considered the recommendation of the Finance Committee related to the shared services formula, without further comment.

<u>Commission Action</u>: The Commission on Dental Accreditation directs CODA staff to obtain comparison cost information from outside vendors and other accrediting agencies related to all shared services provided to CODA from the ADA, with a report to the Commission in Summer 2017 identifying the impact of these shared services on CODA's budget.

<u>Timeline (Long-Term Plan) to Assume Total Expenses:</u> The Commission considered the Finance Committee's report and recommendations related to establishing a timeline (long-term plan) to assume total expenses. The Commission noted that this item is found within the current strategic plan and relates to the Commission's efforts to assume greater financial autonomy and fiscal responsibility.

<u>Commission Action</u>: The Commission on Dental Accreditation directs CODA Staff to gather information from other accrediting organizations on their use of reserve funds to sustain long-term financial stability.

The Commission on Dental Accreditation further directs that CODA direct the Finance Committee to assess CODA's financial stability over the past five (5) years and prepare projections for the next five (5) years including identifying indirect and direct expenses, with a report to CODA in Summer 2017.

<u>Annual Fees and Application Fees:</u> The Commission considered the Finance Committee's recommendations related to annual and application fees. The Commission noted that the 8% increase would ensure the Commission can assume all expenses in 2018. Additionally, the potential for an 8% increase was previously communicated to the communities of interest as directed by CODA in a prior meeting. The Commission also noted that with the number of programs remaining constant, a reserve fund may be necessary to ensure the Commission's long-term sustainability of operational expenses.

Commission Action: The Commission on Dental Accreditation:

- Adopts an 8% increase in annual fees for all disciplines in 2018; \$7,580 for
 predoctoral dental education programs, \$1,890 for dental assisting, dental hygiene,
 dental therapy, and advanced dental education programs, and \$1,340 for dental
 laboratory technology programs.
- Affirms that during the year a program is due for a regular accreditation site visit, the annual fee will be doubled.
- Increases the application fees by 4% for predoctoral dental education programs to \$67,400 and allied and advanced programs to \$16,850.

<u>International Fees (For CODA Accreditation Process):</u> The Commission considered the recommendations related to international fees, as noted within the Finance Committee's report. The Commission noted the minimal number of requests for international consulting (outside of the PACV) process.

Commission Action: The Commission on Dental Accreditation:

- Adopts a 2018 international predoctoral dental education application fee of \$73,010.
- Adopts a 2018 international predoctoral dental education annual accreditation fee of \$16,850.
- Affirms that in 2018 international predoctoral dental education programs pay all site visit expenses (actual expenses) for all site visits during the application and regular site visit schedule.
- Affirms that in 2018 international predoctoral dental education programs pay an administrative fee of 25% of the total site visit cost for coordination of each site visit.
- Decreases the International Consulting Fee (outside of PACV process) to \$5,000.
- Affirms that all international fees must be paid in U.S. Dollars.

<u>Other Accreditation Fees:</u> The Commission considered the Finance Committee's recommendations related to other accreditation fees. The Commission discussed the frequency of each of these fees, noting the special focused site visit fee was the most often assessed followed by the fee for non-compliance with CODA's policy on HIPAA.

Commission Action: In the budget year 2018, the Commission on Dental Accreditation:

- Increases the Special Focused Site Visit Administrative Fee by 8% to \$4,320.
- Maintains the CODA Penalty for Non-Compliance with CODA Policy on HIPAA of \$1,000.
- Increases the Electronic Conversion of Paper Documents Fee to \$1,000.
- Maintains the Email/Contact Distribution List Fee of a \$200 minimum.
- Maintains the Research and Development Fund administrative fee of \$35.

<u>International Fees (For International Consultation and Accreditation PACV Process):</u> The Commission noted the Finance Committee's recommendation to retain current international consultation fees, without further discussion.

<u>Commission Action:</u> The Commission on Dental Accreditation maintains the current PACV International Consultation and Accreditation Fees.

<u>Commission Policies Related to Fees:</u> The Finance Committee recommended proposed revision to policies on fees, which was considered by the Commission without further discussion.

<u>Commission Action:</u> The Commission on Dental Accreditation adopts, with immediate implementation, the proposed revision to policies on fees.

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

The report of the Standing Committee on Quality Assurance and Strategic Planning can be found in **Appendix 18**. The Commission received an informational report from the Quality Assurance and Strategic Planning Committee, indicating that the Committee would focus on identifying a priority list related to the 2017-2021 strategic plan action items as well as expectations for the objectives and action items within the plan.

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

Report of the Standing Committee on Communication and Technology: The report of the Standing Committee on Communication and Technology can be found in **Appendix 19**. The Commission reviewed the informational report of the Standing Committee, noting several surveys related to communication and technology were under development.

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

Consideration of a Request to Establish a Process of Accreditation for Advanced General Dentistry Education Programs in Implant Dentistry: The request to establish a process of accreditation for implant dentistry programs report is found in Appendix 20. The Commission considered the request from the American Academy of Implant Dentistry (AAID). The Commission was unsure whether implant dentistry was a distinct education area or whether it was a technique within dentistry. As with prior requests of this nature, the Commission believed that an ad hoc committee should be established to consider the AAID request. The Commission discussed the importance of having representatives of the surgical specialties on the ad hoc committee.

<u>Commission Action:</u> The Commission on Dental Accreditation directs that an ad hoc committee composed of Commission members be appointed to further study the request for establishment of an accreditation process for advanced general education programs in implant dentistry, in accordance with the Commission's Policies and Procedures for Accreditation of Programs in Areas of Advanced Training in General Dentistry, with a report on the ad hoc committee's progress at the Summer 2017 meeting.

Report of the Standing Committee on International Accreditation: The Commission reviewed the report of actions taken by its Standing Committee on International Accreditation related to the Preliminary Accreditation Consultative Visit (PACV), which is found in **Appendix 21**.

<u>Review of the PACV Survey submitted by the University of Otago, Dunedin, New Zealand:</u> The Commission noted the Standing Committee's action on the PACV Survey from the University of Otago.

<u>Commission Action</u>: The Standing Committee on International Accreditation directed that the fully-operational predoctoral dental education program offered by the *University of Otago*, Dunedin, New Zealand proceed to the next step (observation of a CODA site visit) in the Preliminary Accreditation Consultative Visit (PACV).

The Standing Committee further directed that a formal letter be sent confirming review and the results of its review, with dates of 2017 CODA dental school site visits.

Review of the Informational Update Report submitted by the University of Universidad

Autonoma De Nuevo Leon, San Nicolas De Los Garza, Nuevo Leon, Mexico: The Commission noted the action of the Standing Committee related to the information submitted by the University of Universidad Autonoma De Nuevo Leon.

Commission Action: The Standing Committee on International Accreditation directed that a letter be sent confirming receipt of the unrequested report of the program's progress in anticipation of the formal response to the February 2016 PACV in approximately two (2) years. (A letter of May 18, 2016 from the program states the formal response is to be expected in 2 ½ years; this letter was reviewed by the Committee at its previous, June 2016 meeting.)

<u>International Travel for CODA Volunteers:</u> The Commission considered the Standing Committee's recommendation that the Commission develop a policy and procedures related to planning international PACV and CODA site visits.

<u>Commission Action</u>: The Commission on Dental Accreditation directed that its Standing Committee on Documentation and Policy develop a draft policy and procedure for use in planning international PACV and CODA site visits, to be reviewed by the Commission at its next meeting in Summer 2017.

Enhancement of the Process to Identify the Clinical Practitioner Role for Consulting

Committee for PACV: The Commission noted the Standing Committee's request that CODA staff formalize a process for recruitment of ADA clinical practitioners on PACV site visits.

<u>Commission Action</u>: The Standing Committee on International Accreditation directed CODA staff to formalize the process for the recruitment of ADA clinical practitioners and report back to the Committee on progress in attaining individuals to serve in this role, at a future meeting.

<u>Accreditation:</u> The Commission received, in closed and open session, an update on important national topics related to education and accreditation that could have an impact on the Commission. The Commission also noted that its petition for re-recognition with the USDE was submitted on January 5, 2017. The Commission expected to attend the June 2017 meeting of the National Advisory Committee on Institutional Quality and Integrity to present the Commission's petition.

<u>Survey of Meeting:</u> Commissioners were reminded to complete the electronic post-meeting survey following the meeting. The survey is important for determining whether the Commission is achieving its goals for the year.

New Business:

Interval Between Site Visits for Accreditation: In continuation of the Commission's discussion during closed session, the Commission further discussed the seven-year interval cycle between site visits. It was noted that since a number of disciplines perform procedures in surgery and anesthesia, which increases risk in the delivery of patient care, it may be appropriate to review the interval cycle between site visits. For example, oral and maxillofacial surgery programs are reviewed on a five-year cycle, not seven (7) years. Alternately, it may be appropriate to strengthen monitoring of programs through annual surveys to ensure the educational component is monitored. In consideration of this topic, alternate methods for monitoring such as interim reviews and different timelines for monitoring programs could also be considered. The Commission could also review benchmarks of other healthcare accreditors when studying this topic.

<u>Commission Action:</u> The Commission directs development of an Ad Hoc Committee to study the interval of the accreditation cycle based on risk assessment.

The Commission further directs that the Ad Hoc Committee consider the policies and procedures of other healthcare accrediting agencies, and consider alternatives such as interim reviews and modified accreditation timelines, with an update to the Commission in Winter 2018.

Adjourn: The Commission adjourned the open session at 10:30 A.M.