REPORT OF THE AD HOC COMMITTEE ON ALTERNATIVE SITE VISIT METHODS

Background: At its August 2020 meeting, the Commission on Dental Accreditation (CODA) considered ongoing operations in response to the COVID-19 pandemic and the impact on site visits. The Commission directed that it pursue alternative site visit methods, as needed to employ in 2021. The Commission further directed investigation and development of policies and procedures for alternative site visit methods, with a report to CODA in Winter 2021. The Commission believed that input from its 14 Review Committees on the elements of a site visit that may be conducted virtually versus the elements that must be reviewed on-site was warranted and, as such, directed that the 14 Review Committees be consulted related to this matter. Finally, the Commission directed the appointment of an Ad Hoc Committee to study virtual site visits, including development of policies and procedures for the conduct of virtual visits, for consideration by the Commission in Winter 2021.

The Commission Chair appointed the following individuals to the Ad Hoc Committee on Alternative Site Visit Methods: Dr. Kevin Haubrick (chair), Dr. Joel Berg, Dr. Susan Kass, Dr. Sanjay Mallya, Dr. William Nelson, Dr. Alan Stein, Dr. Marshall Titus, and Dr. Lawrence Wolinsky. The Ad Hoc Committee conducted virtual meetings on December 7, 2020 (all members present) and January 7, 2021 (all members present except Dr. Titus). Additionally, Dr. Jeffery Hicks, chair, and Dr. Bruce Rotter, vice chair, CODA, ex officio, were in attendance at all meetings. Dr. Sherin Tookes, director, CODA, and Mr. Gregg Marquardt, Ms. Michelle Smith, Ms. Jennifer Snow, and Ms. Peggy Soeldner, managers, CODA, and Ms. Cathryn Albrecht, senior associate general counsel, ADA/CODA, were in attendance at all meetings. Ms. Dawn Herman and Ms. Kirsten Nadler, managers, CODA, were in attendance during the January 7, 2021 meeting.

Below is the Ad Hoc Committee’s report and recommendations to the Commission following its meetings of December 7, 2020, and January 7, 2021.

Report and Recommendations of the Ad Hoc Committee:
The Ad Hoc Committee reviewed its charge and the information that was collected to support the work of the Committee. The Committee considered the United States Department of Education (USDE) recognition criteria and USDE letter of March 2020 (Appendix 1), which provided accrediting agencies with temporary flexibility during the COVID-19 pandemic to permit, but not require, accrediting agencies to conduct virtual site visits as long as the agency’s board approves changes to its policies governing site visits. The Committee also considered CODA’s current policies and procedures which govern its site visit process, and related program change and other policies that may lead to a site visit, as found in Appendix 2. The Committee further considered the site visit schedule for 2021, noting the Commission’s prior action to direct that all site visits not conducted in 2020 be shifted to 2021, and that all programs’ site visits be shifted one year forward. As directed by the Commission, each Review Committee’s comments related to alternative site visits was forwarded to the Ad Hoc Committee for consideration (Appendix 3). The Committee also noted the technology implications for the conduct of virtual site visits for
the Commission, programs, and Commission site visitors (Appendix 4). The Committee also considered legal implications of conducting site visits virtually, specifically related to privacy and data security, and confidentiality of the site visit process. Finally, the Committee reviewed information on similar accrediting agencies’ use of alternative site visit methods, as well as policies and procedures that had been developed by these agencies.

Use of Alternative Site Visit Methods:
The Ad Hoc Committee discussed whether the alternative (i.e., virtual) site visit process should be used during the COVID-19 pandemic and, if used, whether the process should be solely reserved for re-accreditation site visits to CODA-accredited programs. Following discussion, the Ad Hoc Committee determined that alternative site visit methods could be used equally for re-accreditation (regular) site visits, as well as special focused site visits and visits to educational programs that had applied for accreditation by the Commission. The Committee noted that in all cases, the USDE expected that the accrediting agency return for an on-site review within a reasonable time following the conduct of a virtual site visit.

In consideration of CODA’s international accreditation process for predoctoral dental education programs, including the Preliminary Accreditation Consultation Visit (PACV) process, the Ad Hoc Committee concluded that CODA should delay all site visits to international locations until an in-person visit can be conducted. No aspect of an international program review by the Commission should occur virtually. Therefore, the Committees recommendations below are limited to US-based programs, which are accredited by the Commission.

Having established its scope of review and recommended uses for alternative site visit methods, as noted above, the Ad Hoc Committee continued its discussion of the current climate related to travel and potential conduct of on-site visits. The Committee noted that travel restrictions can occur at the local, state, and national level, as well as being impacted by institutional/university policies of the program being visited. Additionally, the institutional/university policies of CODA’s site visitors, as well as their personal comfort in travel at this time, could affect site visit logistical planning activities leading up to the date of the site visit. Based upon these changing variables, the Ad Hoc Committee further concluded that the Commission should proceed with alternative site visit methods, as necessary, and should plan to return to a program in a reasonable amount of time to conduct the USDE required in-person review.

The Committee also discussed the timeline that might be appropriate for an in-person visit to the program, following the virtual site visit. The Committee concluded that the in-person visit should occur within a time period not to exceed 18 months following the conduct of a virtual site visit. Additionally, the Committee determined that there may be visits that are conducted completely virtually (all site visits distant to the program) while others may be conducted in a hybrid fashion (at least one discipline-specific site visitor is on-site at the program). It was the belief of the Ad Hoc Committee that if a hybrid visit were to occur, there would be no need for a subsequent in-person visit. The Committee noted that the USDE’s flexibility requires an in-person visit following a virtual visit, though not necessarily a full peer-review visit. Based upon this flexibility, the Committee believed a hybrid visit would satisfy the virtual and in-person
review, given at least one discipline-specific site visitor would be on-site at the program’s facility during the evaluation. The Ad Hoc Committee believed that in all cases with site visit scheduling and logistics, it should be the Commission, not the program, which dictates the process used for the program’s evaluation. Finally, the Committee determined that the program’s next site visit date would be based upon its virtual/hybrid visit date using CODA’s formula of regular site visits occurring at seven (7) year intervals in all disciplines except oral and maxillofacial surgery, which occur every five (5) years.

Alternative Site Visit Process and Procedures:
The Ad Hoc Committee discussed the portions of the site visit that may occur virtually versus the portions that must occur on-site. Following review of the information gathered from CODA’s 14 Review Committees (Appendix 3), the Ad Hoc Committee concluded that the Review Committees were generally calibrated and in agreement on the requirements for on-site versus virtual program review. The Review Committees and Ad Hoc Committee, believed that a majority of the site visit could occur virtually, through submission of materials in advance to the site visitors and Commission office, as well as through confidential virtual site visit interviews. Program documentation that would typically be provided on-site must be limited to only the materials absolutely necessary to demonstrate compliance, and be uploaded to CODA’s electronic accreditation portal along with the program’s self-study for review by the site visitors.

While a majority of the visit can occur virtually, on-site visits remain important, at least in some capacity, in order for the Commission and its site visitors to conduct the following aspects of program review: 1) clinical observation of patient care; 2) review of confidential program documents, including records that would be sensitive under regulations of patient, faculty, and student/resident/fellow privacy, although aggregate data should be provided for a virtual visit to demonstrate compliance; 3) clinic tours of the program’s facility and educational activity sites used by the program; 4) student/resident/fellow interview sessions, although initial interviews could occur virtually and be supplemented on-site; and 5) any other areas in which the virtual site visit did not result in sufficient review and verification of compliance by the program.

The Ad Hoc Committee believed that following a virtual visit, areas of non-compliance should be reviewed and monitored by the Commission, through its Review Committees based upon existing policies and procedures. If a program is reporting to the Commission on areas of non-compliance at the time of its on-site visit, the program will be expected to continue to report on progress directly to the Commission; however, the preexisting areas of non-compliance would not be included in the on-site visit review. The on-site visit would, generally, be limited to review of continued compliance with CODA policies on complaints and third party comments, as well as evaluation of standards related to the aforementioned five (5) areas, including clinical operations and student/resident/fellow clinical experiences, facility tours including educational activity sites, student/resident/fellow interviews, and review of on-site documentation that could not be transmitted during the virtual site visit, and any other items that arise during the on-site evaluation.
Alternative Site Visit Schedule and Technology Usage:
The Ad Hoc Committee also considered the site visit schedule and use of technology to conduct a virtual or hybrid site visit, including technology requirements for the program, Commission, and Commission’s site visitors, in order to conduct reviews virtually. The Committee determined that the site visit schedule, whether virtual, hybrid, or in-person, should remain the same as CODA’s current site visit schedule. The virtual or hybrid site visit would be conducted based upon the time zone of the program being visited, and the program would be expected to prepare a schedule that includes references to all time zones in the United States in order to guide site visitors on the schedule.

Following discussion regarding the technology that would be used to facilitate site visits, the Ad Hoc Committee concluded that the program must be responsible to support the technology used for the visit, recognizing that Zoom is CODA’s preferred tool, including providing real-time virtual support to site visitors regarding technology issues that may arise. Additionally, the program would be expected to pre-set breakout rooms and provide links on the site visit schedule to support the concept of individual, private conference rooms which are used during an on-site visit. The program must also ensure the confidentiality of the review process, including the Commission’s expectation that there be no recording of any kind of the site visit process. The Committee believed the program’s obligations should be documented in a program manual and agreement, which must be signed by the program in advance of the site visit.

Summary of Recommendations:
Following extensive discussion, the Ad Hoc Committee on Alternative Site Visit Methods believed that the proposed temporary policy on the use of virtual site visits should be considered and approved by the Commission (Appendix 5). The Ad Hoc Committee also believed that the proposed Site Visitor Manual on Alternative Site Visit Methods (Appendix 6) and Program Manual on Alternative Site Visit Methods (Appendix 7) should be considered for adoption by the Commission and circulation to programs and site visitors. Additionally, the Ad Hoc Committee believed that each program preparing for a site visit that will occur via alternative methods should be required to sign the proposed Alternative Site Visit Program Agreement presented in Appendix 8. The Committee further believed that CODA should direct staff to develop educational webinars, either synchronous or asynchronous, to inform all affected individuals and programs of the Commission’s expectations related to alternative site visit methods. Finally, the Ad Hoc Committee also believed that the Commission should study the use of alternative site visit methods in the future and identify whether any changes in processes or procedures for the conduct of site visits using alternative methods could be implemented long-term.

**Ad Hoc Committee on Alternative Site Visit Methods Recommendations:** It is recommended that the Commission on Dental Accreditation adopt the proposed Policy on Temporary Use of Alternative Site Visit Methods (Appendix 5), with immediate implementation.
It is further recommended that the Commission on Dental Accreditation adopt the proposed Site Visitor Manual on Alternative Site Visit Methods (*Appendix 6*), with immediate implementation.

It is further recommended that the Commission on Dental Accreditation adopt the proposed Program Manual on Alternative Site Visit Methods (*Appendix 7*), with immediate implementation.

It is further recommended that the Commission on Dental Accreditation adopt the proposed Alternative Site Visit Program Agreement (*Appendix 8*), with immediate implementation.

It is further recommended that the Commission on Dental Accreditation direct staff to develop educational webinars, either synchronous or asynchronous, to inform all affected individuals and programs of the Commission’s expectations related to alternative site visit methods.

It is further recommended that the Commission on Dental Accreditation conduct a future study of alternative site visit methods to identify whether any changes in processes or procedures for the conduct of site visits using alternative methods could be implemented long-term.

**Commission Action:**

Prepared by: Dr. Sherin Tooks
USDE REGULATIONS AND TEMPORARY FLEXIBILITY RELATED TO SITE VISITS

Current USDE Criteria for Recognition of Accrediting Agencies

602.15 – Administrative and fiscal responsibilities
The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that—

(b) The agency maintains complete and accurate records of—
   (1) Its last full accreditation or preaccreditation review of each institution or program, including on-site evaluation team reports, the institution's or program's responses to onsite reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and
   (2) All decision letters issued by the agency regarding the accreditation and preaccreditation of any institution or program and any substantive changes.

602.17 Application of standards in reaching an accrediting decision
The agency must have effective mechanisms for evaluating an institution’s or program’s compliance with the agency’s standards before reaching a decision to accredit or preaccredit the institution or program. The agency meets this requirement if the agency demonstrates that it--

(b) Requires the institution or program to engage in a self-study process that assesses the institution's or program's education quality and success in meeting its mission and objectives, highlights opportunities for improvement, and includes a plan for making those improvements;

(c) Conducts at least one on-site review of the institution or program during which it obtains sufficient information to determine if the institution or program complies with the agency's standards;

(d) Allows the institution or program the opportunity to respond in writing to the report of the on-site review;

(e) Conducts its own analysis of the self-study and supporting documentation furnished by the institution or program, the report of the on-site review, the institution's or program's response to the report, and any other information substantiated by the agency from other sources to determine whether the institution or program complies with the agency's standards;
USDE Temporary Flexibility Related to Site Visits (Excerpts from USDE Letter 3.17.2020)

Letter is attached as Tab 2.1b

- The Department has determined that it is reasonable and prudent to permit on a temporary basis – but not require – accrediting agencies to perform virtual site visits during this period (even if their existing procedures do not provide for virtual visits).

- The agency board (or other decision-making body) should approve any change to policies governing virtual visits (or increased use of virtual visits) using the abbreviated process described at the end of this letter.

- If agencies implement virtual visits, they should follow-up with in-person visits to meet the statutory and regulatory requirements to perform regular on-site inspections.

- Virtual site visits should rely on an engaged, interactive format (e.g., telephonic meetings, video conference calls, and the like), rather than solely document reviews or exchanges of emails.

- If an accreditor employs a virtual site visit, the agency must perform a follow-up, in-person visit to the campus (though not necessarily a full peer-review site visit) within a reasonable period of time following the virtual site visit.

- At its discretion, an accrediting agency may limit virtual site visits to institutions or programs that are otherwise in good standing or to institutions or programs that are engaged in renewal of accreditation, as opposed to those institutions or programs seeking an initial award of accreditation.

- It is the responsibility of the accreditation agency to determine if, and under what conditions, it would perform virtual site visits during this temporary flexibility period.

- Moreover, during this period of COVID-19 interruption, the Department is permitting accreditors the flexibility to develop, adopt, modify, and implement temporary virtual site visit policies.

- With the approval of the agency’s board (or other decision-making body) during a telephonic or video conference meeting, accreditors may adopt or modify temporary virtual site visit policies without a public comment period. Because these policies would be temporary and arise from the unique set of circumstances and challenges presented by the COVID-19 interruption, this approval would not require a vote of the full membership of the accrediting agency. Should an agency desire to make a temporary
virtual site visit policy or policy modification permanent after the period of COVID-19 interruption, it must adhere to applicable statutory and regulatory requirements.

- The Department is also offering accrediting agencies the discretion to extend the term of accreditation, for a reasonable period of time during the COVID-19 interruption, for an institution that is undergoing renewal of accreditation and was scheduled to have a site visit during a COVID-19 interruption.

- The Department expects each agency to resume normal practices as soon as reasonably possible after the COVID-19 interruption has ended and will inform agencies of its expectations as the circumstances created by COVID-19 unfold.

- Finally, the Department is aware that, in some instances, an accrediting agency may have scheduled a site visit of a program or institution such that the results of that site visit would inform an agency accreditation decision in time to ensure that students who graduate during the current or prior term will be considered to have graduated from an accredited program. The Department is reminding accrediting agencies that retroactive accreditation is permissible as long as the effective date of accreditation is no earlier than the date on which the institution or program accepted the program or agency as an applicant on the pathway to accreditation, or the date of a previous negative decision regarding an initial award of accreditation. If an agency typically has a retroactive accreditation policy that establishes the effective date as the date of a site visit to the program or institution and that site visit has now been cancelled as a result of COVID-19, the effective date of the final decision could still be assigned based on the date of the scheduled site visit or an earlier date, but no earlier than the date on which the institution or program was accepted as an applicant on the pathway toward accreditation.

- To allow the flexibility that the current COVID-19 situation requires, the Department is waiving the normal process by which accrediting agencies are required to develop, seek public comment, and enact new policies for the limited purpose of allowing agencies to implement the changes described above (and in the earlier distance education communication), so long as the policy changes are approved by the agency’s board (or other decision-making body). The agency may obtain this approval at a telephonic or videoconference meeting of the board; this approval would not require a public comment period or a vote of the full membership during this period of temporary flexibility. Should an agency desire to make a policy or policy modification permanent after the period of COVID-19 interruption, it must adhere to applicable statutory and regulatory requirements.

- Agencies should record in writing and publish on their websites a decision to use the temporary flexibilities explained in this electronic announcement and include in its records the name of the school, a description of the waiver or extension, an explanation
of the basis for granting the waiver or extension, the date on which the agency granted
the waiver or extension, and a description of the suspended activity resulting from the
waiver or extension. Agencies should also record in writing the vote of its board (or other
decision-making body) when establishing a new or revised policy in response to
circumstances created by COVID-19.
RE: Information for Accrediting Agencies Regarding Temporary Flexibilities Provided to Coronavirus Impacted Institutions or Accrediting Agencies

The U.S. Department of Education (Department) has received inquiries from institutions of higher education and accrediting agencies regarding regulatory flexibilities that may be necessary in response to COVID-19 interruptions. Because of the highly unusual circumstances and challenges presented to the postsecondary education community by COVID-19, the Department provides the following guidance to accreditors, who should view this additional flexibility as a unique and temporary departure from the Department’s accreditation agency requirements.

In earlier COVID-19 information provided by the Department, we extended temporary flexibility to institutions to implement distance learning solutions to continue educating students in the event of campus interruptions or the unexpected return of students from travel abroad experiences. We similarly provided flexibility to accrediting agencies to waive routine regular distance learning review requirements and approval processes to allow institutions quickly to switch to distance learning so as to enable currently enrolled students to complete the current term.

As more campuses limit travel, reduce campus operations, or restrict visitors on campus, it may become difficult for accrediting agencies to perform site visits, including because the home institutions of site visitors have limited institutional travel. As a result, the Department announces the following temporary flexibilities to accrediting agencies to help them serve institutions and students through the period of COVID-19 interruption. The Department has determined that it is reasonable and prudent to permit on a temporary basis – but not require – accrediting agencies to perform virtual site visits during this period (even if their existing procedures do not provide for virtual visits). The agency board (or other decision-making body) should approve any change to policies governing virtual visits (or increased use of virtual visits) using the abbreviated process described at the end of this letter. If agencies implement virtual visits, they should follow-up with in-person visits to meet the statutory and regulatory requirements to perform regular on-site inspections. Virtual site visits should rely on an engaged, interactive format (e.g., telephonic meetings, video conference calls, and the like), rather than solely document reviews or exchanges of emails.
If an accreditor employs a virtual site visit, the agency must perform a follow-up, in-person visit to the campus (though not necessarily a full peer-review site visit) within a reasonable period of time following the virtual site visit. At its discretion, an accrediting agency may limit virtual site visits to institutions or programs that are otherwise in good standing or to institutions or programs that are engaged in renewal of accreditation, as opposed to those institutions or programs seeking an initial award of accreditation. It is the responsibility of the accreditation agency to determine if, and under what conditions, it would perform virtual site visits during this temporary flexibility period.

Moreover, during this period of COVID-19 interruption, the Department is permitting accreditors the flexibility to develop, adopt, modify, and implement temporary virtual site visit policies. With the approval of the agency’s board (or other decision-making body) during a telephonic or video conference meeting, accreditors may adopt or modify temporary virtual site visit policies without a public comment period. Because these policies would be temporary and arise from the unique set of circumstances and challenges presented by the COVID-19 interruption, this approval would not require a vote of the full membership of the accrediting agency. Should an agency desire to make a temporary virtual site visit policy or policy modification permanent after the period of COVID-19 interruption, it must adhere to applicable statutory and regulatory requirements.

The Department is also offering accrediting agencies the discretion to extend the term of accreditation, for a reasonable period of time during the COVID-19 interruption, for an institution that is undergoing renewal of accreditation and was scheduled to have a site visit during a COVID-19 interruption. In addition, during the COVID-19 interruption, accreditors may provide a good cause extension to institutions on a show-cause order or probation if the agency is unable to perform a required site visit or hold a hearing with representatives of the institution because of the COVID-19 interruption. This includes providing an additional good cause extension to an institution or program that has otherwise already been provided with the agency’s maximum allowable good cause extensions. The Department expects each agency to resume normal practices as soon as reasonably possible after the COVID-19 interruption has ended and will inform agencies of its expectations as the circumstances created by COVID-19 unfold.

Finally, the Department is aware that, in some instances, an accrediting agency may have scheduled a site visit of a program or institution such that the results of that site visit would inform an agency accreditation decision in time to ensure that students who graduate during the current or prior term will be considered to have graduated from an accredited program. The Department is reminding accrediting agencies that retroactive accreditation is permissible as long as the effective date of accreditation is no earlier than the date on which the institution or program accepted the program or agency as an applicant on the pathway to accreditation, or the date of a previous negative decision regarding an initial award of accreditation. If an agency typically has a retroactive accreditation policy that establishes the effective date as the date of a
site visit to the program or institution and that site visit has now been cancelled as a result of COVID-19, the effective date of the final decision could still be assigned based on the date of the scheduled site visit or an earlier date, but no earlier than the date on which the institution or program was accepted as an applicant on the pathway toward accreditation.

To allow the flexibility that the current COVID-19 situation requires, the Department is waiving the normal process by which accrediting agencies are required to develop, seek public comment, and enact new policies for the limited purpose of allowing agencies to implement the changes described above (and in the earlier distance education communication), so long as the policy changes are approved by the agency’s board (or other decision-making body). The agency may obtain this approval at a telephonic or videoconference meeting of the board; this approval would not require a public comment period or a vote of the full membership during this period of temporary flexibility. Should an agency desire to make a policy or policy modification permanent after the period of COVID-19 interruption, it must adhere to applicable statutory and regulatory requirements.

Agencies should record in writing and publish on their websites a decision to use the temporary flexibilities explained in this electronic announcement and include in its records the name of the school, a description of the waiver or extension, an explanation of the basis for granting the waiver or extension, the date on which the agency granted the waiver or extension, and a description of the suspended activity resulting from the waiver or extension. Agencies should also record in writing the vote of its board (or other decision-making body) when establishing a new or revised policy in response to circumstances created by COVID-19.

If you have any questions or concerns about the information provided in this electronic announcement, please contact the Department at COVID-19@ed.gov. Also, please visit our COVID-19 website (www.ed.gov/coronavirus) to monitor updates posted by the Department and to find links to information provided by other relevant Federal agencies, such as the Centers for Disease Control.

Thank you for continuing your work to ensure that students receive a quality education, including during this time when innovative solutions may be deployed by institutions rapidly to continue providing educational opportunities to their students.
CODA POLICIES AND PROCEDURES REGARDING SITE VISIT PROCESS

EVALUATION AND OPERATIONAL POLICIES AND PROCEDURES

TABLE OF CONTENTS


III. GENERAL COMMISSION POLICIES AND PROCEDURES .................................................. 31
   A. POLICY AND PROCEDURE FOR DEVELOPMENT AND REVISION OF
      ACCREDITATION STANDARDS ............................................................................. 31
      1. Frequency Of Citing ......................................................................................... 32
   B. POLICY ON ASSESSING THE VALIDITY AND RELIABILITY OF THE
      ACCREDITATION STANDARDS ........................................................................... 32
   C. PROCEDURES FOR HEARING ON STANDARDS ................................................... 34
   D. CONFLICT OF INTEREST POLICY .................................................................... 35
      1. Visiting Committee Members ........................................................................... 35
      2. Commissioners, Review Committee Members And Members Of The Appeal Board ...... 36
      3. Commission Staff Members ........................................................................... 38
   E. CONFIDENTIALITY POLICY .................................................................................. 38
      1. Reminder Of Confidentiality ............................................................................. 40
      2. The Agreement Of Confidentiality .................................................................... 41
   F. POLICY ON PUBLIC DISCLOSURE .................................................................... 41
   G. POLICY ON SIMULTANEOUS SERVICE .............................................................. 42
   H. NON-DISCRIMINATION POLICY ...................................................................... 42
   I. POLICY ON PROFESSIONAL CONDUCT AND PROHIBITION AGAINST
      HARASSMENT .................................................................................................... 43
   J. PROGRAM FEE POLICY ...................................................................................... 45
   K. POLICY ON CODA ADMINISTRATIVE FUND ..................................................... 46
   L. GUIDELINES FOR MANAGING PROGRAM FILES .............................................. 47

IV. POLICIES AND PROCEDURES RELATED TO ACCREDITATION OF PROGRAMS ........ 48
   A. ACCREDITATION STATUS DEFINITIONS ............................................................ 48
      1. Programs That Are Fully Operational ............................................................... 48
      2. Programs That Are Not Fully Operational ....................................................... 48
      3. Other Accreditation Actions ........................................................................... 49
   B. APPLICATION FOR ACCREDITATION FOR FULLY OPERATIONAL PROGRAMS
      WITH ENROLLMENT AND WITHOUT ACCREDITATION ..................................... 50
      Time Limitation For Review Of Applications ....................................................... 51
   C. APPLICATION FOR INITIAL ACCREDITATION FOR DEVELOPING PROGRAMS .... 51
      Time Limitation For Review Of Applications ....................................................... 52
      1. Enrollment Of Students In A Developing Program Prior To Granting Of Initial
         Accreditation .................................................................................................... 52
      2. Time Limitation For Initial Accreditation ......................................................... 53
   D. CRITERIA FOR GRANTING ACCREDITATION ...................................................... 53
E. POLICIES AND PROCEDURES FOR ACCREDITATION OF PROGRAMS IN A NEW 
DENTAL EDUCATION AREA OR DISCIPLINE .................................................. 54
F. SELF-STUDY GENERAL INFORMATION ..................................................... 56
G. PRE-VISIT GENERAL INFORMATION ......................................................... 57
H. POLICY ON THIRD PARTY COMMENTS .................................................. 57
I. SITE VISITS .................................................................................................. 59
  1. Overview And Accreditation Cycle ............................................................. 59
  2. Coordinated Site Visits ............................................................................. 59
  3. Institutional Review Process – Reminder Statement ................................... 60
  4. Policy On Cooperative Site Visits With Other Accreditors ......................... 60
  5. Policy On Special Site Visits .................................................................... 61
  6. Invoicing Process for Special Focused Site Visits ..................................... 62
J. SITE VISITORS .............................................................................................. 62
  1. Appointments ............................................................................................ 63
  2. Criteria For Nomination Of Site Visitors .................................................. 64
     A. Predoctoral Dental Education ................................................................. 64
     B. Advanced Dental Education ................................................................. 65
     C. Allied Dental Education in Dental Hygiene ............................................ 66
     D. Allied Dental Education in Dental Assisting .......................................... 66
     E. Allied Dental Education in Dental Laboratory Technology .................... 66
     F. Allied Dental Education in Dental Therapy ............................................ 66
  3. Policy Statement On Site Visitor Training ............................................... 67
  4. Job Descriptions For Predoctoral Dental Education Visiting Committee Members .......................................................... 67
     A. Chair.................................................................................................. 67
     B. Financial Site Visitor .......................................................................... 68
     C. Curriculum Site Visitor ..................................................................... 69
     D. Basic Science Site Visitor .................................................................. 69
     E. Clinical Sciences Site Visitor .............................................................. 69
     F. National Licensure (Practitioner) Site Visitor ....................................... 69
  5. Job Description For Advanced Dental Education Site Visitors ................. 70
  6. Job Description For Allied Dental Education Site Visitors ...................... 70
  7. Role Of Observers On A Site Visit ............................................................ 72
K. POLICY ON SILENT OBSERVERS ON SITE VISITS ............................ 72
L. POLICY ON STATE BOARD PARTICIPATION DURING SITE VISITS .... 73
M. SITE VISIT PROCEDURES .......................................................................... 74
  1. Duration Of Site Visits ............................................................................ 75
  2. Final Conferences .................................................................................... 75
  3. Rescheduling Dates Of Site Visits ............................................................. 76
  4. Enrollment Requirement For Site Visits For Fully Developed Programs .......... 76
  5. Post-Site Visit Evaluation ....................................................................... 76
N. SITE VISIT REPORTS .................................................................................. 76
  1. Preliminary Site Visit Report ..................................................................... 76
  2. Policy On Institutional Review Of Site Visit Reports ................................ 76
  3. Deadlines For Submission Of Supplemental Information ......................... 77
  4. Final Site Visit Report ............................................................................. 77
5. Policy On Distribution Of Site Visit Reports .......................................................... 78
6. Policy On Reports For Co-Sponsored Programs ................................................... 78

V. OTHER POLICIES AND PROCEDURES RELATED TO ACCREDITATION ................. 79
A. INFORMATION ON THE COMMISSION’S WEBSITE ................................................. 79
B. PROGRESS REPORTS .............................................................................................. 80
C. REPORTING PROGRAM CHANGES IN ACCREDITED PROGRAMS ....................... 80
D. REQUESTS FOR TRANSFER OF SPONSORSHIP OF ACCREDITED PROGRAMS ...... 84
E. POLICY ON PREPARATION AND SUBMISSION OF DOCUMENTS TO THE
   COMMISSION ............................................................................................................. 85
F. POLICY ON MISSED DEADLINES ............................................................................ 86
G. POLICY ON PROGRAMS DECLINING A RE-EVALUATION VISIT ......................... 86
H. POLICY ON FAILURE TO COMPLY WITH COMMISSION REQUESTS FOR SURVEY
   INFORMATION ......................................................................................................... 86
I. REFERRAL OF POLICY MATTERS TO APPROPRIATE COMMITTEES ...................... 87
J. POLICY ON NON-ENROLLMENT OF FIRST YEAR STUDENTS/RESIDENTS .......... 87
K. POLICY ON INTERRUPTION OF EDUCATION ......................................................... 87
L. POLICY ON ENROLLMENT INCREASES IN ADVANCED DENTAL EDUCATION
   PROGRAMS .................................................................................................................. 87
M. GUIDELINES FOR REQUESTING AN INCREASE IN ENROLLMENT IN A
   PREDOCTORAL DENTAL EDUCATION PROGRAM .................................................. 88
N. VOLUNTARY DISCONTINUANCE OF ACCREDITATION ......................................... 89
O. POLICY ON DISCONTINUANCE OR CLOSURE OF EDUCATIONAL PROGRAMS
   ACCREDITED BY THE COMMISSION AND TEACH-OUT PLANS ................................. 90
P. POLICY ON ADVERTISING ......................................................................................... 91
Q. POLICY STATEMENT ON PRINCIPLES OF ETHICS IN PROGRAMMATIC
   ADVERTISING AND STUDENT RECRUITMENT ...................................................... 91
R. STAFF CONSULTING SERVICES .............................................................................. 93
S. POLICY STATEMENT ON REPORTING AND APPROVAL OF SITES WHERE
   EDUCATIONAL ACTIVITY OCCURS ........................................................................ 93
T. POLICY ON DISTANCE EDUCATION ..................................................................... 97
   1. Student Identity Verification Requirement For Programs That Have Distance Education
      Sites ............................................................................................................................ 97
U. POLICY ON INSTITUTIONS OFFERING BOTH ACCREDITED AND NON-
   ACCREDITED PROGRAMS ....................................................................................... 98
V. POLICY ON COMBINED CERTIFICATE AND DEGREE PROGRAMS IN ADVANCED
   DENTAL EDUCATION ............................................................................................... 98
W. QUALIFICATIONS OF A PROGRAM DIRECTOR FOR A COMBINED ADVANCED
   DENTAL EDUCATION PROGRAM ............................................................................. 98
X. POLICY ON REGARD FOR DECISIONS OF STATES AND OTHER ACCREDITING
   AGENCIES ................................................................................................................ 99
Y. COMMENTS ON POLICY PROPOSED AND/OR ADOPTED BY PARTICIPATING
   ORGANIZATIONS ...................................................................................................... 100
Z. POLICY ON RESIDENT DUTY HOURS RESTRICTIONS ......................................... 100
AA. POLICY ON CUSTOMIZED SURVEY DATA REQUESTS ....................................... 100
BB. POLICY ON REQUESTS FOR CONTACT DISTRIBUTION LISTS ............................. 101
CC. POLICY ON REPRINTS ......................................................................................... 101
VI. COMPLAINTS .............................................................................................................. 103
   A. DEFINITION ............................................................................................................. 103
   B. PROGRAM REQUIREMENTS AND PROCEDURES ................................................. 103
   C. COMMISSION LOG OF COMPLAINTS ...................................................................... 103
   D. POLICY AND PROCEDURE REGARDING INVESTIGATION OF COMPLAINTS
      AGAINST EDUCATIONAL PROGRAMS ..................................................................... 104
         Formal Complaints ................................................................................................. 104
         1. Investigative Procedures for Formal Complaints ............................................... 105
         2. Formal Complaints ............................................................................................. 106
         Anonymous Complaints .......................................................................................... 107
   E. POLICY AND PROCEDURES ON COMPLAINTS DIRECTED AT THE
      COMMISSION ON DENTAL ACCREDITATION ......................................................... 108

VII. DUE PROCESS ............................................................................................................ 109
   A. DUE PROCESS RELATED TO SITE VISIT REPORTS ............................................... 109
   B. DUE PROCESS RELATED TO PROGRESS REPORTS ............................................... 110
   C. DUE PROCESS RELATED TO REVIEW COMMITTEE SPECIAL APPEARANCES ...... 110
   D. DUE PROCESS RELATED TO APPEAL OF ACCREDITATION STATUS DECISIONS 111
   E. DUE PROCESS RELATED TO DENIAL OF INITIAL ACCREDITATION ..................... 112
   F. DUE PROCESS RELATED TO WITHDRAWAL OF ACCREDITATION ....................... 113
   G. FUNCTION AND PROCEDURES OF THE APPEAL BOARD ..................................... 113
      1. Appeal Board ....................................................................................................... 113
      2. Selection Criteria For Appeal Board Members ...................................................... 114
      3. Appeal Procedures ............................................................................................... 114
      4. Mechanism For The Conduct Of The Appeal Hearing ........................................... 115

VIII. INTERNATIONAL PREDOCTORAL POLICIES AND PROCEDURES ....................... 116
   A. THE CONSULTATION PROCESS FOR PREDOCTORAL INTERNATIONAL
      PROGRAMS .................................................................................................................. 116
   B. INTERNATIONAL PREDOCTORAL DENTAL EDUCATION SITE VISITS ................ 117
   C. BROAD ELIGIBILITY CRITERIA FOR PRELIMINARY ACCREDITATION
      CONSULTATION VISIT (PACV) ................................................................................ 119
   D. POLICY ON PLANNING AND IMPLEMENTING PRELIMINARY ACCREDITATION
      CONSULTATION VISIT (PACV) AND INTERNATIONAL ACCREDITATION SITE
      VISITS ......................................................................................................................... 120

IX. COMMISSION HISTORY AND BACKGROUND .......................................................... 121

X. NON-GOVERNMENTAL RECOGNITION OF POSTSECONDARY ACCREDITATION  ................................................................................................................................. 123

XI. RECOGNITION CHRONOLOGY - DENTISTRY ............................................................. 124
I. SITE VISITS

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

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

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

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

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

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

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

Reaffirmed: 8/19; 8/10

2. Coordinated Site Visits: If an institution offers more than one dental education program, the Commission evaluates all programs during a single site visit whenever possible and may, at the program’s/institution’s request reduce the site visit date cycle to coordinate visitation to all programs at one time. Shared faculty, shared facilities and integrated curricula, as well as the time and expense
involved in preparing for a visit, are among the reasons for coordinated evaluations.

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

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

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

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

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

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

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

The Commission requests the members of the visiting committees from other agencies sign the Commission’s Statement of Confidentiality in order to participate in interviews conducted by the Commission’s site visitors.
A reminder about the Commission’s willingness to conduct coordinated site visit is included periodically in the CODA Communicator e-newsletter. Revised: 8/14; Reaffirmed: 8/19; 8/13; 8/10, 7/07, 7/01, 10/94, 6/92; CODA: 05/92:1, 2; 12/92:5

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

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

a. Failure to document compliance: A special site visit may be directed for an accredited program when, six (6) months prior to the time period allowed to achieve compliance through progress reports (eighteen (18) months if the program is between one and two years in length or two years if the program is at least two years in length), the program has not adequately documented compliance with the accreditation standards. The special site visit will be focused on the recommendations contained in the site visit report. Recommendations for which supplemental information or documentation is submitted after the last progress report or special site visit report is reviewed by the appropriate Review Committee or the Commission and that in the Commission’s opinion requires on-site verification, shall be considered as not met for purposes of accreditation. Following the special site visit, if compliance is not demonstrated, the Commission will withdraw the program’s accreditation unless the Commission extends the period for achieving compliance for good cause.

b. Change within a program: A special site visit may be directed for an accredited program when a report of program change, review of annual survey data, or information received in other ways, indicates that changes in a program may have affected its ability to maintain compliance with the accreditation standards. The Commission may also request a special report from the involved program prior to conducting a special site visit. The Commission’s Policy on Reporting Program Changes in Accredited Programs found in Section V.C of this manual provides details.

c. Investigating complaints: A special site visit may be directed for an accredited program to investigate a complaint raising questions about the program’s compliance with the accreditation standards. The Commission’s Policy and Procedure Regarding Investigation of Complaints Against Educational Programs found in Section V.D of this manual provides details.

d. Falsifying information: A special site visit may be directed for an accredited program to investigate the possible intentional falsification of information provided to the Commission. The Commission’s policy on Integrity found in Section I.G provides details. The cost of such a special site visit is shared by the Commission and the program.

e. Sites Where Educational Activity Occurs: The Commission’s Policy Statement on Reporting and
Approval of Sites Where Educational Activity Occurs found in Section V.R provides details.

f. Other reasons: A special site visit may, on occasion, be directed for an accredited program to respond to a request to the Commission from the chief executive officer or program administrator. The Commission may also direct that a focused site visit is necessary for just cause if it determines that a program may be unable to maintain compliance with the accreditation standards.

Revised: 8/19

**Invoicing Process for Special Focused Site Visits**

In advance of the special focused site visit, the program must remit payment for the Administrative Fee ($5,000 in 2020 and 2021) plus $1,500 per site visitor/staff attending visits up to two (2) days in length. Site visits that are three (3) or more days will be billed an additional $500 per site visitor/staff for each additional day; further, if additional airfare or transportation expenses are incurred, these will be assessed to the program. Failure to submit the special focused site visit fee in advance of the visit may result in a delay of the visit and additional rescheduling cost to the program, and may impact the program’s accreditation status. See Program Fee Policy.

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

**J. SITE VISITORS**

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

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

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

All other active site visitors who independently consult with educational programs accredited by CODA or applying for accreditation must identify all consulting roles to the Commission and must file with the Commission a letter of conflict acknowledgement signed by themselves and the institution/program with whom they consulted. All conflict of interest policies as noted elsewhere in this document apply. Contact the CODA office for the appropriate conflict of interest declaration form.
Prior to a site visit, a list of site visitors and other participants is reviewed by the institution/program for conflict of interest or any other potential problem. The program/institution being site visited will be permitted to remove individuals from the list if a conflict of interest, as described in the Commission’s Conflict of Interest Policy, can be demonstrated. Information concerning the conflict of interest must be provided in writing clearly stating the specifics of the conflict.

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

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

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

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

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

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

The Commission reviews nominations received from its communities of interest, including discipline-specific sponsoring organizations and certifying boards. Individuals may also self-nominate. In addition to the mandatory subject expertise, the Commission always requests nominations of potentially under-represented ethnic groups and women, and makes every effort to achieve a pool of site visitors with broad geographic diversity to help reduce site visit travel expenses.
Site visitors are appointed/reappointed annually and required to sign the Commission’s Conflict of Interest Statement, the Agreement of Confidentiality, the Copyright Assignment, Licensure Attestation, and the ADA’s Professional Conduct Policy and Prohibition Against Harassment. Site visitors must also complete annual training and will receive periodic updates on the Commission’s policies and procedures related to the Health Insurance Portability and Accountability Act (HIPAA). The Commission office stores these forms for seven (7) years. In addition, site visitors must comply with training requirements, the ADA’s travel policy and other CODA Rules and Regulations. The Commission may remove a site visitor for failing to comply with the Commission’s policies and procedures, continued, gross or willful neglect of the duties of a site visitor, or other just cause as determined by the Commission.

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

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

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

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

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

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

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

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

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

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

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

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

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

Chair:
- Must be a current dean of a dental school or have served as dean within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission and as a previous site visitor.

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

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

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

Finance:
- Must be a current financial officer of a dental school or an individual with extensive knowledge of and experience with the business, finance and administration of a dental school.
Ad Hoc Alternative Site Visit Methods
Commission Only
Winter 2021

- Has served in the above capacity within the previous three (3) years.
- Should have accreditation experience through an affiliation with a dental education program accredited by the Commission or as a previous site visitor.

National Licensure:
- Should be a current clinical board examiner or have served in that capacity within the previous three (3) years.
- Should have an interest in the accreditation process.
  Revised: 8/18; 2/16; 8/14; 1/99; Reaffirmed: 8/19; 8/10, 7/07, 7/01; CODA: 07/05, 05/77:4

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

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

The following are criteria for selection of dental hygiene site visitors:
- a full-time or part-time appointment with a dental hygiene program accredited by the Commission on Dental Accreditation;
- a baccalaureate or higher degree;
- background in educational methodology;
- accreditation experience through an affiliation with a dental hygiene education program that has completed a site visit; and
- accreditation experience within the previous three (3) years.
  Revised: 8/18; 8/16; 8/14; Reaffirmed: 8/19; 8/10; Adopted: 7/09

D. Allied Dental Education in Dental Assisting: The following are criteria for selection of dental assisting site visitors:
- certification by the Dental Assisting National Board as a dental assistant;
- full-time or part-time appointment with a dental assisting program accredited by the Commission on Dental Accreditation;
- equivalent of three (3) years full-time dental assisting teaching experience;
- baccalaureate or higher degree;
- demonstrated knowledge of accreditation; and
- current background in educational methodology.
  Revised: 8/18; 8/16; 8/14; 2/13, 1/08, 1/98, 2/02; Reaffirmed: 8/19; 8/10, 7/08; CODA: 07/95:5
Ad Hoc Alternative Site Visit Methods
Commission Only
Winter 2021

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

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

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

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

- a full-time or part-time appointment with a predoctoral dental or allied dental education program accredited by the Commission on Dental Accreditation or an accredited (or recognized) dental therapy program;
- a baccalaureate or higher degree;
- background in educational methodology;
- accreditation experience through an affiliation with a dental therapy, allied, or predoctoral dental program that has completed a site visit;*
- accreditation experience within the previous three (3) years;*
- must either be a licensed dentist educator (general dentist) or licensed dental therapist educator; and
- the “licensed dentist educator” may be predoctoral dental educator site visitors (i.e., a general dentist educator who serves as curriculum or clinical predoctoral site visitor) or allied dental educator site visitors.

*temporarily waived for dental therapist educator position until after CODA accredits dental therapy education programs

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

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

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

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

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

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

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

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

A. Chair:
   - Will conduct a briefing session with the entire visiting committee relative to the philosophy of the Commission on the approach, purpose and methodology of the conduct of the site visit on the evening prior to the first day of the site visit;
   - Will be responsible for the continual reinforcement of the above concepts during the course of the site visit and for monitoring continually the conduct of the site visit;
   - Will brief visiting committee members as to their role as a fact-finding and reporting committee and the appropriate protocol during the course of the site visit; including what is expected of each member in terms of kinds of activities and relative to the report of findings and conclusions and recommendations, with adequate background rationale for making recommendations and enumerating strengths and weaknesses in the education program being evaluated;
   - Will lead all assigned conferences and executive sessions;
   - Will serve as liaison between the visiting committee members and the dental administration and the executive administrators of the institution;
   - Will make specific and special assignments to individual visiting committee members relative to evaluating and reporting on specific matters and sections of the site visit report, e.g. administrative organization, faculty, library facilities and resources, research program, facilities and equipment, admission process, hospital program(s), student achievement;
   - Will be responsible for ensuring that site visitors fully understand their responsibility for reporting adequately, but succinctly, in their area of expertise (finance, curriculum, basic sciences, clinical sciences and national licensure);
   - Will consult with the dental administration at regular intervals to discuss progress of the visit;
   - Will be responsible, during executive sessions with visiting committee members, for the separation of recommendations from suggestions—focusing upon the recommendations which are to be included in the site visit report which are considered to be major, critical and essential to the conduct of the education program(s); suggestions for program enhancement are to be included as part of the narrative of the report;
   - Will be responsible for the preparation of a written summary of the visiting committee’s
conclusions, findings, perceptions and observations of the program(s)’ in the form of suggestions and recommendations, as appropriate, for oral presentation during the exit interview with the Dean, and for presentation of an abbreviated summary during the exit interview with the institution’s executive administrators.

- Will assess institutional effectiveness including:
  - Assessment of the school’s mission statement;
  - Assessment and evaluation of the school’s planning, and achievement of defined goals related to education, patient care, research and service;
  - Assessment of the school’s outcomes assessment process; and
  - Evaluation of the school’s interaction with other components of higher education, health care education or health care delivery systems.

- Will assess the effectiveness of faculty and staff including:
  - Assessment of the number and distribution of faculty in meeting the school’s stated objectives;
  - Assessment of the school’s faculty development process;
  - Assessment of the school’s faculty governance;
  - Assessment of the school’s measurement of faculty performance in teaching, patient care, scholarship and service; and
  - Assessment of the school’s promotion and tenure process.

B. Financial Site Visitor: Will confer with the sponsoring institution’s chief financial officer(s) and the dental administration and its financial manager to assess the adequacy of the full spectrum of finance as it relates to the dental school including:

- Assessment of the operating budget and budgeting process;
- Assessment of all sources of revenue (state, federal, tuition and fees, practice plans, etc.);
- Evaluation of the maintenance of the facilities and learning resources to support the school’s mission and goals;
- Assessment of the school’s compliance with applicable regulations;
- Assessment of the resources for planned and/or future renovations and/or new construction; and
- Assessment of the school’s resources as they relate to its mission and goals.

C. Curriculum Site Visitor: Will examine the education program and the education support services including:

- Admissions
- Instruction
- Curriculum Management
- Behavioral Sciences
- Practice Management
- Ethics and Professionalism
- Information Management and Critical Thinking
- Student Services

D. Basic Science Site Visitor: Will work closely with curriculum site visitor to ensure consistency of evaluation and assessment. During the formal and informal evaluation of the basic sciences, the site visitor will conduct personal interviews with students, faculty and departmental Chairs and during the assessment will focus on:

- Biomedical Sciences
- Research Program
E. **Clinical Sciences Site Visitor**: Within the limitations imposed by the length of the site visit, will examine and evaluate the preclinical and clinical portions of the predoctoral dental education program and activities in terms of the details of what is occurring in these areas and assess the quality of the education and experiences provided to students to prepare them for dental practice. Will work closely with curriculum site visitor to ensure consistency of evaluation and assessment. During the formal and informal evaluation of the preclinical and clinical sciences, will conduct personal interviews with students, faculty and departmental chairs and during the assessment will focus upon:

- Clinical Sciences
- Patient Care Services
- During the formal and informal evaluation of the clinical program, will conduct personal interviews with students, faculty and departmental chairs and during the assessment will focus upon:
  - stated objectives;
  - adequacy of instruction;
  - appropriateness of subject matter;
  - intra/extra-mural experiences;
  - student clinic requirements;
  - student performance evaluation mechanisms;
  - sterilization of instruments;
  - patient care policies;
  - laboratory tests for patients;
  - patient physical examinations; and
  - clinic administration.

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

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

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

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

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

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

6. Job Description For Allied Dental Education Site Visitors:

A. Site Visit Chair

- Will function as chair/staff representative of visiting committee of site visitors evaluating the allied dental education programs in dental assisting, dental hygiene, dental therapy and dental laboratory technology;
- Will be responsible for the continual reinforcement of the Commission’s procedures to be used for the site visit and for monitoring continually the conduct of the visit;
- Will brief site visitors as to their role as a fact finding and reporting committee and the appropriate protocol during the course of the site visit; including what is expected of each site visitor in terms of kinds of activities and relative to the report of findings and conclusions and recommendations, with adequate background rationale for making recommendations and enumerating strengths and weaknesses in the education program being evaluated;
- Will chair all conferences and meetings of the allied dental visiting committee, as well as those which occur during the visiting committee’s executive sessions;
- Will be responsible for maintaining closely the site visit evaluation schedule;
- Will serve as liaison between the visiting committee and the allied dental visiting committee members;
- Will make specific and special assignments to individual visiting committee members relative to evaluating and reporting on specific matters and sections of the site visit report, e.g. administrative organization, faculty, library facilities and resources, research program facilities and equipment, admissions process, hospital program(s), student achievement;
- Will be responsible for ensuring that site visitors fully understand their responsibility for reporting adequately, but succinctly, in their area of expertise;
- Will consult with the allied dental administration at regular intervals to discuss progress of the visit;
- Will be responsible, during executive sessions with visiting committee members, for the separation of recommendations from suggestions – focusing upon the recommendations which are to be included in the site visit report which are considered major, critical and essential to the conduct of the education program(s). Suggestions for program enhancement are to be included as part of the narrative of the report; and
- Will be responsible for the preparation of a written summary of the visiting committee’s conclusions, finding, perceptions and observations of program(s) strengths, weaknesses, recommendations and suggestions for oral presentation during the exit interview with the dean, and for presentation of an abbreviated summary during the exit interview with the institution’s executive administrators.

B. Dentist: A dentist is also included, when at all possible, on site visits to dental assisting and dental hygiene programs in settings other than dental schools. An additional dentist site visitor will be added to dental school visiting committees when multiple programs are to be reviewed.
The role of the dentist team member during allied site visits includes the following responsibilities:
- Take notes during conferences;
- Conduct meeting with advisory committee, when applicable;
- Ensure confidentiality by waiting to begin the meeting until all affiliated school personnel have left the room;
- Introduce the visiting committee to the advisory committee members;
- Thank the members of the committee for meeting with the team and for their interest in and commitment to the specific allied program(s);
- Explain the purpose of the site visit;
- Discuss the Commission’s policy on confidentiality as it applies to the meeting and the entire site visit;
- Begin discussion of the following topics/questions:
  a. How often the committee meets and the purpose or goals of the committee
  b. Strengths/weaknesses of the students
  c. Specific current committee activities and future goals or anticipated activities
- Ensure that all of the questions in the Site Visit Evaluation Report form under Standard 1. Institutional Effectiveness, Community Resources are answered during the meeting;
- Assist Curriculum site visitor in review of science courses;
- Review clinical courses and clinical evaluation mechanisms;
- Review learning resources – library & audiovisual materials/equipment (It is usually most efficient for this review to be conducted by the dentist site visitor only.);
- Review documentation in the self-study prior to visit;
- Conduct preclinical, clinical, and/or laboratory observations (on/off campus) with Curriculum site visitor;
  a. Extended campus laboratory facilities
  b. Extramural clinical facilities
- Formulate recommendations and suggestions; and
- After the visit, review and critique preliminary draft of the site visit report.

Revised: 2/16; 8/14; 7/07, 7/00, 7/99; Reaffirmed: 8/19; 8/10, 7/01; Adopted: 10/94, 11/87; CODA: 05/86:10

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

Reaffirmed: 8/19; Adopted: 8/10
K. POLICY ON SILENT OBSERVERS ON SITE VISITS

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

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

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

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

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

L. POLICY ON STATE BOARD PARTICIPATION DURING SITE VISITS

It is the policy of the Commission on Dental Accreditation that the state board of dentistry is notified when an accreditation visit will be conducted in its jurisdiction. The Commission believes that state boards of dentistry have a legitimate interest in the accreditation process and, therefore, strongly urges institutions to invite a current member of the state board of dentistry to participate in Commission site visits. The Commission also encourages state boards of dentistry to accept invitations to participate in the site visit process.
If a state has a separate dental hygiene examining board, that board will be contacted when a dental hygiene program located in that state is site visited. In addition, the dental examining board for that state will be notified.

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

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

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

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

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

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

- **What You May Share:**
  - Information about the Commission’s accreditation standards, process and policies.

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

The Commission staff is available to answer any questions you may have before, during or after a site visit. 
Revised: 7/09, 1/00; Reaffirmed: 8/19, 8/10, 7/07, 7/04, 7/01, 12/82, 5/81, 12/78, 12/75; Adopted: 8/86

**M. SITE VISIT PROCEDURES**

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

The Commission recognizes that there is considerable latitude in determining procedures and methodology for site visits. Experience has shown that the conference method for conducting a site visit is widely favored and effective. Conferences are scheduled with identified administrators, faculty and students at specified times.

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

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

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

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

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

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

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

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

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

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

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

During these conferences, the committee presents the findings it will submit to the Commission. These findings address both program strengths and weaknesses. The committee also informs individuals in charge of the program(s) about the Commission’s procedures for processing and acting on the report. In keeping with the Commission’s policy on Public Disclosure and Confidentiality, these final conferences are not recorded on tape or by stenographer. Note taking, however, is permitted and encouraged.

Site visitors or any other participants are not authorized, under any circumstances, to disclose any information obtained during site visits. For more specific information, see the Commission’s Statement of Policy on Public Disclosure and Confidentiality.
3. **Rescheduling Dates Of Site Visits**: In extraordinary circumstances the Commission staff can reschedule the site visit if the program will be reviewed within the same calendar year. Commission staff can also reschedule the site visit to an earlier year to coincide with other programs at the institution. If the site visit would occur in a later year because of the rescheduling, the request must be considered and acted on by the Commission. In general, the Commission does not approve such requests, but it does review each request on a case-by-case basis. Should a site visit be changed the term of the accreditation will remain unchanged.

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

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

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

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

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

---

**D. CONFLICT OF INTEREST POLICY**

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

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

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

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

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

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

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

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

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

Note: Because of the nature of their positions, a state board representative will be a resident of the state in which a program is located and may be a graduate of the institution/program being visited. These components of the policy do not apply for state board representatives, although the program retains the right to reject an individual’s assignment for other reasons.
Ad Hoc Alternative Site Visit Methods
Commission Only
Winter 2021

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

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

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

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

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

- close professional or personal relationships or affiliation with the institution/program or key personnel in the institution/program which may create the appearance of a conflict;
- serving as an independent consultant or mock site visitor to the institution/program;
- being a graduate of the institution/program;
- being a current employee or appointee of the institution/program;
- previously applied for a position at the institution within the last five (5) years;
- being a current student at the institution/program;
- having a family member who is employed by or affiliated with the institution;
- manifesting a professional or personal interest at odds with the institution or program;
- key personnel of the institution/program having graduated from the program of the Commissioner, Review Committee member, or member of the Appeal Board;
- having served on the program’s visiting committee within the last ten (10) years; and/or
- no longer a current employee of the institution or program but having been employed there within the past ten (10) years.
To safeguard the objectivity of the Review Committees, conflict of interest determinations shall be made by the Chair of the Review Committee. If the Chair, in consultation with a public member, staff and legal counsel, determines that a Review Committee member has a conflict of interest in connection with a particular program, the Review Committee member will be instructed to not access the report either in advance of or at the time of the meeting. Further, the individual must leave the room when they have any of the above conflicts. In cases in which the existence of a conflict of interest is less obvious, it is the responsibility of any committee member who feels that a potential conflict of interest exists to absent himself/herself from the room during the discussion of the particular accreditation report.

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

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

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

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

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

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


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

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

- graduation from a program at the institution within the last five years;
- service as a site visitor, employee or appointee of the institution within the last five years; and/or
- close personal or familial relationships with key personnel in the institution/program.

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

---

**E. CONFIDENTIALITY POLICY**

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

Confidentiality applies without limitation, to the following:

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

**SITE VISIT REPORT**: The preliminary draft of a site visit report is an unofficial document and remains confidential between the Commission and the institution’s executive officers and may not, under any circumstances, be released. Members of a visiting committee who review preliminary drafts of the report must consider the report as privileged information and must not discuss it or make its contents known to anyone, under any circumstances. Oral comments made by site visit team members during the course of the site visit are not to be construed as official site visit findings unless documented within the site visit report and may not be publicized. Further, publication of site visit team members’ names and/or contact information is prohibited. Reasons for assigning any non-adverse status other than full approval remain confidential between the institution and the Commission unless the institution wishes to release them. Public release of the final draft of the site visit report that is approved by the Commission is at the sole discretion of
the institution. If there is a point of contention about a specific section of the final site visit report and the institution elects to release the pertinent section to the public, the Commission reserves the right to make the entire site visit report public.

INSTITUTION’S RESPONSE TO A SITE VISIT REPORT: Release of this information is at the sole discretion of the institution. An institution’s response must not improperly disclose any Protected Health Information; however, if any such information is included in the response, such information will not be made public.

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

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

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

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

ON-SITE INTERVIEWS AND ORAL COMMUNICATIONS: In order to carry out their duties as on-site evaluators, visiting committee members must communicate freely with administrators, faculty, staff and students and any other appropriate individuals affiliated with an education program. As part of their on-site accreditation duties, committee members are expected to share with other team members pertinent and relevant information obtained during interviews. All oral communications occurring on-site, however, are confidential. Interviews may not be recorded in either audio or video format. Note taking is permitted and encouraged. When the site visit ends, team members may communicate orally, or in writing, only with Commission staff or other team members about any on-site interview or conversation. All questions related to any aspect of the site visit including oral communications must be referred to the Commission office.
MEETING MATERIALS/DISCUSSIONS: Background reports and informational materials related to accreditation matters are regularly prepared for review by the Commission and its Review Committees. These materials and all discussions related to accreditation matters routinely remain confidential. The Commission determines when, and the manner in which, newly adopted policy and informational reports will receive public distribution.

PROTECTED HEALTH INFORMATION: Patients’ protected health information, which includes any information that could identify an individual as a patient of the facility being site visited, may not be used by the site visitors, Review Committee members, or Commissioners for any purpose other than for evaluation of the program being reviewed on behalf of the Commission. Protected Health Information may not be disclosed to anyone other than Commissioners, Commission staff, Review Committee members or site visitors reviewing the program from which the Protected Health Information was received. Individual Protected Health Information should be redacted from Commission records whenever that information is not essential to the evaluation process. If a site visitor, Review Committee member, or Commissioner believes any Protected Health Information has been inappropriately used or disclosed, he/she should contact the Commission office.

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

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

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

J. PROGRAM FEE POLICY

Programs accredited by the Commission pay an annual fee. The annual fee is doubled in the year of the program’s regular interval accreditation site visit. As there is some variation in fees for different disciplines based on actual accreditation costs, programs should contact the Commission office for specific information. Other than doubling of the annual fee during the site visit year, site visits are conducted without any additional charge to the institution and the Commission assumes all expenses incurred by its site visitors. However, accredited programs with multiple sites which must be site visited during a regular site visit and programs sponsored by the U.S. military in international locations are assessed a fee at the time of the site visit. The fee is established on a case-by-case basis, dependent upon the specific requirements to conduct the visit (e.g. additional site visitors, additional days, and additional travel time and expenses). Fees are also assessed to the program for the conduct of special focused site visits. (See Invoicing Process for Special Focused Site Visits in Policy on Special Site Visits).

International dental education programs also pay an annual fee and site visit fees (See International Dental Education Site Visits). Expenses for representatives from the state board of dentistry or from other agencies, such as a regional accrediting agency, are not assumed by the Commission. Fee structures are evaluated annually by the Commission. The Commission office should be contacted for current information on fees.
An annual administrative fee is also applied to each program. Fees may also be associated with staff consulting services (See Staff Consulting Services, and International Policies and Procedures) administrative fees related to the Commission policy on protected health information and personally identifiable information (See Policy and Procedures Related to Compliance with the Health Insurance Portability and Accountability Act).

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

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

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

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

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

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

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

The following steps apply:
1. An application for accreditation is completed by the program and submitted to the Commission on
C. APPLICATION FOR INITIAL ACCREDITATION FOR DEVELOPING PROGRAMS

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

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

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

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

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

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

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

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

F. SELF-STUDY GENERAL INFORMATION

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

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

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

The sponsoring institution is required to forward a copy of the completed self-study document to each member of the visiting committee and to the Commission office no later than sixty (60) days prior to the scheduled site visit. If the self-study document is submitted with insufficient time for site visitor review, the visit may be canceled. Further, if an opportunity to reschedule the visit within the same calendar year is not available, the Commission will be informed. Failure to submit the self-study within the expected deadline could affect the accreditation status of the program.

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

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

---

G. PRE-VISIT GENERAL INFORMATION

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

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

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

Reaffirmed: 8/19; 8/10
H. POLICY ON THIRD PARTY COMMENTS

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

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

Those programs scheduled for regular review must solicit third-party comments through appropriate notification of communities of interest and the public such as faculty, students, program administrators, dental-related organizations, patients, and consumers at least ninety (90) days prior to their site visit. The notice should indicate the deadline of sixty (60) days for receipt of third-party comments in the Commission office and should stipulate that signed or unsigned comments will be accepted, that names and/or signatures will be removed from comments prior to forwarding them to the program, and that comments must pertain only to the standards for the particular program or policies and procedures used in the Commission’s accreditation process. The announcement may include language to indicate that a copy of the appropriate accreditation standards and/or the Commission’s policy on third-party comments may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611, or by calling 1/800-621-8099, extension 4653.

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

All relevant comments will have names and/or signatures removed and will then be referred to the program at least fifty (50) days prior to the site visit for review and response. A written response from the program should be provided to the Commission office and the visiting committee fifteen (15) days prior to the site visit. Adjustments may be necessary in the site visit schedule to allow discussion of comments with proper personnel. Negative comments received after the established deadline of sixty (60) days prior to the site visit will be handled as a complaint. Any unresolved issues related to the program’s compliance with the accreditation standards will be reviewed by the visiting committee while on-site.
Programs with the status of initial accreditation, and programs seeking initial accreditation must solicit comment through appropriate notification of communities of interest and the public such as faculty, students, program administrators, dental-related organizations, patients, and consumers utilizing the procedures noted above.

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

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

C. REPORTING PROGRAM CHANGES IN ACCREDITED PROGRAMS

The Commission on Dental Accreditation recognizes that education and accreditation are dynamic, not static, processes. Ongoing review and evaluation often lead to changes in an educational program. The Commission views change as part of a healthy educational process and encourages programs to make them as part of their normal operating procedures.

At times, however, more significant changes occur in a program. Changes have a direct and significant impact on the program’s potential ability to comply with the accreditation standards. These changes tend to occur in the areas of finances, program administration, enrollment, curriculum and clinical/laboratory facilities, but may also occur in other areas. All program changes that could affect the ability of the program to comply with the Accreditation Standards must be reported to the Commission. When a change is planned, Commission staff should be consulted to determine reporting requirements. Reporting program changes in the Annual Survey does not preclude the requirement to report changes directly to the Commission. Failure to report and receive approval in advance of implementing the change, using the Guidelines for Reporting Program Change, may result in review by the Commission, a special site visit, and may jeopardize the program’s accreditation status.
Advanced dental education programs must adhere to the Policy on Enrollment Increases in Advanced Dental Education Programs. In addition, programs adding off-campus sites must adhere to the Policy on Reporting and Approval of Sites Where Educational Activity Occurs. Guidelines for Reporting and Approval of Sites where Educational Activity Occurs are available from the Commission office. Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program and Guidelines for Reporting Enrollment Increases in Advanced Dental Education Programs are available from the Commission office.

On occasion, the Commission may learn of program changes which may impact the program’s ability to comply with accreditation standards or policy. In these situations, CODA will contact the sponsoring institution and program to determine whether reporting may be necessary. Failure to report and receive approval prior to the program change may result in further review by the Commission and/or a special site visit, and may jeopardize the program’s accreditation status.

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

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

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

- Establishment of Off-Campus Sites not owned by the sponsoring institution used to meet accreditation standards or program requirements (See Guidelines on Reporting and Approval of Sites Where Educational Activity Occurs);
- Changes to Off-Campus Sites not owned by the sponsoring institution that impacts the use of the site (e.g. minor site to major site, or termination of enrollment at or discontinued use of major site);
- Transfer of sponsorship from one institution to another;
- Moving a program from one geographic site to another, including but not limited to geographic moves within the same institution;
- Program director qualifications not in compliance with the standards. In lieu of a CV, a copy of the new or acting program director’s completed BioSketch must be provided to Commission staff. Contact Commission Staff for the BioSketch template.
- Substantial increase in program enrollment as determined by preliminary review by the discipline-specific Review Committee Chair.
  - Requests for retroactive permanent increases in enrollment will not be considered. Requests for retroactive temporary increases in enrollment may be considered due to special circumstances on a case-by-case basis. Programs are reminded that resources must be maintained even when the full complement of students/residents is not enrolled in the
Ad Hoc Alternative Site Visit Methods
Commission Only
Winter 2021

program. (see Policy on Enrollment Increases In Advanced Dental Education Programs and Predoctoral programs see Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program);

- Change in the nature of the program’s financial support that could affect the ability of the program to meet the standards;
- Curriculum changes that could affect the ability of the program to meet the standards;
- Reduction in faculty or support staff time commitment that could affect the ability of the program to meet the standards;
- Change in the required length of the program;
- Reduction of program dental facilities that could affect the ability of the program to meet the standards;
- Addition of advanced standing opportunity; and/or
- Expansion of a developing dental hygiene or assisting program which will only be considered after the program has demonstrated success by graduating the first class, measured outcomes of the academic program, and received approval without reporting requirements.

The Commission recognizes that unexpected, changes may occur. If an unexpected change occurs, it must be reported no more than 30 days following the occurrence. Unexpected changes may be the result of sudden changes in institutional commitment, affiliated agreements between institutions, faculty support, or facility compromise resulting from natural disaster (See Policy/Guidelines on Interruption of Education). Failure to proactively plan for change will not be considered an unexpected change. Depending upon the timing and nature of the change, appropriate investigative procedures including a site visit may be warranted.

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

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

The Commission uses the following process when considering reports of program changes. Program administrators have the option of consulting with Commission staff at any time during this process.

1. A program administrator submits the report by June 1 or December 1.
2. Commission staff reviews the report to assess its completeness and to determine whether the change could impact the program’s potential ability to comply with the accreditation standards. If this is the case, the report is reviewed by the appropriate Review Committee for the discipline and by the
Commission.

3. Receipt of the report and accompanying documentation is acknowledged in one of the following ways:
   a. The program administrator is informed that the report will be reviewed by the appropriate Review Committee and by the Commission at their next regularly scheduled meeting. Additional information may be requested prior to this review if the change is not well-documented; or
   b. The program administrator is informed that the reported change will be reviewed during the next site visit.

4. If the report will be considered by a Review Committee and by the Commission, the report is added to the appropriate agendas. The program administrator receives notice of the results of the Commission’s review.

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

- **Approve the report of program change**: If the Review Committee or Commission does not identify any concerns regarding the program’s continued compliance with the accreditation standards, the transmittal letter should advise the institution that the change(s) have been noted and will be reviewed at the next regularly-scheduled site visit to the program.

- **Approve the report of program change and request additional information**: If the Review Committees or Commission does not identify any concerns regarding the program’s compliance with the accreditation standards, but believes follow-up reporting is required to ensure continued compliance with accreditation standards, additional information will be requested for review by the Commission. Additional information could occur through a supplemental report or a focused site visit.

- **Postpone action and continue the program’s accreditation status, but request additional information**: The transmittal letter will inform the institution that the report of program change has been considered, but that concerns regarding continued compliance with the accreditation standards have been identified. Additional specific information regarding the identified concerns will be requested for review by the Commission. The institution will be further advised that, if the additional information submitted does not satisfy the Commission regarding the identified concerns, the Commission reserves the right to request additional documentation, conduct a special focused site visit of the program, or deny the request.

- **Postpone action and continue the program’s accreditation status pending conduct of a special site visit**: If the information submitted with the initial request is insufficient to provide reasonable assurance that the accreditation standards will continue to be met, and the Commission believes that the necessary information can only be obtained on-site, a special focused site visit will be conducted.

- **Deny the request**: If the submitted information does not indicate that the program will continue to comply with the accreditation standards, the Commission will deny the request for a program change. The institution will be advised that they may re-submit the request of program change with additional information if they choose. If the program change was submitted retroactively, and non-compliance is identified, the program’s accreditation status will be changed. The transmittal letter will inform the institution that the report of program change has been considered, but an area of non-compliance with the accreditation standards has been identified. The program’s accreditation status is changed and additional specific information regarding the identified area(s) of non-compliance will be requested for review by the Commission.
D. REQUESTS FOR TRANSFER OF SPONSORSHIP OF ACCREDITED PROGRAMS

The sponsorship of an accredited program may be transferred from one educational institution to another without affecting the accreditation status of the program, provided the accreditation standards continue to be met following the transfer. A request for transfer of sponsorship will be considered by the Commission if significant aspects of the program will remain unchanged following the transfer.

Critical factors that will be weighed in review of the transfer of sponsorship request include: administration, funding sources, curriculum, faculty, facilities, and patient volume. If most of these critical factors will be unchanged, then the Commission will consider the request for transfer of sponsorship of the program. If most of these factors will be significantly altered following the change in sponsorship, then the program cannot be considered as a continuation of the same program under different sponsorship. Rather, the program to be offered by the new sponsoring institution will be considered as a new program and will be required to complete the established application process for initial accreditation appropriate to the discipline. If the program is viewed as a new program, the accreditation status of the previous program will be discontinued at an appropriate time.

Information regarding the transfer of sponsorship and its effect on the program’s compliance with the accreditation standards must be submitted prior to implementation of the transfer. Written notice of the agreement to transfer sponsorship of the program must be provided to the Commission by both institutions; the new sponsor must explicitly indicate its willingness to accept responsibility for the transferred program. The information to be submitted must include the expected date of the transfer and the anticipated enrollment in each year of the program following the transfer. In addition, documentation must be submitted to demonstrate how the program will continue to meet the accreditation standards related to administration, financial support, curriculum, faculty and facilities. Any other changes that will occur in the program as a result of the transfer of sponsorship must also be explained and documented.

Programs anticipating a possible transfer of sponsorship are strongly encouraged to consult with Commission staff prior to submitting a request. The Commission has guidelines for preparing a request for transfer of sponsorship, to assist institutions in adequately explaining and documenting such changes.

The following alternatives may be recommended by Review Committees and/or be taken by the Commission in relation to the review of requests for transfer of sponsorship.

- **Approve the transfer of sponsorship:** If the Review Committee or Commission does not identify any concerns regarding the program’s continued compliance with the accreditation standards, the transmittal letter should advise the institution that the program will be reviewed at the next regularly-scheduled site visit to the new sponsoring institution. If concerns have been identified that are not of such a nature as to require the submission of additional information immediately, the concerns may be cited in the transmittal letter; the institution will be advised that the concerns will be reviewed at the time of the next regularly-scheduled site visit.

- **Postpone action and continue the program’s accreditation status, but request additional information:**
This action may be taken only once following submission of the initial request. The transmittal letter will inform the institutions that Commission action has been postponed because concerns regarding continued compliance with the accreditation standards have been identified. Additional specific information regarding the identified concerns will be requested for review by the Commission. The institutions will be further advised that, if the additional information submitted does not satisfy the identified concerns, the Commission reserves the right to conduct a special focused site visit of the program at an appropriate time following implementation of the transfer, or to deny the request.

- **Postpone action and continue the program’s accreditation status pending conduct of a special site visit:** If the information submitted with the initial request is insufficient to provide reasonable assurance that the accreditation standards will continue to be met, and the Commission believes that the necessary information can only be obtained on-site, a special focused site visit to the new sponsoring institution will be conducted.

- **Deny the request for transfer:** If the submitted information does not indicate that the program will continue to comply with the accreditation standards, the Commission will deny the request for transfer of sponsorship. The institutions will be advised that they may re-submit the request with additional information if they choose.

Revised: 1/14, 8/10, 7/07, 7/97; Reaffirmed: 8/20; 8/15; 7/07, 7/01, 5/91, 12/82; CODA: 05/91:11

---

**S. POLICY STATEMENT ON REPORTING AND APPROVAL OF SITES WHERE EDUCATIONAL ACTIVITY OCCURS**

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

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

**Reporting Requirements:**

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

<table>
<thead>
<tr>
<th>Reporting Requirements for Off-Campus Sites</th>
<th>Major Activity Sites</th>
<th>Minor Activity Sites</th>
<th>Supplemental Activity Sites*</th>
</tr>
</thead>
</table>
### Definitions

| Students/Residents **required** to complete an experience at this site to meet a program requirements or accreditation standards, and Competency assessments or comparable summative assessments performed at the site | Students/Residents **required** to complete an experience at this or another site to meet a program requirements or accreditation standards, and No competency assessments or comparable summative assessments performed at the site. Evaluation may occur. | Student/Resident chooses whether to visit the site outside of the educational program (e.g. volunteer mission trips, health fair, etc. not used to fulfill program or accreditation requirements). |

### Program Report Requirement

| Report required by June 1 or December 1 | Report required at least 30 days prior to planned implementation of educational activity site. | No report required. |

### Acknowledgement/Approval

| Commission approval required prior to implementation of the educational activity site. Approval of the major activity sites required prior to recruiting students/residents for the site and initiating use of the site. | Commission acknowledgement of review at the program’s next site visit. | No approval required. |

### Site Visit(s) to Educational Activity Site

| Commission may direct special focused site visit to review educational activity site prior to or after approval of the site. Commission may review site at future site visits. | Commission may visit educational activity site during program’s next site visit. | No site visit required. |

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

The Commission must ensure that the necessary education as defined by the standards is available, and appropriate resources (adequate faculty and staff, availability of patient experiences, and distance learning provisions) are provided to all students/residents enrolled in an accredited program. Generally, only programs without reporting requirements will be approved to initiate educational experiences at major activity sites.
When the Commission has received notification that an institution plans to offer its accredited program at an off-campus educational activity site, the Commission may conduct a special focused site visit to each educational activity site where each student’s/resident’s educational experience is provided, based on the specifics of the program, the accreditation standards, and Commission policies and procedures, or if other cause exists for such a visit as determined by the Commission. There may be extenuating circumstances when a special review is necessary.

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

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

**Discipline-specific Exemptions:**

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

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

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

For predoctoral dental education programs, when primary program faculty travel with student(s) to a site and competency is assessed, the site may be treated as a minor site for reporting purposes.
Expansion of a developing dental hygiene program and/or current or developing dental assisting program will only be considered after the program has demonstrated success by graduating the first class, measured outcomes of the academic program, and received approval without reporting requirements.

**Fees Related to the Use of Educational Activity Sites:**
All programs accredited by the Commission pay an annual fee. Additional fees will be based on actual accreditation costs incurred during the visit to and educational activity site. The Commission office should be contacted for current information on fees.

**Commission on Dental Accreditation Consideration of Educational Activity Sites:**
The Commission uses the following process when considering reports for adding educational activity sites. Program administrators have the option of consulting with Commission staff at any time during this process.

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

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

- **Approve the addition of the educational activity site:** If the Review Committees or Commission does not identify any concerns regarding the program’s continued compliance with the accreditation standards, the transmittal letter should advise the institution that the change has been noted and will be reviewed at the next regularly-scheduled site visit to the program.
- **Approve the addition of the educational activity site and request additional information:** If the Review Committees or Commission does not identify any concerns regarding the program’s compliance with the accreditation standards, but believes follow up reporting is required to ensure continued compliance with accreditation standards, additional information will be requested for review by the Commission. Additional information could occur through a supplemental report or a focused site visit. Use of the educational site is permitted.
• **Postpone action and continue the program’s accreditation status, but request additional information:** The transmittal letter will inform the institution that the report of the addition of the educational activity site has been considered, but that concerns regarding continued compliance with the accreditation standards have been identified. Additional specific information regarding the identified concerns will be requested for review by the Commission. The institution will be further advised that, if the additional information submitted does not satisfy the Commission regarding the identified concerns, the Commission reserves the right to request additional documentation, conduct a special focused site visit of the program, or deny the request. Use of the educational activity site is not permitted until Commission approval is granted.

• **Deny the request:** If the submitted information does not indicate that the program will continue to comply with the accreditation standards, the Commission will deny the request for the addition of educational activity sites. The institutions will be advised that they may re-submit the request with additional information if they choose.

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

---

**T. POLICY ON DISTANCE EDUCATION**

The Commission’s accreditation standards have been stated, purposefully, in terms which allow flexibility, innovation and experimentation. Regardless of the method(s) used to provide instruction, the Commission expects that each accredited program will comply with the accreditation standards.

Distance education means education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

- the internet;
- one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- audio conferencing; and/or
- video cassettes, DVDs, and CD–ROMs, if the cassettes, DVDs, or CD–ROMs are used in a course in conjunction with any of the technologies listed above.

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

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

**1. Student Identity Verification Requirement For Programs That Have Distance Education Sites:** Programs that offer distance education must:

- have a processes in place through which the program establishes that the student who registers in a
distance education course or program is the same student who participates in and completes the course or program and receives the academic credit;

- verify the identity of a student who participates in class or coursework by using, at the option of the program, methods such as a secure login and pass code; proctored examinations; and/or new or other technologies and practices that are effective in verifying student identity;
- make clear in writing that processes are used that protect student privacy;
- notify students of any projected additional student charges associated with the verification of student identity at the time of registration or enrollment.

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

VI. COMPLAINTS

A. DEFINITION

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

B. PROGRAM REQUIREMENTS AND PROCEDURES

NOTICE OF OPPORTUNITY TO FILE COMPLAINTS: In accord with the U.S. Department of Education’s Criteria and Procedures for Recognition of Accrediting Agencies, the Commission requires accredited programs to notify students of an opportunity to file complaints with the Commission.

Each program accredited by the Commission on Dental Accreditation must develop and implement a procedure to inform students of the mailing address and telephone number of the Commission on Dental Accreditation. The notice, to be distributed at regular intervals, but at least annually, must include but is not necessarily limited to the following language:

The Commission on Dental Accreditation will review complaints that relate to a program’s compliance with the accreditation standards. The Commission is interested in the sustained quality and continued improvement of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

A copy of the appropriate accreditation standards and/or the Commission’s policy and procedure for submission of complaints may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611-2678 or by calling 1-800-621-8099 extension 4653.

The accredited program must retain in its files information to document compliance with this policy so that it is available for review during the Commission's on-site reviews of the program.
REQUIRED RECORD OF COMPLAINTS: The program must maintain a record of student complaints received since the Commission’s last comprehensive review of the program.

At the time of a program’s regularly scheduled on-site evaluation, visiting committees evaluate the program’s compliance with the Commission’s policy on the Required Record of Complaints. The team reviews the areas identified in the program’s record of complaints during the site visit and includes findings in the draft site visit report and note at the final conference.

Revised: 2/13, 8/02, 1/9; Reaffirmed: 8/15; 8/10, 7/09, 7/08, 7/07, 7/04, 7/01, 7/96; CODA: 01/94:6 4

C. COMMISSION LOG OF COMPLAINTS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Revised: 2/18; 8/17; 1/14, 11/11; Reaffirmed: 8/15; 8/10

2. Formal Complaints: Formal complaints (as defined above) are investigated as follows:
1. The complainant is informed in writing of the anticipated review schedule.
2. The Commission informs the chief administrative officer (CAO) of the institution sponsoring the accredited program that the Commission has received information indicating that the program’s compliance with specific required accreditation policy(ies), procedure(s) or designated standard(s) has been questioned.
3. Program officials are asked to report on the program’s compliance with the required policy(ies), procedure(s) or standard(s) in question by a specific date, usually within thirty (30) days.
   a. For standard(s)-related complaints, the Commission uses the questions contained in the appropriate sections of the self-study to provide guidance on the compliance issues to be addressed in the report and on any documentation required to demonstrate compliance. Additional guidance on how to best demonstrate compliance may also be provided to the program.
   b. For policy(ies) or procedure(s)-related complaints, the Commission provides the program with the appropriate policy or procedural statement from the Commission’s Evaluation and Operational Policies and Procedures Manual. Additional guidance on how to best demonstrate compliance will be provided to the program. The Chair of the appropriate Review Committee and/or legal counsel may assist in developing this guidance.
4. Receipt of the program’s written compliance report, including documentation, is acknowledged.
5. The appropriate Review Committee and the Commission will investigate the issue(s) raised in the complaint and review the program’s written compliance report at the next regularly scheduled meeting. In the event that waiting until the next meeting would preclude a timely review, the appropriate Review Committee(s) will review the compliance report in a telephone conference call(s). The action recommended by the Review Committee(s) will be forwarded to the Commission for mail ballot approval in this later case.
6. The Commission may act on the compliance question(s) raised by the complaint by:
   a. determining that the program continues to comply with the policy(ies), procedure(s) or standard(s) in question and that no further action is required.
   b. determining that the program may not continue to comply with the policy(ies), procedure(s) or standard(s) in question and going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
      i. If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
      ii. If by on-site review: The Commission will describe the scope and nature of the problem and
Ad Hoc Alternative Site Visit Methods
Commission Only
Winter 2021

determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a special on-site review will be conducted. If a special on-site review is required, the visit will be scheduled and conducted in accord with the Commission's usual procedures for such site visits.

c. determining that a program does not comply with the policy(ies), procedure(s) or standards(s) in question and:
   i. changing a fully-operational program’s accreditation status to “approval with reporting requirements”
   ii. going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
      • If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
      • If by on-site review: The Commission will describe the scope and nature of the problem and determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a special on-site review will be conducted. If a special on-site review is required, the visit will be scheduled and conducted in accord with the Commission's usual procedures for such site visits.

7. Within two weeks of its action on the results of its investigation, the Commission will also:
   a. notify the program of the results of the investigation.
   b. notify the complainant of the results of the investigation.
   c. record the action.

8. The compliance of programs applying for initial accreditation is assessed through a combination of written reports and on-site reviews.
   a. When the Commission receives a complaint regarding a program which has an application for initial accreditation pending, the Commission will satisfy itself about all issues of compliance addressed in the complaint as part of its process of reviewing the applicant program for initial accreditation.
   b. Complainants will be informed that the Commission does provide developing programs with a reasonable amount of time to come into full compliance with standards that are based on a certain amount of operational experience.

Revised: 8/17; 1/98; Reaffirmed: 8/15; 8/10, 7/09, 7/04; Adopted: 7/96

B. INTERNATIONAL PREDOCTORAL DENTAL EDUCATION SITE VISITS

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

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

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

Two site visitors (Commission staff and/or volunteers) selected for their expertise in the focused topic areas will make up the visiting committee that provides the focused consultation services and carries out the visit. The trip may be seven days in length, allowing ample time for the committee to adjust to any time change and to access lower airfares. The program will receive a written report summarizing the review and recommendations within sixty (60) days.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Adopted: 8/17
**REVIEW COMMITTEE FEEDBACK ON CONDUCTING VIRTUAL SITE VISITS**

Special Meetings of the all CODA Review Committees, September 2020 and Special Meeting of the Commission, October 2020

<table>
<thead>
<tr>
<th>Predoctoral Dental Review Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dental Education:</strong> The PREDOC RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The PREDOC RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements.</td>
</tr>
</tbody>
</table>

The PREDOC RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences with faculty and administration
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Interview with students selected to represent each class

The PREDOC RC believed the following components of the site visit must be conducted on-site:
- Tour of the facility, clinics, basic science areas, and educational activity sites
- Open session with students (large open session with all students)
- Follow-up interview with students selected to represent each class
- Clinic and student observations
- Introduction session with the program director
- Closing sessions with program director and administration
- Document review of sensitive and/or confidential information (i.e., those that might be subject to confidentiality, HIPAA or FERPA)

| Dental Therapy: The PREDOC RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The PREDOC RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements. |

| **Dental Therapy:** The PREDOC RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The PREDOC RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements. |
The PREDOC RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences with faculty and administration
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Interview with students selected to represent each class

The PREDOC RC believed the following components of the site visit must be conducted on-site:

- Tour of the facility, clinics, basic science areas, and educational activity sites
- Open session with students (large open session with all students)
- Follow-up interview with students selected to represent each class
- Clinic and student observations
- Introduction session with the program director
- Closing sessions with program director and administration
- Document review of sensitive and/or confidential information (i.e., those that might be subject to confidentiality, HIPAA or FERPA)

---

Dental Assisting Review Committee

**Dental Assisting:** The DA RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The DA RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements.

The DA RC believed the following components of the site visit could be conducted virtually:

- Introduction and exit session with the program director and administration
- Interviews and conferences with faculty and administration
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Interview with students
- Tour of facilities with high speed action camera technology
- Tour of learning resources center
- Conference with the Advisory Committee
The DA RC believed the following components of the site visit must be conducted on-site:
- Chairside observations
- Tour of extramural facilities

### Dental Hygiene Review Committee

**Dental Hygiene:** The DH RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The DH RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements.

The DH RC believed the following components of the site visit could be conducted virtually:
- Introduction and exit session with the program director and administration
- Interviews and conferences with faculty and administration
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Conference with the Advisory Committee

The DH RC believed the following components of the site visit must be conducted on-site:
- Tour of the facility, clinics, and educational activity sites
- Open session with students (large open session with all students)
- Clinic and student observations
- Document review of sensitive and/or confidential information (i.e., those that might be subject to confidentiality, HIPAA or FERPA)

### Dental Laboratory Technology Review Committee

**Dental Laboratory Technology:** The DLT RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted on-site. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The DLT RC also believed that the program’s regular reaccreditation status should be based upon the virtual site visit, although the status may change if issues arise during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements.

The DLT RC believed the following components of the site visit could be conducted virtually:
- Introduction and exit session with the program director and administration
- Interviews and conferences with faculty and administration
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Interview with students
- Tour of learning resources center
- Conference with the Advisory Committee

The DLT RC believed the following components of the site visit must be conducted on-site:
- Laboratory observations
- Tour of facilities
- Tour of extramural facilities

### Advanced Education in General Dentistry, General Practice Residency, Dental Anesthesiology, Oral Medicine and Orofacial Pain Review Committee

**Advanced Education in General Dentistry:** The AGDOO RC believed that, with the exception of program records, including patient records, all components of a site visit could be conducted virtually. Additionally, the AGDOO RC believed tours could be done virtually, but virtual tours may not be fully reflective of the facilities used by the programs.

The AGDOO RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences
- Facility tours

The AGDOO RC believed the following components of the site visit must be conducted on-site:
- Review of documentation, including patient records, because of HIPAA and privacy requirements

**General Practice Residency:** The AGDOO RC believed that, with the exception of program records, including patient records, all components of a site visit could be conducted virtually. Additionally, the AGDOO RC believed tours could be done virtually, but virtual tours may not be fully reflective of the facilities used by the programs.

The AGDOO RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences
- Facility tours

The AGDOO RC believed the following components of the site visit must be conducted on-site:
- Review of documentation, including patient records, because of HIPAA and privacy requirements
**Dental Anesthesiology:** The AGDOO RC believed that, with the exception of program records, including patient records, all components of a site visit could conducted virtually. Additionally, the AGDOO RC believed tours could be done virtually, but virtual tours may not be fully reflective of the facilities used by the programs.

The AGDOO RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences
- Facility tours

The AGDOO RC believed the following components of the site visit must be conducted on-site:

- Review of documentation, including patient records, because of HIPAA and privacy requirements

**Oral Medicine:** The AGDOO RC believed that, with the exception of program records, including patient records, all components of a site visit could conducted virtually. Additionally, the AGDOO RC believed tours could be done virtually, but virtual tours may not be fully reflective of the facilities used by the programs.

The AGDOO RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences
- Facility tours

The AGDOO RC believed the following components of the site visit must be conducted on-site:

- Review of documentation, including patient records, because of HIPAA and privacy requirements

**Orofacial Pain:** The AGDOO RC believed that, with the exception of program records, including patient records, all components of a site visit could conducted virtually. Additionally, the AGDOO RC believed tours could be done virtually, but virtual tours may not be fully reflective of the facilities used by the programs.

The AGDOO RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences
- Facility tours

The AGDOO RC believed the following components of the site visit must be conducted on-site:

- Review of documentation, including patient records, because of HIPAA and privacy requirements
**Dental Public Health Review Committee**

The DPH RC believed that with appropriate technology and procedures, the entire site visit could be conducted virtually, especially in light of the fact there are no clinical records to review or clinical facilities inspect. The DPH RC also believed, if necessary, video and/or photographs could be provided in lieu of on-site tour. The DPH RC also believed the on-site evaluation should occur at whatever timeframe is required to meet Department of Education requirements.

The DPH RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences
- Review of documentation that is not confidential and/or private
- Facility tours, using video and/or photographs, if appropriate

The DPH RC believed the following components of the site visit must be conducted on-site:
- Review of private and confidential files/records

**Endodontics Review Committee**

*Endodontics:* The ENDO RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements. Given the number of unknowns stemming from the ongoing pandemic, the Committee believed that site visits could be conducted almost entirely by virtual means. The ENDO RC also predicted that a largely virtual model could set a precedent for the future, although the design of an initial model may change over time.

The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information. The ENDO RC also believed that the standardization of how the technology is utilized would be important so as not to put any program at a disadvantage based on its technological capabilities. Further, security concerns such as prevention of recording of interviews must be carefully considered. The thorough preparation of site visitors in advance of a virtual site visit (e.g., reviewing documents, requesting additional information) was emphasized by the Committee through their discussion of how the self-study and the site visit are complementary, and that the site visit must remain a verification process.

The ENDO RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences with faculty, administration, and students/residents
- Review and discussion of the electronic self-study, including all interviews associated with review of Accreditation Standards
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Facility tour by video; whether pre-recorded or live
- Inspection of facilities and instrumentation
- Chart/Record reviews (i.e., those that might be subject to confidentiality, HIPAA or FERPA)

The ENDO RC believed the following components of the site visit must be conducted on-site:
- Follow-up on issues identified through virtual visit

<table>
<thead>
<tr>
<th>Oral and Maxillofacial Pathology Review Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>The OMP RC believed the Commission should conduct virtual site visits when possible and necessary during COVID-19. The OMP RC also believed that nearly all of the components of a site visit could be conducted virtually.</td>
</tr>
</tbody>
</table>

The OMP RC believed the following components of the site visit could be conducted virtually:
- Interviews with faculty and students/residents
- Review of program documentation and records as long as they are reviewed in a manner that maintains confidentiality.
- To the extent possible, facility tours and review of specimens

The OMP RC believed the following components of the site visit must be conducted on-site:
- Review of program documentation and records where confidentiality cannot be maintained
- Facility tours and review of specimens in situations where virtual review is not possible

<table>
<thead>
<tr>
<th>Oral and Maxillofacial Radiology Review Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>The OMR RC agreed that nearly all components of a site visit could be conducted virtually, with the exception of facility tours. In addition, the OMR RC determined review of documentation could be conducted virtually if compliance with HIPAA and FERPA is assured.</td>
</tr>
</tbody>
</table>

The OMR RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences
- Review of documentation and patient charts, as long as compliance with HIPAA and FERPA are maintained

The OMR RC believed the following components of the site visit must be conducted on-site:
- Facility tours
- Review of documentation and patient charts if confidential and secure review cannot be assured through virtual site visit

The Committee also discussed the type of documentation and/or method of review that may require modification for components of the site visit that may be conducted virtually. The OMR RC discussed the importance of programs providing sufficient information in the self-
study for review prior to the site visit to ensure a more efficient on-site review. Further, the OMR RC believed CODA may want to look into future enhancements of the self-study process to include annual oversight and distributed review of portions of the self-study to occur over the 7-year cycle rather than every 7 years, which could result in review of the program as needed depending on the findings.

**Oral and Maxillofacial Surgery (Residency and Fellowship) Review Committee**

**Oral and Maxillofacial Surgery:** The OMS RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information, and understood that security, logistics, and other concerns will need to be addressed by the Commission. The Committee particularly noted the need to ensure the integrity of the review process and suggested the use of program waivers or attestations to the accuracy and completeness of the virtual site visit material and activity. The OMS RC fully supported the implementation of virtual site visits and viewed it as a necessity due to the evolving and uncertain nature of the pandemic impacting travel, personal preferences of volunteer site visitors, institutional limitations, and other factors.

The OMS RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences with faculty, administration, and residents; while preferred in-person, could be conducted virtually
- Review and discussion of the electronic self-study
- Review of on-site documents, which would require conversion to an electronic format and provided to the site visit team in advance of the visit
- Facility tours may be conducted through video; whether pre-recorded or live

The OMS RC believed the following components of the site visit must be conducted on-site:
- Follow-up on issues identified through virtual site visit
- Document review of sensitive and/or confidential information (i.e., those that might be subject to confidentiality, HIPAA)
- Facility tours are preferred in person, but could be conducted virtually as noted above

**Orthodontics and Dentofacial Orthopedics (Residency and Fellowship) Review Committee**

**Orthodontics and Dentofacial Orthopedics:** The ORTHO RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education (USDE) requirements. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of information.
Following discussion, the ORTHO RC noted that special focused site visits and initial accreditation site visits, should remain in-person only. The Committee believed that regularly scheduled site visits, with some adaptation, could be completed virtually in their entirety during COVID-19. Some elements, such as patient care activities, student/resident interviews, and facilities tours, are preferred to occur in-person but may be accommodated virtually with in-person follow-up at an appropriate time.

The ORTHO RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences with faculty, administration, and students/residents, although student/resident interviews are preferred in-person
- Facility tour (recorded or live), although preferred in-person
- Review and discussion of the electronic self-study
- Review of on-site documents

The ORTHO RC believed the following components of the site visit would best be conducted on-site:
- Follow-up to questions that could not be adequately addressed virtually
- Tour of the facilities
- Patient care activities
- Student/Resident interviews

---

**Pediatric Dentistry Review Committee**

The PED RC believed all components of a site visit could be conducted virtually, as long as the technology allows for confidential sessions and document portals are secure and password protected. The PED RC also discussed the length of the visit and the fact that site visits may need to be extended to ensure sufficient time for site visit team discussions and frequent breaks to avoid “screen” fatigue. Finally, the PED RC believed the follow up on-site visit should be conducted no more than 12 months following the virtual visit.

The PED RC believed the following components of the site visit could be conducted virtually:
- Interviews and conferences
- Documentation and patient chart review as long as confidentiality is maintained
- Facility tours

The PED RC believed the following components of the site visit must be conducted on-site:
- Documentation and patient chart reviews if confidentiality cannot be maintained
- Confirmation of findings of virtual site visit

---

**Periodontics Review Committee**

**Periodontics:** The PERIO RC believed that the Commission should conduct alternative (virtual) site visits wherever possible and necessary during COVID-19, recognizing that some components of the site visit must also be conducted during the on-site evaluation that is to occur within a reasonable time in accordance with United States Department of Education
(USDE) requirements. The Committee noted that special care should be taken to ensure the confidentiality of the process and protection of personal and patient information. The PERIO RC also believed that the virtual process should include the allowance for a site visitor’s request for, and receipt of, additional information to demonstrate compliance with Accreditation Standards and CODA policies, a common occurrence during an in-person site visit.

Through discussion, the Committee believed that at least two thirds of the site visit could be conducted virtually, with follow-up and review of sensitive and/or confidential information to be completed on site. The PERIO RC also noted the value in physical inspection of clinic space, and related items, which could be part of the follow-up visit.

The PERIO RC believed that an initial accreditation visit could be even further streamlined through a virtual mechanism. While most site visits could be conducted virtually, the PERIO RC noted that the special focused site visit may need to remain in-person.

The PERIO RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences with faculty, administration, and students/residents
- Review and discussion of the electronic self-study
- Review of documents stated in self-study
- Clinic spaces, library, other appropriate facilities could be viewed by video

The PERIO RC believed the following components of the site visit must be conducted on-site:

- Document review of sensitive and/or confidential information (i.e., those that might be subject to confidentiality, HIPAA or FERPA), such as ambulatory records, hospital charts, operating room logs, program documentation and attending staff and student/resident files, periodontics program Methods of Evaluation, production reports, sedation logs, competency records, and other documentation not stated in self-study
- Follow-up tour of clinics and other related facilities

**Prosthodontics Review Committee**

The PROS RC believed that all components of a site visit could be conducted virtually with two exceptions: review of documentation that is considered private and confidential, and facility tours. Interviews could be conducted virtually, but the PROS RC noted additional time may be needed to allow for individual interviews in addition to group interviews. The PROS RC also believed as much information as possible should be provided to the site visit team in advance of the site visit to allow more time for other on-site activities. Finally, the PROS RC believed the on-site visit should be conducted no more than six (6) months after the virtual visit to ensure the findings and information gained virtually is current.

The PROS RC believed the following components of the site visit could be conducted virtually:

- Interviews and conferences
Ad Hoc Alternative Site Visit Methods
Commission Only

- Review of program documentation that is not private and/or confidential

The PROS RC believed the following components of the site visit must be conducted on-site:
  - Review of program documentation considered private and/or confidential
  - Facility tours
TECHNOLOGY IMPLICATIONS FOR VIRTUAL SITE VISITS

Commission on Dental Accreditation Technology Needs

- Zoom Accounts – Currently CODA has three (3) accounts and each staff has Skype for Business; are more accounts needed? What if the program/institution does not permit use of Zoom?
- Computer and Webcam – All staff have laptop computers with webcam; Site Visitors must have access to a computer with webcam
- Internet – CODA and Site Visitors must have access to stable internet connections to support web-streaming
- Telephones – CODA staff have softphone on computer; Site Visitors may need access to telephone systems while working on computer
- ADA Connect - ADA Connect site may need to be expanded to develop more individual folders for confidential program upload of site visit materials. May need to determine capacity of site if program materials are retained in this location for an extended period of time (uploaded three months prior to site visit and held in this site until visit ends and report is generated).
- Other?

Educational Program Technology Needs

- Computers to run multiple concurrent interviews, with video capability (webcam) to focus on each interviewee
- Webcams (if not built into laptop)
- Stable internet connection
- Video equipment (pre-recorded or live) or still photo equipment for touring facilities
  - “high speed action camera technology” (DA RC Comment)
- Ability to utilize Zoom, per CODA system, or provide an alternative
- Ability to provide access to CODA and site visitors to examine “on-site” documents
- Other?

CODA Site Visitor Technology Needs

- Computer and Webcam; ability to review materials (paper or virtual) while conducting interviews
- Ability to access Zoom or another technology without firewall concerns
- Internet – Access to stable internet connections to support web-streaming
- Telephones –Site Visitors may need access to telephone systems while working on computer
- ADA Connect – ability to access confidential program upload of site visit materials.
- Other?
PROPOSED POLICY ON TEMPORARY USE OF ALTERNATIVE SITE VISIT METHODS

CODA Policy on Temporary Use of Alternative Site Visit Methods

On March 13, 2020, a national emergency was declared due to the COVID-19 pandemic. As a result of the continued impact on travel, the Commission on Dental Accreditation (CODA) has determined temporary use of alternative site visit (i.e., virtual or hybrid site visit) methods may be necessary to fulfill the Commission’s obligation to conduct accreditation site visits to programs that are currently accredited by, or apply for accreditation by, the Commission. The term of this policy shall be in effect upon CODA approval and until the termination date of the temporary flexibility granted through the United States Department of Education.

Alternative site visit methods may be used to conduct site visits to U.S.-based dental education programs seeking accreditation (applicant programs) as well as regular reaccreditation and special focused site visits, as applicable. The conduct of a site visit using alternative methods will be based on travel, health and safety concerns and/or restrictions in the geographic location(s) that may be visited by the Commission’s staff and volunteers, or for other reasons deemed appropriate by the Commission during the pandemic (for example, institutional, local, state, or federal directives).

Alternative site visit methods may not be used for any portion of the international accreditation process, including but not limited to the CODA Preliminary Accreditation Consultation Visit (PACV) process and the CODA predoctoral dental education international accreditation process.

Alternative site visits may be entirely virtual (all site visitors remote), or hybrid (at least one (1) on-site Commission site visitor in the discipline), as determined by the Commission in consultation with the program and site visit committee, and subject to the Commission’s final decision.

- Virtual site visits will require an on-site visit by a Commission site visit team (with 1-2 team members per discipline and, as necessary, Commission staff), as dictated by the Commission. The on-site visit to the educational program will occur within a period not to exceed 18 months following the conduct of a virtual site visit unless cause exists to conduct the visit earlier, subject to CODA’s site visit schedule and ongoing health, safety, and/or travel concerns and/or restrictions. During the in-person visit, the Commission reserves the right to review the portions of the program that could not be completed virtually (e.g., facility tours, clinic observations, educational activity site tours, confidential document reviews, patient record reviews, etc.) and any areas in which concerns were raised during the virtual site visit, or other standards, policies and/or procedures that may arise during the course of the in-person site visit.
- Hybrid site visits will be structured to include all components of the site visit process, with both virtual and on-site review of the program by Commission site visitors. As such, the Commission will view the hybrid site visit as equivalent to an on-site visit, with no secondary visit required based solely upon the methodology used to conduct the site visit.
Following the virtual (followed by a later on-site visit) or hybrid site visit, the program’s next regular reaccreditation on-site visit will be scheduled seven (7) years following the date of the virtual or hybrid site visit in all disciplines except oral and maxillofacial surgery (residency and fellowship), which will be scheduled five (5) years following the date of the virtual or hybrid site visit. The Commission reserves the right to conduct an earlier visit to the program in accordance with Commission policies and procedures (e.g., special focused site visit, pre-graduation site visit).

Generally, for all alternative site visit methods, the Commission’s current policy and procedure related to the conduct of a site visit and Commission review of site visit reports, progress reports, and other due process noted in the Evaluation and Operational Policies and Procedures will apply.

The following principles apply to the temporary use of alternative site visit methods:

- The program will be issued a preliminary draft site visit report following the site visit, regardless of site visit format, in accordance with Commission policy. The preliminary draft site visit report will be provided to the Commission along with the program’s response, should one be submitted, and the Commission will make an accreditation decision based on this report.

- When Accreditation Standards are revised during the period in which the program is submitting progress reports for either the virtual, hybrid, or in-person site visit, the program will be responsible for demonstrating compliance with the new standards. Further, identification of new deficiencies during the reporting time period will not result in a modification of the specified deadline for compliance with prior deficiencies.

- In order to conduct a virtual or hybrid site visit, the program must utilize the Commission’s meeting technology (i.e., Zoom), since the Commission will serve as host for the site visit. If the program cannot comply with use of CODA’s technology, the site visit will be delayed and the program must submit a formal request for extension of accreditation using the Report of Program Change, which will be considered by the Commission at its next regular meeting.

- All virtual/hybrid site visits will be conducted using the time zone of the program being visited, documenting all time zones using CODA’s site visit schedule template.

- Audio and/or video recording of the site visit is strictly prohibited.

- The Commission will dictate the portions of a site visit that will be conducted using alternative site visit methods.
  - The following applies to the conduct of a virtual-only site visit:
    - The Commission and its site visit team will dictate the final schedule of the site visit.
    - Tours of vacant facilities may be conducted virtually. However, all clinical observations and tours that may involve access to patients, will be conducted on-site only.
    - All program information must be provided to the site visitors in aggregate form and must conform to CODA’s privacy and data security policy. Documents that include Protected Health Information (PHI), Personally
Identifiable Information (PII), FERPA or other confidential records will not be reviewed virtually.

- Student/Resident/Fellow interviews will be conducted virtually and on-site.
- All typical “on-site documentation” will be provided to the site visit committee and Commission in advance of the site visit, and must be limited to the essential documents to demonstrate a program’s compliance. The on-site documents will be uploaded to CODA’s electronic accreditation portal along with the program’s self-study. Following the site visit, the program’s “on-site documentation” will be securely destroyed and will not be retained in the program’s accreditation file, unless necessary to document a site visit finding.

The following applies to the conduct of a **hybrid site visit**:

- The Commission and its site visit team will dictate the final schedule of the site visit.
- All clinical observations and tours that may involve access to patients, will be conducted by the on-site visitor only. Tours of vacant facilities may be conducted virtually for the entire visiting committee.
- All program information must be provided to the site visitors in aggregate form and must conform to CODA’s privacy and data security policy. Documents that include Protected Health Information (PHI), Personally Identifiable Information (PII), FERPA or other confidential records will be reviewed on-site only.
- Student/Resident/Fellow interviews will be conducted virtually and on-site.
- All typical “on-site documentation” will be provided to the site visit committee and Commission in advance of the site visit, and must be limited to the essential documents to demonstrate a program’s compliance. The on-site documents will be uploaded to CODA’s electronic accreditation portal along with the program’s self-study. Following the site visit, the program’s “on-site documentation” will be securely destroyed and will not be retained in the program’s accreditation file, unless necessary to document a site visit finding.

Adopted [insert date]
Site Visitor Manual for Alternative (Virtual or Hybrid) Site Visit Methods
## Table of Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>CODA Policy on Temporary Use of Alternative Site Visit Methods</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to the Alternative (Virtual or Hybrid) Site Visit Process</td>
<td>5</td>
</tr>
<tr>
<td>Site Visitor Expectations</td>
<td>5</td>
</tr>
<tr>
<td>Site Visitor Technology Requirements</td>
<td>5</td>
</tr>
<tr>
<td>Program/Institution Technology Requirements</td>
<td>6</td>
</tr>
<tr>
<td>Conduct of Virtual Meetings</td>
<td>6</td>
</tr>
<tr>
<td>Virtual Meeting Rooms</td>
<td>6</td>
</tr>
<tr>
<td>Review of Self-Study and On-site Program Documents</td>
<td>7</td>
</tr>
<tr>
<td>Conduct of the Site Visit</td>
<td>7</td>
</tr>
<tr>
<td>Site Visit Schedule</td>
<td>7</td>
</tr>
<tr>
<td>Before the Site Visit</td>
<td>8</td>
</tr>
<tr>
<td>During the Site Visit</td>
<td>8</td>
</tr>
<tr>
<td>After the Site Visit</td>
<td>9</td>
</tr>
<tr>
<td>Commission Staff Contact List</td>
<td>10</td>
</tr>
<tr>
<td>Conducting a Program Review Using Technology</td>
<td>11</td>
</tr>
<tr>
<td>Zoom Instructions for Site Visitors</td>
<td>12</td>
</tr>
</tbody>
</table>
CODA Policy on Temporary Use of Alternative Site Visit Methods

On March 13, 2020, a national emergency was declared due to the COVID-19 pandemic. As a result of the continued impact on travel, the Commission on Dental Accreditation (CODA) has determined temporary use of alternative site visit (i.e., virtual or hybrid site visit) methods may be necessary to fulfill the Commission’s obligation to conduct accreditation site visits to programs that are currently accredited by, or apply for accreditation by, the Commission. The term of this policy shall be in effect upon CODA approval and until the termination date of the temporary flexibility granted through the United States Department of Education.

Alternative site visit methods may be used to conduct site visits to U.S.-based dental education programs seeking accreditation (applicant programs) as well as regular reaccreditation and special focused site visits, as applicable. The conduct of a site visit using alternative methods will be based on travel, health and safety concerns and/or restrictions in the geographic location(s) that may be visited by the Commission’s staff and volunteers, or for other reasons deemed appropriate by the Commission during the pandemic (for example, institutional, local, state, or federal directives).

Alternative site visit methods may not be used for any portion of the international accreditation process, including but not limited to the CODA Preliminary Accreditation Consultation Visit (PACV) process and the CODA predoctoral dental education international accreditation process.

Alternative site visits may be entirely virtual (all site visitors remote), or hybrid (at least one (1) on-site Commission site visitor in the discipline), as determined by the Commission in consultation with the program and site visit committee, and subject to the Commission’s final decision.

- Virtual site visits will require an on-site visit by a Commission site visit team (with 1-2 team members per discipline and, as necessary, Commission staff), as dictated by the Commission. The on-site visit to the educational program will occur within a period not to exceed 18 months following the conduct of a virtual site visit unless cause exists to conduct the visit earlier, subject to CODA’s site visit schedule and ongoing health, safety, and/or travel concerns and/or restrictions. During the in-person visit, the Commission reserves the right to review the portions of the program that could not be completed virtually (e.g. facility tours, clinic observations, educational activity site tours, confidential document reviews, patient record reviews, etc.) and any areas in which concerns were raised during the virtual site visit, or other standards, policies and/or procedures that may arise during the course of the in-person site visit.

- Hybrid site visits will be structured to include all components of the site visit process, with both virtual and on-site review of the program by Commission site visitors. As such, the Commission will view the hybrid site visit as equivalent to an on-site visit, with no secondary visit required based solely upon the methodology used to conduct the site visit.

- Following the virtual (followed by a later on-site visit) or hybrid site visit, the program’s next regular reaccreditation on-site visit will be scheduled seven (7) years following the date of the virtual or hybrid site visit in all disciplines except oral and maxillofacial surgery (residency and fellowship), which will be scheduled five (5) years following the date of the virtual or hybrid site visit. The Commission reserves the right to conduct an earlier visit to the program in accordance with Commission policies and procedures (e.g. special focused site visit, pre-graduation site visit).

Generally, for all alternative site visit methods, the Commission’s current policy and procedure related to the conduct of a site visit and Commission review of site visit reports, progress reports, and other due process noted in the Evaluation and Operational Policies and Procedures will apply.

The following principles apply to the temporary use of alternative site visit methods:

- The program will be issued a preliminary draft site visit report following the site visit, regardless of site visit format, in accordance with Commission policy. The preliminary draft site visit report will be provided to the Commission along with the program’s response, should one be submitted, and the Commission will make an accreditation decision based on this report.

- When Accreditation Standards are revised during the period in which the program is submitting progress reports for either the virtual, hybrid or in-person site visit, the program will be responsible for demonstrating compliance with the new standards. Further, identification of new
deficiencies during the reporting time period will not result in a modification of the specified
deadline for compliance with prior deficiencies.

- In order to conduct a virtual or hybrid site visit, the program must utilize the Commission’s
meeting technology (i.e., Zoom), since the Commission will serve as host for the site visit. If the
program cannot comply with use of CODA's technology, the site visit will be delayed and the
program must submit a formal request for extension of accreditation using the Report of Program
Change, which will be considered by the Commission at its next regular meeting.

- All virtual/hybrid site visits will be conducted using the time zone of the program being visited,
documenting all time zones using CODA’s site visit schedule template.

- Audio and/or video recording of the site visit is strictly prohibited.

- The Commission will dictate the portions of a site visit that will be conducted using alternative site
visit methods.

  o The following applies to the conduct of a **virtual-only site visit**:
    - The Commission and its site visit team will dictate the final schedule of the site
      visit.
    - Tours of vacant facilities may be conducted virtually. However, all clinical
      observations and tours that may involve access to patients, will be conducted on-
      site only.
    - All program information must be provided to the site visitors in aggregate form
      and must conform to CODA’s privacy and data security policy. Documents that
      include Protected Health Information (PHI), Personally Identifiable Information
      (PII), FERPA or other confidential records will not be reviewed virtually.
    - Student/Resident/Fellow interviews will be conducted virtually and on-site
    - All typical "on-site documentation" will be provided to the site visit committee and
      Commission in advance of the site visit, and must be limited to the essential
documents to demonstrate a program’s compliance. The on-site documents will
doctoring to CODA’s electronic accreditation portal along with the program’s
self-study. Following the site visit, the program’s “on-site documentation” will be
securely destroyed and will not be retained in the program’s accreditation file,
unless necessary to document a site visit finding.

  o The following applies to the conduct of a **hybrid site visit**:
    - The Commission and its site visit team will dictate the final schedule of the site
      visit.
    - All clinical observations and tours that may involve access to patients, will be
      conducted by the on-site visitor only. Tours of vacant facilities may be conducted
      virtually for the entire visiting committee.
    - All program information must be provided to the site visitors in aggregate form
      and must conform to CODA’s privacy and data security policy. Documents that
      include Protected Health Information (PHI), Personally Identifiable Information
      (PII), FERPA or other confidential records will be reviewed on-site only.
    - Student/Resident/Fellow interviews will be conducted virtually and on-site.
    - All typical "on-site documentation" will be provided to the site visit committee and
      Commission in advance of the site visit, and must be limited to the essential
documents to demonstrate a program’s compliance. The on-site documents will
be uploaded to CODA’s electronic accreditation portal along with the program’s
self-study. Following the site visit, the program’s “on-site documentation” will be
securely destroyed and will not be retained in the program’s accreditation file,
unless necessary to document a site visit finding.

Adopted [insert date]
INTRODUCTION TO THE ALTERNATIVE (VIRTUAL OR HYBRID) SITE VISIT PROCESS

The purpose of this manual is to provide Commission on Dental Accreditation (CODA) site visitors with guidance on the conduct of site visits using alternative site visit methods. Please carefully review the policy noted above, as well as the protocols noted below. The protocols below have been established to ensure consistency in the site visit process. All protocols must be followed, as written, unless another arrangement is made with the Commission Office.

Contact the Commission Office immediately should you have any questions or concerns.

By receiving this manual, the CODA site visitor affirms they have read the CODA Site Visitor Manual for Alternative Site Visits and agree to follow the guidelines in support of a virtual or hybrid site visit.

Site Visitor Expectations

The Commission appreciates the time and resources required to conduct an accreditation site visit. Use of alternative site visit methods will require additional dedication to ensure that the site visit process is a smooth one for both the CODA site visitor(s) and the educational program under review.

CODA site visitors are expected to dedicate their entire focus to the conduct of the accreditation site visit, regardless of the format used to conduct the visit. Therefore, a site visitor should only accept an assignment if they are able to dedicate uninterrupted time to all days of the site visit. The site visit schedule will not be modified to accommodate site visitors’ needs.

The CODA site visitor must:

- Have access to a quiet and private space to conduct the site visit. You must not be disturbed by co-workers, family, pets, or any other distractions during the site visit. Conducting CODA business in a public space is prohibited.
- Have access to secure and reliable internet throughout the site visit. You must not use public internet browsers when conducting CODA business. A personal or work, secure browser must be used.
- Have a desktop or laptop computer for use throughout the site visit.
- Have audio and camera functionality on the computer used for the site visit.
- Have the ability to utilize Zoom.
- Have the ability to dedicate time to conduct the entire visit, as scheduled.
- Represent the Commission in a professional manner:
  - Dress professionally (top and bottom)
  - Do not multi-task – no other distractions should be present
  - Silence phones and other interruptions
  - Keep focused on the conversation and engage in the discussion
  - Speak clearly and keep in mind video and voice delays

Site Visitor Technology Requirements

It is critical that a site visitor’s technology function properly throughout the site visit process. The program being site visited will host the site visit using its technology and will make CODA staff and site visitors the designated hosts and co-hosts of each session. Executive sessions for the site visit team must be set up with a different login that is only provided to CODA staff and site visitors, and the CODA staff and site visitors must be the host and co-hosts. Zoom technology is preferred. All site visitors must have the ability to utilize electronic business platforms when conducting CODA business.

The following protocols must be followed:

- The program will host all conferences using its technology; Zoom is preferred. **Confidentiality is expected, and there must be no recording of any session.**
The site visitor must use a desktop or laptop computer for conferences, which includes:
  - A camera, which must be on at all times during the site visit
  - A microphone, which must be functional at all times during the site visit
  - A speaker, which must be functional at all times during the site visit
  - Use ear buds or headphones to limit background noise and ensure privacy

The site visitor must have access to a secure internet connection using broadband wired or wireless networking (3G, 4G/LTE or 5G).

The site visitor must have a backup technology plan, equipment/device.

The site visitor must test their equipment prior to the site visit to ensure it is in working order.

Program/Institution Technology Requirements

- The program will host all conferences using its technology; Zoom is preferred. **Confidentiality is expected, and there must be no recording of any session.**
- Each individual who will meet with CODA site visitors must have audio and camera functionality on the computer used for the site visit.
- Video must be on at all times for all program representatives, including students/residents/fellows, faculty and staff. Picture placeholders or blank screens with names are not permitted. Anyone using this method will be removed from the meeting.
- If the site visit team or program encounter technology issues, CODA may use its discretion to schedule a second virtual or hybrid site visit or to delay the site visit until an in-person visit may be conducted.

Conduct of Virtual Meetings

The program will host all conferences using its technology; Zoom is preferred. The program will designate the Chair and at least one other site visitor and/or CODA staff as the host/co-host. At all times during the site visit, two or more CODA volunteers must be the co-host to ensure that a technology failure of the host does not terminate the virtual meeting.

- Ensure you are in a private meeting space without distractions.
- Become familiar with the meeting technology (see guide below)
- Video must be on at all times. Picture placeholders or blank screens with names are not permitted. Anyone using this method must be removed from the meeting.
- **DO NOT record any of the meetings. CODA prohibits the recording of meetings.**
- **DO NOT use the Chat feature. There is to be no chat during the site visit. Site visit team member discussions are to be reserved for Executive Sessions.**
- Use ear buds or headphones to limit background noise and ensure privacy
- All participants must use the videoconferencing feature. However, if internet goes down and the videoconferencing technology fails, the site visitor must immediately access the meeting using the telephone dial-in and may participate by audio only until internet is restored.
- Designate multiple co-hosts among the site visit team members for each videoconference session.
- Begin the initial meeting 15 minutes early to allow people to enter the virtual meeting and troubleshoot.
- At each session, once all attendees are present, the host/co-host must “lock” the meeting.

Virtual Meeting Rooms: There will be two (2) room types used during the site visit, as follows:

- Executive Session Room – to be used by the site visit team only, with a separate link for access.
- Meeting Room and Breakout Rooms – to be used by the site visit team and program representatives.

Both rooms will have breakout room functionality. Additionally, both rooms will have a waiting room and the site visit chair, site visit team members, and CODA staff will have to grant permission for individuals to enter.
Review of Self-Study and On-Site Program Documents

- The program is expected to upload to CODA’s E-Accreditation platform its Self-Study and any materials that would typically be reviewed on-site. It is the program’s obligation to ensure these materials adhere to CODA’s policies related to privacy and data security found at https://www.ada.org/en/coda/policies-and-guidelines/hipaa. If any member of the site visit team believes that prohibited information has been submitted, please notify the Commission staff immediately.
- CODA will provide the site visit team with the program’s Self-Study in the E-Accreditation platform. These materials will be securely deleted from the E-Accreditation platform following the site visit. The Self-Study will be retained in the program’s file, in accordance with CODA protocol.
- The program’s “on-site documentation” will be provided in a separate folder on the E-Accreditation platform. The program’s “on-site documentation” will be securely destroyed and will not be retained in the program’s accreditation file by CODA, unless necessary to document a site visit finding.
- All program and CODA site visit related materials must be securely disposed of from the site visitor’s personal device(s) immediately following the site visit, per CODA policy.

Conduct of the Site Visit**

It is important all site visitors be aware of the site visit schedule and meeting protocol in advance of the site visit. Please note site visits will occur based on the time zone of the program being visited, with notation of all time zones using CODA’s site visit schedule template.

** Also See Section on Conducting a Program Review Using Technology

Site Visit Schedule

- Programs must prepare a schedule that accounts for all time zones, to assist the site visit team. If the site visit team does not receive the appropriate schedule, contact the program through the Site Visit Chair or Commission Staff. (See Schedule Template below)
- The site visit schedule for a virtual or hybrid site visit must be consistent with the time spent for an on-site visit. Site Visits may not be shortened and may not be extended due to their virtual/hybrid format.
- There is to be no more than 15 program representatives at any interview session. Additional individuals will be difficult to manage.
- The site visit schedule must include all components noted in the site visit schedule template used for an on-site visit, with the following modifications:
  - There is to be no clinic observation when patients are present in the clinic. Real-time tours of vacant clinics and facilities are acceptable.
  - All students/residents/fellows (“students”) must be invited to the student interview session. If the total student population exceeds 20 students, separate the sessions to accommodate an equal amount of time for each year of the program with each session attended by 20 students. (For example, if there are 40 students total, 20 per class, there should be two (2) student sessions. If there are 80 students total, 40 per class, there should be four (4) sessions with two (2) sessions per class.) Student sessions for all disciplines under CODA’s purview will also occur at the second (in-person) site visit.
  - For dental school site visits, the student session will be limited to the structured meeting with class representatives. Student sessions will also occur at the second (in-person) site visit.
The Site Visit Schedule must be provided by the program using the following format:

**Day X: Day, Date**

<table>
<thead>
<tr>
<th>Subject of Conferences</th>
<th>Names and Titles of Individuals Meeting with Committee</th>
<th>Room Link</th>
<th>Pacific Time</th>
<th>Mountain Time</th>
<th>Central Time</th>
<th>Eastern Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview with Administration (CEO/CAO/Program Director)</td>
<td>First and Last Name, CEO First and Last Name, CAO First and Last Name, Program Director</td>
<td>Meeting Technology Link</td>
<td>6:00 – 6:30am</td>
<td>7:00 – 7:30am</td>
<td>8:00 – 8:30am</td>
<td>9:00 – 9:30am</td>
</tr>
</tbody>
</table>

**Before the Site Visit**
- Ensure your technology is operable and reliable, and that you will have a confidential place to conduct the site visit.
- Ensure you have access to and have reviewed the program’s Self-Study, On-Site Documentation, and the Site Visit Schedule, via the CODA E-Accreditation portal.
- Communicate with the site visit team members, as usual, noting any additional information that the program should upload to the E-Accreditation portal.
- Coordinate and prepare for the first Executive Session with the site visit team.
- Review the Site Visit Schedule. The site visit schedule for a virtual/hybrid site visit must be consistent with the time spent for an on-site visit. Site Visits may not be shortened and may not be extended due to their virtual or hybrid format.

**During the Site Visit**
- Start the Executive Session (first site visit meeting) at least 15 minutes ahead of schedule to ensure all technical difficulties are addressed.
- Prior to each interview, ask each individual to announce their name and role, just like in-person meetings. Keep the schedule handy to reference individuals who should be in attendance at each session.
- Remove any individual who is not visible or should not be in attendance during each session.
- At the start of each interview session, remind all attendees that there must be no recording of the CODA meetings.
- All site visitors must fully engage in interviews, allowing for question and answer to each standard that must be addressed. Remember there may be audio delays, so speak clearly and pause between questions. Do not speak while others are speaking.
- Ask questions as you would for an in-person visit, to help guide the process of program review given the virtual or hybrid format.
- Remember, the program may provide aggregate information that comports with CODA’s privacy and data security policy found at [https://www.ada.org/en/coda/policies-and-guidelines/hipaa](https://www.ada.org/en/coda/policies-and-guidelines/hipaa).
- All Accreditation Standards must be reviewed regardless of the format of the site visit (in-person, virtual, or hybrid), and documentation to support compliance must conform to CODA’s privacy and data security requirements.
  - There will be no review of PHI, PII, Student/Resident/Fellow Files or other confidential records using technology; these type of records may be reviewed on-site only. The
program must demonstrate compliance with all Accreditation Standards providing aggregate data when needed.

- Facility tour will be pre-recorded and may be supplemented with a “real-time / live” virtual tour during the site visit. Real-time / Live tours must be to facility spaces in which **no patients are present**.
  - For the “real-time / live” tour, the site visitors may want to have a general walk-through of the vacant facility, looking at clinical space, laboratory space, student/resident/fellow space, office space, and other areas, as applicable. The site visit team may want to ask the program to open instrument draws or demonstrate emergency equipment is in place, etc.
- In lieu of a visit to sites where educational activity occurs, the site visit team should request educational site faculty/attending staff be available for interviews. Tour of educational activity sites can occur as noted above for facility tours.

- Conduct Executive Sessions at regular intervals throughout the site visit.
- Develop a single Site Visitor Evaluation Report of findings to submit to the Commission by the site visit Chair. **The SVER must be complete and must address the program’s compliance with all Accreditation Standards, as would be expected for an in-person site visit.**
- Provide an exit session in which you provide the verbal final findings of the site visit. There is no recording of this session.
- All other protocols, policies and procedures of the Commission apply to the conduct of virtual or hybrid site visits.

**After the Site Visit**

- Regardless of the site visit format, all CODA protocols apply for the submission of the site visit team’s Site Visitor Evaluation Report and review of the Preliminary Draft Site Visit Report.
- Do not engage in any further communication with the program following the site visit.
- All program and CODA site visit related materials must be securely disposed of from the site visitor’s personal device(s) immediately following the site visit, per CODA policy.
### COMMISSION ON DENTAL ACCREDITATION

#### STAFF LIST

CODA Direct Dial: 312-440-EXT.

211 E. Chicago Avenue, Suite 1900, Chicago, IL 60611

**Dr. Sherin Tooks**, Director  
2940 tookss@ada.org  
**Ms. Marjorie Hooper**, Coordinator, CODA Operations  
4653 hooperm@ada.org  
*Office of the Director / CODA Operations / International Predoctoral*

<table>
<thead>
<tr>
<th>Managers</th>
<th>Senior Project Assistants</th>
</tr>
</thead>
</table>
| **Ms. Dawn Herman**  
hermand@ada.org  
Predoc/Dental School/Dental Therapy | **Mr. Eric Wiig**  
wiige@ada.org | 2721 2713 |
| **Ms. Peggy Soeldner**  
soeldnep@ada.org  
General Practice Residency <GPR>, Adv. Education in Gen. Dent. <AECD>, Oral Med., Dental Anesthesiology; Orofacial Pain | **Ms. Bridget Blackwood**  
blackwoodb@ada.org | 2788 4675 |
| **Ms. Kirsten Nadler**  
nadlerk@ada.org  
DPH, OMP, OM, Pedo, Pros | **Ms. Bridget Blackwood**  
blackwoodb@ada.org  
Mr. Eric Wiig  
2713 | 2672 2713 |
| **Ms. Jennifer Snow**  
snowj@ada.org  
Endo, OMS, Ortho, Perio | **Mr. Christopher Castaneda**  
castanedac@ada.org | 2714 2669 |
| VACANT (Michelle Smith)  
Dental Hygiene  
**Ms. Michelle Smith**  
smithmi@ada.org  
Dental Assisting, Dental Laboratory Technology | **Mr. Daniel Sloyan**  
sloyand@ada.org | 2695 2718 |
| **Mr. Gregg Marquardt**  
marguardtgg@ada.org  
Communication and Technology Strategies | 2705 |

**Site Visit Coordinator Predoc/Advanced**  
**Ms. Kelsey Loveless**  
lovelessk@ada.org  
2675  
**Site Visit Coordinator Allied Dental Board Contact**  
**Ms. Bernadette Molina**  
molinab@ada.org  
2668
Conducting a Program Review Using Technology

CODA’s preferred meeting platform is Zoom; however, the program will utilize the platform of its choosing. The program is expected to provide clear user instructions for their technology platform, as well as software access, and ongoing IT support to the CODA site visit team and CODA staff for duration of the site visit.

Prior to the Site Visit:

- **Download the program documents** and any other materials you intend to reference before your meeting begins. CODA’s E-Accreditation Portal and other software systems may not permit access during a video conference. Make sure you have all the materials on your computer desktop in advance of the meeting. Create a Folder called “CODA Site Visit” and place items in this folder so that they can be easily and securely destroyed immediately following the site visit. Remember, the computer used for CODA business must be encrypted, must not back-up to cloud storage, and must auto-lock following 15 minutes of inactivity.

  Consider how you want to refer to these materials during the meeting. Options include:
  
  - Shrink the size of the videoconference screen (do not “leave the meeting”) and open the downloaded documents. You can enlarge the videoconference screen at any time.
  - Print out portions of the materials which you want to consult. **Remember, these must be secured as they are confidential.**
  - Use another device to refer to the meeting materials book. For example, your laptop or I-Pad for videoconference and your desktop for the downloaded material.
  - “Extend” your desktop if you are using multiple monitors.

- **Test your internet and computer systems well in advance of the site visit.** See elsewhere for additional technology requirements.

- **Ensure the program has provided you with a quick-reference guide for using the program’s virtual meeting technology.** Ensure that you have the ability to access and test the technology prior to the site visit; enlist the program’s IT staff should assistance be needed.

During the Site Visit:

- **All videoconference meetings are confidential; recording via any method is strictly prohibited.**

- **Mute your microphone unless you are speaking.**

- **The Chat function must be disabled. No chatting will be permitted during CODA site visits.**

- **Protocols for videoconference meeting conduct are discussed elsewhere in this manual.**
Zoom Instructions for Site Visitors

(If Program will Utilize Zoom)

Training materials and documentation
Zoom offers free live and interactive training courses. If you can’t attend one of the live sessions they also offer recorded versions of the training. These sessions are typically around 60 minutes long.

If you want to watch recorded training, start by watching the 30 minute Getting Started with Zoom video. https://livetraining.zoom.us/recording/play/F_BDBIJE-nJ26x9flGaFwnvYvZw7CM2VEj6oBsXAfFvCBYCQVxI7IfL4uJ?continueMode=true

Then continue with the 60 minute Zoom Meetings Training video. https://livetraining.zoom.us/recording/play/48IlOfofCsCX-SWKxkHTv7JoPMeoGH-1uaDcY-P68pX-PU36fJT3FjiWYkBvl?continueMode=true

Zoom also has short video tutorials on a variety of topics. These videos are 1 to 2 minutes long. They are a good reminder of how to do something after you’ve experienced the regular training.

Join a Zoom Meeting
https://www.youtube.com/embed/vFhAEoCF7jg?rel=0&autoplay=1&cc_load_policy=1

Zoom Meeting Controls - Introduction
https://www.youtube.com/embed/4w_pRMBEA?rel=0&autoplay=1&cc_load_policy=1

How to Participate in a Zoom Meeting:

In your site visit schedule, click “Join Zoom Meeting:”

Join Zoom Meeting
https://zoom.us/j/833914312
Meeting ID: 833 914 312

Click “Open Zoom Meetings:”
Type your first and last name and click “Join:”

Join the audio one of three ways – By computer:

By calling the system:

Or by having the system call you:
The Zoom interface will look like this:

A. Show meeting information (meeting ID, Host, meeting URL)
B. Choose meeting view (Gallery vs Speaker view). Gallery view shows up to 49 participant’s video. Speaker view shows larger video of current speaker.
C. Microphone and Camera options (be SURE your mic is unmuted AND your computer speaker is on); the camera must also be on at all times
D. Participant’s information and options – all participants must include first and last name
E. Share content, chat and record settings (chat and record must not be used)
F. Exit meeting
Program Manual for Alternative (Virtual or Hybrid) Site Visit Methods
# Commission on Dental Accreditation
## Program Manual for Alternative (Virtual or Hybrid) Site Visit Methods

## Table of Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>CODA Policy on Temporary Use of Alternative Site Visit Methods</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to the Alternative (Virtual or Hybrid) Site Visit Process</td>
<td>5</td>
</tr>
<tr>
<td>Program/Institution Technology Requirements</td>
<td>5</td>
</tr>
<tr>
<td>Conduct of Virtual Meetings</td>
<td>6</td>
</tr>
<tr>
<td>The Self-Study and On-Site Program Documents</td>
<td>6</td>
</tr>
<tr>
<td>Conduct of the Site Visit</td>
<td>7</td>
</tr>
<tr>
<td>Site Visit Schedule</td>
<td>7</td>
</tr>
<tr>
<td>Before the Site Visit</td>
<td>8</td>
</tr>
<tr>
<td>During the Site Visit</td>
<td>8</td>
</tr>
<tr>
<td>After the Site Visit</td>
<td>8</td>
</tr>
<tr>
<td>Commission Staff Contact List</td>
<td>9</td>
</tr>
<tr>
<td>Conducting a Program Review Using Technology</td>
<td>10</td>
</tr>
<tr>
<td>Zoom Instructions for Programs</td>
<td>11</td>
</tr>
</tbody>
</table>
CODA Policy on Temporary Use of Alternative Site Visit Methods

On March 13, 2020, a national emergency was declared due to the COVID-19 pandemic. As a result of the continued impact on travel, the Commission on Dental Accreditation (CODA) has determined temporary use of alternative site visit (i.e., virtual or hybrid site visit) methods may be necessary to fulfill the Commission’s obligation to conduct accreditation site visits to programs that are currently accredited by, or apply for accreditation by, the Commission. The term of this policy shall be in effect upon CODA approval and until the termination date of the temporary flexibility granted through the United States Department of Education.

Alternative site visit methods **may be used** to conduct site visits to U.S.-based dental education programs seeking accreditation (applicant programs) as well as regular reaccreditation and special focused site visits, as applicable. The conduct of a site visit using alternative methods will be based on travel, health and safety concerns and/or restrictions in the geographic location(s) that may be visited by the Commission’s staff and volunteers, or for other reasons deemed appropriate by the Commission during the pandemic (for example, institutional, local, state, or federal directives).

Alternative site visit methods **may not be used** for any portion of the international accreditation process, including but not limited to the CODA Preliminary Accreditation Consultation Visit (PACV) process and the CODA predoctoral dental education international accreditation process.

Alternative site visits may be entirely virtual (all site visitors remote), or hybrid (at least one (1) on-site Commission site visitor in the discipline), as determined by the Commission in consultation with the program and site visit committee, and subject to the Commission’s final decision.

- **Virtual site visits** will require an on-site visit by a Commission site visit team (with 1-2 team members per discipline and, as necessary, Commission staff), as dictated by the Commission. The on-site visit to the educational program will occur within a period not to exceed 18 months following the conduct of a virtual site visit unless cause exists to conduct the visit earlier, subject to CODA’s site visit schedule and ongoing health, safety, and/or travel concerns and/or restrictions. During the in-person visit, the Commission reserves the right to review the portions of the program that could not be completed virtually (e.g., facility tours, clinic observations, educational activity site tours, confidential document reviews, patient record reviews, etc.) and any areas in which concerns were raised during the virtual site visit, or other standards, policies and/or procedures that may arise during the course of the in-person site visit.

- **Hybrid site visits** will be structured to include all components of the site visit process, with both virtual and on-site review of the program by Commission site visitors. As such, the Commission will view the hybrid site visit as equivalent to an on-site visit, with no secondary visit required based solely upon the methodology used to conduct the site visit.

- Following the virtual (followed by a later on-site visit) or hybrid site visit, the program’s next regular reaccreditation on-site visit will be scheduled seven (7) years following the date of the virtual or hybrid site visit in all disciplines except oral and maxillofacial surgery (residency and fellowship), which will be scheduled five (5) years following the date of the virtual or hybrid site visit. The Commission reserves the right to conduct an earlier visit to the program in accordance with Commission policies and procedures (e.g. special focused site visit, pre-graduation site visit).

Generally, for all alternative site visit methods, the Commission’s current policy and procedure related to the conduct of a site visit and Commission review of site visit reports, progress reports, and other due process noted in the Evaluation and Operational Policies and Procedures will apply.

The following principles apply to the temporary use of alternative site visit methods:

- The program will be issued a preliminary draft site visit report following the site visit, regardless of site visit format, in accordance with Commission policy. The preliminary draft site visit report will be provided to the Commission along with the program’s response, should one be submitted, and the Commission will make an accreditation decision based on this report.

- When Accreditation Standards are revised during the period in which the program is submitting progress reports for either the virtual, hybrid or in-person site visit, the program will be responsible for demonstrating compliance with the new standards. Further, identification of new
deficiencies during the reporting time period will not result in a modification of the specified deadline for compliance with prior deficiencies.

- In order to conduct a virtual or hybrid site visit, the program must utilize the Commission’s meeting technology (i.e., Zoom), since the Commission will serve as host for the site visit. If the program cannot comply with use of CODA’s technology, the site visit will be delayed and the program must submit a formal request for extension of accreditation using the Report of Program Change, which will be considered by the Commission at its next regular meeting.
- All virtual/hybrid site visits will be conducted using the time zone of the program being visited, documenting all time zones using CODA’s site visit schedule template.
- Audio and/or video recording of the site visit is strictly prohibited.
- The Commission will dictate the portions of a site visit that will be conducted using alternative site visit methods.
  - The following applies to the conduct of a **virtual-only site visit**:
    - The Commission and its site visit team will dictate the final schedule of the site visit.
    - Tours of vacant facilities may be conducted virtually. However, all clinical observations and tours that may involve access to patients, will be conducted on-site only.
    - All program information must be provided to the site visitors in aggregate form and must conform to CODA’s privacy and data security policy. Documents that include Protected Health Information (PHI), Personally Identifiable Information (PII), FERPA or other confidential records will not be reviewed virtually.
    - Student/Resident/Fellow interviews will be conducted virtually and on-site
    - All typical “on-site documentation” will be provided to the site visit committee and Commission in advance of the site visit, and must be limited to the essential documents to demonstrate a program’s compliance. The on-site documents will be uploaded to CODA’s electronic accreditation portal along with the program’s self-study. Following the site visit, the program’s “on-site documentation” will be securely destroyed and will not be retained in the program’s accreditation file, unless necessary to document a site visit finding.
  - The following applies to the conduct of a **hybrid site visit**:
    - The Commission and its site visit team will dictate the final schedule of the site visit.
    - All clinical observations and tours that may involve access to patients, will be conducted by the on-site visitor only. Tours of vacant facilities may be conducted virtually for the entire visiting committee.
    - All program information must be provided to the site visitors in aggregate form and must conform to CODA’s privacy and data security policy. Documents that include Protected Health Information (PHI), Personally Identifiable Information (PII), FERPA or other confidential records will be reviewed on-site only.
    - Student/Resident/Fellow interviews will be conducted virtually and on-site.
    - All typical “on-site documentation” will be provided to the site visit committee and Commission in advance of the site visit, and must be limited to the essential documents to demonstrate a program’s compliance. The on-site documents will be uploaded to CODA’s electronic accreditation portal along with the program’s self-study. Following the site visit, the program’s “on-site documentation” will be securely destroyed and will not be retained in the program’s accreditation file, unless necessary to document a site visit finding.

Adopted [insert date]
INTRODUCTION TO THE ALTERNATIVE (VIRTUAL OR HYBRID) SITE VISIT PROCESS

The purpose of this manual is to provide dental, advanced dental, and allied dental education programs that are accredited by the Commission on Dental Accreditation (CODA) and those programs seeking accreditation with guidance on the conduct of site visits using alternative site visit methods. Please carefully review the policy noted above, as well as the protocols noted below. The protocols below have been established to ensure consistency in the site visit process. All protocols must be followed, as written, unless another arrangement is made with the Commission Office.

Contact the Commission Office immediately should you have any questions or concerns.

An “Alternative Site Visit Program Agreement” must be submitted to CODA acknowledging that the dental, allied dental, or advanced dental education program has read the CODA Program Manual for Alternative Site Visits and agrees to follow the guidelines in support of a virtual or hybrid site visit. The program director, chief academic officer, and chief executive officer of the institution must sign the agreement and return it to the CODA office in advance of the site visit. Failure to return a signed Alternative Site Visit Program Agreement could delay the program’s site visit and may affect the program’s accreditation status. Electronic signature are acceptable during the COVID-19 pandemic.

Program/Institution Technology Requirements

It is critical that the program’s technology function properly throughout the site visit process. The program being site visited will host the site visit using its technology and will make CODA staff and site visitors the designated hosts and co-hosts of each session. Executive sessions for the site visit team must be set up with a different login that is only provided to CODA staff and site visitors, and the CODA staff and site visitors must be the host and co-hosts. Zoom technology is preferred. All program/institutional representatives must have the ability to utilize electronic business platforms related to the conduct of a virtual or hybrid site visit.

The Commission appreciates the time and resources required to conduct an accreditation site visit. Use of alternative site visit methods will require additional dedication to ensure that the site visit process is a smooth one for both the CODA site visitor(s) and the educational program under review.

The following are expected:

- The program will host all conferences using its technology; Zoom is preferred. Confidentiality is expected, and there must be no recording of any session.
- Prior to the site visit, provide the CODA site visitors and staff a quick-reference guide for using your program’s virtual meeting technology. Ensure that each site visitor has the ability to access and test the technology prior to the site visit; enlist your IT staff should assistance be needed.
- Each individual who will meet with CODA site visitors must have audio and camera functionality on the computer used during the site visit.
- Video must be on at all times for all program representatives, including students/residents/fellows, faculty and staff. Picture placeholders or blank screens with names are not permitted. Anyone using this method will be removed from the meeting.
- The program must have an IT personnel available at all times during the site visit to assist with troubleshooting.
- If the site visit team or program encounter technology issues, CODA may use its discretion to schedule a second virtual or hybrid site visit or to delay the site visit until an in-person visit may be conducted.
**Conduct of Virtual Meetings**
The program will host all conferences using its technology; Zoom is preferred. The program will designate the Chair and at least one other site visitor and/or CODA staff as the host/co-host. The Host/Co-Host will remove individuals who are not identified as attendees during an interview session.

The Commission requests that program personal ensure the following:
- Secure a private meeting space without distractions.
- Become familiar with the meeting technology (see guide below)
- Video must be on at all times. Picture placeholders or blank screens with names are not permitted. Anyone using this method will be removed from the meeting.
- **DO NOT record any of the meetings. CODA prohibits the recording of meetings.**
  - The program has an obligation to inform all individuals meeting with the site visit team of this requirement.
- **DO NOT use the Chat feature.** There is to be no chat during the site visit. This feature must be disabled.
- First and last names must be used to identify each program representative within the virtual meeting platform. Initials, partial names, or other identifiers will result in an individual being removed from the interview session.
- In advance of the site visit, the program must provide the site visit schedule which identifies the names of each individual attending the interview sessions.
- Use ear buds or headphones to limit background noise and ensure privacy.
- All participants must use the videoconferencing feature. However, if internet goes down and the videoconferencing technology fails, the program personnel must immediately access the meeting using a telephone dial-in and may participate by audio only until internet is restored.
- Program personnel must to arrive to the virtual meeting five (5) minutes prior to the start time. Program personnel will enter a waiting room and be admitted to the meeting at the appropriate time.
- At each session, once all attendees are present, the host/co-host will “lock” the meeting.

**The Self-Study and On-Site Program Documents**
- The program is expected to upload to CODA’s E-Accreditation platform its Self-Study and any materials that would typically be reviewed on-site. The site visit team will access the program’s materials through CODA’s E-Accreditation platform.
- All Accreditation Standards will be assessed for compliance during the virtual/hybrid site visit, along with the program’s compliance with applicable policies and procedures as is the case during an on-site evaluation. The program is responsible for demonstrating compliance while ensuring confidentiality and compliance with privacy regulations.
- **It is the program’s obligation and responsibility to ensure all submitted (uploaded) materials adhere to CODA’s policies related to privacy and data security found at [https://www.ada.org/en/coda/policies-and-guidelines/hipaa](https://www.ada.org/en/coda/policies-and-guidelines/hipaa).** Information that may be subject to FERPA or other expectations of confidentiality must not be uploaded to the CODA E-platform nor provided to the site visit team in any other manner.
- All program information, as applicable, must be submitted in aggregate form to ensure the confidentiality of information. Student/Resident/Fellow names, and all patient and individual identifiers (as noted in the policy linked above) must be removed from the submission.
- As a reminder – CODA site visit teams must not access HIPAA protected information or personally identifiable information (PII) when off-site from the program’s facility.
- The program’s “On-Site Documentation” must be provided in a separate folder on the E-Accreditation platform. The program’s “On-Site Documentation” will be securely destroyed and will not be retained in the program’s accreditation file by CODA, unless necessary to document a site visit finding.
- All program documentation must be organized and concise. The program must only submit information that is directly demonstrative of its compliance with the Accreditation Standards.
CODA will provide the site visit team with the program’s Self-Study in the E-Accreditation platform. These materials will be securely deleted from the E-Accreditation platform following the site visit. The Self-Study and related documents will be retained in the program’s file, in accordance with CODA protocol.

**Conduct of the Site Visit**

It is critical the site visit team receive the site visit schedule of conferences in advance of the site visit. Please note site visits will occur based on the time zone of the program being visited, with notation of all time zones using CODA’s site visit schedule template.

**Site Visit Schedule**

- Programs must prepare a schedule that accounts for all time zones, to assist the site visit team. (See Schedule Template below)
- The site visit schedule for a virtual/hybrid site visit must be consistent with the time spent for an on-site visit. Site Visits may not be shortened and may not be extended due to their virtual or hybrid format.
- There is to be no more than 15 program representatives at any interview session. Additional individuals will be difficult to manage. Only those individuals with direct involvement in the specific area of the program under review should attend that portion of the site visit.
- The site visit schedule must include all components noted in the site visit schedule template used for an on-site visit, with the following modifications:
  - There is to be no clinic observation when patients are present in the clinic. Real-time tours of vacant clinics and facilities are acceptable.
  - All students/residents/fellows (“students”) must be invited to the student interview session. If the total student population exceeds 20 students, separate the sessions to accommodate an equal amount of time for each year of the program with each session attended by 20 students. *(For example, if there are 40 students total, 20 per class, there should be two (2) student sessions. If there are 80 students total, 40 per class, there should be four (4) sessions with two (2) sessions per class.)* Student sessions for all disciplines under CODA’s purview will also occur at the second (in-person) site visit.
  - For dental school site visits, the student session will be limited to the structured meeting with class representatives. Student sessions will also occur at the second (in-person) site visit.

The Site Visit Schedule must be provided by the program using the following format:

**Day X: Day, Date**

<table>
<thead>
<tr>
<th>Subject of Conferences</th>
<th>Names and Titles of Individuals Meeting with Committee</th>
<th>Room Link</th>
<th>Pacific Time</th>
<th>Mountain Time</th>
<th>Central Time</th>
<th>Eastern Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview with Administration (CEO/CAO/Program Director)</td>
<td>First and Last Name, CEO First and Last Name, CAO First and Last Name, Program Director</td>
<td>Meeting Technology Link</td>
<td>6:00 – 6:30am</td>
<td>7:00 – 7:30am</td>
<td>8:00 – 8:30am</td>
<td>9:00 – 9:30am</td>
</tr>
</tbody>
</table>
Before the Site Visit

- Ensure all program representatives' technology is operable and reliable, and that they will have a confidential place to conduct the site visit.
- Upload the program’s Self-Study, On-Site Documentation, and the Site Visit Schedule, via the CODA E-Accreditation portal in accordance with CODA requirements.
- Ensure all program representatives are aware of their assigned interview times and meeting access.
- Remind all attendees that there must be no recording of the CODA meetings. Additionally, individuals must log into the virtual meeting using first and last name. Cameras must be on at all times.
- Communicate with the site visit team Chair or CODA Staff, as usual, noting any additional information that the program should upload to the E-Accreditation portal at the site visit team’s request.

During the Site Visit

- Ensure that program representatives arrive five (5) minutes ahead of schedule to each interview session.
- Maintain ongoing access to IT support to ensure all technical difficulties are addressed.
- The program may provide aggregate information that comports with CODA’s privacy and data security policy found at https://www.ada.org/en/coda/policies-and-guidelines/hipaa.
- All Accreditation Standards will be reviewed regardless of the format of the site visit (in-person, virtual, or hybrid), and documentation to support compliance must conform to CODA’s privacy and data security requirements.
  - There will be no review of PHI, PII, Student/Resident/Fellow Files or other confidential records using technology; these type of records may be reviewed on-site only. The program must demonstrate compliance with all Accreditation Standards providing aggregate data when needed.
  - Facility tour will be pre-recorded and may be supplemented with a “real-time / live” virtual tour during the site visit. Real-time / Live tours must be to facility spaces in which no patients are present.
    - For the “real-time / live” tour, the site visitors may want to have a general walk-through of the vacant facility, looking at clinical space, laboratory space, student/resident/fellow space, office space, and other areas, as applicable. The site visit team may want to ask the program to open instrument draws or demonstrate emergency equipment is in place, etc.
  - In lieu of a visit to sites where educational activity occurs, the site visit team should request educational site faculty/attending staff be available for interviews. Tour of educational activity sites can occur as noted above for facility tours.
- Answer questions and reference supporting documentary evidence to demonstrate the program’s compliance with all Accreditation Standards and applicable policies and procedures.
- Attend the exit session in which the program will receive a verbal report of final site visit findings. There is no recording of this session or any other CODA site visit session.
- All other protocols, policies and procedures of the Commission apply to the conduct of virtual or hybrid site visits.

After the Site Visit

- The program will receive the Preliminary Draft Site Visit Report in accordance with CODA policies and procedures.
- The program will receive an electronic post site visit survey.
- Do not engage in any further communication with the program following the site visit. If questions arise, contact the Commission office.
# COMMISSION ON DENTAL ACCREDITATION
## STAFF LIST

**CODA Direct Dial: 312-440-EXT.**

211 E. Chicago Avenue, Suite 1900, Chicago, IL 60611

<table>
<thead>
<tr>
<th>Manager</th>
<th>Contact</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Sherin Tooks</td>
<td>2940</td>
<td>Director</td>
</tr>
<tr>
<td>Ms. Marjorie Hooper</td>
<td>4653</td>
<td>Coordinator, CODA Operations</td>
</tr>
</tbody>
</table>

**Office of the Director / CODA Operations / International Predoctoral**

<table>
<thead>
<tr>
<th>Managers</th>
<th>Senior Project Assistants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ms. Dawn Herman</td>
<td>2721</td>
</tr>
<tr>
<td>Ms. Peggy Soeldner</td>
<td>2788</td>
</tr>
<tr>
<td>Ms. Kirsten Nadler</td>
<td>2672</td>
</tr>
<tr>
<td>Ms. Jennifer Snow</td>
<td>2714</td>
</tr>
<tr>
<td>VACANT (Michelle Smith)</td>
<td>2695</td>
</tr>
<tr>
<td>Ms. Michelle Smith</td>
<td>4660</td>
</tr>
<tr>
<td>Mr. Gregg Marquardt</td>
<td>2705</td>
</tr>
</tbody>
</table>

**Site Visit Coordinator Predoc/Advanced**

| Ms. Kelsey Loveless | 2675 | Ms. Bernadette Molina | 2668 |

**Site Visit Coordinator Allied Dental Board Contact**

**Communication and Technology Strategies**

**General Practice Residency <GPR>, Adv. Education in Gen. Dent, <AEGD>, Oral Med., Dental Anesthesiology; Orofacial Pain**

**Office of the Director**

**Office of the Director**
Conducting a Program Review Using Technology

CODA’s preferred meeting platform is Zoom; however, the program will utilize the platform of its choosing. The program is expected to provide clear user instructions for their technology platform, as well as software access, and ongoing IT support to the CODA site visit team and CODA staff for duration of the site visit.

Prior to the Site Visit:

- Consider how you want to refer to program materials during the meeting. Remember, your camera must be on at all times.

- Test your internet and computer systems well in advance of the site visit. See elsewhere for additional technology requirements.

- Provide the CODA site visitors and staff a quick-reference guide for using your program’s virtual meeting technology. Ensure that each site visitor has the ability to access and test the technology prior to the site visit; enlist your IT staff should assistance be needed.

During the Site Visit:

- All videoconference meetings are confidential; recording via any method is strictly prohibited.

- Mute your microphone unless you are speaking.

- The Chat function must be disabled. No chatting will be permitted during CODA site visits.

- Protocols for videoconference meeting conduct are discussed elsewhere in this manual.
Zoom Instructions for Programs
(If Program will Utilize Zoom)

Training materials and documentation
Zoom offers free live and interactive training courses. If you can’t attend one of the live sessions they also offer recorded versions of the training. These sessions are typically around 60 minutes long.

If you want to watch recorded training, start by watching the 30 minute Getting Started with Zoom video. https://livetraining.zoom.us/recording/play/F_BDBiJ-EndygEj16xL9flGaFwnvYvZw7CM2VEjWoBxAfFvCBYCQVxl7IhfL4uj?continueMode=true

Then continue with the 60 minute Zoom Meetings Training video. https://livetraining.zoom.us/recording/play/48IlOfofCsCX-SiWKnHTv7JoPMeoGH-1uaDcY-P68pX-PU36fJT3FjkIWykByVlt?continueMode=true

Zoom also has short video tutorials on a variety of topics. These videos are 1 to 2 minutes long. They are a good reminder of how to do something after you’ve experienced the regular training.

Join a Zoom Meeting
https://www.youtube.com/embed/vFhAEoCF7jg?rel=0&autoplay=1&cc_load_policy=1

Zoom Meeting Controls - Introduction
https://www.youtube.com/embed/4w_pRMBEALE?rel=0&autoplay=1&cc_load_policy=1

How to Participate in a Zoom Meeting:

In your site visit schedule, click “Join Zoom Meeting:”

Join Zoom Meeting
https://zoom.us/j/833914312
Meeting ID: 833 914 312

Click “Open Zoom Meetings:”

https://zoom.us wants to open this application.

Open Zoom Meetings  Cancel
Type your first and last name and click “Join:”

Join the audio one of three ways – By computer:

By calling the system:

Or by having the system call you:
The Zoom interface will look like this:

A. Show meeting information (meeting ID, Host, meeting URL)
B. Choose meeting view (Gallery vs Speaker view). Gallery view shows up to 49 participant’s video. Speaker view shows larger video of current speaker.
C. Microphone and Camera options (be SURE your mic is unmuted AND your computer speaker is on); the camera must also be on at all times
D. Participant’s information and options – all participants must include first and last name
E. Share content, chat and record settings (chat and record must not be used)
F. Exit meeting
Ad Hoc Alternative Site Visit Methods
Commission Only

**Alternative Site Visit Program Agreement**

The ________________________________ (Discipline Type) program sponsored by the ________________________________ (Institution Name) understands and agrees to abide by the Commission on Dental Accreditation (CODA) Policy on Temporary Use of Alternative Site Visit Methods and the policies and procedures related to the conduct of alternative site visits as documented within the CODA Program Manual for Alternative (Virtual or Hybrid) Site Visit Methods, as these policies and procedures relate to the CODA site visit review of the program for the purpose of evaluation of an application for accreditation (application site visit), conduct of a special focused site visit, or conduct of a reaccreditation site visit. By signing the agreement the program agrees to all policies and procedures in the aforementioned documents, including but not limited to the following:

- The site visit must be confidential; no portion of the visit will be recorded beyond the program’s pre-recorded facility tour.
- The program will submit information within the Commission’s E-Accreditation portal, and all information will comply with the Commission’s privacy and data security policies and procedures.
- A virtual site visit will be followed by an in-person site visit as directed by CODA policy.
- The findings of the virtual or hybrid site visit will be reported to the program within the preliminary draft site visit report following the site visit, regardless of site visit format, in accordance with Commission policy. The preliminary draft site visit report will be provided to the Commission along with the program’s response, should one be submitted, and the Commission will make an accreditation decision based on this report.
- Following the virtual (followed by a later on-site visit) or hybrid site visit, the program’s next regular reaccreditation on-site visit will be scheduled seven (7) years following the date of the virtual or hybrid site visit in all disciplines except oral and maxillofacial surgery (residency and fellowship), which will be scheduled five (5) years following the date of the virtual or hybrid site visit. The Commission reserves the right to conduct an earlier visit to the program in accordance with Commission policies and procedures (e.g. special focused site visit, pre-graduation site visit).

As the individuals representing and responsible for the dental education program, we agree to the terms of this agreement and will not challenge the results of the site visit or the Commission on Dental Accreditation’s decisions based on the site visit format or findings unless under CODA’s current policies and procedures for due process.

If the program is co-sponsored, this table must be submitted for each program sponsor.

<table>
<thead>
<tr>
<th>Institution Name*:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address: (do not list P.O. Boxes)</td>
</tr>
<tr>
<td>City:</td>
</tr>
</tbody>
</table>

*Institution Name:
<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Title</th>
<th>Phone</th>
<th>E-Mail</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief Executive Officer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chief Administrative Officer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Director</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>