REPORT OF THE STANDING COMMITTEE ON DOCUMENTATION AND POLICY REVIEW

Background: The Standing Committee on Documentation and Policy Review met via virtual meetings on January 20, 2021 and January 27, 2021. Committee members in attendance at both meetings included: Dr. Scott DeVito (chair), Dr. Joel Berg, Dr. John Hellstein, Dr. Susan Kass, Dr. Timmothy Schwartz, Dr. Marshall Titus, and Dr. Lawrence Wolinsky. Dr. Garry Myers attended the January 20, 2021 meeting and a portion of the January 27, 2021 meeting. Dr. Jeffery L. Hicks, chair, and Dr. Bruce Rotter, vice chair, Commission on Dental Accreditation (CODA), ex-officio, also attended both meetings. Dr. Sherin Tooks, director, and Ms. Dawn Herman, Mr. Gregg Marquardt, Ms. Kirsten Nadler, Ms. Michelle Smith, Ms. Jennifer Snow, Ms. Peggy Soeldner, managers, CODA, were in attendance at both meetings. Ms. Cathryn Albrecht, senior associate general counsel, attended the January 27, 2021 meeting.

At these meetings, the Standing Committee discussed the criteria for appointment as Commissioners and Review Committee members; miscellaneous policies identified for review and possible revision outside of their regular review cycle; and recent changes to the United States Department of Education (USDE) criteria for recognition and potential impact to the Commission.

Criteria for Appointment of Commissioners and Review Committee Members: The Standing Committee engaged in a lengthy discussion on the criteria for appointment to serve in the roles of Commissioner and Review Committee member within the Commission on Dental Accreditation. The Standing Committee noted the ongoing difficulty in finding volunteers in various roles on the Commission and, in particular, its Review Committees, resulting from the requirement to hold ADA membership as a condition for appointment. The Committee further noted that changes in membership criteria would result in revisions to CODA policies, the oversight of which is one of the charges of the Standing Committee.

The Standing Committee reviewed the CODA Rules and ADA governance documents (Bylaws and Governance and Organizational Manual) and learned that if CODA pursues changes to the ADA membership requirement for Commissioners who are dentists, a resolution to the House of Delegates (HOD) would be required. Additionally, in CODA leadership roles, the ADA Governance and Organizational Manual mentions the Chair, only; however, the Manual notes that in the event of a vacancy in the Chair of a Commission, the Vice Chair shall serve as ad interim Chair pending selection of a Chair, which suggests that both roles require ADA membership. The Committee also noted that Commission Rules require both the CODA Chair and CODA Vice Chair to be an ADA member.

The Standing Committee also noted that the CODA Rules indicate Appeal Board Members must be members of their appointing organization, but membership in the ADA is not required except for the ADA appointee on the Appeal Board.
The Standing Committee discussed the Review Committee nomination criteria, which by CODA’s own regulations mandates that Review Committee members who are eligible also be members of the ADA. It was noted that the requirement for Review Committee members may be changed solely at the Commission’s discretion.

Following considerable discussion, the Committee concluded that a change in the ADA membership requirement for Commissioners should not be pursued by the Commission at this time. Recommendations related to the Commission’s criteria for Review Committee members is noted elsewhere in this report.

**Consideration of Proposed Revisions to Miscellaneous Policies:** The Standing Committee considered policies that may warrant revision to ensure they are current, relevant, and align with Commission protocol and practices. Policies reviewed at this time included: Review Committees and Review Committee Meetings, Commission and Commission Meetings, Conflict of Interest Policy, Application for Accreditation for Fully Operational Programs With Enrollment and Without Accreditation, Application for Initial Accreditation for Developing Programs, Site Visitors, Reporting Program Changes in Accredited Programs, Policy on Non-Enrollment of First Year Students/Residents, Policy on Reprints, and Policy and Procedure Regarding Investigation of Complaint Against Educational Programs, section on Anonymous Comments/Complaints. The Committee also discussed report deadlines and whether the deadline should be changed.

**Review Committees and Review Committee Meetings:** The Standing Committee reviewed the Review Committees and Review Committee Meetings policy, specifically the section related to the process for receiving nominations for Review Committee members from sponsoring organizations and certifying boards. The Committee learned of two (2) recent incidents, and others in the past, where Review Committee appointments were delayed because sponsoring organizations/certifying boards did not provide the minimum number of qualified nominees, as required by the Commission. The Committee discussed possible solutions, including whether CODA should assume responsibility for identifying nominees when the sponsoring organization/certifying board does not comply with CODA’s request, and whether the vacant position on a Review Committee should remain vacant until the nominating organization provides the minimum number of qualified nominees. The Committee discussed the ramifications of changing the process, including the challenge CODA could face in identifying qualified nominees and the hardship to the affected Review Committee in conducting its business if a position remains vacant. Following discussion, the Committee determined that the sponsoring organization/certifying board from which the nominations are to be submitted has access to the largest group of potential nominees and should continue to be responsible for submitting a minimum of two (2) qualified nominations to the Commission. Accordingly, the policy should not be changed at this time and the situation should be monitored and revisited in the future if there continues to be delays in qualified nominations to the Commission for vacancies on Review Committees.
In discussion of Review Committee nominations criteria and requirements, specifically related to the ADA membership requirement for Review Committee members, the Committee noted the requirement that Review Committee members be ADA members and learned that, in the recent past, it has been a barrier to receiving nominations from otherwise interested and qualified nominees. This has created a hardship in filling Review Committee openings, particularly for smaller Review Committees. Therefore, the Committee believed the ADA membership requirement should be removed from the Review Committee nominations criteria, found in the Review Committees and Review Committee Meetings policy, and as noted in Appendix 1.

In addition, the Standing Committee also reviewed the section entitled Nomination Criteria to provide guidance in interpreting the criteria for public, higher education and hospital administrators on Review Committees, specifically related to being a “Member of” or “Member of or employee” of any professional/trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission, as well as the prohibition of any spouse, parent, child or sibling of an individual identified in the prior role. The Committee considered whether current membership or eligibility of membership should be the limiting criteria, and noted that the USDE regulations currently state “Member of” as the limitation. It was also noted that requiring eligibility for membership as a limitation further narrows the pool upon which CODA can draw nominees in these categories. The Committee believed the intent is to prohibit appointment of individuals with current knowledge of dentistry through membership in an organization affiliated or associated with CODA, or being the spouse, parent, child or sibling of an individual identified in the prior role. To that end, the Standing Committee believed the criteria is appropriately worded and revision is not warranted at this time.

**Commission and Commission Meetings policy:** The Standing Committee learned that the Composition portion of the Commission and Commission Meetings policy was not completely revised at the time of a major revision to the Board of Commissioners, Composition, within the CODA Rules at the Winter 2020 meeting of the Commission. Therefore, the Committee determined the revisions to the Composition portion of the Commission and Commission Meetings policy and presented in Appendix 1 are editorial in nature and should be made in the EOPP as indicated.

**Conflict of Interest Policy:** The Standing Committee reviewed the Conflict of Interest Policy, specifically the conflict of serving on the site visit to a program in the same state in which the site visitor is affiliated with an institution/program. The Committee learned, at times, it is difficult to secure site visitors due to the increased use of sites where educational activity occurs which are in locations outside of the state that is the program’s primary location and may be in the same state as a potential site visitor even though the potential site visitor has no knowledge of or conflict with the program and no relationship with the educational activity site in their own state. Following discussion, the Committee believed a conflict exists if the site visitor is affiliated with an institution/program in the same state as the program’s primary location or any of the
program’s educational activity sites, or if other conflicts exist, and that the policy should be revised to reflect this clarification.

The Standing Committee also discussed the conflict related to serving on the site visit to a program in the same state where the site visitor “owns property” but that is not the site visitor’s primary residence. Following deliberation, the Committee noted that the recent addition of this clause as a conflict has created an additional challenge in identifying site visitors to serve on site visit teams. The Committee believed owning property in the same state as a program being visited appears to be unrelated to accreditation and may be overly restrictive, particularly where the property is not the site visitor’s primary residence and the site visitor has no knowledge of the program. Therefore, the Standing Committee believed that owning property in the same state as a program being site visited should not be considered a conflict of interest and should be removed from the policy.

The Standing Committee also learned that the conflict identified in policy related to serving on the program’s visiting committee within the last ten (10) years, is also presenting increased challenges in identifying site visitors, and, of late, in making Review Committee assignments. The Committee discussed the risks in assigning site visitors to the same program, including bias based on previous site visit findings, both positive and negative. The Committee also discussed the likelihood that programs would be different than when previously visited based on CODA’s site visit interval of seven (7) years for all disciplines except oral and maxillofacial surgery, which is on a five (5) year visitation schedule. Through further deliberations, the Committee discussed the number of years between serving on a site visit team to the same institution, and believed seven (7) years is appropriate. Therefore, the Committee believed the policy should be revised to reflect the change in the amount of time between serving on a site visit team to the same institution, with the intent being that a site visitor must not have served on the program’s last comprehensive site visit or any visit from that time to the present. Following the discussion of this policy, the Standing Committee recommended approving the revisions to the Conflict of Interest Policy found in Appendix 1.

Application for Accreditation for Fully Operational Programs With Enrollment and Without Accreditation and Application for Initial Accreditation for Developing Programs: The Standing Committee reviewed the policies related to application for accreditation of fully operational and developing programs, specifically the steps for accreditation found in both. The Committee noted the steps in policy clearly identify that the first opportunity for the Commission to consider a program, if the application is in order, is 12 to 18 months following the application submission date. However, the Committee learned that procedurally, due to the amount of time required to process applications, including receipt of the application fee and initiation of the application review process, clarification of the point at which the 12 to 18 month period begins may be warranted. Following discussion, the Standing Committee believed that the policy should be revised to clarify that the 12 to 18 months timeframe for CODA consideration of an applicant program begins following Commission’s acknowledgement of the application through
a formal letter to the program as the first step in the application review process, and recommended the revisions to the policies found in Appendix 1 be approved.

**Site Visitors:** The Standing Committee reviewed the Site Visitors policy, specifically related to the criteria for selection of dental therapy site visitors. The Committee noted the criteria for the selection of dental therapy site visitors includes a temporary waiver of some criteria for the dental therapist educator position until after CODA accredits dental therapy programs; currently CODA accredits one (1) dental therapy program. Noting ongoing difficulty in finding dental therapist educators, the Committee believed the criteria should be revised to set a threshold number of dental therapy programs that must be accredited in order to terminate the waiver of certain criteria for the dental therapist educator position on a site visit team and believed the threshold should be a minimum of three (3) dental therapy programs. The Committee also believed the addition of the dental therapy site visit team composition should be added to policy and recommended approval of the revisions to the Site Visitor policy found in Appendix 1.

**Reporting Program Changes in Accredited Programs:** The Standing Committee reviewed the Reporting Program Changes in Accredited Programs policy, specifically the section related to the addition of educational tracks. Through discussion, the Committee learned that the addition of different types of educational tracks, such as part-time tracks, are not always reported by programs prior to implementation and that the addition of this program option to policy may be warranted. The Committee believed the addition of this, and other track offerings, are significant and could affect the ability of the program to continue to meet the Accreditation Standards. Therefore, the Committee recommended the addition of a part-time, multi-degree or other track offerings to the Reporting Program Changes policy as a program change that requires review by the appropriate Review Committee and approval by the Commission prior to implementation, as noted in Appendix 1.

**Policy on Non-Enrollment of First Year Students/Residents:** The Standing Committee discussed the Policy on Non-Enrollment of First Year Students/Residents specifically related to the opportunity for a third year of non-enrollment only for programs with the status of “approval without reporting requirements.” The Committee discussed the policy and believed the opportunity to request the extension of accreditation should be available for programs with any accreditation status, particularly since the program must provide a formal request stating the reasons why the accreditation of the program should not be discontinued. Therefore, the Committee believes the proposed revision in Appendix 1 should be approved.

**Policy on Reprints:** The Standing Committee discussed the Policy on Reprints and learned that the word “reprint” may require additional definition to ensure it is understood that “reprint” includes reproducing materials in any paper or electronic format or media. Following discussion, the Committee believed the proposed revision in Appendix 1 provides appropriate clarification and recommended it be approved.
Policy and Procedure Regarding Investigation of Complaints Against Educational Programs; Anonymous Comments/Complaints: The Standing Committee learned that, on occasion, CODA receives complaints identified as “anonymous” which are received via email and identify the sender in the email address. Through discussion, the Committee confirmed that complaints received in this manner are no longer “anonymous” since the identity of the sender is provided within the communication to the Commission, and should be reviewed as a “formal” complaint. Therefore, the Committee determined that the proposed revision found in Appendix 1 provides appropriate clarification and recommended its approval.

Deadlines for Submission of Reports to CODA: The Standing Committee discussed the deadline dates for submission of reports for consideration by the Commission. The Committee learned that receipt of program reports by the deadline of December 1 and June 1 continues to be a problem and can create a challenge in preparing reports for review by the Review Committees and Commission in a timely manner, particularly if follow-up with programs is required. The Committee discussed the possibility of moving the deadlines for all reports to November 15 and May 15 to allow additional time to follow-up with programs and provide sufficient time for review of reports by the Review Committees. Following discussion, the Committee believed changing the deadlines may be viewed as a penalty to compliant programs by requiring reports earlier than has been CODA’s general practice. The Committee noted that policies regarding failure to submit requested information and missed deadlines may be referenced when communicating with programs that do not adhere to CODA’s prescribed reporting deadlines. Therefore, the Standing Committee believed the deadlines for submitting reports to CODA should not be changed at this time.

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

Consideration of Proposed Revisions to Miscellaneous Policies Due to Changes in United States Department of Education (USDE) Recognition Criteria: Through preparation of the Commission’s re-recognition petition to the USDE, Commission staff noted some USDE regulations have changed and warrant careful review and possible revision to related CODA Accreditation Standards and policies. To that end, the Standing Committee reviewed the specific language and regulations, and related CODA policies, as identified by CODA staff. Proposed revisions to policies are provided in Appendix 2. The USDE definitions and regulations reviewed are provided in Appendix 3.

USDE Language Change from “Regional Accreditation” to “Institutional Accreditation”: The Standing Committee learned that the language used by the USDE related to a parent institution’s accreditation has changed from “regional” accreditation to “institutional” accreditation, as noted in regulation §602.3 (Definitions). The Committee also learned that the predoctoral, dental therapy, dental hygiene, dental assisting, and dental laboratory technology Accreditation
Standards use the term “regional” accreditation. Therefore, the Committee believed the Predoctoral, Dental Hygiene, Dental Assisting, and Dental Laboratory Technology Review Committees should review the Accreditation Standards under their purview and consider possible revisions to align with the language now used in USDE regulations.

In addition, the Standing Committee learned the USDE’s sole reference to “institutional accreditation” could create confusion when identifying the institutional accreditors that have USDE recognition authority to oversee institutions at the post-secondary, doctoral, and post-doctoral levels. For example, dental education programs must be sponsored by institutions accredited with the ability to award doctoral degrees. Post-doctoral dental education programs must be sponsored by institutions with the ability to award post-doctoral certificates and/or degrees. Allied dental education programs must be sponsored by institutions with the ability to award post-secondary certificates and degrees. The concern is that the change in USDE language could result in questions regarding the level of degree-granting authority that the institution has and its institutional accreditor’s USDE recognition. Given the scope of impact across all disciplines under CODA’s purview, the Committee believed each Review Committee should consider the discipline-specific Accreditation Standards under its purview for potential revision to address changes in reference to institutional accreditation and ensure the CODA Standards clearly identify the type of institutional accreditor required to serve as sponsors of CODA-accredited dental education programs.

**Standing Committee Recommendation:** It is recommended that the Commission on Dental Accreditation direct all Review Committees to review and revise their Accreditation Standards, as applicable, to align with USDE terminology related to “institutional accreditation” and to ensure the Accreditation Standards clearly document the appropriate type of accreditor for the discipline, with a report to the Summer 2021 meeting of the Commission.

**Consideration of Modifications to CODA Policies Related to USDE Recognition Criteria:** The Standing Committee reviewed the following USDE recognition criteria and related CODA policies: §602.16 Accreditation and preaccreditation standards, §602.18 Ensuring consistency in decision-making, §602.20 Enforcement of standards, §602.25 Due process, §602.26 Notification of accrediting decisions; and §602.28 Regard for decisions of States and other accrediting agencies.

§602.16 Accreditation and preaccreditation standards. The Standing Committee reviewed this regulation specifically related to Distance Education and noted no changes to warrant revision to CODA’s Policy on Distance Education at this time. The Committee believed CODA staff should continue to monitor this regulation for changes.

§602.18 Ensuring consistency in decision-making and §602.20 Enforcement of standards. The Standing Committee reviewed these regulations and the related CODA Accreditation Status Definitions. Through review, the Committee learned that the change in language of §602.18
specifically relates to the amount of time a program has to demonstrate compliance with deficiencies, noting the regulation allows an amount of time not to exceed three (3) years unless the agency determines there is good cause to extend the period of time. Further, regulation §602.20 indicates the agency’s timeline for a program to reach full compliance “must not exceed the lesser of four years or 150 percent of the length of the program in the case of a programmatic accrediting agency;” CODA is a programmatic accrediting agency. Through review of CODA policy, the Committee noted the CODA Accreditation Status Definitions states: “Evidence of compliance with the cited standards or policies must be demonstrated within a timeframe not to exceed 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. If the deficiencies are not corrected within the specified time period, accreditation will be withdrawn, unless the Commission extends the period for achieving compliance for good cause.” Following deliberation, the Committee questioned whether it would be responsible, as an accrediting agency of health profession disciplines, to lengthen the amount of time to reach compliance to no more than three (3) years as noted in the revised USDE regulations. The Committee believed CODA policy currently allows sufficient time for a program to come into compliance and, when necessary and appropriate, the flexibility for extending the period of achieving compliance for good cause. The Committee concluded that revision to Accreditation Status Definitions, particularly the timeline to reach full compliance, is not warranted at this time.

§602.25 Due process. The Standing Committee reviewed the USDE’s revisions to its criteria for recognition, along with CODA policies Due Process Related to Withdrawal of Accreditation and the Function and Procedures of the Appeal Board. Through review of the USDE criteria, the Committee believed the related CODA policy on Due Process Related to Withdrawal of Accreditation sufficiently addresses the requirements and revision is not warranted at this time. However, through review of the regulation related to Appeal Board decisions, the Committee noted the USDE revision includes removal of the Appeal Board’s authority to “reverse” decisions made by a decision-making body, which is currently noted in CODA’s Function and Procedures of the Appeal Board. Therefore, the Committee believed the revisions to this policy found in Appendix 2 should be approved to ensure consistency between the USDE criteria for Appeal Board authority and CODA policy and procedures.

§602.26 Notification of accrediting decisions. In conjunction with review of this criteria, the Standing Committee reviewed the Commission’s policies Voluntary Discontinuance of Accreditation and Due Process Related to Withdrawal of Accreditation as well as suggested revisions due to changes in the recognition criteria.

Through review of the USDE criteria related to voluntary discontinuance of accreditation, the Committee noted the timeframe to notify the USDE and appropriate licensing bodies and accrediting agencies was changed to ten (10) business days. Therefore, the Committee recommended the Voluntary Discontinuance of Accreditation policy, found in Appendix 2, be revised to ensure consistency and continued compliance with USDE recognition criteria.
The Standing Committee also reviewed the USDE criteria related to Due Process Related to Withdrawal of Accreditation, as well as suggested revisions. The Committee noted that accrediting agencies must provide written notice of the *initiation* of an adverse action and the *final decision* on an adverse action within seven (7) business days to the USDE, appropriate state licensing or authorizing agencies, appropriate institutional accrediting agencies, and the public. Further, programs are also required to inform all current and prospective students/residents/fellows of the Commission’s notice of any *initiated or final decision* on an adverse action within seven (7) business days of the program’s receipt of CODA’s notice. To ensure CODA policies appropriately reflect current USDE criteria, the Committee recommended the revisions noted in Appendix 2 be approved.

§602.28 Regard for decisions of States and other accrediting agencies. The Standing Committee also reviewed §602.28 and related CODA Policy on Regard for Decisions of States and Other Accrediting Agencies. Following review of the criteria for recognition and CODA policy, the Committee determined revisions are warranted to ensure CODA policy is appropriately aligned with revised USDE criteria, and recommended the revisions found in Appendix 2 be approved.

**Standing Committee Recommendation:** It is recommended that the Commission on Dental Accreditation adopt and implement immediately the proposed revisions to policies found in Appendix 2, including the revision of policies in the Commission’s EOPP and in all appropriate Commission documents.

**Commission Action:**

Prepared by: Ms. Peggy Soeldner
MISCELLANEOUS POLICY REVISIONS FOR CONSIDERATION

Underline indicates addition; Strikethrough indicates deletion

REVIEW COMMITTEES AND REVIEW COMMITTEE MEETINGS

1. Structure: The chair of each Review Committee will be the appointed Commissioner from the relevant discipline.
   i. The Commission will appoint all Review Committee members.
      a. Review Committee positions not designated as discipline-specific will be appointed from the Commission where feasible, e.g. a public representative on the Commission could be appointed to serve as the public member on the Dental Laboratory Technology Review Committee; an ADA appointee to the Commission could be appointed to the Dental Assisting Review Committee as the general dentist practitioner.
      b. Discipline-specific positions on Review Committees will be filled by appointment by the Commission of an individual from a small group of qualified nominees (at least two) submitted by the relevant national organization, discipline-specific sponsoring organization or certifying board. Nominating organizations may elect to rank their nominees, if they so choose. If fewer than two (2) qualified nominees are submitted, the appointment process will be delayed until such time as the minimum number of required qualified nominations is received.
   ii. Consensus is the method used for decision making; however if consensus cannot be reached and a vote is required, then the Chair may only vote in the case of a tie (American Institute of Parliamentarians Standard Code of Parliamentary Procedures).
   iii. Member terms will be staggered, four year appointments; multiple terms may be served on the same or a different committee, with a one-year waiting period between terms. A maximum of two (2) terms may be served in total. The one-year waiting period between terms does not apply to public members.
   iv. One public member will be appointed to each committee.
   v. The size of each Review Committee will be determined by the committee’s workload.
   vi. As a committee’s workload increases, additional members will be appointed while maintaining the balance between the number of content experts and non-content experts. Committees may formally request an additional member through New Business at Review Committee/Commission meetings. If an additional member is approved, this member must be a joint nomination from the professional organization and certifying board, as applicable.
   vii. Conflict of interest policies and procedures are applicable to all Review Committee members.
   viii. Review Committee members who have not had not been on a site visit within the last two (2) years prior to their appointment on a Review Committee should observe at least one site visit within their first year of service on the Review Committee.
   ix. In the event that fewer than 50% of discipline-specific experts are present for any one discipline, the decision by a quorum of the Review Committee shall be acceptable. In the case of less than 50% of discipline-specific experts, including the Chair, available for a review committee meeting, for specified agenda items or for the entire meeting, the Review Committee Chair may temporarily appoint an additional discipline-specific expert(s) with the approval of the CODA Director. The substitute should be a previous Review Committee member or an individual approved by both the Review Committee Chair and the CODA Director. The substitute would
have the privileges of speaking, making motions and voting.

x. Consent agendas may be used by Review Committees, when appropriate, and may be approved by a quorum of the Review Committee present at the meeting.

Revised: 8/20; 1/20; 8/18; 8/17; 2/15; 1/14, 2/13, 8/10, 7/09; 7/08; 7/07; Adopted: 1/06

2. Composition

Predoctoral Education Review Committee (9 members)

1 discipline-specific Commissioner appointed by American Dental Education Association
1 public member
3 dental educators who are involved with a predoctoral dental education program (two must be general dentists)
1 general dentist
1 non-general* dentist
1 dental assistant, dental hygienist, dental therapist or dental laboratory technology professional educator
1 dental therapist educator

*a dentist who has completed an advanced dental education program in dental anesthesiology, dental public health, endodontics, oral and maxillofacial radiology, oral and maxillofacial pathology, oral and maxillofacial surgery, oral medicine, orofacial pain, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics, or prosthodontics.

Three (3) Advanced Dental Education Review Committees (DPH, OMP, OMR - 5 members each. At least one member must be a dental educator.)

1 discipline-specific Commissioner appointed by the discipline-specific sponsoring organization
1 public member
1 dentist nominated by the discipline-specific sponsoring organization
1 dentist nominated by the discipline-specific certifying board
1 general dentist

Six (6) Advanced Dental Education Review Committees (ENDO, OMS, ORTHO, PERIO, PED, PROS - 6 members each. At least one member must be a dental educator.)

1 discipline-specific Commissioner appointed by the discipline-specific sponsoring organization
1 public member
1 dentist nominated by the discipline-specific sponsoring organization
1 dentist nominated by the discipline-specific certifying board
1 dentist nominated by the discipline-specific certifying board and discipline-specific sponsoring organization
1 general dentist

Advanced Education in General Dentistry, General Practice Residency, Dental Anesthesiology, Oral Medicine and Orofacial Pain Review Committee (12 members)

1 discipline-specific Commissioner, jointly appointed by American Dental Education Association (ADEA), the Special Care Dentistry Association (SCDA), the American Society of Dentist Anesthesiologists (ASDA), the American Academy of Oral Medicine (AAOM), and the American Academy of Orofacial Pain (AAOP)
1 public member
2 current General Practice Residency (GPR) educators nominated by the SCDA
3 current Advanced Education in General Dentistry (AEGD) educators nominated by ADEA
1 oral medicine educator nominated by the American Academy of Oral Medicine
1 dental anesthesiology educator nominated by the American Society of Dentist Anesthesiologists
1 orofacial pain educator nominated by the American Academy of Orofacial Pain
1 general dentist graduate of a GPR or AEGD
1 non-general* dentist
1 higher education or hospital administrator with past or present experience in administration in a
teaching institution
* a dentist who has completed an advanced dental education program in dental public health,
endodontics, oral and maxillofacial radiology, oral and maxillofacial pathology, oral and
maxillofacial surgery, orthodontics and dentofacial orthopedics, pediatric dentistry, periodontics,
or prosthodontics.

Dental Assisting Education Review Committee (10 members)
1 discipline-specific Commissioner appointed by American Dental Assistants Association
1 public member
2 general dentists (practitioner or educator)
5 dental assisting educators
1 dental assisting practitioner who is a graduate of a Commission accredited program

Dental Hygiene Education Review Committee (11 members)
1 discipline-specific Commissioner appointed by American Dental Hygienists’ Association
1 public member
4 dental hygienist educators
2 dental hygienist practitioners
1 dentist practitioner
1 dentist educator
1 higher education administrator

Dental Laboratory Technology Education Review Committee (5 members)
1 discipline-specific Commissioner appointed by National Association of Dental Laboratories
1 public member
1 general dentist
1 dental laboratory technology educator
1 dental laboratory owner nominated by National Association of Dental Laboratories

Revised: 8/18; 2/16; 2/15; 8/14; 2/13, 7/09, 7/08, 1/08; Reaffirmed: 8/17; 8/10; Adopted: 1/06

3. Nomination Criteria: The following criteria are requirements for nominating members to serve on the
Review Committees. Rules related to the appointment term on Review Committees apply.

All Nominees:
- Ability to commit to one (1) four (4) year term;
- Willingness to commit ten (10) to twenty (20) days per year to Review Committee activities,
  including training, comprehensive review of print and electronically delivered materials and travel to
  Commission headquarters;
- Ability to evaluate an educational program objectively in terms of such broad areas as curriculum,
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1 faculty, facilities, student evaluation and outcomes assessment;
2 • Stated willingness to comply with all Commission policies and procedures (e.g. Agreement of
3 Confidentiality; Conflict of Interest Policy; Operational Guidelines; Simultaneous Service; HIPAA
4 Training, Licensure Attestation, and Professional Conduct Policy and Prohibition Against
5 Harassment);
6 • Ability to conduct business through electronic means (email, Commission Web Sites); and
7 • Active, life or retired member of the American Dental Association, where applicable.

Educator Nominees:
8 • Commitment to predoctoral, advanced, and/or allied dental education;
9 • Active involvement in an accredited predoctoral, advanced, or allied dental education program as a
10 full- or part-time faculty member;
11 • Subject matter experts with formal education and credentialed in the applicable discipline; and
12 • Prior or current experience as a Commission site visitor.

Practitioner Nominees:
13 • Commitment to predoctoral, advanced, and/or allied dental education;
14 • Majority of current work effort as a practitioner; and
15 • Formal education and credential in the applicable discipline.

Public/Consumer Nominees:
16 • A commitment to bring the public/consumer perspective to Review Committee deliberations. The
17 nominee should not have any formal or informal connection to the profession of dentistry; also, the
18 nominee should have an interest in, or knowledge of, health-related and accreditation issues. In order
19 to serve, the nominee must not be a:
20 a. Dentist or member of an allied dental discipline;
21 b. Member of a predoctoral, advanced, or allied dental education program faculty;
22 c. Employee, member of the governing board, owner, or shareholder of, or independent consultant
23 to, a predoctoral, advanced, or allied dental education program that is accredited by the
24 Commission on Dental Accreditation, has applied for initial accreditation or is not-accredited;
25 d. Member or employee of any professional/trade association, licensing/regulatory agency or
26 membership organization related to, affiliated with or associated with the Commission, dental
27 education or dentistry; and
28 e. Spouse, parent, child or sibling of an individual identified above (a through d).

Higher Education Administrator:
29 • A commitment to bring the higher education administrator perspective to the Review Committee
30 deliberations. In order to serve, the nominee must not be a:
31 a. Member of any trade association, licensing/regulatory agency or membership organization related
32 to, affiliated with or associated with the Commission; and
33 b. Spouse, parent, child or sibling of an individual identified above.

Hospital Administrator:
34 • A commitment to bring the hospital administrator perspective to Review Committee deliberations. In
35 order to serve, the nominee must not be a:
a. Member of any trade association, licensing/regulatory agency or membership organization related to, affiliated with or associated with the Commission; and

b. Spouse, parent, child or sibling of an individual identified above.

Revised: 2/21; 8/18; 8/17; 8/14; 8/10; Adopted: 07/08

COMMISSION AND COMMISSION MEETINGS

The Commission and its Review Committees meet twice each year to consider site visit reports and institutional responses, progress reports, information from annual surveys, applications for initial accreditation, and policies related to accreditation. These meetings are held in the winter and the summer.

Reports from site visits conducted less than 90 days prior to a Commission meeting are usually deferred and considered at the next Commission meeting. Commission staff can provide information about the specific dates for consideration of a particular report.

The Commission has established policy and procedures for due process which are detailed in the Due Process section of this manual.

Revised: 8/17; 8/14; 7/06, 7/96; Reaffirmed: 8/10; Adopted: 7/96

1. Composition and Criteria

Composition

The Board of Commissioners shall consist of:

Four (4) members shall be selected from nominations open to all trustee districts from the active, life or retired members of this association, no one of whom shall be a faculty member working more than one day per week of a school of dentistry or a member of a state board of dental examiners or jurisdictional dental licensing agency. These members shall be nominated by the Board of Trustees and elected by the American Dental Association House of Delegates.

Four (4) members who are active, life or retired members of the American Dental Association shall be selected by the American Association of Dental Boards from the active membership of that body, no one of whom shall be a member of a faculty of a school of dentistry.

Four (4) members who are active, life or retired members of the American Dental Association shall be selected by the American Dental Education Association from its active membership. These members shall hold positions of professorial rank in dental schools accredited by the Commission on Dental Accreditation and shall not be members of any state board of dental examiners.

Four (4) members who shall be appointed by the Board of Trustees from the names of active, life or retired members of this Association. None of the appointees shall be a faculty member of any
dental education program working more than one day per week or a member of a state board of dental examiners or jurisdictional dental licensing agency.

Four (4) members who are active, life or retired members of this Association and also active members of the American Association of Dental Boards shall be selected by the American Association of Dental Boards. None of these members shall be a faculty member of any dental education program.

Four (4) members who are active, life or retired members of this Association and also active members of the American Dental Education Association shall be selected by the American Dental Education Association. None of these members shall be a member of any state board of dental examiners or jurisdictional dental licensing agency.

The remaining Commissioners shall be selected as follows: one (1) certified dental assistant selected by the American Dental Assistants Association from its active or life membership, one (1) licensed dental hygienist selected by the American Dental Hygienists’ Association, one (1) certified dental laboratory technician selected by the National Association of Dental Laboratories, one (1) student selected jointly by the American Student Dental Association and the Council of Students, Residents and Fellows of the American Dental Education Association, one (1) dentist who is board certified in the respective discipline-specific area of practice and is selected by each of the following organizations: American Academy of Oral and Maxillofacial Pathology, American Academy of Oral and Maxillofacial Radiology, American Academy of Pediatric Dentistry, American Academy of Periodontology, American Association of Endodontists, American Association of Oral and Maxillofacial Surgeons, American Association of Orthodontists, American Association of Public Health Dentistry, American College of Prosthodontists; one (1) dentist who is jointly appointed by the American Dental Education Association, the Special Care Dentistry Association, the American Society of Dentist Anesthesiologists, the American Academy of Oral Medicine, and the American Academy of Orofacial Pain and four (4) consumers members of the public who are neither dentists nor allied dental personnel nor teaching in a dental or allied dental education institution and who are selected by the Commission, based on established and publicized criteria. In the event a Commission member sponsoring organization fails to select a Commissioner, it shall be the responsibility of the Commission to select an appropriate representative to serve as a Commissioner. A member of the Standing Committee on the New Dentist (when assigned by the ADA Board of Trustees) and The Director of the Commission shall be an ex-officio members of the Board without the right to vote.

Criteria (All Appointees)

- Ability to commit to one (1) four (4) year term;
- Willingness to commit ten (10) to twenty (20) days per year to activities, including training, comprehensive review of print and electronically delivered materials, and travel to Commission headquarters;
• Ability to evaluate an educational program objectively in terms of such broad areas as curriculum, faculty, facilities, student evaluation and outcomes assessment;
• Stated willingness to comply with all Commission policies and procedures (e.g. Agreement of Confidentiality; Conflict of Interest Policy; Operational Guidelines; Simultaneous Service; HIPAA Training, Licensure Attestation, and Professional Conduct Policy and Prohibition Against Harassment);
• Ability to conduct business through electronic means (email, Commission Web Sites); and
• Active, life or retired member of the American Dental Association, where applicable.

Revised: 2/21; 8/18; 8/17; Adopted: 8/14

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) seven (7) 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 as the program’s primary location;
- 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.

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: 2/21; 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) seven (7) years;
• 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: 2/21; 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

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 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, is generally could be 12 to 18 months following the Commission’s formal acknowledgment of receipt of the application and initiation of the review process. 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.
**Time Limitation for Review of Applications:** The review of an application will be terminated if an institution fails to respond to the Commission’s requests for information for a period of six (6) months. In this case, the institution will be notified that the application process has been terminated. If the institution wishes to begin the process again, a new application and application fee must be submitted.

Revised: 2/21; 8/16; 2/16; 8/13; 7/08; Reaffirmed: 8/18; 8/13; 8/10; Adopted: 8/02

**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, is generally could be 12 to 18 months following the Commission’s formal acknowledgment of receipt of the application and initiation of the review process. 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: 2/21; 8/16; 2/16; 8/13; 7/08, 8/02, 7/01; Reaffirmed: 8/18; 8/13; 8/11, 8/10

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 re-appointed.

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; 1/03, 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).

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.

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.
• 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; 2/18; 2/16; 8/14; 1/99; Reaffirmed: 8/19; 8/10, 7/07, 7/01; CODA: 07/05, 05/77:

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:

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 a minimum of three (3) dental therapy education programs.

Dental therapy site visit team consist of three (3) members as follows: one (1) dental therapist educator, one (1) predoctoral dentist educator (curriculum or clinical site visitor), and one (1) additional site visitor that could be either a second dental therapist educator, second
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predoctoral dentist educator, or an allied dentist educator. If needed due to lack of dental therapy educator availability, such that if a dental therapy educator cannot be identified in accordance with Commission policy then the three-person site visit team may be composed of predoctoral educators and allied dentists, three (3) people total in any combination.

Revised: 2/21; 8/18; 8/16; Reaffirmed: 8/19; Adopted: 02/16

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 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, part-time track or multi-degree track, or other track offerings; 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.

POLICY ON NON-ENROLLMENT OF FIRST YEAR STUDENTS/RESIDENTS

First-year non-enrollment must be reported to the Commission.

The accreditation status of programs within the purview of the Commission on Dental Accreditation will be discontinued when all first-year positions remain vacant for two (2) consecutive years. Exceptions to this policy may be made by the Commission for programs with “approval without reporting requirements” status upon receipt of a formal request from the institution stating reasons why the accreditation of the program should not be discontinued. Exceptions to this policy may also be made by the Commission for programs in Oral and Maxillofacial Pathology with “initial accreditation” status upon receipt of a formal request from the institution stating reasons why the accreditation of the program should not be discontinued. If the Commission grants an institution’s request to continue the accreditation of a program, the continuation of accreditation is effective for one (1) year. Only one (1) request for continued accreditation will be granted for a total of three (3) consecutive years of non-enrollment. See the Commission’s policies related to Reporting Program Changes in Accredited Programs, Initial Accreditation, Intent to Withdraw Accreditation, Voluntary Discontinuance, and Discontinuance or Closure of Educational Programs Accredited by The Commission and Teach-Out Plans for additional information.

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Revised: 2/21; 1/20; Reaffirmed: 8/20; Adopted: 8/18

POLICY AND PROCEDURE REGARDING INVESTIGATION OF COMPLAINTS AGAINST EDUCATIONAL PROGRAMS

Anonymous Comments/Complaints
An “anonymous comment/complaint” is defined as an unsigned comment/complaint submitted to the Commission. Any submitted information that identifies the complainant renders this submission a formal complaint and will be reviewed as such (e.g. inclusion of a complainant’s name within an email or submitted documentation).

All anonymous complaints will be reviewed by Commission staff to determine linkage to Accreditation Standards or CODA policy and procedures. If linkage to Accreditation Standards or CODA policy is identified, legal counsel, the Chair or the appropriate Review Committee, and the applicable Review Committee members may be consulted to assist in determining whether there is sufficient evidence of probable cause of noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s) to proceed with an investigation. The initial screening is usually completed within thirty (30) days. If further investigation is warranted, the anonymous complaint will be handled as a formal complaint (See Formal Complaints); however, due to the anonymous nature of the submission, the Commission will not correspond with the complainant.

Anonymous comments/complaints determined to be unrelated to an Accreditation Standard or CODA policies and procedures, or those that do not provide sufficient evidence of probable cause
of noncompliance with the standard(s) or required accreditation policy(ies), or procedure(s) to proceed, will be added to the respective program’s file for evaluation during the program’s next scheduled accreditation site visit. At the time of the site visit, the program and site visit team will be informed of the anonymous comment/complaint. The program will have an opportunity to respond to the anonymous comment/complaint; the response will be considered during the site visit evaluation. Anonymous comments/complaints will be assessed to determine trends in compliance with Commission standards, policies, and procedures. The assessment of findings related to the anonymous comments/complaint will be documented in the site visit report.

Revised: 2/21; Adopted: 8/17
CONSIDERATION OF POLICY REVISIONS RELATED TO CHANGES IN THE USDE
REGULATIONS FOR RECOGNITION OF ACCREDITING AGENCIES

Underline indicates addition; Strikethrough indicates deletion

FUNCTION AND PROCEDURES OF THE APPEAL BOARD

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

Reaffirmed: 8/16; 8/10

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

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

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

• a current member of a dental or allied dental faculty*;
• an employee, member of the governing board, owner, shareholder of, or independent consultant to, a program that either is accredited by the Commission on Dental Accreditation or has applied for initial accreditation*; and
• spouse, parent, child, or sibling of an individual identified above;
• current member of the Commission; and/or
• an individual who has participated in any step of the process leading up to the decision that is being appealed (e.g. member of the visiting committee, member of Review Committee, etc.).

The Appeal Board Member shall:
• be willing to participate as a member of the appellate body should it be convened; and
be willing to comply with all Commission policies and procedures (e.g., Agreement of Confidentiality; Conflict of Interest Policy; and Professional Conduct Policy and Prohibition Against Harassment).

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

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

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

1. Within fourteen (14) days after the institution’s receipt of notification of the Commission on Dental Accreditation’s decision to deny or withdraw accreditation, the program may file a written request of appeal to the Director of the Commission. If a request of appeal is not made, the Commission’s proposed decision will automatically become final and the appropriate announcement will be made.

2. If a request of appeal is received, the Director of the Commission shall acknowledge receipt of the request and notify the program of the date of the appeal hearing. The appeal date shall be within sixty (60) days after the appeal has been filed.

3. The program filing the appeal may be represented by legal counsel in addition to the program administrator and other program representatives and shall be given the opportunity at such hearing to offer evidence and argument in writing or orally or both tending to refute or overcome the findings and decision of the Board of Commissioners. The educational program need not appear in person or by its representative at the appellate hearing.

4. Legal counsel of the American Dental Association will be available to members of the Appeal Board upon request.

5. No new information regarding correction of the deficiencies may be presented with the exception of review of new financial information if all of the following conditions are met: (i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made. (ii) The financial information is significant and bears materially on the financial deficiencies identified by the Commission. The criteria of significance and materiality are determined by the Commission. (iii) The only remaining deficiency cited by the Commission in support of a final adverse action decision is the institution’s or program’s failure to meet the Commission’s standard pertaining to finances. An institution or program may seek the review of new financial information described in this section only once and any determination by the Commission made with respect to that review does not provide a basis for an appeal.

6. The Appeal Board may make the following decisions: to affirm, amend, or remand, or reverse the adverse actions of the Commission. A decision to affirm, or amend or reverse the adverse action is implemented by the Commission. In a decision to remand the adverse action for further consideration, the Appeal Board will identify specific issues that the Commission must address. The Commission must act in a manner consistent with the Appeal
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Board’s decisions or instructions.

7. No change in the accreditation status of the program will occur pending disposition of the appeal.

8. Within ten (10) days of the hearing, the applicant shall be notified by tracked mail of the Appeal Board's decision. The decision may be to sustain the decision of the Commission or to remand the matter back to the Commission for reconsideration. Notice shall include a statement of the specifics on which the decision is based.

9. The decision rendered by the Appeal Board shall be final and binding.

10. In the event the educational program does not file a timely appeal of the Board of Commissioner’s findings and decisions, the Board of Commissioner’s decision shall become final.

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

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

Revised: 2/21; 8/18; 8/16; 8/11, 1/03; Reaffirmed: 8/10

4. Mechanism For The Conduct Of The Appeal Hearing:

1. A brief opening statement may be made by the Commission of Dental Accreditation for the purpose of establishing the Commission’s finding and the reasons therefore.

2. The Appellant will then present its argument to the Board.

3. The Commission may then present its rebuttal of the Appellant’s argument.

4. After hearing the evidence, the Appeal Board shall meet in executive session to discuss the appeal and make its decision. The Appeal Board’s decision may be to sustain the decision of the Commission, or remand the matter to the Commission for reconsideration. The decision shall be based on a majority vote of the members of the Appeal Board with the Chair voting only to break a tie vote.

5. The Appellant shall be notified by tracked mail of the decision of the Appeal Board, including a statement of specifics, within ten (10) days following the hearing.

Revised: 8/16; 7/07, 7/06, 7/00, 12/88, 1978; Reaffirmed: 8/11, 8/10; Adopted: 12/77
VOLUNTARY DISCONTINUANCE OF ACCREDITATION

The Commission may become aware of an accredited program’s decision to voluntarily discontinue its participation in the accreditation program when it receives official notification from the sponsoring institution’s chief executive officer. When the Commission becomes aware of the program’s intent to discontinue accreditation, it takes the following steps:

1. Commission staff verifies that both the program and institution understand the impact of this intended action and informs the institution and program of the specific audiences that will be notified of their decision to let accreditation lapse (the USDE Secretary, the appropriate accrediting agency and state licensing agency). If students/residents who matriculated prior to the program’s reported discontinuance effective date are enrolled in any year of the program, the program must submit a Teach-Out Plan until all of these students/residents have graduated. (See Policy on Discontinuance or Closure of Educational Programs Accredited by the Commission and Teach-Out Plans)

2. Within ten (10) business days thirty (30) days, Commission staff contacts the institution’s chief executive officer and program director and acknowledges the date when accreditation will lapse (i.e. program’s discontinuance effective date) and the date by which the program will no longer be listed in the Commission's lists of accredited programs (i.e. date of CODA meeting or mail ballot). The USDE Secretary and the state licensing or accrediting agency are copied on this letter. Commission staff will inform the program that any classes enrolled on or after the program’s reported date of discontinuance must be advised that they will not graduate from a CODA-accredited program. (See Policy on Discontinuance or Closure of Educational Programs Accredited by the Commission and Teach-Out Plans)

3. At its next meeting, or by mail ballot if waiting until the next meeting would preclude a timely review, the Commission will take action to affirm the program’s decision to let accreditation lapse, either through a Discontinuance or Teach-Out (See Other Accreditation Action Definitions). The USDE Secretary and appropriate state licensing or accrediting agency are copied on any follow-up correspondence to the institution/program that may occur after this meeting.

Revised: 2/21; 2/16; 8/15; 7/06, 7/00; Reaffirmed: 8/20; 8/10

DUE PROCESS RELATED TO WITHDRAWAL OF ACCREDITATION

An institution/program may request a special appearance (hearing) before the appropriate Review Committee in order to supplement the written information about the program which has already been provided to the Review Committee. (See Due Process Related to Review Committee Special Appearance)
If the Review Committee’s recommendation to the Commission is to withdraw accreditation, the Commission will notify the institution of the proposed action and the date of the Commission meeting at which the Review Committee’s recommendation will be considered. This notification will advise the institution of its right to provide additional information for the Commission to consider prior to reaching a decision on the proposed action. Any additional information must be submitted in writing at least one (1) week prior to the meeting, absent documented extraordinary circumstances, and should include any reasons why the institution believes that the withdrawal of accreditation is unjustified.

If the Commission determines that accreditation should be withdrawn, the program will be notified within fourteen (14) days and the notification is sent by tracked mail. The program is also notified of its right to appeal this decision to the Appeal Board. The filing of an appeal shall automatically stay the final decision of the Commission.

Adverse actions, or those that may be appealed, are defined as those related to denial or withdrawal of accreditation. Such decisions become final fourteen (14) days after the date on the transmittal letter or when any appeal has been resolved. The Commission has procedures in place to provide notice of the reasons for taking an adverse accreditation action. Such procedures are required in order for accrediting agencies to comply with U.S. Department of Education's Criteria and Procedures for Recognition of Accrediting Agencies.

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

12. Notice Of Reasons For Adverse Actions: Accrediting agencies recognized by the Secretary of the USDE, including the Commission, are required to report any adverse accreditation action (defined as an action to deny or withdraw accreditation). Accordingly, when the Commission makes a final decision to deny or withdraw a program’s accreditation, a brief statement summarizing the reasons for the Commission’s decision and the official comments that the affected program may make with regard to that decision, is made available to the USDE Secretary, the appropriate state licensing or authorizing agency and the public. The Commission’s final decision; the statement summarizing the reasons for the Commission’s decision; and the program’s official comments will be posted on the Commission’s website no later than sixty (60) days after the decision is final.

The Commission’s Notice of Reasons for Adverse Action Disclosure Statement includes the following information about the program’s accreditation history, past problems, current problems, specific reasons why action to deny or withdraw accreditation was taken and what future option are available to the program.

To illustrate the scope of the statement and the level of reasons reported, a sample announcement follows:

Disclosure Statement: Dental Assisting Program
Pick Your State Community College

The Commission on Dental Accreditation, the only nationally-recognized accrediting agency for predoctoral, advanced, and allied dental education programs, reviewed an application for initial accreditation of the new dental assisting program offered by Pick-Your-State Community College. On the basis of information provided in the application, the Commission was unable to grant “initial accreditation” status to the program.

The Commission determined, at its (date) meeting, that the application did not provide sufficient information and assurances that the proposed program meets the intent of the Accreditation Standards for Dental Assisting Education Programs. Specific concerns in compliance with the standards were noted in the following areas:

Financial Support (adequacy of resources);
Curriculum (adequacy of knowledge and skills offered, scope and depth of instruction in required areas, and documentation of student competence);
Admissions (documentation that written criteria, procedures, and policies are used);
Faculty (adequacy of teaching and supervision of students);
Facilities (insufficient documentation of adequacy of physical facilities and equipment).

The Commission informed the program and sponsoring institution that these specific concerns would need to be addressed before the institution reapplied for “initial accreditation” status of the dental assisting program.

CEO, Sponsoring Institution    (date)
Chair, Commission on Dental Accreditation  (date)

13. Procedure For Disclosure Notice Of Adverse Actions: The following procedure is used when an adverse action (to deny or withdraw accreditation) is taken. Applicants, when they inquire about initial accreditation, are to be notified by Commission staff that the Notice of Reasons for Adverse Actions statement will be prepared and distributed should accreditation be denied.

1. The Commission sends notice of any adverse action in a transmittal letter to the appropriate institutional executives no later than fourteen (14) days after the Commission meeting. This letter is sent by certified/tracked mail, (including email), and includes the reasons for any adverse action to deny or withdraw accreditation. All current and prospective students/residents/fellows must be informed of the Commission’s notice of any adverse
action within seven (7) business days of the program’s receipt of the notice. The USDE Secretary, the appropriate state entities, and any appropriate institutional accrediting agency are notified at this time, usually by a letter to the Secretary with copies to the other entities and the institution.

2. A statement of the reasons for any adverse action is developed and available for distribution within sixty (60) days. This new statement will include the same information that has been contained in the transmittal letter. For this reason, the statement will be drafted and the draft will be sent to the institution/program for review at the same time as the transmittal letter. As needed, the draft statement will be reviewed by legal counsel prior to being sent.

3. The institution must notify the Commission within fourteen (14) days if it wishes to indicate an intent to appeal an adverse action. If an intent to appeal is received, the usual appeal procedures are followed according to the Commission policy on Due Process Related to Appeal of Accreditation Actions.

4. If an intent to appeal is not received by the fourteen (14) day deadline specified, the adverse action is considered final and the USDE Secretary, the appropriate state entities, and any appropriate institutional accrediting agency are notified at this time, usually by a letter to the Secretary with copies to the other entities and the institution.

5. During the same fourteen (14) days, the institution/program will be asked to review the draft statement and:
   a. indicate agreement with the statement; and/or,
   b. make official comments with regard to the decision, or state that the affected institution has been offered the opportunity to provide official comment.

6. When the final statement (or statement and response) has been developed and signed by both parties, it will be distributed as required in the regulations to the USDE Secretary, to the appropriate state licensing or authorizing agency, to any appropriate institutional accrediting agency, and to the public. All current and prospective students/residents/fellows must be informed of the Commission’s final decision within seven (7) business days of the program’s receipt of the notice.

7. The Commission’s final decision; the statement summarizing the reasons for the Commission’s decision; and the program’s official comments will be posted on the Commission’s website no later than sixty (60) days after the decision is final.

When there are no differences of opinion regarding the statement, it may be possible to send it to the Secretary along with the letter in step #4 above, along with posting the final decision and reasons on the Commission’s website.

Revised: 2/21; 8/17; 5/12; 7/06; Reaffirmed: 8/14; 8/10; Adopted: 7/00; CODA: 07/94:6

POLICY ON REGARD FOR DECISIONS OF STATES AND OTHER ACCREDITING AGENCIES

The Commission takes into account decisions made by other recognized accrediting or state agencies. If the Commission determines that an institution sponsoring an accredited program or
a program seeking accreditation is the subject of an interim action or threatened loss of
accreditation or legal authority to provide postsecondary education, the Commission will act as
follows.

If a recognized institutional accrediting agency takes adverse action with respect to the
institution offering the program or places the institution on public probationary status, the
Commission will promptly review its accreditation of the program to determine if it should take
adverse action against the program.

The Commission does not renew the accreditation status of a program during any period in
which the institution offering the program:
• Is the subject of an interim action or final decision by a recognized institutional accrediting
agency potentially leading to the suspension, revocation, withdrawal, or termination of
accreditation or pre-accreditation;
• Is the subject of a decision by a recognized institutional accrediting agency to deny
accreditation or pre-accreditation;
• Is the subject of a pending or final interim action by a state agency potentially leading to
the suspension, revocation, withdrawal or termination of the institution's legal authority to
provide postsecondary education;
• Has been notified of probation or an equivalent status, or a threatened loss of accreditation,
and the due process procedures required by the action have not been completed; and/or
• Has been notified of a threatened suspension, revocation, or termination by a state of the
institution's legal authority to provide postsecondary education, and the due process
procedures required by the action have not been completed.

In considering whether to grant initial accreditation to a program, the Commission takes into
account actions by:
• Recognized institutional accrediting agencies that have denied accreditation or pre-
accreditation to the institution offering the program, placed the institution on public
probationary status, or revoked the accreditation or pre-accreditation of the institution; and
• State agency that has suspended, revoked, or terminated the institution's legal authority to
provide postsecondary education.

If the Commission grants accreditation to a program notwithstanding its actions described above,
the Commission will provide to the USDE Secretary, within 30 days of granting initial or
continued accreditation, a thorough and reasonable explanation, consistent with the accreditation
standards, why the previous action by a recognized institutional accrediting agency or the state
does not preclude the Commission's grant of accreditation. The Commission’s review and
explanation will consider each of the findings of the other agency in light of its own standards.

Upon formal request, the Commission will share with other appropriate USDE-recognized
accrediting agencies and USDE-recognized State approval agencies information about the
accreditation status of a program and any adverse actions it has taken against an accredited program.

Revised: 2/21; 5/12; Reaffirmed: 8/20; 8/15; 8/10, 7/07, 7/01; Revised: 7/96; 12/88
§602.16 Accreditation and preaccreditation standards.
(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if the following conditions are met:
(1) The agency’s accreditation standards must set forth clear expectations for the institutions or programs it accredits in the following areas:
   (i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of State licensing examinations, course completion, and job placement rates.
   (ii) Curricula.
   (iii) Faculty.
   (iv) Facilities, equipment, and supplies.
   (v) Fiscal and administrative capacity as appropriate to the specified scale of operations.
   (vi) Student support services.
   (vii) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.
   (viii) Measures of program length and the objectives of the degrees or credentials offered.
   (ix) Record of student complaints received by, or available to, the agency.
   (x) Record of compliance with the institution's program responsibilities under title IV of the Act, based on the most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to the agency; and
(2) The agency's preaccreditation standards, if offered, must--
   (i) Be appropriately related to the agency's accreditation standards; and
   (ii) Not permit the institution or program to hold preaccreditation status for more than five years before a final accrediting action is made.
(b) Agencies are not required to apply the standards described in paragraph (a)(1)(x) of this section to institutions that do not participate in title IV, HEA programs. Under such circumstance, the agency’s grant of accreditation or preaccreditation must specify that the grant, by request of the institution, does not include participation by the institution in title IV, HEA programs.
(c) If the agency only accredits programs and does not serve as an institutional accrediting agency for any of those programs, its accreditation standards must address the areas in paragraph (a)(1) of this section in terms of the type and level of the program rather than in terms of the institution.
(d)
(1) If the agency has or seeks to include within its scope of recognition the evaluation of the quality of institutions or programs offering distance education, correspondence courses, or direct assessment education, the agency's standards must effectively address the quality of an institution's distance education, correspondence courses, or direct assessment education in the areas identified in paragraph (a)(1) of this section.

(2) The agency is not required to have separate standards, procedures, or policies for the evaluation of distance education or correspondence courses.

(e) If none of the institutions an agency accredits participates in any title IV, HEA program, or if the agency only accredits programs within institutions that are accredited by a nationally recognized institutional accrediting agency, the agency is not required to have the accreditation standards described in paragraphs (a)(1)(viii) and (a)(1)(x) of this section.

(f) An agency that has established and applies the standards in paragraph (a) of this section may establish any additional accreditation standards it deems appropriate.

(g) Nothing in paragraph (a) of this section restricts--

(1) An accrediting agency from setting, with the involvement of its members, and applying accreditation standards for or to institutions or programs that seek review by the agency;

(2) An institution from developing and using institutional standards to show its success with respect to student achievement, which achievement may be considered as part of any accreditation review; or

(3) Agencies from having separate standards regarding an institution’s or a program’s process for approving curriculum to enable programs to more effectively meet the recommendations of--

(i) Industry advisory boards that include employers who hire program graduates;

(ii) Widely recognized industry standards and organizations;

(iii) Credentialing or other occupational registration or licensure; or

(iv) Employers in a given field or occupation, in making hiring decisions.

(4) Agencies from having separate faculty standards for instructors teaching courses within a dual or concurrent enrollment program, as defined in 20 U.S.C. 7801, or career and technical education courses, as long as the instructors, in the agency’s judgment, are qualified by education or work experience for that role.

Note: On August 31, 2020, the Department rescinded Dear Colleague Letter 06-17 (the “DCL”), which was issued in September 2006, and had been interpreted to mean that, if an institution does not offer more than 50% of an educational program via distance education, the institution’s accrediting agency is not required to expand its scope of recognition to include distance education. Agencies should be aware that, pursuant to 34 C.F.R. § 668.8(m), a distance education program is not eligible for Title IV participation unless the institution has been evaluated and accredited to offer distance education programs by a recognized accrediting agency that has distance education within its scope of recognition. This requirement applies to the offering of any portion of a distance education program. Accrediting agencies should work with institutions they accredit or plan to accredit to communicate the agency’s requirements for evaluating whether the institution is capable of effective delivery of distance education programs. Further, if distance education in a program offered by an institution or at the institution as a whole exceeds 50%, accreditors must approve this as a substantive change.
pursuant to 34 C.F.R. § 602.22(a)(1)(ii)(C). Pursuant to 34 C.F.R. § 602.27(a)(4), the addition of distance education to an agency's scope of recognition requires only written notification to the Department. The Department is waiving, through the end of the term that begins after the date on which the Federally-declared national emergency related to COVID-19 is rescinded, the requirement that institutions must have obtained accreditation to offer distance education programs. The Department recognizes that it may take additional time for accreditors and institutions to implement the changes necessary to come into compliance with 34 C.F.R. § 668.8(m) beyond the expiration of the waiver period because of the uncertainty of at what point in a term the national emergency will end. Accordingly, the Department may issue further guidance and that guidance may also allow additional time following the end of the national emergency for accrediting agencies and institutions to come into compliance with the requirements of 34 C.F.R. § 668.8(m).

§602.18 Ensuring consistency in decision-making.
(a) The agency must consistently apply and enforce standards that respect the stated mission of the institution, including religious mission, and that ensure that the education or training offered by an institution or program, including any offered through distance education, correspondence courses, or direct assessment education is of sufficient quality to achieve its stated objective for the duration of any accreditation or preaccreditation period.
(b) The agency meets the requirement in paragraph (a) of this section if the agency—
(1) Has written specification of the requirements for accreditation and preaccreditation that include clear standards for an institution or program to be accredited or preaccredited;
(2) Has effective controls against the inconsistent application of the agency's standards;
(3) Bases decisions regarding accreditation and preaccreditation on the agency's published standards and does not use as a negative factor the institution's religious mission-based policies, decisions, and practices in the areas covered by § 602.16(a)(1)(ii), (iii), (iv), (vi), and (vii) provided, however, that the agency may require that the institution's or program's curricula include all core components required by the agency;
(4) Has a reasonable basis for determining that the information the agency relies on for making accrediting decisions is accurate;
(5) Provides the institution or program with a detailed written report that clearly identifies any deficiencies in the institution's or program's compliance with the agency's standards; and
(6) Publishes any policies for retroactive application of an accreditation decision, which must not provide for an effective date that predates either—
(i) An earlier denial by the agency of accreditation or preaccreditation to the institution or program; or
(ii) The agency's formal approval of the institution or program for consideration in the agency's accreditation or preaccreditation process.
(c) Nothing in this part prohibits an agency, when special circumstances exist, to include innovative program delivery approaches or, when an undue hardship on students occurs, from applying equivalent written standards, policies, and procedures that provide alternative means of satisfying one or more of the requirements set forth in 34 CFR 602.16, 602.17, 602.19, 602.20,
602.22, and 602.24, as compared with written standards, policies, and procedures the agency ordinarily applies, if—

(1) The alternative standards, policies, and procedures, and the selection of institutions or programs to which they will be applied, are approved by the agency's decision-making body and otherwise meet the intent of the agency's expectations and requirements;

(2) The agency sets and applies equivalent goals and metrics for assessing the performance of institutions or programs;

(3) The agency's process for establishing and applying the alternative standards, policies, and procedures is set forth in its published accreditation manuals; and

(4) The agency requires institutions or programs seeking the application of alternative standards to demonstrate the need for an alternative assessment approach, that students will receive equivalent benefit, and that students will not be harmed through such application.

(d) Nothing in this part prohibits an agency from permitting the institution or program to be out of compliance with one or more of its standards, policies, and procedures adopted in satisfaction of §§ 602.16, 602.17, 602.19, 602.20, 602.22, and 602.24 for a period of time, as determined by the agency annually, not to exceed three years unless the agency determines there is good cause to extend the period of time, and if—

(1) The agency and the institution or program can show that the circumstances requiring the period of noncompliance are beyond the institution's or program's control, such as—

(i) A natural disaster or other catastrophic event significantly impacting an institution's or program's operations;

(ii) Accepting students from another institution that is implementing a teach-out or closing;

(iii) Significant and documented local or national economic changes, such as an economic recession or closure of a large local employer;

(iv) Changes relating to State licensure requirements;

(v) The normal application of the agency's standards creates an undue hardship on students; or

(vi) Instructors who do not meet the agency's typical faculty standards, but who are otherwise qualified by education or work experience, to teach courses within a dual or concurrent enrollment program, as defined in 20 U.S.C. 7801, or career and technical education courses;

(2) The grant of the period of noncompliance is approved by the agency's decision-making body;

(3) The agency projects that the institution or program has the resources necessary to achieve compliance with the standard, policy, or procedure postponed within the time allotted; and

(4) The institution or program demonstrates to the satisfaction of the agency that the period of noncompliance will not—

(i) Contribute to the cost of the program to the student without the student's consent;

(ii) Create any undue hardship on, or harm to, students; or

(iii) Compromise the program's academic quality.

§602.20 Enforcement of standards.

(a) If the agency's review of an institution or program under any standard indicates that the institution or program is not in compliance with that standard, the agency must—
(1) Follow its written policy for notifying the institution or program of the finding of noncompliance;
(2) Provide the institution or program with a written timeline for coming into compliance that is reasonable, as determined by the agency's decision-making body, based on the nature of the finding, the stated mission, and educational objectives of the institution or program. The timeline may include intermediate checkpoints on the way to full compliance and must not exceed the lesser of four years or 150 percent of the—
(i) Length of the program in the case of a programmatic accrediting agency; or
(ii) Length of the longest program at the institution in the case of an institutional accrediting agency;
(3) Follow its written policies and procedures for granting a good cause extension that may exceed the standard timeframe described in paragraph (a)(2) of this section when such an extension is determined by the agency to be warranted; and
(4) Have a written policy to evaluate and approve or disapprove monitoring or compliance reports it requires, provide ongoing monitoring, if warranted, and evaluate an institution's or program's progress in resolving the finding of noncompliance.
(b) Notwithstanding paragraph (a) of this section, the agency must have a policy for taking an immediate adverse action, and take such action, when the agency has determined that such action is warranted.
(c) If the institution or program does not bring itself into compliance within the period specified in paragraph (a) of this section, the agency must take adverse action against the institution or program, but may maintain the institution's or program's accreditation or preaccreditation until the institution or program has had reasonable time to complete the activities in its teach-out plan or to fulfill the obligations of any teach-out agreement to assist students in transferring or completing their programs.
(d) An agency that accredits institutions may limit the adverse or other action to particular programs that are offered by the institution or to particular additional locations of an institution, without necessarily taking action against the entire institution and all of its programs, provided the noncompliance was limited to that particular program or location.
(e) All adverse actions taken under this subpart are subject to the arbitration requirements in 20 U.S.C. 1099b(e).
(f) An agency is not responsible for enforcing requirements in 34 CFR 668.14, 668.15, 668.16, 668.41, or 668.46, but if, in the course of an agency's work, it identifies instances or potential instances of noncompliance with any of these requirements, it must notify the Department.
(g) The Secretary may not require an agency to take action against an institution or program that does not participate in any title IV, HEA or other Federal program as a result of a requirement specified in this part.

§602.25 Due process.
The agency must demonstrate that the procedures it uses throughout the accrediting process satisfy due process. The agency meets this requirement if the agency does the following:
(a) Provides adequate written specification of its requirements, including clear standards, for an institution or program to be accredited or preaccredited.

(b) Uses procedures that afford an institution or program a reasonable period of time to comply with the agency's requests for information and documents.

(c) Provides written specification of any deficiencies identified at the institution or program examined.

(d) Provides sufficient opportunity for a written response by an institution or program regarding any deficiencies identified by the agency, to be considered by the agency within a time frame determined by the agency, and before any adverse action is taken.

(e) Notifies the institution or program in writing of any adverse accrediting action or an action to place the institution or program on probation or show cause. The notice describes the basis for the action.

(f) Provides an opportunity, upon written request of an institution or program, for the institution or program to appeal any adverse action prior to the action becoming final.

(1) The appeal must take place at a hearing before an appeals panel that—

(i) May not include current members of the agency's decision-making body that took the initial adverse action;

(ii) Is subject to a conflict of interest policy;

(iii) Does not serve only an advisory or procedural role, and has and uses the authority to make the following decisions: To affirm, amend, or remand adverse actions of the original decision-making body; and

(iv) Affirms, amends, or remands the adverse action. A decision to affirm or amend the adverse action is implemented by the appeals panel or by the original decision-making body, at the agency's option; however, in the event of a decision by the appeals panel to remand the adverse action to the original decision-making body for further consideration, the appeals panel must explain the basis for a decision that differs from that of the original decision-making body and the original decision-making body in a remand must act in a manner consistent with the appeals panel's decisions or instructions.

(2) The agency must recognize the right of the institution or program to employ counsel to represent the institution or program during its appeal, including to make any presentation that the agency permits the institution or program to make on its own during the appeal.

(g) The agency notifies the institution or program in writing of the result of its appeal and the basis for that result.

(h) (1) The agency must provide for a process, in accordance with written procedures, through which an institution or program may, before the agency reaches a final adverse action decision, seek review of new financial information if all of the following conditions are met:

(i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made.

(ii) The financial information is significant and bears materially on the financial deficiencies identified by the agency. The criteria of significance and materiality are determined by the agency.
(iii) The only remaining deficiency cited by the agency in support of a final adverse action decision is the institution's or program's failure to meet an agency standard pertaining to finances.

(2) An institution or program may seek the review of new financial information described in paragraph (h)(1) of this section only once and any determination by the agency made with respect to that review does not provide a basis for an appeal.

§602.26 Notification of accrediting decisions.

The agency must demonstrate that it has established and follows written procedures requiring it to provide written notice of its accrediting decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public. The agency meets this requirement if the agency, following its written procedures—

(a) Provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public no later than 30 days after it makes the decision:

(1) A decision to award initial accreditation or preaccreditation to an institution or program.
(2) A decision to renew an institution's or program's accreditation or preaccreditation;

(b) Provides written notice of a final decision of a probation or equivalent status or an initiated adverse action to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision and requires the institution or program to disclose such an action within seven business days of receipt to all current and prospective students;

(c) Provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision, but no later than 30 days after it reaches the decision:

(1) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program.
(2) A final decision to take any other adverse action, as defined by the agency, not listed in paragraph (c)(1) of this section;

(d) Provides written notice to the public of the decisions listed in paragraphs (b) and (c) of this section within one business day of its notice to the institution or program;

(e) For any decision listed in paragraph (c) of this section, requires the institution or program to disclose the decision to current and prospective students within seven business days of receipt and makes available to the Secretary, the appropriate State licensing or authorizing agency, and the public, no later than 60 days after the decision, a brief statement summarizing the reasons for the agency's decision and the official comments that the affected institution or program may wish to make with regard to that decision, or evidence that the affected institution has been offered the opportunity to provide official comment;

(f) Notifies the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution or program—
(1) Decides to withdraw voluntarily from accreditation or preaccreditation, within 10 business days of receiving notification from the institution or program that it is withdrawing voluntarily from accreditation or preaccreditation; or
(2) Lets its accreditation or preaccreditation lapse, within 10 business days of the date on which accreditation or preaccreditation lapses.

§602.28 Regard for decisions of States and other accrediting agencies.
(a) If the agency is an institutional accrediting agency, it may not accredit or preaccredit institutions that lack legal authorization under applicable State law to provide a program of education beyond the secondary level.
(b) Except as provided in paragraph (c) of this section, the agency may not grant initial or renewed accreditation or preaccreditation to an institution, or a program offered by an institution, if the agency knows, or has reasonable cause to know, that the institution is the subject of--
(1) A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State;
(2) A decision by a recognized agency to deny accreditation or preaccreditation;
(3) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; or
(4) Probation or an equivalent status imposed by a recognized agency.
(c) The agency may grant accreditation or preaccreditation to an institution or program described in paragraph (b) of this section only if it provides to the Secretary, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, why the action of the other body does not preclude the agency's grant of accreditation or preaccreditation.
(d) If the agency learns that an institution it accredits or preaccredits, or an institution that offers a program it accredits or preaccredits, is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the agency must promptly review its accreditation or preaccreditation of the institution or program to determine if it should also take adverse action or place the institution or program on probation or show cause.
(e) The agency must, upon request, share with other appropriate recognized accrediting agencies and recognized State approval agencies information about the accreditation or preaccreditation status of an institution or program and any adverse actions it has taken against an accredited or preaccredited institution or program.

§602.3 What definitions apply to this part?

The following definitions apply to this part:

Accreditation means the status of public recognition that an accrediting agency grants to an educational institution or program that meets the agency's standards and requirements.
**Accrediting agency** or **agency** means a legal entity, or that part of a legal entity, that conducts accrediting activities through voluntary, non-Federal peer review and makes decisions concerning the accreditation or preaccreditation status of institutions, programs, or both.

**Act** means the Higher Education Act of 1965, as amended.

**Adverse accrediting action** or **adverse action** means the denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program.

**Advisory Committee** means the National Advisory Committee on Institutional Quality and Integrity.

**Compliance report** means a written report that the Department requires an agency to file when the agency is found to be out of compliance to demonstrate that the agency has corrected deficiencies specified in the decision letter from the senior Department official or the Secretary. Compliance reports must be reviewed by Department staff and the Advisory Committee and approved by the senior Department official or, in the event of an appeal, by the Secretary.

**Designated Federal Official** means the Federal officer designated under section 10(f) of the Federal Advisory Committee Act, 5 U.S.C. Appdx. 1.

**Distance education** means education that uses one or more of the technologies listed in paragraphs (1) through (4) of this definition 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—

1. The internet;
2. One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
3. Audio conferencing; or
4. 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 in paragraphs (1) through (3) of this definition.

**Final accrediting action** means a final determination by an accrediting agency regarding the accreditation or preaccreditation status of an institution or program. A final accrediting action is a decision made by the agency, at the conclusion of any appeals process available to the institution or program under the agency's due process policies and procedures.

**Institutional accrediting agency** means an agency that accredits institutions of higher education.
**Monitoring report** means a report that an agency is required to submit to Department staff when it is found to be substantially compliant. The report contains documentation to demonstrate that—

(i) The agency is implementing its current or corrected policies; or

(ii) The agency, which is compliant in practice, has updated its policies to align with those compliant practices.

**Program** means a postsecondary educational program offered by an institution of higher education that leads to an academic or professional degree, certificate, or other recognized educational credential.

**Programmatic accrediting agency** means an agency that accredits specific educational programs, including those that prepare students in specific academic disciplines or for entry into a profession, occupation, or vocation.

**Recognition** means an unappealed determination by the senior Department official under §602.36, or a determination by the Secretary on appeal under §602.37, that an accrediting agency complies with the criteria for recognition listed in subpart B of this part and that the agency is effective in its application of those criteria. A grant of recognition to an agency as a reliable authority regarding the quality of education or training offered by institutions or programs it accredits remains in effect for the term granted except upon a determination made in accordance with subpart C of this part that the agency no longer complies with the subpart B criteria or that it has become ineffective in its application of those criteria.

**Representative of the public** means a person who is not—

(1) An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the agency or has applied for accreditation or preaccreditation;

(2) A member of any trade association or membership organization related to, affiliated with, or associated with the agency; or

(3) A spouse, parent, child, or sibling of an individual identified in paragraph (1) or (2) of this definition.

**Scope of recognition** or **scope** means the range of accrediting activities for which the Secretary recognizes an agency. The Secretary may place a limitation on the scope of an agency's recognition for title IV, HEA purposes. The Secretary's designation of scope defines the recognition granted according to—

(i) Types of degrees and certificates covered;
(ii) Types of institutions and programs covered;
(iii) Types of preaccreditation status covered, if any; and
(iv) Coverage of accrediting activities related to distance education or correspondence courses.

**Senior Department official** means the official in the U.S. Department of Education designated by the Secretary who has, in the judgment of the Secretary, appropriate seniority and relevant subject matter knowledge to make independent decisions on accrediting agency recognition.

**Substantial compliance** means the agency demonstrated to the Department that it has the necessary policies, practices, and standards in place and generally adheres with fidelity to those policies, practices, and standards; or the agency has policies, practices, and standards in place that need minor modifications to reflect its generally compliant practice.