

## POLICIES AND PROCEDURES FOR REVIEW

(underline indicates addition; strikethrough indicates deletion)

### Revised Purpose of This Manual – EOPP p. 1

#### A. PURPOSE OF THIS MANUAL

This manual provides information about the Commission on Dental Accreditation's accreditation policies and procedures for all institutions sponsoring ~~predoctoral dental, advanced, and allied dental and advanced~~ dental education programs. It contains background information on the Commission and its accreditation policies, as well as specific information to assist programs in attaining accreditation and in preparing for on-site reviews. The information in this manual applies to all dental education programs (~~predoctoral dental, advanced, and allied dental~~ and allied dental) ~~dental specialty, advanced general dentistry, dental assisting, dental hygiene, dental therapy and dental laboratory technology~~ except where specifically noted. Dates following each policy refer to the date of the Commission action to Adopt, Revise or Reaffirm the policy. A reference noted as CODA: 7/00;4 indicates that additional information can be found on page four (4) of the Commission's July 2000 minutes.

Revised: 8/17

### Revised CODA Rules, Article IV, Accreditation Program, Section 4, Appeal – EOPP p. 6 (comma placement)

#### Article IV. ACCREDITATION PROGRAM

Section 4. APPEAL: In the event the final decision of the Board of Commissioners is a denial or withdrawal of accreditation, the educational program shall be informed of this decision within fourteen (14) days following the Commission meeting. Within fourteen (14) days after receipt of the final decision of the Board of Commissioners, the educational program may appeal the decision of the Board of Commissioners by filing a written appeal with the Director of the Board of Commissioners. The filing of an appeal shall automatically stay the final decision of the Board of Commissioners. The Appeal Board of the Commission shall convene and hold its hearing within sixty (60) days after the appeal is filed. The educational program filing the appeal may be represented by legal counsel 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. 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. The educational program need not appear in person or by its representative at the appellate hearing. The Appeal Board may make the following decisions: to affirm, amend, remand, or reverse the adverse actions of the Commission. A decision to affirm, 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 Board's decisions or instructions. The Appeal Board shall advise the appellant educational program of the Appeal Board's decision in writing by tracked mail or courier service signature

required. The decision rendered by the Appeal Board shall be final and binding. In the event the educational program does not file a timely appeal of the Board of Commissioners' findings and decision, the Board of Commissioners' decision shall become final.

Revised: 8/17; 1/17; 8/15; 8/10, 10/02, 10/97, 10/87, 11/82; Reaffirmed: 8/12

Revision to Article IV, Section IV (comma placement), adopted by the Commission on Dental Accreditation, August 2017.

## Revised Scope and Decisions – EOPP p. 8

### C. SCOPE AND DECISIONS

The Commission on Dental Accreditation is concerned with the educational quality of ~~predoctoral dental, allied dental and~~ advanced, and ~~specialty allied~~ dental education programs in the United States. The Commission accredits more than ~~1300~~ 1400 programs in the disciplines within its purview, conducting all aspects of the accreditation process. Through its accreditation activities, the Commission attempts to foster educational excellence, supports programmatic self-improvement and assures the general public of the ongoing availability of quality dental care. These goals are an integral part of a process of evaluation which combines on-site visits with regular review of written and quantitative data. Decisions on accreditation status are the sole responsibility of the Commission. Neither Commission staff, site visitors, independent consultants, individual members of the Commission, nor any other agents of the Commission are empowered to make or modify accreditation decisions.

The Commission formulates and adopts accreditation standards for the accreditation of predoctoral ~~dental education programs~~, advanced, ~~and specialty dental education programs~~ and allied dental education programs.

The Commission, in fulfilling its accreditation responsibilities, focuses on the educational results or outcomes of the programs for which it has authority, as well as on the process used to obtain these results. During its review process, the Commission evaluates programs in relation to predetermined standards. These accreditation standards afford educational institutions latitude and flexibility in program development and implementation. In evaluating the educational process, the Commission applies the established accreditation standards for each discipline uniformly to all programs. All accreditation actions are based on and directly linked to the educational standards or required accreditation policies.

The Commission shares routinely with other accrediting agencies and state licensing agencies information about the status of and any adverse actions taken against any accredited program. Likewise, the Commission receives information about the accreditation actions taken by other accrediting agencies. In accord with established procedure, staff reviews that information and makes note of actions taken at those institutions that also sponsor a Commission-accredited program. When a new program seeks initial accreditation, information regarding the sponsoring institution's accreditation status must be provided. If any potential problems are revealed, staff seeks additional clarifying information and presents that information to the Commission, usually at its next regularly scheduled meeting. If the Commission were notified by the Department of Education of a potential problem at an institution sponsoring an education program accredited by the Commission on Dental Accreditation, that issue would be addressed immediately.

Revised: 8/17; Reaffirmed: 8/12, 8/10

**Revised United States Department of Education – EOPP p. 9 (comma placement)****D. UNITED STATES DEPARTMENT OF EDUCATION**

The United States Department of Education (USDE) periodically publishes a list of Nationally Recognized Accrediting Agencies and Associations, which is used to determine eligibility for U.S. federal funding or government assistance under certain legislation. Agencies and associations included on the USDE list are those determined to be the reliable authorities in evaluating the quality of education offered by educational institutions or programs. In order for institutions to become eligible for federal funds, the accrediting agency for that institution must be recognized by USDE. The authority and recognition responsibility of USDE is governed by the Higher Education Act (HEA) of 1965, as amended. This legislation is periodically reauthorized, usually at five-year intervals. Following each reauthorization, the Department promulgates new Procedures and Criteria for Recognition of Accrediting Agencies. The Secretary of Education requires the Commission on Dental Accreditation to submit to USDE the standards, policies, and procedures used in its evaluation program. Periodic reviews by USDE are conducted to determine the Commission's continued eligibility for recognition. The Commission on Dental Accreditation has been recognized since the first recognition list was published in 1952.

**Policy On Communication With The United States Department Of Education (USDE):**

As required by the USDE, the Commission will forward to the USDE Secretary annually the following:

- Copies of all Annual Report(s);
- Copies, updated annually, of its directory of accredited programs;
- A summary of the Commission's major accrediting activities during the previous year, if requested by the Secretary of Education; and
- Any proposed changes in the Commission's policies, procedures, or accreditation standards that might alter the Commission's scope of recognition or compliance with the requirements of this part of the USDE recognition criteria.

Revised: 8/17; 8/10; Reaffirmed: 8/12, 7/07, 7/01; CODA: 7/96:23

**Revised Philosophy of Accreditation – Accreditation Standards - EOPP p. 9**

**1. Accreditation Standards:** The Commission on Dental Accreditation evaluates the educational quality of predoctoral, advanced, and allied dental education ~~dental and dental-related~~ programs in the United States. All 50 states plus Puerto Rico and the District of Columbia recognize the Commission's authority to accredit predoctoral, advanced, and allied dental ~~dental and dental-related~~ education programs in the predoctoral, advanced, and allied dental education ~~dental and dental-related~~ disciplines. The Commission also evaluates the educational quality of international dental education programs (see International Predoctoral Policies and Procedures). The Commission on Dental Accreditation has developed accreditation standards for each of the disciplines within its purview. The standards, which are the basis for accreditation actions, are reviewed periodically and revised as necessary (see Policy and Procedures for Development and Revision of Accreditation Standards). Documents for each discipline are available on the Commission's website and from the Commission office upon request. In addition, each predoctoral, advanced, and allied dental education ~~dental and dental-related educational~~ program defines its own goals and objectives for preparing members of the dental team. The extent to which a program meets its own goals and objectives is also considered by the Commission.

Revised: 8/17; Reaffirmed: 8/10

**Revised Reciprocal Agreement with CDAC - EOPP p. 10****RECIPROCAL AGREEMENT WITH THE COMMISSION ON DENTAL ACCREDITATION OF CANADA**

The reciprocal accreditation arrangement between the Commission on Dental Accreditation and the Commission on Dental Accreditation of Canada (CDAC) has been maintained and expanded since its adoption in 1956. Under the reciprocal agreement, each Commission recognizes the accreditation of educational programs in specified categories accredited by the other agency. Under this arrangement, the Commissions agree that the educational programs accredited by the other agency are equivalent to their own and no further education is required for eligibility for licensure. Commissioners and staff of the accrediting agencies will regularly attend the meetings of the other agency and its standing committees. In addition, Commissioners and/or staff will participate annually in at least one site visit conducted by the other agency. The Commissions believe that this cross-participation is important in maintaining an understanding of the accreditation processes in each country and in ensuring that the accreditation processes in each country continue to be equivalent.

The following educational programs are included in the scope of the reciprocal agreement.

- Predoctoral dental education
- Dental hygiene
- Level II dental assisting
- All nine (9) ADA recognized advanced specialty education programs

The following statement is ~~found in the “Find a Program” section of the CODA website used in each issue of the List of Accredited Advanced Education Programs and in each issue of the List of Accredited Dental Education Programs:~~

**Canadian Programs**

By reciprocal agreement, programs that are accredited by the Commission on Dental Accreditation of Canada are recognized by the Commission on Dental Accreditation. However, individuals attending dental programs in one country and planning to practice in another country should carefully investigate the requirements of the licensing jurisdiction where they wish to practice.

By reciprocal agreement, Level II Dental Assisting and Dental Hygiene programs that are accredited by the Commission on Dental Accreditation of Canada are recognized by the Commission on Dental Accreditation.

Revised: 8/17; 2/15; 7/91; Reaffirmed: 8/12, 8/10, 7/07, 1/03, 7/01; CODA: 1/97:03, 1/94:4-5

**Revised Policy on Integrity – EOPP p. 11****G. INTEGRITY**

Integrity is expected throughout the accreditation process. In its relationships with the Commission, a program shall demonstrate honesty and integrity. By seeking accreditation or re-accreditation, the program agrees to comply with Commission requirements, policies, guidelines, self-study requirements, decisions, and requests.

- In the accreditation process, the program shall be completely candid, providing all pertinent information; and

- With due regard for the rights of individual privacy, the program shall provide the Commission with access to all parts of its operations, and with complete and accurate information about the program's affairs, including reports of other accrediting, licensing, and auditing agencies, as requested.

The program's failure to report honestly, by presenting false information, by omission of essential information or by distortion of information with the intent to mislead, constitutes a breach of integrity, in and of itself. If it appears to the Commission that the program has violated the principles of integrity in the materials submitted to the Commission or in any other manner that requires immediate attention, an investigation will be made, and the program will be offered an opportunity to respond to suspected violations. The Commission will ordinarily withdraw accreditation from a program, after due notice, if:

- The Commission concludes that the program has engaged in illegal conduct or is deliberately misrepresenting itself or presenting false information to the faculty, staff, students, the public or the Commission; or
- The program fails to provide fully and truthfully all pertinent information and materials requested by the Commission.

The Commission may immediately withdraw accreditation if it deems that action to be the most appropriate way to address the issue.

Revised: 8/17; Reaffirmed: 8/12, 8/10; Adopted: 7/08

## **Revised Policy on Development of Administrative and Operational Policy Statements – EOPP p. 11**

### H. DEVELOPMENT OF ADMINISTRATIVE AND OPERATIONAL POLICY STATEMENTS

The purpose of the Commission on Dental Accreditation as described in its *Rules* and in the American Dental Association (ADA) *Bylaws* is (1) to formulate and adopt requirements and guidelines for the accreditation of ~~predoctoral, and dental,~~ advanced dental ~~educational~~ and allied dental educational~~al~~ programs and (2) to accredit ~~predoctoral and dental,~~ advanced dental ~~educational~~ and allied dental educational~~al~~ programs. It is frequently necessary for the Commission to develop policy statements in the process of conducting its business. Such policy may be accreditation related, administrative or operational. The intended audience of a policy statement may be the accredited programs, the broader educational community, the dental community, the general public or some other more specialized audience.

Although policy statements adopted by the Commission may serve a variety of purposes, the procedures which precede adoption are very similar. Comment from all potentially affected communities will generally be obtained by circulating the proposed policy to the appropriate discipline-~~specific related~~ Review Committees and, on occasion, to those organizations traditionally viewed as partners in the accreditation process. Some circumstances dictate even wider circulation to a broader community to provide the Commission with the information it needs in order to take action. Although the issue may have come from a specific discipline, the Commission may determine that the issue may affect a broader community and provide guidance to staff for further development of the issue. While the Commission may elect to circulate policy for comment, it is not required to do so. Operational policy, such as that related to Commission and Review Committee meetings or policies and procedures related to the accreditation of programs, are the purview of the Commission's ~~s~~Standing ~~e~~Committee on Documentation and Policy Review Outcome Assessment, and may not be sent out for comment.

Revised: 8/17; Reaffirmed: 8/12, 8/10

- 1. Procedure:** The following procedure is used when basic policy statements are developed:
1. An issue or concern surfaces during or between meetings and is placed on the agenda for the next meeting of the Commission.
  2. If an issue surfaces between meetings, it is automatically placed on the next agenda.
  3. If an issue surfaces during a meeting, the Commission determines whether or not the issue will be considered further at the next meeting.
  4. Staff studies the issue, gathers information from appropriate sources and develops a draft policy statement for circulation to all potentially affected Review Committees.
  5. The recommendations of each affected Review Committee on the draft policy statement are forwarded to the Commission. The Commission may take action on the statement in one of the following ways:
    - The statement may be ruled unnecessary and rejected;
    - The statement may be referred back to staff for further work (additional study or redrafting) which should be clearly specified; or
    - The statement may be adopted, with or without amendments.

If adopted, the policy statement is included in the appropriate compilation of Commission policy statements. In general, the following occurs:

- Accreditation-related policies are included in the Commission's *Evaluation and Operational Policies and Procedures Manual*.
- Accredited programs will be informed of the new policy, usually through an [announcement article](#) posted in the Accreditation Area of the Commission's website.

Revised: [8/17](#); 2/15; Reaffirmed: 8/12, 8/10

## Revised Review Committees and Review Committee Meetings – EOPP p. 13

### A. 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 ~~specialty or~~ 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. ~~Specialty or d~~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, specialty 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 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; however, more than 50% of the discipline-specific members must be present to evaluate the consent agenda.  
Revised: 8/17; 2/15; 1/14, 2/13, 8/10, 7/09; 7/08; 7/07; Adopted: 1/06

### Revised Review Committee Nomination Criteria – EOPP p. 15

**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, 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.

#### Educator Nominees:

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

#### Practitioner Nominees:

- Commitment to predoctoral dental, advanced, dental and/or allied dental education;
- Prior or current experience as a practitioner; and

- Formal education and credential in the applicable discipline.

Public/Consumer Nominees:

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

Higher Education Administrator:

- A commitment to bring the higher education administrator perspective to the Review Committee deliberations. In 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.

Hospital Administrator:

- A commitment to bring the hospital administrator perspective to Review Committee deliberations. In 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: 8/17; 8/14; 8/10; Adopted: 07/08

**Revised Policy on Chairs of Review Committees – EOPP p. 16**

**5. Chairs Of Review Committees:** Review Committees are chaired by the Commissioner for the respective discipline(s). The Chair of the Predoctoral Review Committee is selected by the Chair of the Commission from among the four (4) Commissioners appointed by ADEA. ~~All other Review Committees are chaired by the Commissioner for the respective discipline/specialty.~~

Revised: 8/17; Reaffirmed: 8/10

**Revised Commission and Commission Meetings – EOPP p. 18 (comma placement)**

**B. 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

### **Revised Commission Criteria – EOPP p. 19**

#### **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: 8/17](#); Adopted: 8/14

### **Revised Policy on Absence From Commission Meetings – EOPP p. 19 (comma placement)**

**2. Policy On Absence From Commission Meetings:** When a Commissioner notifies the Director that he/she will be unable to attend a meeting of the Commission, the Director will notify the Chair. The Chair determines if another individual should be invited to attend the meeting in the Commissioner's absence. A substitute will be invited if the Commissioner's discipline would not otherwise be represented. This individual must be familiar with the Commission's policies and procedures; and therefore, must be a current or former member of the appropriate Review Committee and must represent the same discipline or appointing organization as the absent Commissioner. In the event that these criteria cannot be met, the Commission Chair may elect not to invite another individual to the meeting. The substitute would have the privileges of speaking, introducing business, making motions, and voting.

Revised: [8/17](#); 8/10, 7/97; Reaffirmed: 7/07, 7/01; CODA: 12/86:14

### **Revised Distribution of Meeting Minutes – EOPP p. 21**

**10. Distribution Of Meeting Minutes:** Final minutes of each Commission meeting, including the report on accreditation status of dental education programs, are made available to the Commission's communities of interest through an e-mail notice of posting on the Commission's website. Organizations may request to be added to the distribution list which follows.

Academy of General Dentistry, Executive Director  
 American Academy of Orofacial Pain, Executive Director  
 American Academy of Oral Medicine, Executive Director  
 American Association of Dental Boards, Executive Director  
 American Dental Assistants Association, Executive Director  
 American Dental Association, Board of Trustees  
 American Dental Association, Council on Dental Education and Licensure  
 American Dental Education Association, Executive Director

American Dental Hygienists' Association, Executive Director  
American Society of Dental Anesthesiologists, Executive Director  
American Student Dental Association, Executive Director  
Asociación Dental Mexicana, A.C., Director International Relations  
Chiefs of Federal Dental Services  
Commission on Dental Accreditation of Canada, Chairman, Director  
Constituent Dental Societies, Executive Directors  
Council for Higher Education Accreditation, President  
Dental Assisting National Board, Executive Director  
Members, Commission on Dental Accreditation  
Members, Review Committees, Commission on Dental Accreditation  
National Association of Dental Laboratories, Executive Director  
National Board for Certification of Dental Laboratories, Executive Director  
National Institutional and Specialized Accrediting Bodies, Executive Directors  
Recognized Dental Specialty Organizations, Executive Directors/Secretaries  
Regional Institutional Accrediting Agencies, Executive Directors  
Special Care Dentistry Association (SCDA), Executive Director  
Specialty Certifying Boards, Executive Directors/Secretaries  
State Boards of Dentistry, Executive Secretaries/Administrators

Revised: [8/17](#); 2/15; 1/14; 8/10; Reaffirmed: 8/14

## **Revised Notice of Accreditation Actions to Communities of Interest – EOPP p. 22**

**11. Notice Of Accreditation Actions To Communities Of Interest:** In carrying out its responsibilities as an accrediting agency, the Commission on Dental Accreditation announces its decisions to grant, renew or discontinue (at an institution's request) accreditation to the USDE Secretary, the appropriate state licensing or authorizing agency, appropriate accrediting agencies, the public, educational institutions, dental examining boards, related dental organizations, and the profession no later than thirty (30) days after it makes the decisions.

The Commission publishes listings of accredited programs in predoctoral ~~dental education~~, advanced, ~~specialty and general dentistry education~~ and allied dental education. Lists of accredited programs are posted to the Commission's website within thirty (30) days following a Commission meeting to be available to educational institutions' executives and administrators, the USDE, regional and appropriate national accrediting agencies, state licensing agencies and to other interested agencies and organizations. Individuals are provided paper copies of such listings upon request.

When warranted, the Commission may notify an institution of its intent to withdraw a program's accreditation and the time at which this intended action will be taken. The Commission may also reach the decision to deny or withdraw the accreditation of a program. In these instances, the Commission provides written notice of the final decisions to place a program on "intent to withdraw" or to deny or withdraw accreditation to the USDE Secretary, the appropriate accrediting agencies, and the appropriate state licensing or authorizing agency at the same time it notifies the sponsoring institution of the decision. Notice to the public is provided through the listings of accredited programs that is available on the Commission's website and is updated within twenty-four (24) hours of providing the final notice to the program's sponsoring institution.

Revised: [8/17](#); 2/15; Reaffirmed: 8/14; 8/10

**Revised Notice of Reasons for Adverse Actions – EOPP p. 22**

**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 dental, advanced, and~~ allied dental ~~and advanced 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.

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CEO, Sponsoring Institution (date)

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Chair, Commission on Dental Accreditation (date)

Revised: 8/17; 5/12; Reaffirmed: 8/14/ 8/10

### **Revised Procedure for Disclosure Notice of Adverse Actions – EOPP p. 23 (comma placement)**

**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 and includes the reasons for any adverse action to deny or withdraw accreditation.
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
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: [8/17](#); 5/12; 7/06; Reaffirmed: 8/14; 8/10; Adopted: 7/00; CODA: 07/94:6

### **Revised Policy on Changes to Composition of Review Committee Committees and Board of Commissioners – EOPP p. 24**

#### **C. POLICY ON CHANGES TO THE COMPOSITION OF REVIEW COMMITTEES AND THE BOARD OF COMMISSIONERS**

The Commission believes it is imperative that content area experts are represented on site visit committees, Review Committees and on the Commission to accomplish its mission. However, the Commission does not establish Review Committees or add Commissioner positions based upon the number of programs accredited or number of students/residents enrolled within a given discipline.

The Board of Commissioners is composed of representatives and subject area experts from the dental education, dental licensure, and private practice communities, dental specialties, postdoctoral general dentistry, allied dental education, and the public at large. The Commission's Review Committees mirror this structure with committees devoted to dental, dental assisting, dental hygiene, dental laboratory technology, each of the recognized dental specialties, and postdoctoral general dentistry. The Postdoctoral General Dentistry Education Review Committee reviews programs in advanced education in general dentistry, general practice residency, and advanced general dentistry education programs in dental anesthesiology, oral medicine, and orofacial pain; content experts from each of these areas are represented on the Postdoctoral General Dentistry Review Committee. The Predoctoral Dental Education Review Committee reviews programs in predoctoral dental education and dental therapy education; content experts from each of these areas are represented on the Predoctoral Dental Education Review Committee. The Review Committees function to ensure the quality of ~~predoctoral dental, advanced, and allied dental and dental-related~~ education programs accredited by the Commission is maintained; they are advisory to the Commission on matters of accreditation policy and program review.

As ~~predoctoral dental, advanced, dental~~ and allied dental education and practice continues to evolve, the Board of Commissioners may consider a change in its composition, consistent with its *Rules*. The Board may also modify the number or composition of its Review Committees. Such changes may be necessary to reflect changes in the makeup of the dental profession workforce and to provide standards and quality accreditation services to the educational programs in these areas.

For example, changes to the Board of Commissioners or Review Committees may be considered by the Board of Commissioners under the following circumstances:

- When a new dental workforce or specialty category is recognized by a nationally accepted agency.
- When development of accreditation standards or accreditation services for a new or existing dental workforce category cannot be supported by the existing structure(s).
- When the Board of Commissioners identifies the need to modify its composition or that of a Review Committee(s).

Procedure for Requesting a New Review Committee and/or Commissioner Position:

- A request is submitted to the Commission for either a new Review Committee and/or Commissioner position.
- The Chair of the Commission may refer the request to the appropriate standing committee and/or review committee(s) for evaluation or may present the request to the Commission at its next regularly scheduled meeting.
- If referred to a committee, the committee considers the request and provides a recommendation to the Commission.
- The Commission considers the report and recommendation of standing/review committee(s) or considers the request directly as presented by the chair and makes a final determination.
- If the Commission approves the request and directs a new Review Committee, a period of implementation and training will also be provided. If a modification to the existing composition of the Board of Commissioners is approved, the Commission's *Rules* will be modified.

Revised: 8/17; 2/16; Adopted 8/14

## Revised Commission Committees – EOPP p. 25

### D. COMMISSION COMMITTEES

The Commission on Dental Accreditation has six (6) standing committees: Quality Assurance and Strategic Planning, Documentation and Policy Review, Finance, Nomination, Communication and Technology, and International Accreditation (Predoctoral only). Additionally, ad hoc committees and other committees and task forces may be formed to address specific issues or concerns. An ad hoc committee functions until the issue is resolved or until it becomes a standing committee of the Commission.

Occasionally, a Commissioner may be asked to serve on other task forces or joint committees that could include representatives from the American Dental Association, the American Dental Education Association or other organizations.

The charge to each of the Commission's standing committees follows:

#### **Quality Assurance and Strategic Planning**

- Develop and implement an ongoing strategic planning process;
- Develop and implement a formal program of outcomes assessment tied to strategic planning;
- Use results of the assessment processes to evaluate the effectiveness of the Commission and make recommendations for appropriate changes, including the appropriateness of its structure;
- Monitor USDE, and other quality assurance organizations i.e. Council on Higher Education Accreditation (CHEA), American National Standards Institute/International Organization for Standardization (ANSI/ISO), and International Network for Quality Assurance Agencies in Higher Education (INQAAHE) for trends and changes in parameters of quality assurance; and
- Monitor and make recommendations to the Commission regarding changes that may affect its operations, including expansion of scope and international issues.

#### **Documentation and Policy Review**

- Ensure all Commission documents reflect consistency in application of Commission policies, and that relevant sections of accreditation standards are consistent across disciplines;
- Review and consolidate the recommendations of all review committees into standard language for the Commission's consideration for adoption, when new or revised standards are proposed and will impact more than one discipline; and
- [Develop Commission policies and procedures contained in the Evaluation and Operational Policies and Procedures manual.](#)
- Periodically review current Commission policies and procedures to ensure that they are current and relevant.

#### **Nomination**

- Review nominations and make recommendations for appointment of consumer/public members to the Commission;
- Review nominations and make recommendations for appointment of individuals to Review Committees of the Commission;
- Ensure the pre-nomination education process provides information regarding expectations and duties of commissioners, review committee members, and site visitors; and
- Periodically review nomination and selection criteria and make recommendations for changes if necessary, consistent with the Commission's strategic plan and policies.

**Finance**

- Monitor, review and make recommendations to the Commission concerning the annual budget and provide administrative oversight of the research and development fund.

**Communication and Technology**

- Evaluate and recommend alternative methods, including the use of enhanced technology, for monitoring programs' continuous compliance with the standards;
- Evaluate and recommend new technological advances in accreditation for reporting and management of information, allowing accreditation to move toward the concepts of continuous assessment, data collection, and readiness;
- Monitor technological trends in alternative site visit methods;
- Develop and implement strategies to increase the effectiveness, quality, content, and processes of communication with all the Commission's communities of interest;
- Ensure that Commission communications strategies allow for transparency and accountability; and
- Oversee the publication of the e-newsletter, the CODA Communicator, with emphasis on communicating the value/outcomes of accreditation.

**International Accreditation (Predoctoral only)**

- Provide international consultation fee-based services to international predoctoral dental education programs, upon request.
- Develop and implement international consultation policies and procedures to support the international consultation program.
- Monitor and make recommendations to the Commission regarding changes that may affect its operations related to international issues.

Revised: [8/17](#); 2/16; Adopted: 8/10

**Revised Materials Available from The Commission – EOPP p. 27****E. MATERIALS AVAILABLE FROM THE COMMISSION**

These materials are available from the Commission on Dental Accreditation upon request.

- Application for initial accreditation for each discipline
- Accreditation standards documents for each discipline
- Self-study documents for each discipline
- Accredited Program Listing:
  - [Predoctoral](#) Dental Education Programs,
  - ~~Dental Assisting, Dental Hygiene and Dental Laboratory Technology~~ [Allied Dental](#) Education Programs, and
  - Advanced ~~Specialty and General Dentistry~~ [Dental](#) Education Programs
- Annual Reports for Predoctoral ~~Dental Education, Allied Dental Education and~~ Advanced, [and Allied](#) Dental Education are available online, including:
  - Supplement: Dental School Tuition, Admission and Attrition
  - Supplement: Dental School Faculty and Support
  - Supplement: Dental School Trends
  - Supplement: Dental School Curriculum, Clock Hours of Instruction

Reports listed as confidential include information which was collected with the understanding that the reports would not identify specific educational institutions. Thus, these reports use randomly assigned

code numbers for each predoctoral dental education program rather than the name of the institution. Confidential reports include the Supplement: Analysis of Dental School Finances - Financial Report

- Guidelines:
    - Preparation of Reports (Response to Site Visit Reports and Progress Reports)
    - Submitting Teach-Out Reports by Institutions Discontinuing or Closing Commission-Accredited Educational Programs Preparing Phase-out Reports by Institutions Terminating Educational Programs
    - Preparing Requests for Transfer of Sponsorship
    - Reporting Program Changes in Accredited Programs
    - Documentation Guidelines for Selected Recommendations (in site visit reports)
    - Requesting an Enrollment Increase (predoctoral and advanced) s (Specialty Programs)
    - ~~○ Requesting an Increase in Enrollment in a Predoctoral Dental Education Program (Adopted 8/14)~~
    - ~~○ Reporting Enrollment Increases in Postdoctoral General Dentistry Education Programs (Adopted 8/15)~~
    - Reporting and Approval of Sites Where Educational Activity Occurs (Adopted 2/16)
    - Electronic Submission of Documents
    - Privacy and Data Security Requirements for Institutions
    - Privacy and Data Security Requirements for International Institutions
  - Outcomes Assessment - a resource packet ~~of articles/instruments~~ on assessing outcomes
  - ~~• Accreditation—an informational brochure explaining the Commission's accreditation process~~
- Revised: 8/17

**New Policy: Policy on Preparation and Submission of Reports to the Commission  
EOPP P. 44**

**POLICY ON PREPARATION AND SUBMISSION OF REPORTS TO THE COMMISSION**

All institutions offering programs accredited by the Commission are expected to prepare reports that adhere to guidelines set forth by the Commission on Dental Accreditation, including required verification signatures by the institution's chief executive officer. The Commission's various guidelines for preparing and submitting reports, including electronic submission, can be found on the Commission's website or obtained from the Commission staff.

In addition, all institutions must meet established deadlines for submission of requested information. Any information that does not meet the preparation or submission guidelines or is received after the prescribed deadline may be returned to the program or held for consideration at the following meeting in accordance with the wishes of the program. *The Commission's timelines for demonstration of full compliance with the cited standards will not be modified as a result of the delayed review.* See the Commission's Policy on Missed Deadlines.

Adopted: 8/17

**Revised Accreditation Status Definitions - EOPP p. 45**

**1. Programs That Are Fully Operational:**

Approval (*without reporting requirements*): An accreditation classification granted to an educational program indicating that the program achieves or exceeds the basic requirements for accreditation.

Approval (*with reporting requirements*): An accreditation classification granted to an educational program indicating that specific deficiencies or weaknesses exist in one or more areas of the program. 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. Identification of new deficiencies during the reporting time period will not result in a modification of the specified deadline for compliance with prior deficiencies.

Circumstances under which an extension for good cause would be granted include, but are not limited to:

- sudden changes in institutional commitment;
- natural disaster which affects affiliated agreements between institutions; faculty support; or facilities;
- changes in institutional accreditation;
- interruption of an educational program due to unforeseen circumstances that take faculty, administrators or students away from the program.

Revised: 8/17; 2/16; 5/12; 1/99; Reaffirmed: 8/13; 8/10, 7/05; Adopted: 1/98

**Intent to Withdraw:** A formal warning utilized by the Commission on Dental Accreditation to notify an accredited program and the communities of interest that the program's accreditation will be withdrawn if compliance with accreditation standards or policies cannot be demonstrated by a specified date. The warning is usually for a six-month period, unless the Commission extends for good cause. The Commission advises programs that the intent to withdraw accreditation may have legal implications for the program and suggests that the institution's legal counsel be consulted regarding how and when to advise applicants and students of the Commission's accreditation actions. The Commission reserves the right to require a period of non-enrollment for programs that have been issued the Intent to Withdraw warning.

Revised: 2/16; 8/13

**Withdraw:** An action taken by the Commission when a program has been unable to demonstrate compliance with the accreditation standards or policies within the time period specified. A final action to withdraw accreditation is communicated to the program and announced to the communities of interest. A statement summarizing the reasons for the Commission's decision and comments, if any, that the affected program has made with regard to this decision, is available upon request from the Commission office. Upon withdrawal of accreditation by the Commission, the program is no longer recognized by the United States Department of Education. In the event the Commission withdraws accreditation from a program, students currently enrolled in the program at the time accreditation is withdrawn and who successfully complete the program, will be considered graduates of an accredited program. Students who enroll in a program after the accreditation has been withdrawn will not be considered graduates of a Commission accredited program. Such graduates may be ineligible for certification/licensure examinations.

Revised 6/17; Reaffirmed: 8/13; 8/10, 7/07, 7/01; CODA: 12/87:9

## Revised Reporting Program Changes - EOPE P. 78

### 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. Reporting 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 specialty education programs must adhere to the Policy on Enrollment Increases in Advanced Specialty 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 Postdoctoral General Dentistry Education Programs are available from the Commission office.

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.

When a change is planned, Commission staff should be consulted to determine reporting requirements. This report 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;
- 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. Programs are reminded that resources must be maintained even when the full complement of students/residents is not enrolled in the program. (Specialty programs see Policy on Enrollment Increases In Advanced Specialty Programs; Predoctoral programs see Guidelines for Requesting an Increase in Enrollment in a Predoctoral Dental Education Program and Postdoctoral General Dentistry Education programs see Guidelines for Reporting Enrollment Increases in Postdoctoral General Dentistry Education Programs);
  - Change in the nature of the program's financial support that could affect the ability of the program to meet the standards;
  - Curriculum changes that could affect the ability of the program to meet the standards;
  - Reduction in faculty or support staff time commitment that could affect the ability of the program to meet the standards;

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

The Commission recognizes that unexpected, changes may occur. If an unexpected change occurs, it must be reported no more than 30 days following the occurrence. Unexpected changes may be the result of sudden changes in institutional commitment, affiliated agreements between institutions, faculty support, or facility compromise resulting from natural disaster. 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.

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 institutions will be advised that they may re-submit the request with additional information if they choose.

Revised: [8/17](#); 8/16; 2/16; 8/15; 2/15; 8/13 2/12, 8/11, 8/10, 7/09, 7/07, 8/02, 7/97; Reaffirmed: 7/07, 7/01, 5/90; CODA: 05/91:11

### **Revised Policy on Discontinuance or Closure of Educational Programs Accredited by the Commission and Teach-Out Plans - EOPP P. 85**

It is the responsibility of an institution sponsoring an accredited program to report to the Commission any programmatic change that might affect a program's ability to meet accreditation standards.

When an institution is considering discontinuance or closure of a Commission-accredited educational program that currently enrolls students/residents, the Commission must be notified officially in writing as early as possible in the decision making process. Specifically, the Commission must be informed of the institution's plans for the entire Teach-Out period, during which students/residents are enrolled, including a detailed explanation of any significant changes relative to retention of qualified faculty and support personnel, student/resident enrollment by class, the didactic and clinical teaching programs (including curriculum, extramural experiences and facilities), and financial support that will be provided. During the period of Teach-Out, the program may not enroll additional students/residents in any year of the program.

The institution must ensure that the program continues to meet minimum accreditation standards and that students/residents and other interested parties are protected throughout the Teach-Out period. In this regard, the Commission reserves the right to closely monitor the Teach-Out through the annual accreditation survey, or periodic reports from the institution detailing changes in administration, faculty, curriculum, facilities, finances, and other major components that could affect the quality of the educational program. In addition, the Commission reserves the right to conduct a special site visit following review of each of these reports. If a program fails to submit a Teach-Out report or requested monitoring information, the Commission will notify the chief executive officer of the institution of its

intent to withdraw accreditation at its next scheduled meeting.

The institution has moral and ethical obligations to meet the commitment and responsibility it assumes when it matriculates students/residents into the program; those obligations include providing the students/residents with the opportunity to complete the educational sequence at that institution. When an institution indicates its intent to close an accredited program or to voluntarily discontinue participation in the Commission's accreditation program, and if there will not be adequate resources for the program to meet its obligations to enrolled students/residents and allow them to complete their training, the institution must assist students/residents in a timely fashion in transferring to other accredited programs in order to complete their educational program. The Commission will assist students/residents in transferring to other accredited programs; this assistance will be provided [in the form of guidance with reporting program changes to CODA for review](#), in cooperation with the institution that sponsors the closing program.

The program to which students/residents transfer should be able to demonstrate that the finances, facilities, faculty, and patient resources can accommodate the transferring students/residents. Any changes in program enrollment that would result from the transfer of students/residents must be reported to the Commission by the receiving program(s) in accordance with the Commission's policy for reporting program changes. Formal teach-out agreements must be developed with all institutions accepting transferring students/residents to specify the conditions of the transfer. These agreements must ensure that the combined educational experiences meet the Commission's accreditation standards. Such teach-out agreements must be submitted to the Commission as part of the Teach-Out plan.

Students/Residents who are enrolled and successfully complete the program during the Teach-Out will be considered graduates of an accredited program. Students/Residents who transfer to another program and successfully complete that program will be considered graduates of the latter program. Such students/residents will be considered graduates of an accredited program if the latter program is accredited during the time such students/residents are enrolled. It will be the closing institution's responsibility to ensure that appropriate student/resident records and transcripts are maintained for future reference.

The Commission will take action to affirm a program's reported discontinuance or closure effective date at the appropriate time when the program no longer enrolls students/residents in any year of the program. The Commission has developed Guidelines for Submitting Teach-Out Reports by Institutions Discontinuing or Closing Commission-Accredited Educational Programs to assist institutions with preparing teach-out reports for the Commission. These guidelines are routinely distributed along with the Commission's Policy on Discontinuance or Closure of Educational Programs.

Revised: [8/17](#); 2/16; 8/15; 5/93; Reaffirmed: 8/10, 7/07, 07/01, 12/92, 12/85, 12/79

## **Revised Policy Statement on Principles of Ethics in Programmatic Advertising and Student Recruitment - EOPP Page 87**

### **P. POLICY STATEMENT ON PRINCIPLES OF ETHICS IN PROGRAMMATIC ADVERTISING AND STUDENT RECRUITMENT**

All accredited dental and dental-related education programs, or individuals acting on their behalf, are expected to exhibit integrity and responsibility in programmatic advertising and student recruitment. Responsible self-regulation requires rigorous attention to principles of ethical practice. If the Commission determines that the institution or program has provided the public with incorrect or misleading information regarding the accreditation status of the program, the contents of site visit

evaluations reports, or the Commission's accrediting actions with respect to the program, the program must provide public correction of this information to all possible audiences that received the incorrect information. The Commission must be provided with documentation of the steps taken to provide public correction. Other areas covered in this policy include, but are not limited to:

#### Advertising, Publications, and Promotional Literature

- Educational programs and services offered should be the primary emphasis of all advertisements, publications, promotional literature and recruitment activities.
- All statements and representations should be clear, factually accurate and current. Supporting information should be kept on file and be readily available for review.
- The sponsor of the educational program must be clearly identified when referencing the program's accreditation status with CODA.
- Catalogs and other official publications should be readily available and accurately depict:
  - a. purpose and goals of the program(s);
  - b. admission requirements and procedures;
  - c. degree and program completion requirements;
  - d. faculty, with degrees held and the conferring institution;
  - e. tuition, fees, and other program costs including policies and procedures for refund and withdrawal; and
  - f. financial aid programs.
- College catalogs and/or official publications describing career opportunities should provide clear and accurate information on the following, as applicable:
  - a. national and/or state requirements for eligibility for licensure or entry into the occupation or profession for which education and training are offered;
  - b. any unique requirements for career paths, or for employment and advancement opportunities in the profession or occupation; and
  - c. differentiation between postdoctoral general dentistry programs and advanced education programs in the dental specialties recognized by the American Dental Association.

#### Student Recruitment for Admissions

- Student recruitment should be conducted by well-qualified admissions officers, faculty or trained volunteers whose credentials, purposes, and position or affiliation with the program and/or institution are clearly specified.
- Independent contractors or agents used by the program and/or institution for recruiting purposes should be governed by the same principles as institutional admissions officers and volunteers.
- Prospective students must be fully informed of program costs, available financial aid and repayment options.
- All catalogs and career materials should accurately describe the skills and competencies that students will need at the time of admission to the program. Options to accommodate students with lesser or greater skills, such as remediation or advanced standing programs, should be included in this description.
- If information about employment or career opportunities is included in an official publication, such information must be current and accurate.
- Accurate information must be provided regarding postdoctoral general dentistry education programs and advanced education programs in the dental specialties recognized by the American Dental Association.
- Programs applying for accreditation must make it clear that submission of an application for accreditation indicates the institution has entered into the accreditation process; it does not mean that the program is accredited. Further, programs must not enroll students/residents until accreditation is granted and must make it clear to applicants that accreditation is granted only by the Commission.

Educational programs accredited by the Commission on Dental Accreditation should assume responsibility for informing the Commission office of improper or misleading advertising or unethical practices which come to their attention, so that the Commission may take appropriate steps to be sure the situation is rectified as quickly as possible.

Revised: [8/17](#); 8/15; 7/04, 7/96; Reaffirmed: 8/10, 7/09, 7/01; Adopted: 12/88

**Revised Policy on Reporting and Approval of Sites Where Educational Activity Occurs - EOPP p. 89**

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

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

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

**Reporting Requirements:**

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

<b>Reporting Requirements for Off-Campus Sites</b>	<b>Major Activity Sites</b>	<b>Minor Activity Sites</b>	<b>Supplemental Activity Sites <sup>*</sup></b>
Definitions	Students/Residents <b>required</b> to complete an experience at this site to meet a program requirements or accreditation standards, and  Competency assessments <u>or comparable summative assessments</u> performed at the site	Students/Residents <b>required</b> to complete an experience at this or another site to meet a program requirements or accreditation standards, and  No competency assessments <u>or comparable summative assessments</u> performed at the site. Evaluation may occur.	Student/Resident chooses whether to visit the site outside of the educational program (e.g. volunteer mission trips, health fair, etc. not used to fulfill program or accreditation requirements).
Program Report Requirement	Report required by June 1 or December 1	Report required at least 30 days prior to planned implementation of educational activity site.	No report required.

Acknowledgement/Approval	Commission approval required prior to implementation of the educational activity site. Approval of the major activity sites required prior to recruiting students/residents for the site and initiating use of the site.	Commission acknowledgement of review at the program's next site visit.	No approval required.
Site Visit(s) to Educational Activity Site	Commission may direct special focused site visit to review educational activity site prior to or after approval of the site. Commission may review site at future site visits.	Commission may visit educational activity site during program's next site visit.	No site visit required.

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

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

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

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

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

**Discipline-specific Exemptions:**

The Commission recognizes that dental assisting and dental laboratory technology programs utilize numerous extramural private dental offices and laboratories to provide students with clinical/laboratory



work experience. The program will provide a list of all currently used extramural sites in the self-study document. The Commission will may then randomly select and visit facilities at the time of a site visit to the program. Prior Commission approval of these extramural dental office and laboratory sites will not be required.

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

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

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

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

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

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

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

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

1. Depending upon the type of educational activity site established, a program administrator submits either: (1) the major educational activity site report by June 1 or December 1 or (2) the minor educational activity site report at least thirty (30) days prior to planned implementation of educational activity site.
2. Commission staff reviews the report to assess its completeness and to determine whether the change could impact the program's potential ability to comply with the accreditation standards. If this is the case, the report is reviewed by the appropriate Review Committee for the discipline and by the Commission.
3. Receipt of the educational activity site report and accompanying documentation is acknowledged in one of the following ways:

- a. The program administrator is informed that the report will be reviewed by the appropriate Review Committee and by the Commission at their next regularly scheduled meeting. Additional information may be requested prior to this review if the change is not well-documented; or
  - b. The program administrator is informed that the reported change will be reviewed during the next site visit.
4. If the report will be considered by a Review Committee and by the Commission, the report is added to the appropriate agendas. The program administrator receives notice of the results of the Commission's review.

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

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

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

### **Revised Policy and Procedure Regarding Investigation of Complaints Against Educational Programs – EOPP p. 98**

#### **POLICY AND PROCEDURE REGARDING INVESTIGATION OF COMPLAINTS AGAINST EDUCATIONAL PROGRAMS**

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

The Commission will consider formal, written, signed complaints using the procedure noted in the section entitled “Formal Complaints.” Unsigned comments/complaints will be considered “anonymous

comments/complaints” and addressed as set forth in the section entitled “Anonymous Comments/Complaints.” Oral comments/complaints will not be considered.

### **Formal Complaints**

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

~~An “anonymous comment/complaint” is defined as an unsigned comment/complaint submitted to the Commission. Anonymous comments/complaints may be received at any time and 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.~~

**1. Investigative Procedures for Formal Complaints:** ~~The Commission will consider only formal, written, signed complaints; unsigned complaints will be considered “anonymous complaints” and addressed as set forth above; oral complaints will not be considered.~~ Students, faculty, constituent dental societies, state boards of dentistry, patients, and other interested parties may submit an appropriate, signed, formal complaint to the Commission on Dental Accreditation regarding any Commission accredited dental, allied dental or advanced dental education program, or a program that has an application for initial accreditation pending. An appropriate complaint is one that directly addresses a program’s compliance with the Commission’s standards, policies and procedures. The Commission is interested in the continued improvement and sustained quality of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

In accord with its responsibilities to determine compliance with accreditation standards, policies, and procedures, the Commission does not intervene in complaints as a mediator but maintains, at all times, an investigative role. This investigative approach to complaints does not require that the complainant be identified to the program.

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

~~Only written, signed complaints will be considered by the Commission; unsigned complaints will be considered “anonymous complaints” and addressed as set forth above; oral complaints will not be considered.~~ The Commission strongly encourages attempts at informal or formal resolution through the program's or sponsoring institution's internal processes prior to initiating a formal complaint with the Commission. The following procedures have been established to manage complaints:

When an inquiry about filing a complaint is received by the Commission office, the inquirer is provided a copy of the Commission’s Evaluation and Operational Policies and Procedures Manual which includes

the policies and procedures for filing a complaint and the appropriate accreditation standards document.

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

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

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

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

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

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

**2. Formal Complaints:** Formal complaints (as defined above) are investigated as follows:

1. The complainant is informed in writing of the anticipated review schedule.
2. The Commission informs the chief administrative officer (CAO) of the institution sponsoring the accredited program that the Commission has received information indicating that the program's compliance with specific required accreditation policy(ies), procedure(s) or designated standard(s) has been questioned.
3. Program officials are asked to report on the program's compliance with the required policy(ies), procedure(s) or standard(s) in question by a specific date, usually within thirty (30) days.
  - a. For standard(s)-related complaints, the Commission uses the questions contained in the appropriate sections of the self-study to provide guidance on the compliance issues to be

addressed in the report and on any documentation required to demonstrate compliance.

[Additional guidance on how to best demonstrate compliance may also be provided to the program.](#)

- b. For policy(ies) or procedure(s)-related complaints, the Commission provides the program with the appropriate policy or procedural statement from the Commission's Evaluation and Operational Policies and Procedures Manual. Additional guidance on how to best demonstrate compliance will be provided to the program. The Chair of the appropriate Review Committee and/or legal counsel may assist in developing this guidance.
4. Receipt of the program's written compliance report, including documentation, is acknowledged.
5. The appropriate Review Committee and the Commission will investigate the issue(s) raised in the complaint and review the program's written compliance report at the next regularly scheduled meeting. In the event that waiting until the next meeting would preclude a timely review, the appropriate Review Committee(s) will review the compliance report in a telephone conference call(s). The action recommended by the Review Committee(s) will be forwarded to the Commission for mail ballot approval in this later case.
6. The Commission may act on the compliance question(s) raised by the complaint by:
  - a. determining that the program continues to comply with the policy(ies), procedure(s) or standard(s) in question and that no further action is required.
  - b. determining that the program may not continue to comply with the policy(ies), procedure(s) or standard(s) in question and going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
    - i. If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
    - ii. If by on-site review: The Commission will describe the scope and nature of the problem and determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a special on-site review will be conducted. If a special on-site review is required, the visit will be scheduled and conducted in accord with the Commission's usual procedures for such site visits.
  - c. determining that a program does not comply with the policy(ies), procedure(s) or standards(s) in question and:
    - i. changing a fully-operational program's accreditation status to "approval with reporting requirements"
    - ii. going on to determine whether the corrective action the program would take to come into full compliance could be documented and reported to the Commission in writing or would require an on-site review.
      - If by written report: The Commission will describe the scope and nature of the problem and set a compliance deadline and submission date for the report and documentation of corrective action taken by the program.
      - If by on-site review: The Commission will describe the scope and nature of the problem and determine, based on the number and seriousness of the identified problem(s), whether the matter can be reviewed at the next regularly scheduled on-site review or whether a special on-site review will be conducted. If a special on-site review is required, the visit will be scheduled and conducted in accord with the Commission's usual procedures for such site visits.
7. Within two weeks of its action on the results of its investigation, the Commission will also:
  - a. notify the program of the results of the investigation.
  - b. notify the complainant of the results of the investigation.

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

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

### Anonymous Comments/Complaints

An “anonymous comment/complaint” is defined as an unsigned comment/complaint submitted to the Commission.

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.

Adopted: 8/17

## **New Policy on Planning and Implementing Preliminary PACV and International Accreditation Site Visits – EOPP, Page 113**

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

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

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

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

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

Adopted: 8/17