2019 Mandatory CODA Site Visitor Training

Commission on Dental Accreditation (CODA)
Mandatory Annual Site Visitor Training
Fall 2019
Introduction to Mandatory Site Visitor Training

• In 2018 the Commission directed that all active CODA site visitors complete mandatory annual training in order to retain appointment.
• The training program is intended to serve as an annual refresher, and enhance understanding and calibration among site visitors.
• In 2019 the first annual training program was developed.
• You are requested to review the training materials and complete the mandatory assessment by no later than January 31, 2020.
• Please contact CODA staff with any questions.
Overview of Mandatory Training

• Section 1: Changes & Updates

• Section 2: Interpreting Standards

• Section 3: Completing the Site Visitor Evaluation Report (SVER)

• Section 4: Mandatory Assessment
Section 1: Changes & Updates

2019 Mandatory Annual Training
Policies and Procedures
Policy Change for Site Visitors - Appointments

- Site visitors are appointed/reappointed annually and asked to sign the Commission’s Conflict of Interest Statement, the Agreement of Confidentiality, the Copyright Assignment, Licensure Attestation, and the ADA’s Professional Conduct Policy and Prohibition Against Harassment. Site visitors must also complete annual training and will receive periodic updates on the Commission’s policies and procedures related to the Health Insurance Portability and Accountability Act (HIPAA). The Commission office stores these forms for seven (7) years. In addition, site visitors must comply with training requirements, the ADA’s travel policy and other CODA Rules and Regulations. The Commission may remove a site visitor for failing to comply with the Commission’s policies and procedures, continued, gross or willful neglect of the duties of a site visitor, or other just cause as determined by the Commission.
Policy Change Regarding Statement on Site Visitor Training

• New site visitors attend a two-day formal workshop.

• All active Site visitors must complete mandatory annual web-based retraining in order to retain appointment. Who have not been assigned on a site visit during the previous two years must re-attend the in-house training provided to new site visitors, observe a site visit in the appropriate discipline, or review the training materials of the American Dental Education Association (ADEA) Annual Meeting, before being assigned to evaluate a program on a site visit.
Policy Change on Conflict of Interest – Site Visitors

Modifications include:

- is a resident of **or owns property in** the state; and/or.
- is in the process of considering, interviewing and/or hiring key personnel at the institution.

The two conflict of interest additions, noted above, have been added to the policy on Site Visitor Conflicts of Interest. It is the responsibility of the site visitor to review the policy prior to accepting any site visitor assignment and report to CODA staff if any conflict of interest (real or perceived) may exist. Site visitors must also consider ease of travel to the site, and overall time commitment, when considering whether to accept an assignment. If any of these will be problematic, please decline the assignment.
Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs

• Major Activity Sites:
  – Clarification that a site used for “competency assessment or comparable summative assessments” is a major site

• Minor Activity Sites:
  – Clarification that a site used for “no competency assessment or comparable summative assessments” is a minor site. Though other evaluations (daily evaluation, for example) may occur.
Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs

- 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.

- The site visit team must identify sites early in the site visit planning process so that arrangements can be made, as needed, to visit sites.
Policy on Third Party Comments

• Programs must post the Third Party Comment notice 90 days prior to the site visit.

• Programs with special focused visits are expected to solicit third party comments as soon as the program is notified of the visit by CODA, if posting 90 days prior to the visit is not possible.

• CODA will consider signed and unsigned third-party comments and forward these to the site visitors and program for on-site review.

• The site visit team will confirm posting when on-site.
Confidentiality

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

- All program materials and CODA materials are confidential. The site visitor must securely dispose of all CODA and program site visit materials following the site visit and approval of the draft site visit report.
New and Proposed Accreditation Standards
Revised Standards


Site visitors must use the current Accreditation Standards and Site Visitor Evaluation Report (SVER) when completing reviews.

• August 3, 2018 implementation:
  – Dental Public Health
  – General Practice Residency
  – Advanced Education in General Dentistry
Revised Standards

• January 1, 2019 implementation:
  – Dental Hygiene
  – All Advanced Dental Education Programs

• February 8, 2019 implementation:
  – Predoctoral Dental
    • Revised Intent Statements Standards 2-20 and 2-24; New Intent Statement Standard 2-9

• July 1, 2019 implementation:
  – Predoctoral Dental
    • Revision to Standards 2-8 and 3-1
  – Clinical Fellowship in Oral and Maxillofacial Surgery
  – Oral and Maxillofacial Surgery Residency
Revised Standards

• July 1, 2019 implementation (cont.):
  – Periodontics
  – Endodontics

• January 1, 2020 implementation:
  – Predoctoral Dental
    • Definition of Terms (Research and Health Literacy), Standard 6-Research; Standard 2-17

• July 1, 2020 implementation:
  – Oral and Maxillofacial Surgery Residency
It is important to monitor changes in standards as a result of validity and reliability studies. Additionally, site visitors are encouraged to contribute to the process by completing the survey that is emailed to you.

Spring 2019

• Dental Hygiene; Dental Laboratory Technology; Endodontics; Oral and Maxillofacial Radiology; Oral Medicine

Fall 2019

• Periodontics; Oral and Maxillofacial Surgery (Residency and Fellowships); Orthodontics and Dentofacial Orthopedics (Residency and Fellowships)
"Should" Statements within Standards (Summer 2019)

- CODA directed that “Should” will be defined as:
  
  **Should**: Indicates a method to achieve the standard; highly desirable, but not mandatory.
  
- The Commission further directed that each review committee review the use of “should” in its Accreditation Standards and consider the impact its revised definition could have on the Accreditation Standards, including possible conversion of “should” statements to “must” statements, if appropriate, including application within a time frame to correlate with other revision activities, with a report on progress or a plan for implementation to the Commission for consideration at the Winter 2020 meeting.

- Site visitors will assess programs on the “must” statements of the Accreditation Standards.
Section 2: Interpreting Standards

2019 Mandatory Annual Training
A Review of How to Interpret the Standards

• To prepare, you must first review:
  – The Definition of the Standards
  – The Purpose of the Standards
  – What to look for when reviewing and interpreting
Practice Review

- In this module you will review different examples (different disciplines) of the same Standard:

- **Standard 1. Institutional Effectiveness**
  - Predoctoral
  - Dental Hygiene
The Standards identify those aspects of program structure and operation that the Commission regards as essential to program quality and achievement of program goals. They specify the minimum acceptable requirements for programs and provide guidance regarding alternative and preferred methods of meeting standards.

Although the standards are comprehensive and applicable to all institutions that offer dental education programs, the Commission recognizes that methods of achieving standards may vary according to the mission, size, type and resources of sponsoring institutions. Innovation and experimentation with alternative ways of providing required training are encouraged, assuming standards are met and compliance can be demonstrated. The Commission recognizes the importance of academic freedom, and an institution is allowed considerable flexibility in structuring its educational program so that it can meet the Standards. No curriculum has enduring value, and a program will not be judged by conformity to a given type. The Commission also recognizes that schools organize their faculties in a variety of ways.

Instruction necessary to achieve the prescribed levels of knowledge and skill may be provided by the educational unit(s) deemed most appropriate by each institution.
To Interpret, Understand the Definitions

• All Discipline Standards have a *Definition of Terms* section

• The *Definition of Terms* section is of critical importance so that site visitors have a thorough understanding of the terms used in the standards. Although there is slight variation from discipline to discipline, the basic Standards are very similar.

• Additional terms may also be found at the end of each Standards document. They include the status classifications that are granted to institutions by the Commission after an evaluation has occurred.
Disciplines will be similar but different

Definition of Terms Used in Predoctoral Dental Standards for Dental Education Programs

Community-based experience: Refers to opportunities for dental students to provide care in the community.

Dental Hygiene Standards

Definitions of Terms Used in Dental Hygiene Accreditation Standards

Standard: A rule or basis of comparison established in measuring or judging capacity, quantity, quality, content and value; criterion used as a model or pattern.
Purpose of the Standards

• Helps programs maintain high expectations without undue rigidity

• Demanding but not overly prescriptive, in order to promote creativity and individuality in the program

• Allow for flexibility in the curriculum development process in order to foster innovation for the individual programs to design and create the programs according to their specific needs
All Discipline-Specific Standards Contain:

- **Must** statements
- Language common to ALL disciplines
- Multiple “**musts**” on a single topic
- One “**must**” governing multiple areas
- Intent Statements
  - Assist with interpretation of Standards
- Examples of Evidence
  - Assists with documentation of compliance with Standards
Intent Statements

• Some Standards include **Statements of Intent**, which are presented to provide clarification to dental education programs in the application of and in connection with compliance with the *Accreditation Standards*.

• The statements of intent set forth some of the reasons and purposes for the particular Standards. As such, these statements are not exclusive or exhaustive. Other purposes may apply.
Examples of Evidence

- **Examples of Evidence** may also be included. Examples provide the program and site visitor with a list of some items that may be used by the program to demonstrate its compliance.

- Examples of Evidence are not required documentation; the program may use these examples or others to demonstrate compliance with a Standard.
Follow This Workflow When Determining Compliance

1. Read the Standard
2. Read the **Must** statement
3. Keep the context of the Standard in mind
4. What did they provide for documentation?
5. Has the Standard been met?
6. What do they need to meet it?
How to Interpret the Standards: Examples of Different Disciplines
Sample Scenarios from different disciplines – Predoctoral

Read the Standard and the MUST statement. Then read the Intent:

Standard 1 – Institutional Effectiveness

Ongoing planning for, assessment of and improvement of educational quality and program effectiveness at the dental school must be broad-based, systematic, continuous, and designed to promote achievement of institutional goals related to institutional effectiveness, student achievement, patient care, research, and service.

Intent:

Assessment, planning, implementation and evaluation of the educational quality of a dental education program that is broad-based, systematic, continuous and designed to promote achievement of program goals will maximize the academic success of the enrolled students. The Commission on Dental Accreditation expects each program to define its own goals and objectives for preparing individuals for the practice of general dentistry.
This Standard is asking for the following:

This Standard requires an ongoing process of planning, assessment, implementation, and evaluation for the assessment of the program’s outcomes.

The program must also obtain information that is broad-based, systematic, and continuous and designed to promote achievement of goals.

The program must apply outcomes measures related to institutional effectiveness, student achievement, patient care, research, and service.

This standard relates to “Institutional Effectiveness”
Sample Scenarios – Dental Hygiene

Read Standard 1 from a different discipline – similar but different:

Standard 1 – Institutional Effectiveness

Planning and Assessment

1-1 The program must demonstrate its effectiveness using a formal and ongoing planning and assessment process that is systematically documented by:

developing a plan addressing teaching, patient care, research and service which are consistent with the goals of the sponsoring institution and appropriate to dental hygiene education. implementing the plan; assessing the outcomes, including measures of student achievement; using the results for program improvement.

Intent:

Assessment, planning, implementation and evaluation of the educational quality of a dental hygiene education program (inclusive of distance education modalities/programs), that is broad-based, systematic, continuous and designed to promote achievement of program goals will maximize the academic success of the enrolled students in an accountable and cost effective manner. The Commission on Dental Accreditation expects each program to define its own goals for preparing individuals in the discipline and that one of the program goals is to comprehensively prepare competent individuals in the discipline.
Although this standard is worded differently, it is asking for the same cycle of program improvement for institutional effectiveness.

Plan-Assess-Implement-Evaluate.

The program’s plan must be formal, ongoing, systematically documented and must also address teaching, patient care, research and service.
Sample Scenarios – Oral and Maxillofacial Surgery

Standard 1 from a third discipline – again, similar but different:

Standard 1 – Institutional Commitment/Program Effectiveness

– The program **must** develop clearly stated goals and objectives appropriate to advanced dental education, addressing education, patient care, research and service. Planning for, evaluation of and improvement of educational quality for the program **must** be broad-based, systematic, continuous and designed to promote achievement of program goals related to education, patient care, research and service.

– The program **must** document its effectiveness using a formal and ongoing outcomes assessment process to include measures of advanced dental education resident achievement.

– **1-1** The program **must** document success of graduates in obtaining American Board of Oral and Maxillofacial Surgery certification.
Sample Scenarios – Oral and Maxillofacial Surgery

• In the third example for the Oral and Maxillofacial Surgery residency program, the Standard is presented in a slightly different way; however, the result is the same.

• The additional **must** statement identifies that programs must document success of graduates in obtaining American Board of Oral and Maxillofacial Surgery certification.
Institutional Effectiveness

The three examples are asking for Institutional Effectiveness but have been presented in three different ways. This speaks to the flexibility of the Standards to allow for differences but similarities to reach the same goal – Effectiveness of the Institution/Program.
Documentation of Standard 1: Institutional Effectiveness

Examples of different disciplines
The following are examples of how the documentation may be presented in the final review

**Standard 1. Institutional Effectiveness**

**Predoc:**
The program has documented its effectiveness using a formal and ongoing outcomes assessment process to include measures of dental education student achievement. Based on a review of the program’s outcomes assessment process and student achievement measures, the visiting committee found the program utilizes the following student achievement methods: annual student and faculty surveys, patient satisfaction surveys, National Board Dental Examination results, regional clinical board examination results, course evaluations, and research activity. The program has generally achieved its outcomes assessment goals and objectives. The visiting committee noted the program is making efforts to increase recruitment of diverse faculty and students based on the data collected and analyzed in the outcomes assessment process. The program is also enhancing its research collaborations within the institutional environment to further support faculty and student engagement in research as a result of data collected. The program identified a need for additional pediatric patient experiences and has initiated efforts to enhance this component of the program.

Based on the program’s outcomes assessment process and on-site evaluation, a suggestion related to increased pediatric patient experiences is noted elsewhere in this report.
In the previous slide, notice that the school used the following outcomes measures:

1. Annual student and faculty surveys,
2. Patient satisfaction surveys,
3. National Board Dental Examinations
4. Regional Clinical Board Examinations
5. Course Evaluations
6. Research activity

**How can they improve the program?**
A suggestion was written to increase the pediatric patient experiences for the program.

This is an example of how this program could improve their Institutional Effectiveness.
Standard 1. Institutional Commitment and Program Effectiveness

Dental Hygiene:

The program has documented its effectiveness using a formal and ongoing outcomes assessment process to include measures of dental hygiene student achievement. Based on a review of the program’s outcomes assessment process and student achievement measures, the visiting committee found the program uses the following student achievement measures: National Board Dental Hygiene Examination (NBDHE) scores, state licensure examination scores, graduation exit interviews, employer surveys, alumni/graduate surveys, patient satisfaction surveys, program completion/job placement rates and course evaluations. Enhancements to the program based on the student achievement data collected and analyzed in the outcomes assessment plan includes recommendations to students regarding NBDHE review courses, clinic times reviewed in DH Clinic 101 to simulate private practice experience, revised patient agreement forms to advise patients of treatment referral options, revision of table clinics to present to dental professionals, modified mock board examination to replicate the Commission on Dental Competency Assessments (CDCA) clinical examination, and revised student orientation sessions to include a PowerPoint on professionalism.
In the prior slide, note that the program utilized the following areas as part of the Institutional Effectiveness plan:

1. National Board Dental Hygiene Examination (NBDHE) results
2. State licensure examination results
3. Graduation exit interviews
4. Employer surveys,
5. Alumni/graduate surveys
6. Patient satisfaction surveys
7. Program completion/job placement rates
8. Course evaluations

How can they improve the program?

The student achievement data was analyzed with the outcomes assessment plan and a NBDHE review course was implemented, DH clinic times were added to simulate private practice experience and the patient agreement forms to advise patients of treatment referral was revised and improved. A modifies board examination was implemented and a revised student orientation PowerPoint was added. All of these changes will improve the Institutional Effectiveness of the program.
Look for Outcomes Addressing All Areas of the Standard

What is the outcomes assessment plan?
• Is it broad based?
• Is it systematic?
• Is it continuous?

What are the outcomes measures?
• Do measures relate to student achievement in all areas required by the standards (effectiveness, student achievement, patient care, research)
Look for Outcomes Addressing All Areas of the Standard

What are the outcomes?
- National Board Examinations
- Course evaluations
- Student and faculty evaluations
- Employment Surveys

How did they improve?
- Encourage research
- Modify mock boards
- Expanded curriculum for pediatric patients
Take Away Reminders on Interpreting the Standards

• Assess the program on the “MUST” statements.

• If the Standard includes multiple “must” statements or multiple subparts within one “must” statement, the site visitor is expected to assess the program’s compliance on all components.

• Note key descriptor words in the Standards, such as “ongoing,” “broad based,” etc.

• Use the current, published Standards in your review; this is a requirement.
Section 3: Completing the Site Visit Evaluation Report (SVER)

2019 Mandatory Annual Training
Objectives Section 3: Completing the SVER

• List the components of the SVER

• Know the difference between a recommendation and a suggestion

• Understand the construction of recommendations and suggestions

• Review the required narrative for the program effectiveness section in the SVER
Site Visitor Evaluation Report (SVER) Process

- Review the Standards and SVER (in advance of visit)
  - Review the program’s Self-Study (in advance of visit)
- Note areas with questions, concerns (in advance of visit)
  - Conduct reviews, interviews, observations (on-site)
- Verify compliance through on-site reviews (on-site)
  - Reach consensus with the team (on-site)
- Complete the SVER (1 per discipline submitted by the Chair)
  - Submit to Staff at conclusion of site visit (if staff in attendance)
SVER – Format and Version

• Come prepared to the site visit with the electronic SVER (the current and correct document for your discipline is available on CODA website)

• Bring a laptop to complete the SVER electronically

• Please submit the completed SVER to CODA in a typed format, preferably in Word
Completing the SVER

• Your SVER is the record of the site visit.

• When the Commission meets it relies on your report. It is crucial that your SVER and ultimately the Preliminary Draft Site Visit Report (created from your SVER) be complete, accurate and detailed.

• Each component of the SVER must be addressed and completed.

• Program Effectiveness and Student/Resident Achievement section must include narrative.
Completing the SVER

• You have two options – YES or NO (not both)

• YES – means the program is compliant with the standard. Every “YES” response to a Standard either receives no comment, or may include a suggestion for program enhancement.

• NO – means the program is not compliant with the standard. Every “NO” response to a Standard must receive a recommendation with supporting narrative.

NOTE: Only one response (Yes or No) can be selected per item. You must not select both responses within one item.
Components of the SVER

All components must be addressed, including:

- **Sponsoring Institution and Names of Key Individuals:** CEO, CAO, Program Director, Site Visitors, Chair, State Board Representative, Observers, persons interviewed, other(s) (may vary by discipline)
  - Include names of all individuals who attended

- **Summary Information:** enrollment, FTE faculty, authorized enrollment for advanced education programs, and other data (varies by discipline)

- **Previous Site Visit Recommendations**
Components of the SVER

Carefully Account for Sites Where Educational Activity Occurs

- Completely fill in the chart below for each major and minor site where educational activity occurs
- List each site, even if it is "owned" by the sponsoring institution

<table>
<thead>
<tr>
<th>Name and Address</th>
<th>Owned by Institution (√)</th>
<th>Purpose</th>
<th>Duration</th>
<th>Site Visited (√)</th>
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CHECK if owned
CHECK if the site was visited
Components of the SVER

All components must be addressed, including:

- **Compliance with Commission Policies** – all must be addressed
  - Program Changes
  - Third Party Comments
  - Complaints and Complaint Record (including anonymous complaints)
  - Distance Education
- **Program Effectiveness and Student/Resident Achievement**
- **Accreditation Standards**
Background Information from CODA

• As you prepared for the site visit, you have already reviewed the background information provided by CODA

  – Prior transmittal letters, site visit reports and other key correspondence related to program changes

  – Data Profile: five-year compilation of Annual Survey data

These are confidential and must be securely destroyed following the visit.
SVER - Prior Site Visit Recommendations

• Review the last site visit report (provided as background material by CODA) and the program’s documentation in the self-study.

• If the standard still exists, note the program’s response and identify whether the program is currently compliant.

• If not compliant, identify the standard and rationale for recommendation or suggestion that you write during your site visit.
SVER – Program Changes

• Confirm that the program’s changes were reported to CODA through review of background materials and the self-study
• Programs must report all program changes
  – Some changes require prior approval by CODA (report must be submitted by June 1 or December 1)
  – Some changes require reporting 30 days prior to anticipated implementation (depending on the type of change).
  – Reporting on the Annual Survey, only, is not acceptable
• See CODA policy for specific examples
• Contact CODA staff for guidance and review program change policy for more information
If you are concerned a program has enrolled over its authorized enrollment, look at the background information to determine if this was approved by CODA.

- Ask CODA staff if you’re not sure of the program’s authorized enrollment (self-report vs. CODA record).
- If the program does not comply with this policy (or another CODA policy), you will mark the relevant policy “NO” in the SVER and write the details of your finding(s).
- Policy noncompliance is described in its own section and is not written as a traditional recommendation (standards noncompliance versus policy noncompliance).
SVER – Policy on Third Party Comments

• The program must show evidence of a posting, published 90 days prior to the site visit, soliciting comments.
  – Mark YES if posted
  – Mark NO if not posted and explain what you found (e.g., not posted, not posted at all facilities of the program, not posted 90 days in advance)
  – If the program marks “no,” they should provide very specific details about why. Was the policy not posted at all? Was it not posted 90 days in advance? Was the policy not posted in each facility the program uses?
SVER – Policy on Third Party Comments

- If comments were received, CODA staff will notify the site visit team and program.
  - Review program response to comments.
  - If program is non-compliant with a standard or policy, related to a comment received, identify the standard in question and rationale to support recommendation or suggestion.
  - As a result of your review of the third party comments, program response, and on-site verification, you will determine whether there is a noncompliant standard or policy. If so, identify the standard or policy in question.
SVER – Policy on Complaints

• The program is responsible for developing and implementing a procedure demonstrating that students/residents are notified, at least annually, of the opportunity and the procedures to file complaints with the Commission.

• Additionally, the program must maintain a record of student/resident complaints since the Commission’s last comprehensive review of the program.
SVER – Policy on Complaints

- The site visitor must review the student/resident complaint record (since time of last site visit) as part of the accreditation review.
- Look for themes or patterns in complaints related to the program’s compliance with the Accreditation Standards.
- If themes/patterns exist, identify specific Accreditation Standards which require further investigation during the visit.
- In the Site Visitor Evaluation Report (SVER), note any deficiencies in compliance (recommendations) or any suggestions for program enhancement that are linked to student/resident complaints.
- Identify the specific complaint issue and the associated standard.
- Anonymous complaints will be considered during the site visit and provided to the team as part of the background materials. The program will have an opportunity to respond.
SVER – Policy on Distance Education

• Site Visitor Evaluation Report (SVER) includes questions on Distance Education in the Compliance with Commission Policies section

• Programs are reviewed at time of site visit for compliance with Distance Education policy

• May be associated with the use of Off-Campus Sites, which is a separate & distinct policy

• Technology-driven

• Expectation is that programs using this modality must comply with accreditation standards; must have a student identity verification process, and must alert students to possible associated charges
• Distance education means education that uses one or more of the technologies listed below to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:
  – the internet;
  – one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
  – audio conferencing; and/or
  – video cassettes, DVDs, and CD–ROMs, if the cassettes, DVDs, or CD–ROMs are used in a course in conjunction with any of the technologies listed above.
SVER - Policy on Distance Education, continued

• Programs that offer distance education must have processes in place through which the program establishes that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.

  – Programs must verify the identity of a student who participates in class or coursework by using, at the option of the program, methods such as a secure login and pass code; proctored examinations; and/or new or other technologies and practices that are effective in verifying student identity

  – The program must make clear in writing that processes are used that protect student privacy and programs must notify students of any projected additional student charges associated with the verification of student identity at the time of registration or enrollment
Is It Distance Education?

• Distance Education is education that uses one or more technologies to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the student and the instructor, either synchronously or asynchronously.

• Some examples would be (a partial list):
  – Delivery of course content via technology with assignments submitted through an online educational platform
  – Computer-based examinations/quizzes that are completed outside of the educational institution (i.e. not proctored by faculty)
  – Discussion assignments completed online
Three (3) important sections of the SVER under the Program Effectiveness Section

Program Effectiveness questions are found immediately after the Distance Education section in the SVER

This section requires that the site visitor prepare a written paragraph on the program’s outcomes assessment process and document the measures used, positive results, negative results, and recent changes made by the program related to student achievement data.
Site Visitor must:

- Confirm that the institution/program is assessing student/resident achievement and provide a detailed analysis of the program’s performance with respect to student/resident achievement. Include a description of the assessment tools used by the program and a summary of data and conclusions.

- Describe the **positive and negative** program outcomes related to the program’s student/resident achievement measures. Describe program changes made in accordance with outcomes data collected. Conversely, describe areas where program change has not been made in accordance with outcomes data collected.

- Identify specific standards where recommendations or suggestions are written related to student/resident achievement.
SVER– Program Effectiveness and Student/Resident Achievement, continued

• Program Effectiveness Question #1
  – Document the tools programs are using to assess student/resident achievement.
  – Provide an analysis of the program’s performance with regard to student/resident achievement

• Program Effectiveness Question #2
  – Document the outcomes, both positive and negative.
  – Document Program changes, made as a result of the outcomes assessment process.
• Program Effectiveness Question #3
  – Identify suggestions or recommendations cited elsewhere in the report, which directly relate to program effectiveness.
Examples of Measures Programs May Use

• “The program has demonstrated positive student achievement through various outcomes measures that include:”
  – National and Regional board pass rates (for Allied, provide actual rates in SVER)
  – Retention/Graduation rates
  – Certifying board examination performance
  – In-Service Training Examination scores
  – Graduate and Alumni surveys
  – Pre- and Post-testing
  – Placement in residency or fellowship programs
  – Research publication
  – The above is only a partial list of examples
Student/Resident Achievement Outcomes

Examples

• “The program has not demonstrated positive student achievement through:”
  – High attrition rates
  – Low pass rates (national or regional certification exams)
  – Graduation rates
  – Low benchmarks
  – Poor survey results
Student/Resident Achievement Summary

Examples

Address positive and/or negative results and what the program did based on these results:

“Based on an analysis of data obtained through the outcomes process, the program has…”

– Added additional laboratory sessions
– Revised admissions criteria
– Developed an exam prep course or re-sequenced courses
– Added a rotation to increase specific experience
Writing Recommendations and Suggestions
• A recommendation is written when an area of non-compliance has been identified.
• A rationale must be included - why are you writing a recommendation?
• Consider the following:
  - What specifically is the issue?
  - What does the program currently provide? How well is it provided? How well does it work?
  - To what extent are students/residents gaining the required training and experience?
  - What training and experiences are the students/residents not gaining?
Writing a Recommendation, Cont.

- Treat each **NO** on the SVER as a separate issue and provide rationale for each.
- Provide as much **detail** as possible in the narrative. The narrative must support the recommendation.
- The recommendation cannot be prescriptive - tell the institution **what** to do, not **how** to do it.
- Begin with “It is recommended that” and then restate the “must” statement verbatim (without the word “must”).
- Include only those parts of the standard that are not met.
- Cite multiple sources; don’t use names.
Writing a Recommendation, Cont.

Two parts to a Recommendation:

A) The Narrative

– Describe what was compliant with the Standard, if applicable.
– Explain what is missing/why the program is out of compliance.
– Remember that this report is written for external audience including CEO, CAO, Program Director (who may or may not be familiar with dental terminology and language) and for the Commission to review. Be descriptive and clearly articulate the issue(s).
B) The Recommendation

– Re-state the standard in the recommendation.
– Take out the word “must.”
– Only include the part(s) of the standard that are out of compliance.
– With multiple statements in a standard, write, “It is further recommended that…”
– Don’t invent new language or a new standard; you must restate the standard exactly.
Composing a Recommendation

Example:

Entire Standard reads:

4-9.1 The cumulative anesthetic experience of each graduating resident must include administration of general anesthesia/deep sedation for a minimum of 300 cases. This experience must involve care for 50 patients younger than 13. A minimum of 150 of the 300 cases must be ambulatory anesthetics for oral and maxillofacial surgery outside of the operating room.
Example of Written Recommendation

Through review of the self-study guide, on-site materials and surgical logs and interviews, (multiple sources cited)

the visiting committee noted that the cumulative anesthetic experience of each graduating resident has included a minimum of 300 cases. (the issue, what is provided, how well it is provided)

Notice that only the portion of 4-9.1 that was not in compliance is restated as the recommendation.
Example of Written Recommendation

However, the visiting committee determined that the number of pediatric patients ranged from 30 to 40. (how well it works, what is not being provided, why it’s a problem. Notice that only the portion of the standard not being met is included in the recommendation)

1. It is recommended that this experience involve care for 50 patients younger than 13. (OMS Standard 4-9.1)

Standard states: This experience must involve care for 50 patients younger than 13.
Remember…

- A recommendation must relate to a specific standard, and only a “must” statement.
- Treat each “no” as a separate issue and provide rationale for each.
- Cite multiple sources without divulging sources.
- Provide as much detail as possible.
Writing a Suggestion

• When a program is in compliance, but could be improved.

• You marked “YES” on the SVER

• Emphasis is on *enhancing* compliance; not to provide a “favor”

• Program is not obligated to address in response.

• Written in the basic format of a recommendation:
   Must relate to a Standard
   Cite multiple sources, if applicable
   Provide the “story/narrative”
   Begin with “It is suggested that …..”
Writing a Suggestion, Cont.

• State how the program meets the standard
• State the rationale for the suggestion
• Provide a suggestion that is not the exact wording of the standard
  – Remember: suggestions are written to enhance compliance (a program must demonstrate compliance)
    *If a program does not comply, mark “NO” on the SVER and write a recommendation, not a suggestion
  – As with recommendations, suggestions must be related to a specific standard (not just a suggestion based on opinion or preference)
Through review of the self-study and on-site inspection of the facilities, the visiting committee noted the absence of a panoramic radiography unit. (multiple sources, description of findings)

While the lack of a panoramic radiography unit does not preclude the achievement of the program’s goals and objectives, (confirms that the program meets the standard)

the use of one could strengthen the clinical component of the program, particularly in the area of patient assessment and diagnosis. (how the experience could be enhanced)

Therefore, it is suggested that the program explore ways through which students/residents can gain experience in the use of a panoramic radiography unit to enhance patient assessment and diagnosis. (the non-prescriptive suggestion)
Writing Style

• Remember: Recommendations and/or suggestions are not written to tell a program *what* to do, or *how* to do it
• Do not be prescriptive
• Keep suggestions broad; consider phrases/verbs such as:
  – “Consider methods”
  – “Explore opportunities”
  – “Enhance”
  – “Improve”
  – “Increase access to…”
• What about “may” or “should” statements from the Standards document?

– Programs are only evaluated on “must” statements, not intent statements, examples of evidence or “may,” “should,” or “shall” statements.
Other Written Comments

• Comments that document a specific situation that could be useful for future site visits could be included in the SVER
  – Plans for construction, for example
  – Typically, these comments supplement a recommendation or suggestion
• No written commendations
• Do not add extraneous comments, such as:
  – Residents are happy
  – The faculty said …
  – This program is doing a great job
Tips for Writing Within the SVER

• Keep your audience in mind (be simple and direct).
• The SVER is a straightforward and detailed explanation of findings.
• Vague comments are confusing; stick to the facts.
• Note recommendations that have been previously cited at the last site visit.
• Move from general to specific in the writing of the rationale for recommendations or suggestions.
• Comment only on those areas determined to be recommendations or suggestions.
• Programs are only evaluated on “must” statements, not intent statements, examples of evidence, or “may,” “should,” or “shall” statements.
Recap: The Site Visitor Evaluation Report

• The SVER contains “Must” statements from the Standards in “yes” and “no” format.

• All questions must be answered, all data entered, all sections completed.

• If you indicate NO, the program is not in compliance with this standard and you must write a recommendation. Programs must respond to recommendations.

• If you indicate YES, you have two options:
  – make no comment
  – write a suggestion

• Remember…the program’s evaluation is based on compliance with the current Accreditation Standards and CODA policies at the time of the site visit.
Recap: After the Site Visit

When the Site Visit is over:

• Be CERTAIN to review and approve the preliminary draft site visit report
• When the PDSVR has been approved, your job is done
• Do not correspond with anyone in the program or institution
• Remember: reviewing the draft is an integral part of your job as a site visitor
Section 4: Mandatory Assessment

2019 Mandatory Annual Training
Complete the Mandatory Assessment

• To register your completion of the training program, you are required to complete the mandatory assessment found at the link below.

https://surveys.ada.org/jfe/form/SV_8jO9vmAHCT0ss4J

• Remember, your final assessment must be completed by January 31, 2020. A score of 70% is required to pass the assessment. If this score is not achieved, you will be asked to repeat the exam until this score is attained.

• Thank you for participating in CODA’s annual mandatory site visitor training program.