

ACGME's Efforts to Support Medically Underserved Areas/Populations

Laney McDougal, MS-HSM

Director, Medically Underserved Areas/Populations and GME ACGME

RRPD/THCPD Annual Conference | September 13, 2023



Disclosures

I have no conflicts of interest or financial relationships to disclose.



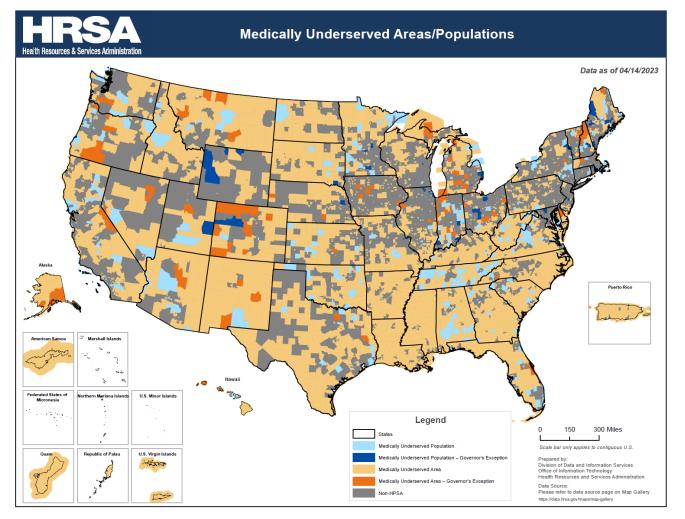
Objectives

- Discuss factors contributing to the development of a new accreditation framework
- Explain the sections of the ACGME's accreditation framework for medically underserved areas and populations
- Describe the ACGME's commitment to supporting the development of GME in rural and underserved areas



ACGME Mission

To improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.



GME Exposure is a Factor

"More than half (57.1%) of the individuals who completed residency training from 2011 through 2020 are practicing in the state where they did their residency training"

AAMC 2021 Report on Residents, Executive Summary

Predictors of Primary Care Physician Practice Location in Underserved Urban or Rural Areas in the United States: A Systematic Literature Review

Goodfellow, Amelia; Ulloa, Jesus G. MD, MBA; Dowling, Patrick T. MD, MPH; Talamantes, Efrain MD, MBA, MSHPM; Chheda, Somil; Bone, Curtis MD, MHS; Moreno, Gerardo MD, MSHS

Author Information ⊗

Academic Medicine: September 2016 - Volume 91 - Issue 9 - p 1313-1321 doi: 10.1097/ACM.000000000001203

A Roadmap to Rural Residency Program Development

Emily M. Hawes, PharmD, BCPS, CPP Amanda Weidner, MPH Cristen Page, MD, MPH Randall Longenecker, MD Judith Pauwels, MD Steven Crane, MD Frederick Chen, MD Erin Fraher, PhD, MPP

ural communities face a pressing need for primary care, behavioral health, and obstetrical care services, yet rural hospitals around the country are closing, and the gap between mortality rates in rural and urban areas is widening. 1,2 While there is some debate about whether the nation faces a shortage of physicians, there is general consensus that the workforce is maldistributed.³ Estimates suggested we face a shortfall of 14164 practitioners in primary care health professional shortage areas.⁴ While efforts to address rural workforce shortages need to be targeted along multiple points in a physician's career trajectory, exposure to rural and underserved settings during training has been shown to increase physicians' sense of preparedness for rural practice and retention in rural communities. 5,6 Despite this evidence, graduate medical education (GME) in rural areas remains very limited, and the US Government Accountability Office estimates that only 1% of residents across all specialties train in rural areas.^{7–10} This is due in part to the unique challenges that face rural health



Accreditation Council for Graduate Medical Education

What We Do

Designated Institutional Officials Program Directors and Coordinators

Residents and Fellows

Meetings and Educational Activities

FEATURED

July 1, 2020

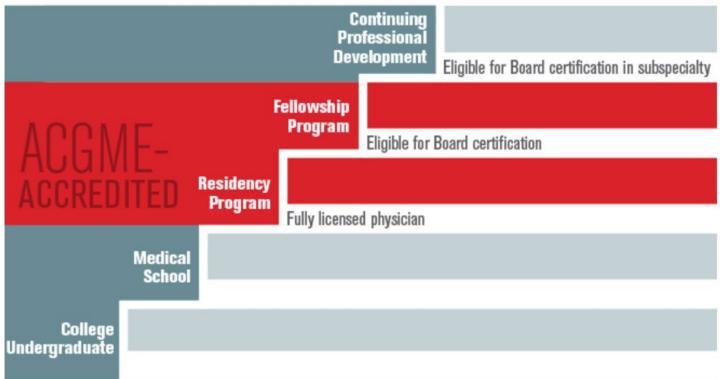
ACGME, AOA, and AACOM Usher in New Era of Single Accreditation for Graduate Medical Education

The ACGME, the American Osteopathic Association (AOA), and the American Association of Colleges of Osteopathic Medicine (AACOM) celebrate the successful transition to a single accreditation system for graduate medical education (GME) in the US.

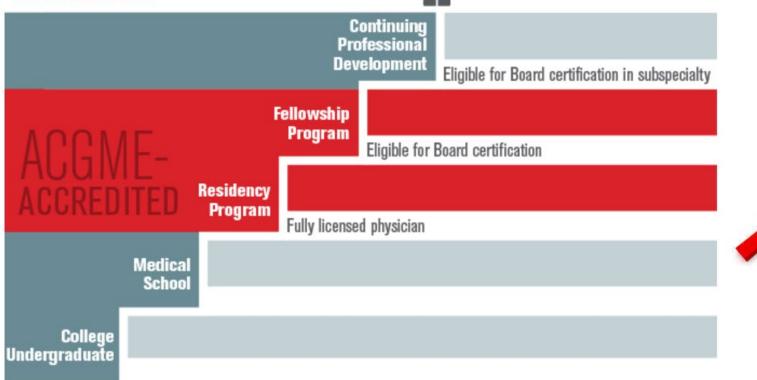
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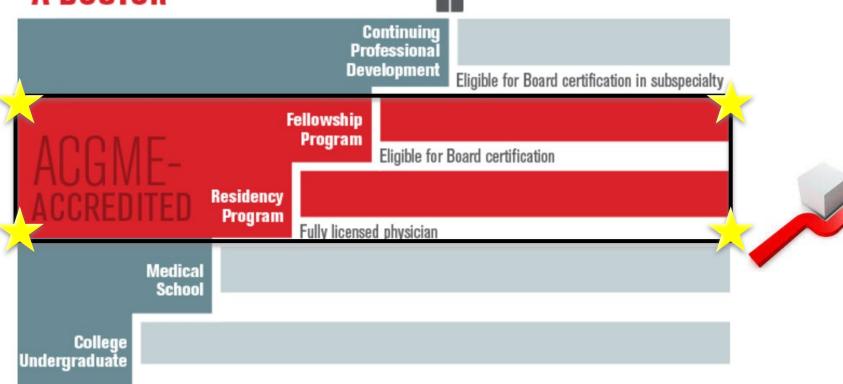












MUA/P Work Group



Jackson, MS

Work Group:

Accreditation Framework for Medically Underserved Areas and Populations (External Members)

Name	Title	Organization			
Donald Brady, MD	Designated Institutional Official	Vanderbilt University Medical Center			
Thomas Hansen, MD	Designated Institutional Official	Advocate Health Care			
Robert Juhasz, DO	Medical Staff	Cleveland Clinic			
Jeffrey Kirsch, MD	Associate Dean for Clinical and Veterans Affairs	Oregon Health and Science University			
Sandeep Krishnan, MD	Fellow, Interventional Cardiology	University of Washington School of Medicine			
Lorrie Langdale, MD	Professor & Chief of General Surgery	University of Washington School of Medicine			
Karen Nichols, DO, MA	Dean	Midwestern Univ/Chicago Coll of Osteopathic Medicine			
Jeffrey Pettit, PhD	Clinical Associate Professor (Public Member)	University of Iowa Hospitals & Clinics			
Benjamin Preyss, MD	Medical Director of Population Health	Lawndale Christian Health Center			
Claudia Ramirez Sanchez, MD	PGY-2, Internal Medicine (Resident Member)	Cook County Health and Hospital System			
Gary Slick, DO	Designated Institutional Official	Oklahoma State University Center for Health Sciences			



Work Group:

Accreditation Framework for Medically Underserved Areas and Populations (Internal Members)

Name	Title			
Paige Amidon, MBA, MPH	Senior Vice President, Department of Communications			
John Combes, MD	Visiting Scholar, Department of Education			
Kate Hatlak, MSEd	Executive Director, Hospital-Based Accreditation			
Paul Johnson, MFA	Executive Director, Institutional Accreditation			
Mary Lieh-Lai, MD	Senior Vice President, Medical Accreditation			
Lorenzo Pence, DO	Senior Vice President, Osteopathic Accreditation			
Paul Rockey, MD	Scholar-in-Residence			
Kevin Weiss, MD	Senior Vice President, Institutional Accreditation			



Presenters at Work Group Meetings

Presenter	Presenter Title, Organization	Presentation Title				
Lori Mihalich-Levin	Partner, Dentons	Regulatory Mechanisms for GME Financing in Medically Underserved Areas				
John Sealey, DO	DIO, Detroit Wayne County Health Authority GME Consortium	GME and Accreditation in Urban Medically Underserved Areas				
Roxanne Fahrenwald, MD, MS	DIO, Montana Family Medicine Residency	GME and Accreditation in Rural Medically Underserved Areas				
Candice Chen, MD	Director, Division of Medicine and Dentistry, HRSA	HRSA's Support of GME in Medically Underserved Areas				
Tom Gearan, MD	Program Director, Internal Medicine, Maine Medical Center	Maine Medical Center, Rural Internal Medicine				
Kathleen Klink, MD Edward Bope, MD	Chief, Health Professions Education (Klink), GME Affiliations Officer (Bope), Department of Veterans Affairs	Presentation from Department of Veterans Affairs				
Randall Longenecker, MD	Assistant Dean, Rural & Underserved Programs, Ohio University Heritage College of Osteopathic Medicine	Presentation from RTT Collaborative				





Accreditation Framework for Medically Underserved Areas/Populations (MUA/Ps)



I. Enhancing ACGME Support



II. Engaging with ACGME Review Processes



III. Understanding ACGME Compliance Challenges



IV. Facilitating Effective Institutional Oversight and Administration

The ACGME Framework for Medically Underserved Areas and Populations and Graduate Medical Education

Laney McDougal, MS-HSM Paul Foster Johnson, MFA Lynne Kirk, MD Kevin Weiss, MD, MPH

JGME Volume 15, Issue 2 (April 2023)

https://meridian.allenpress.com/jgme/article/15/2/272/492295/The-ACGME-Framework-for-Medically-Underserved





Starting Definition

Medically underserved areas and populations (MUA/Ps) are places or communities in which groups of people have unmet health or health care needs.



Programmatic Unit for Medically Underserved Areas/Populations and GME



Laney McDougal, MS
Director, MUA/P and GME
Department of Sponsoring Institutions and CLE
Department of Accred, Recog, and Field Activities



Paul Foster Johnson, MFA
Vice President
Sponsoring Institutions



MUA/P Advisory Group -

inaugural meeting 12/1-12/2/22

Chad Harris, MD

Natividad Medical Center Chair

Paul Foster Johnson, MFA

ACGME Vice Chair

Billy Beets, Jr., MD, FAAFP, DABFM

Oklahoma State University College of Osteopathic Medicine

Jim Clardy, MD

University of Arkansas for Medical Sciences College of Medicine

Gary Cloud, PhD, MBA

A.T. Still University

Public Member

Michael Dill

Association of American Medical Colleges

Marie Dotseth, MHA

Public Member

Diana Franco, MD

Loyola Medicine/MacNeal Hospital Resident Member

Thomas Gearan, MD

Maine Medical Center

Raven Hill, DO

Morehouse School of Medicine Resident Member

Theresa Nevarez, MD, MBA

Los Angeles County-Harbor-UCLA Medical Center

Dotun Ogunyemi, MD

Arrowhead Regional Medical Center

Bridget Thackeray, DO

Texas Institute for Graduate Medical Education and Research (TIGMER)

Kimberly Thomas, MD, MSPH

Providence Health

Susan Ward-Jones, MD

East Arkansas Family Health Center, Inc.



MUA/P Advisory Group —

Ex-officio members

Loretta Christensen, MD, MBA, MSJ, FACS Indian Health Service

John Snyder, MD, MS, MPH, FACP Health Resources and Services Administration

Leith States, MD, MPH
Department of Health and Human Services

Kanta Velamuri, MDVeterans Health Administration



Projects and Priorities



Stakeholder Engagement



Rural Track Program Designation



Advisory Group



Data Enhancement

Review Committee Considerations

Distant Sites

- o Resources provided (e.g., travel costs, lodging, etc.)
- Separate match/resident awareness
- Residents from other institutions rotating at the site
- Peer-to-peer interaction
- o Is site director over more than one site?
- Local support systems
- Revised specialty-specific program requirements
 - IM changes to minimum required complement (effective 7/1/2022)

III.B.1.	All complement increases must be approved by the Review Committee. (Core)		
	III.B.1.a)	There must be a sufficient number of residents to allow peer-to-peer interaction and learning. (Core)	
	III.B.1.a).(1)	The program should offer a minimum of nine positions.	
	III.B.1.b)	A program must have a minimum of 15 residents enrolled and participating in the training program at all times. (Detail)	

Specialty-Specific Background and Intent: The Review Committee believes that peer-to-peer interactions and learning are extremely important components of residency education and has set the minimum number of residents to nine. While three residents per educational year is suggested, it is not required as long as there is relative balance per level. To ensure that resident education is not compromised by having too few residents, the number of residents in a program will be monitored at each review, particularly for those programs with significant decreases in complement. However, this requirement is categorized as a "detail" as there may be programs that have specific circumstances that allow them to function with a smaller resident complement. This categorization allows the establishment of residency education programs in rural and medically underserved areas and populations when the Review Committee determines that the program has sufficient resources to ensure substantial compliance with accreditation requirements.

Internal Medicine Requirements, Tracked Changes Copy (effective 7/1/22)



https://www.acgme.org/initiatives/medically-underserved-areas-and-populations/rural-tracks/

Specialty-Specific RTP Questionnaires

The following Review Committees currently use a RTP Questionnaire to obtain additional information for programs seeking ACGME RTP designation:

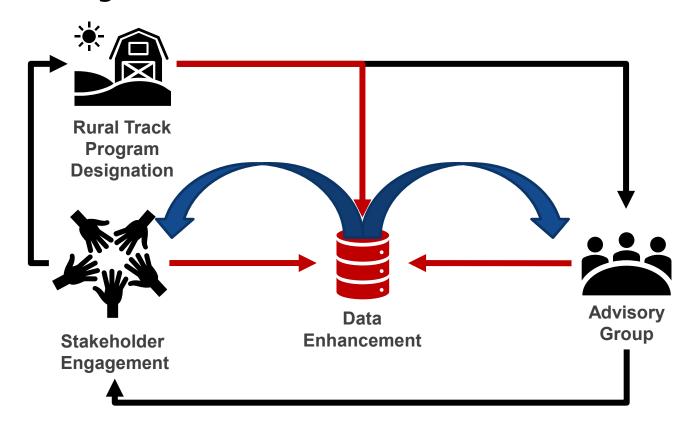
- Family Medicine
- · Internal Medicine
- Obstetrics and Gynecology (new program request)
- Obstetrics and Gynecology (complement increase request)
- Pediatrics
- · Physical Medicine and Rehabilitation
- Psychiatry

The specialty-specific ACGME RTP Questionnaires can also be found on the Documents and Resources page of the relevant specialty's section on the ACGME website and are submitted as part of the ACGME RTP designation request as indicated on the form. Questions concerning this form can be directed to staff members of the relevant specialty Review Committee, whose contact information may be found on that specialty's section of the ACGME website.





Projects and Priorities





Data Project Aim

To enhance GME location data to <u>measure exposure of GME</u> within rural and underserved areas/populations, support ACGME strategic objectives and departmental needs, and align with the MUA/P and GME framework as approved by the ACGME Board of Directors.



Understand the GME footprint: location, duration, and type of experiences





Over a four-year period, RDE aims to enhance ACGME location data in its...

- accessibility through revised categorization of existing data,
 efficient data collection, and additional public reporting functionality
- accuracy through data validation
- reliability through external data integration and data sharing

Corresponding with ACGME Strategic Objectives:

- ✓ Prepare the profession to meet future public needs [3, 4]
- ✓ Enhance the Clinical Learning Environment [7]
- ✓ Pursue knowledge development in medical education [8, 9]
- ✓ Increase ACGME engagement on behalf of the public [13, 14]



Project Objectives

- Year 1 define each participating site as clinical or nonclinical, establish distinct participating site and SI taxonomy
- Year 2 establish taxonomy for MUA/P track designations, external data validation for participating site information
- Year 3 transition block diagram to dynamic data tables, establish data-derived geographic attribution of site addresses
- Year 4 collect graduate outcome data

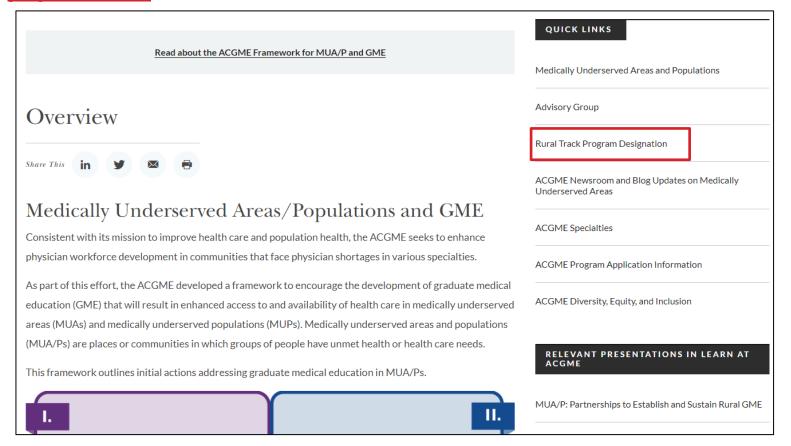


Frequently Asked Questions





https://www.acgme.org/initiatives/medically-underserved-areas-and-populations/





9 FM 3 Psych 2 IM 1 Surg

∧ ACGME-accredited programs with ACGME Rural Track Program Designation by specialty and state



ACGME	All States								
State	Program Code / Name	Specialty Name	Address	Program Director	Accreditation	Accreditation Effective Date	ACGME RTP Designation Process	ACGME RTP Designation Date	Current Residents or Fellows in Rural Track
Alaska	[1400200001] University of Washington School of Medicine (Soldotna) Program	Internal medicine	250 Hospital Place Soldotna, AK 99669-7559 United States	Kenneth P. Steinberg, MD	Initial Accreditation	01/20/2023	Application	01/20/2023	
Arkansas	[1200400003] University of Arkansas for Medical Sciences Regional Centers	Family medicine	UAMS Regional Centers (Berryville/Eureka Springs) 214 Carter St Berryville, AR 72616 United States	Ronald K. Brimberry, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	•
California	[1200500005] Adventist Health Hanford Central Valley Network (Sonora) Program	Family medicine	Adventist Health Hanford Central Valley Network Program 115 MALL DRIVE HANFORD, CA 93230 United States	Jyothi R. Patri, MD, MHA	Initial Accreditation	07/01/2022	Application	07/01/2022	•
Connecticut	[1202200001] Quinnipiac University Frank H. Netter MD School of Medicine Program	Family medicine	Frank H. Netter MD School of Medicine 275 Mount Carmel Avenue Hamden, CT 06518 United States	Traci J. Marquis- Eydman, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	(
Connecticut	[4000800001] Quinnipiac University Frank H. Netter MD School of Medicine Program	Psychiatry	Quinnipiac University Frank H. Netter MD School of Medicine Program 540 Litchfield Street Torrington, CT 06790 United States	Remy A. Sirken, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	
Nebraska	[1403021222] Creighton University School of Medicine (Omaha) Program	Internal medicine	Creighton University Education Building 7710 Mercy Road, Suite 301 Omaha, NE 68124-2354 United States	Joseph Nahas, MD	Continued Accreditation	01/20/2023	Complement Increase	08/29/2022	
Nebraska	[4003021116] Creighton University School of Medicine (Omaha) Program	Psychiatry	Department of Psychiatry Creighton University Education Building 7710 Mercy Road, Suite 601 Omaha, NE 68124-2370 United States	Jyotsna S. Ranga, MD	Continued Accreditation	02/10/2023	Complement Increase	09/09/2022	•
New Mexico	[1203400001] New Mexico Primary Care Training Consortium Program	Family medicine	New Mexico Primary Care Training Consortium Program 2010 Industrial Park Road Espanola, NM 87532 United States	Nora E. Lamartine, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	
New York	[1203500740] SUNY Upstate Medical University Program	Family medicine	SUNY Upstate Medical University Community Campus - POB North, Suite 3V 4900 Broad Road Syracuse, NY 13215 United States	R. Bailey, MD	Continued Accreditation	01/25/2023	Complement Increase	10/19/2022	:
North Carolina	[4003600001] Mountain Area Health Education Center (Linville) Program	Psychiatry	Mountain Area Health Education Center (Linville) Program 436 Hospital Dr Suite 235 Linville, NC 28646 United States	Elena Perea, MD	Initial Accreditation	04/29/2022	Application	04/29/2022	
Oregon	[1204000001] Oregon Health & Science University Hospital Program	Family medicine	Oregon Health & Science University Hospital Program 3181 SW Sam Jackson Park Rd Portland, OR 97239 United States	Jinnell A. Lewis, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	C
Pennsylvani a	[1204100004] UPMC Medical Education Program	Family medicine	740 High Street Williamsport, PA 17701 United States	JOHN N. BOLL Jr, DO	Initial Accreditation	07/01/2022	Application	07/01/2022	(
Virginia	[1205100001] Virginia Commonwealth University Health System Program	Family medicine	Virginia Commonwealth University Health System Program 1755 N Mecklenburg Ave South Hill, VA 23970 United States	Lori H. Landes, MD, PhD	Initial Accreditation	07/01/2022	Application	07/01/2022	C
West Virginia	[4405500002] Marshall Community Health Consortium Program	Surgery	1600 Medical Center Drive Suite 2500 Huntington, WV 25701 United States	Farzad Amiri, MD	Initial Accreditation	04/14/2022	Application	04/14/2022	\$
Wisconsin	[1205600002] Mercy Health System (Lake Geneva) Program	Family medicine	Mercy Health System Program 350 Peller Road Lake Geneva, WI 53147 United States	Gary Myron, MD	Initial Accreditation	07/01/2022	Application	07/01/2022	2

Alaska - 1 Arkansas – 1 California – 1 Connecticut – 2 Nebraska – 2 New Mexico – 1 New York – 1 North Carolina – 1 Oregon – 1 Pennsylvania – 1 Virginia – 1 West Virginia – 1 Wisconsin - 1



MUA/P Interest Group





Connect with the GME community working in MUA/Ps

Provide an interface with ACGME to build information and knowledge

More information is available in ACGME e-Communications.
Interest group meetings are held remotely via Zoom.



Save the Date: Tuesday, September 26 from 3-4pm CST



Search discussions

O comments Updated 8.16.23

MUA/P and **GME** Discussion Forum

MUA/P and GMF Resource Center

Welcome to the MUA/P and GME Resource Center! This center is intended for use by GME community members who are involved in addressing the needs of medically underserved areas/populations (MUA/Ps). MUA/Ps are places or communities in which groups of people have unmet health or health care needs. GME community members are encouraged to use this space to share and solve for common challenges and to share and access helpful knowledge and resources related to MUA/Ps.

MUA/P Community Discussion Forum

Start a New Discussion

This discussion forum is being moderated by ACGME Staff. We ask that all participants engage in civil conversation using respectful language at all times. Persistent violation of discussion rules will result in removal from the forum. Additionally, ACGME Staff reserve the right to remove posts that are not consistent with the purpose of the forum.

Partnerships to establish GME in MUA/Ps

What partnerships are important to establishing GME in MUA/Ps?

Total: 1



Most recent

Join

https://dl.acgme.org/pages/acgme-muap-resource-center-login-page



Contact

ACGME MUA/P and GME Staff

 Questions about the ACGME RTP designation and ACGME's efforts to address GME in MUA/P

Check MUA/P web page

Specialty Review Committee Staff

 Questions pertaining to compliance with Program Requirements

Check ACGME specialty web page

Institutional Review Committee Staff

 Questions pertaining to compliance with Institutional Requirements

Check ACGME IRC web page

ADS Team

 Technical questions with application or Annual Update

ads@acgme.org 312.755.7474



Questions?

Laney McDougal, MS-HSM

muap@acgme.org 312.755.7458



Thank you!



Teaching Health Center Graduate Medical Education (THC GME)

2023 Annual Grantee Meeting

September 13, 2023
Commission on Dental Accreditation

Timeline and Time Limitation for Accreditation

- Timeline for Application: Provided that the application is in order, the first opportunity for the Commission to consider the program is generally 12 to 18 months following the Commission's formal acknowledgment of receipt of the application, initiation of the review process, and following an initial site visit.
- Time Limitation for Application: The review of an application will be terminated if an institution fails to respond to the Commission's requests for information for a period of six (6) months.
- Time Limitation for "Initial Accreditation" Status: The classification of "initial accreditation" granted to dental and dentalrelated educational programs will be terminated at the end of two (2) years following the projected enrollment date if students/residents have not been enrolled. (See the Commission's Policy on Non-Enrollment of First Year Students for further information).

CODA Application Process for Developing Programs – General Steps in Process

- Completed Verification Page submitted
- E-Portal open and application uploaded
- Application Fee paid
- Cursory review for completeness (all questions answered, institutional accreditor, program director)
- Acknowledgement Letter, with Screening List
- Reviewer identified and review initiated

CODA Application Process for Developing Programs – General Steps in Process

- If Criteria for Consideration of An Application for Accreditation have been sufficiently addressed and documented, and the program, as proposed, appears to have the potential to meet the Accreditation Standards, a site visit is scheduled four (4) to seven (7) months following completion of the application review. (Third Party Comment Posted)
- Substantive changes in the application must be reported and may delay the site visit.

Criteria for Consideration of An Application for Accreditation

Change, effective August 11, 2023:

e. If the program will rely on support from entities outside of the institution to comply with the Accreditation Standards or program requirements (e.g. access to clinical facility or resources for required instruction), contractual agreements are drafted and signed providing assurance that a program dependent upon the resources of a variety of institutions and/or extramural clinics and/or other entities has adequate support. The program must document that support from outside entities does not compromise its authority as the sponsor of the program.

CODA Application Process for Developing Programs – General Steps in Process

- Pre-enrollment site visit conducted and preliminary draft site visit report (PDSVR) generated
- Program has opportunity to reply to PDSVR
- PDSVR and program response considered by discipline-specific Review Committee
- CODA considers Review Committee recommendation
- CODA action transmitted to program

After "Initial Accreditation" is Granted

 Once a program is granted "initial accreditation" status....Programs that are less than four (4) years in duration will be site visited again prior to the first class of students/residents graduating.

Accreditation Standards Regarding Program Sponsorship (Current Standards)

<u>AEGD</u>

 Each sponsoring or co-sponsoring United States-based educational institution, hospital or health care organization must be accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS).

Accreditation Standards Regarding Program Sponsorship (Current Standards)

PED

Advanced dental education programs **must** be sponsored by institutions, which are properly chartered, and licensed to operate and offer instruction leading to degrees, diplomas or certificates with recognized education validity. Hospitals that sponsor advanced dental education programs must be accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). Educational institutions that sponsor advanced dental education programs **must** be accredited by an agency recognized by the United States Department of Education. The bylaws, rules and regulations of hospitals that sponsor or provide a substantial portion of advanced dental education programs must ensure that dentists are eligible for medical staff membership and privileges including the right to vote, hold office, serve on medical staff committees and admit, manage and discharge patients.

Accreditation Standards

https://coda.ada.org/standards

Revised Standards

- August 5, 2022 implementation
 - Advanced Dental Education Programs in Advanced Education in General Dentistry (V&R)
 - Advanced Dental Education Programs in General Practice Residency (V&R)

Pediatric Dentistry Standards (anesthesia)

- Comments reviewed by CODA Summer 2023, including feedback that:
 - Administrative and financial costs of obtaining permits could place an undue burden on clinical faculty who supervise residents, especially at affiliated clinical sites.
 - Other comments indicated that the requirements in the Standards are less stringent than the ADA Guidelines and that the Accreditation Standards should at least meet or exceed the ADA Guidelines to ensure pediatric dentistry program graduates have more advanced training requirements than that of dental students or general dentists.

Therefore, due to comments received and reviewed, the PED RC recommended, and the Commission concurred, that a workgroup of the members of the Review Committee, including the current and incoming Review Committee chair, further consider the proposed revisions with a report to the Winter 2024 meetings.

Proposed Standards: Comments Due

Comment Due June 1, 2024:

- Advanced Education in General Dentistry
- Pediatric Dentistry

 Proposed revisions related to institutions that may sponsor a CODA-accredited program.

https://coda.ada.org/accreditation/open-hearingscomments-due

Excerpts of Proposed Pediatric Dentistry Standards

- Health Care Organization: A Federally Qualified Health Center (FQHC), Indian Health Service (IHS), Veterans Health Administration system (VA), or academic health center/medical center/ambulatory care center (both public and private) that is accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS).
- Health care organizations that sponsor advanced dental education programs **must** be accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS).
- Advanced dental education programs conferring a certificate **must** have state or federal approval to operate and, as applicable, to confer a certificate. Advanced dental education programs conferring a degree **must** have institutional accreditation and authority to confer a degree.

Excerpts of Proposed Advanced Education in General Dentistry Standards

- Health Care Organization: A Federally Qualified Health Center (FQHC), Indian Health Service (IHS), Veterans Health Administration system (VA), or academic health center/medical center/ambulatory care center (both public and private) that is accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS).
- Advanced dental education programs conferring a certificate **must** have state or federal approval to operate and, as applicable, to confer a certificate. Advanced dental education programs conferring a degree **must** have institutional accreditation and authority to confer a degree.

Appropriate Institutional Accrediting Agencies

- An agency recognized by the United States

 Department of Education
 - Must hold appropriate recognition with USDE for postgraduate (post-doctoral) certificate/degree granting
- An accreditation organization recognized by the Centers for Medicare and Medicaid Services
 (CMS)
 - Must be recognized by CMS as an accreditation organization

Why Stay Informed on Standards Revisions?

- It is the program's obligation to stay up-todate on the Standards for compliance.
- A program's compliance is evaluated with Accreditation Standards ("must" statements) that have been adopted and implemented at the time of the site visit.
- Programs may need to modify the selfstudy/application if standards have been implemented during the self-study development process.

Consortiums in Dental Education

- Consortium structures may vary
- Review on case-by-case basis

AEGD and PED Standards state:

- The sponsoring institution **must** ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.
- The authority and final responsibility for curriculum development and approval, student/resident selection, faculty selection and administrative matters **must** rest within the sponsoring institution.

Co-Sponsors Versus Affiliations

<u>AEGD</u>

 Sponsor: The institution that has the overall administrative control and responsibility for the conduct of the program.

<u>PED</u>

- Sponsoring Institution: primary responsibility for advanced dental education programs.
- Affiliated Institution: support responsibility for advanced dental education programs.

Co-Sponsors Versus Affiliations

 Standards address relationships through written agreements that outline the responsibility of each party [sponsor and affiliate(s)]

 Sponsor or Co-Sponsors must retain full authority of the program

Note: All sponsors must sign verification page for each program report.

Educational Activity Sites

Educational Activity Sites may be used for didactic, clinical or observational program requirements/experiences or to meet accreditation standards.

- Minor Sites required to complete an experience at this or another site to meet a program requirement or accreditation standards; No competency (or summative) assessments.
- Major Sites required to complete an experience at this site to meet a program requirement or accreditation standards; Competency assessments (or summative) assessments are performed.

Note: Review Policy and Guidelines for details

Online Resources

- Evaluation and Operational Policies and Procedures (EOPP)
 - Redline copy of changes are available at the link below

https://coda.ada.org/policies-and-guidelines

 EOPP is the Program Director's resource to CODA Policy and Procedures, please review prior to contacting CODA

Online Resources

Application Process
 https://coda.ada.org/accreditation/apply-for-accreditation

Electronic Submission Guidelines
 https://coda.ada.org/policies-and-guidelines/electronic-submission-guidelines

 Privacy and Data Security Requirements for Institutions https://coda.ada.org/policies-and-guidelines/hipaa-compliance

Online Resources

Meeting Dates

https://coda.ada.org/accreditation/meeting-materials

- Reports of Major Actions and Minutes of Past Meetings https://coda.ada.org/accreditation/post-meeting-actions
- Hearing on Standards Information
 https://coda.ada.org/accreditation/open-hearings-comments-due
- Site Visit Schedules (U.S. and International)
 https://coda.ada.org/site-visitor-resources/site-visit-visitor-resources/site-visit-visit-schedule

CODA Staff Contacts

Staff contacts are found on CODA's website:

https://coda.ada.org/about-coda/coda-staff

- Dr. Sherin Tooks, Senior Director
- Ms. Peggy Soeldner, Manager, Advanced Dental Education

Please contact staff by email and phone.

CODA conducts all business electronically. Please do not send postal mail to the Commission office.

Commission on Dental Accreditation

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