

[American Osteopathic Association](#)

Commission on Osteopathic College Accreditation

**Accreditation of Colleges of Osteopathic Medicine:
COM New & Developing Accreditation Standards**

Effective ~~July 1, 2019~~ [September 26, 2023](#)
([Revised October 1, 2024](#))



AMERICAN OSTEOPATHIC ASSOCIATION

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Introduction

The American Osteopathic Association’s Commission on Osteopathic College Accreditation (COCA) accredits osteopathic medical education programs leading to the ~~DO~~ [Doctor of Osteopathic Medicine \(DO\)](#) degree in the United States (programmatically accredited). The COCA also accredits free-standing colleges of osteopathic medicine where no other educational program is offered (institutionally accredited) and serves as the federal Title IV gatekeeper for those institutions. [As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.](#) By assessing the compliance of osteopathic medical education programs based on the nationally accepted standards of the COCA, we serve the interests of the public and of the students enrolled in our colleges of osteopathic medicine (COMs).

To achieve and maintain accreditation, an osteopathic medical education program leading to the ~~Doctor of Osteopathic Medicine (DO)~~ degree must meet the standards contained in this document. The COCA regularly reviews the accreditation standards, and seeks feedback from the osteopathic community and the public. ~~Changes~~ [Substantive changes](#) to ~~the existing~~ COCA standards ~~are considered at a public hearing before a final vote for adoption is~~ [which impose new or additional requirements on programs will be made only after providing notice and opportunity for comment](#) by ~~the COCA~~ [affected persons, institutions, and organizations](#). Once approved, new or revised standards are published in *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards*, which indicates when the changes become effective.

New and developing COMs proceed through a three-stage process prior to reaching full accreditation:

1. Applicant status
2. Candidate status
3. Pre-accreditation status

This document is organized into a series of standards, each of which includes a concise statement of the principles that represent the standard. The elements of each standard specify the components that collectively constitute the standard; they are statements that identify the variables that the COCA considers in evaluating a medical education program’s compliance with the standard.

Additional information on the accreditation actions may be found in the *Accreditation of Colleges of Osteopathic Medicine: COCA Policies and Procedures* document. Additional information about the accreditation process and the standards and elements may be obtained from the COCA office (predoc@osteopathic.org) or from the COCA website (www.aoacoca.org).

NOTICE TO ALL COMs

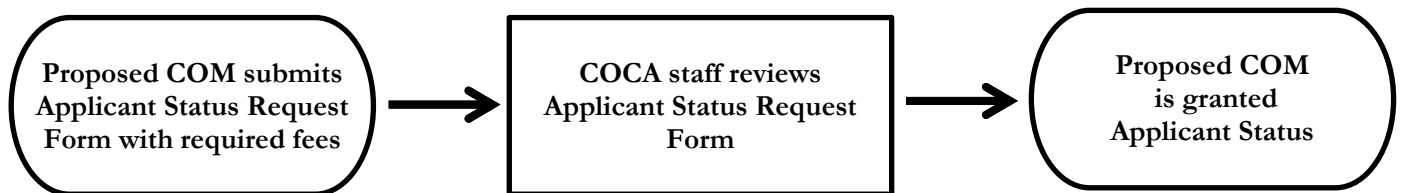
The submission of any information pursuant to the following accreditation standards is subject to the COCA's submission of that information to the ~~USDE~~[United States Department of Education \(USDE\)](#) in compliance with the Department's regulatory requirements to determine recognition of the COCA as an accrediting agency. So as to provide comprehensive and accurate information to the Department, the COCA does not redact any information received from any COM. Accordingly, please be advised that, should a COM wish to have redacted information submitted to the Department, a COM must submit to the COCA two sets of the same information. The first set must be an unredacted compilation of all responses to the accreditation standards and the second set must be redacted according to what the COM wishes to have remain confidential. The redacted document must include the word "redacted" in its title and file name.

Applicant Status

Applicant status is the initial step in seeking accreditation. This status is offered without rights or privileges of accreditation, and does not establish or imply recognition by the COCA. Applicant status is granted upon the formal request for evaluation submitted by the Chief Executive Officer of the applicant COM.

Applicant status is not made public by the COCA and must not be advertised or publicized by the applicant status COM. A school at this stage ~~should~~must identify ~~themselves~~itself as “proposed XCOM (applicant status – seeking accreditation)”.

The Application for New Colleges of Osteopathic Medicine (available at www.aoacoca.org) is to be completed and submitted to the COCA at least 36 months and no more than 60 months prior to the anticipated matriculation date of the first class of students. An application for applicant status must also be accompanied by a non-refundable application fee as prescribed in the fee schedule. Contact COCA for the current fee schedule.



Candidate Status

Candidate status is the second step in seeking accreditation by an applicant COM and is conferred with the privilege of recognition by the COCA, which will be publicly announced. Candidate status may be granted to [proposed](#) COMs that demonstrate the planning and resources necessary to be expected to be able to proceed to pre-accreditation status within two years. [A proposed COM approved for candidate status must identify itself as “proposed XCOM.”](#)

An applicant for candidate status must submit a candidate status self-study along with a feasibility study ~~(and business plan)~~ that assesses the viability of the proposed new COM. The feasibility study ~~(and business plan)~~ must be developed in partnership with a professional nationally known external business consulting firm. The [proposed](#) COM dean and administrative team must play an integral role in the development of these documents. An application for candidate status must also be accompanied by a non-refundable application fee as prescribed in the fee schedule.

~~It is expected that a~~The dean ~~will~~[must](#) be hired [\(as outlined in Candidate elements 2.1 and 2.2 below\)](#) at least 12 months prior to the submission of the candidate status documents and will provide the principal guidance and direction in the development of the [proposed](#) COM through all steps of the candidate status process and beyond through pre-accreditation status and into accreditation. A change in the dean during this time period requires re-initiation of the candidate status application process.

~~It is also expected that the~~The dean ~~will~~[must](#) hire qualified individuals at the associate/assistant dean level to assist ~~him/her~~ in the development of the [proposed](#) COM through candidate status and into pre-accreditation status and ultimate progress to accreditation. A minimum of two associate deans [\(at least one of which must be a board-certified DO\)](#) must be under contract with the [proposed](#) COM before candidate status will be granted.

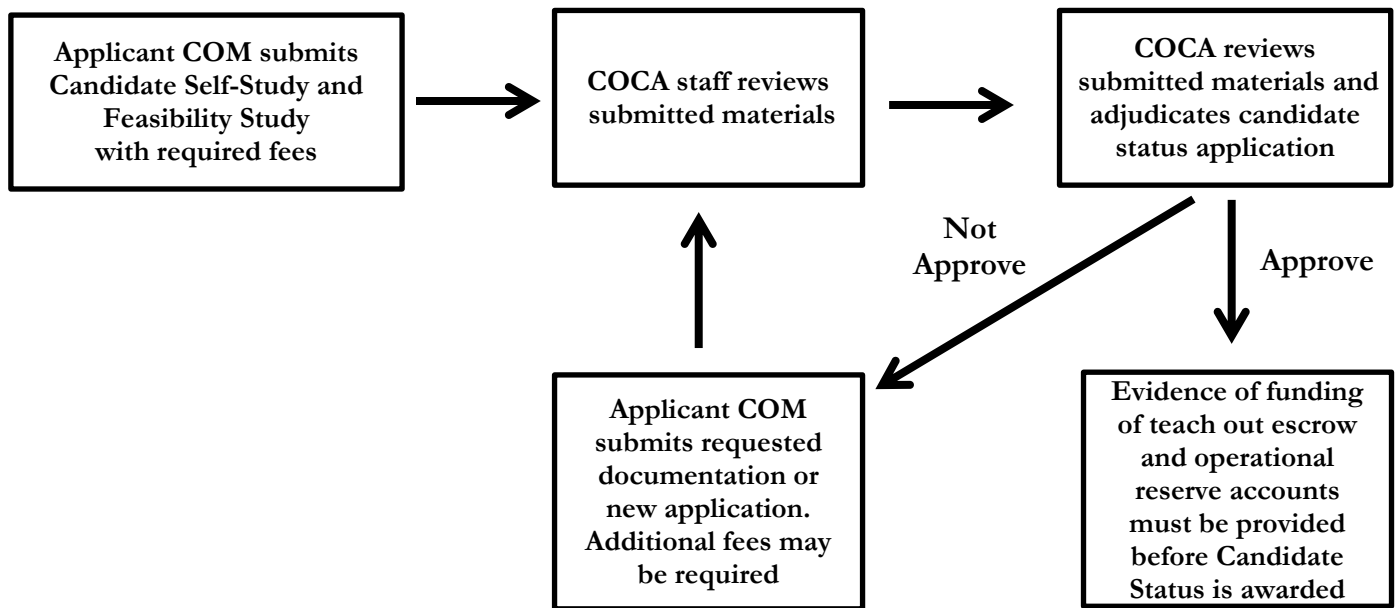
The [proposed](#) COM holding candidate status may not recruit, accept applications from, or admit prospective students. This means that a [proposed](#) COM holding this status may not do any of the following:

- Use solicitation to recruit students,
- Solicit or collect application fees,
- Collect application information, including academic transcripts, Medical College Admissions Test (MCAT) scores, and letters of recommendation,
- Initiate the admission review process,
- Schedule interviews for any potential applicants,
- Offer advice on financial aid, [or](#)
- Issue letters of admittance into the COM.

Candidate Status Process

1. Applicant COM submits candidate status self-study and feasibility study (business plan) and non-refundable application fee at least 90 days prior to the COCA meeting at which the application will be considered.
2. The teach-out and operating escrow agreements must be submitted with the self-study.
3. ~~Staff~~COCA staff review of self-study and ~~feasibility study~~all supporting documentation for accuracy and completeness.
4. ~~COCA or COCA Executive Committee reviews~~commissioners review the self-study and all supporting documentation.
- 4.5. Prior to the review by the COCA, the proposed COM may be required to answer questions about the self-study and feasibility study from COCA commissioners.
5. ~~Proposed COM may offer testimony at the time of COCA/COCA Executive Committee review.~~
6. The COCA/~~COCA Executive Committee~~ may receive third-party comments.
7. The applicant COM's candidate status application is adjudicated by the full COCA in an executive session meeting.
- 7.8. COCA approves or denies candidate status. In order for an applicant COM to achieve candidate status, 100% of the candidate standards must be met.
- 8.9. ~~Applicant~~The applicant COM must fund; and ~~demonstrate evidence~~provide documentation of; funding of the teach out escrow and operation accounts prior to the ~~COCA's grant~~final approval of candidate status.
9. ~~COCA/COCA Executive Committee approves or denies candidate status.~~
10. In the event the COCA denies a candidate status application, the COCA may, at its discretion, direct that a new application for candidate status be submitted or that supplemental information be submitted. In either event, the fees required by the COCA fee schedule shall apply.

Candidate Status Process



Review of Candidate Status

Candidate status will be reviewed through submitted written annual reports until the [proposed](#) COM achieves pre-accreditation status. If the [proposed](#) COM has not been able to proceed to pre-accreditation status within 24 months of the granting of candidate status, the candidate status will be withdrawn. A re-application will require a new candidate status self-study and application fee.

Candidate Status Self-Study

Introductory Materials

The introductory information for a candidate status self-study must include: 1) the identification of a proposed site; 2) the reasons justifying the site for a proposed COM; 3) the proposed class size; and 4) the academic year in which the proposed COM intends to matriculate students; ~~and 5) a feasibility study.~~

Candidate Standards

Candidate Standard 1: Mission and Governance

Candidate Element 1.1: Program Mission

A proposed college of osteopathic medicine (COM) must develop a mission statement that: 1) explains the overall purpose of the proposed COM's program; and 2) serves as guide for program planning and assessment. A proposed COM must include a commitment to advancing diversity, equity, and inclusion (DEI) in its mission, values, vision, goals, or objectives. Where the proposed COM is part of a larger educational institution or parent institution, the proposed COM's mission must be consistent with the institution's mission. The proposed COM must have a mechanism in place that will require future periodic review of its program mission to meet the proposed COM's anticipated potential growth and continued development. The proposed COM must have a mechanism in place that will consider the input of its future students, faculty, and staff, ~~and students~~ when its mission and any value, vision, goal, or objectives statements will be reviewed for future, potential revision.

Candidate Submission 1.1: Program Mission

1. Provide ~~copies~~ a copy of the program mission ~~.~~
- ~~1.2.~~ 2. Provide a copy of the values, vision ~~(optional)~~ , goals or objectives ~~(optional)~~ statements, if applicable.
- ~~2.3.~~ 3. If the proposed COM is part of a larger educational institution (parent institution), provide a copy of the parent institution's mission statement. The documents should show the last updated date (or effective date) ~~and revision history~~ .
- ~~3.4.~~ 4. Describe the proposed COM's mechanism that will require future periodic review of its program mission to meet the proposed COM's anticipated potential growth and continued development.

Candidate Element 1.2: Licensing and Regional/ Institutional Accreditation

A proposed COM must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level.

The parent/sponsoring institution under which the proposed COM operates (or the independent COM itself) must be recognized by an institutional accrediting agency that is recognized by the US Department of Education (USDE). The proposed COM must report to the COCA any adverse actions that are taken against its parent institution by its institutional accreditor within five business days of notification of such action.

[Any proposed COM, branch campus, or additional location on or adjacent to another institution's campus must clearly state that the DO degree is not affiliated with the host institution.](#)

Candidate Submission 1.2: Licensing and Regional/ Institutional Accreditation

1. Provide a copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.
2. If institutionally accredited, provide a [link to the public ~~link to~~ webpage](#) where the most recent institutional accreditation documents are published.
3. [Provide a link to the public webpage that describes the COM's relationship with a partner institution \(if applicable\).](#)

Candidate Element 1.3: Governance and Program Policies

A proposed COM must have a governing body~~;~~ or be part of a parent institution with a governing body, that defines the mission of the proposed COM and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. The majority of the members of the governing body must be independent of financial interest/benefit from the proposed COM. The proposed COM must publish and abide by policies regarding conflict of interest ~~(for board members, employees, and institutionally employed faculty)~~; due process for employees, students, and credentialed instructional staff; confidentiality of employee, student, and medical records; fiscal management; and ethics~~—which~~. The ethics policy must incorporate the American Osteopathic Association Code of Ethics.

Candidate Submission 1.3: Governance and Program Policies

1. Provide the bylaws of the proposed ~~COM;~~COM (or parent institution~~)~~.
- ~~4.2.~~ Provide a list of the governing body ~~and a list of~~ members, including titles~~, of the body~~.
- ~~2.3.~~ Provide a copy of the policies for:
 - a. Conflict of interest for board members, employees, and institutionally employed faculty~~;~~
 - b. Due process for all employees, students, faculty, and credentialed instructional staff~~;~~
 - c. Confidentiality of employment, student, and medical records~~;~~
 - d. Fiscal management and accountability~~;~~ and
 - e. Ethics, incorporating the AOA code of ethics.

Note: If these policies are part of a larger document, please provide a specific citation (e.g., page number/section number) to where the above policies can be located.

~~6.~~

Candidate Element 1.4a: Non-Discrimination

A proposed COM must ~~demonstrate~~ have a policy of non-discrimination in the selection of and anti-sexual harassment with regard to students, administrative personnel, faculty and staff, ~~and students~~ based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age ~~or disabilities, disability,~~ and religion. This must apply to all proposed COM actions.

A proposed COM or its parent institution must develop a mechanism for students, faculty, and staff to report alleged discrimination incidents and track their resolution.

Candidate Submission 1.4a: Non-Discrimination

1. Provide a copy of the non-discrimination ~~policy~~ and anti-sexual harassment policies.
2. Describe and provide flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

7.

Candidate Element 1.4b: Non-Discrimination for Faith-Based Institutions

The COCA respects the religious mission of faith-based schools. A proposed COM having a religious affiliation or purpose ~~may~~ must have a policy of non-discrimination and anti-sexual harassment with regard to students, administrative personnel, faculty, and staff but need not apply all selection criteria ~~and/or policies that are~~ listed in Element 1.4a if each omission is directly related to that affiliation or purpose, and so long as ~~any such criteria and/or~~ the policies are made known to applicants and the public and do not contravene any other COCA standard. This must apply to all proposed COM actions.

A proposed COM or its parent institution, must develop a mechanism for students, faculty, and staff to report alleged discrimination incidents and track their resolution, as appropriate for the proposed COM's faith-based mission.

Candidate Submission 1.4b: Non-Discrimination

1. Provide the faith-based mission for the proposed COM or its parent institution.
2. Provide a copy of the non-discrimination ~~policy~~ and ~~procedures~~ anti-sexual harassment policies.
- ~~2.~~3. Describe and provide flowcharts of the processes for ~~the selection of students, faculty, and staff~~ reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

Note: Whether or not a proposed COM is a faith-based institution, once a proposed COM elects to comply with either element 1.4a or 1.4b, the proposed COM is expected to comply with all requirements based on that election irrespective of its faith-based designation.

~~Candidate Element 1.5: Clinical Education Affiliation Agreements~~

~~A proposed COM must be able to produce agreements, including executed affiliation agreements, that support the clinical educational experience for its students.~~

~~Candidate Submission 1.5: Clinical Education Affiliation Agreements~~

- ~~1. Provide a copy of the proposed COM-approved affiliation agreement.~~
- ~~2. Provide a list of all clinical sites with which the proposed COM has entered into a clinical affiliation agreement or from which the proposed COM has received a letter of intent.~~
- ~~3. At the time of the site visit, a COM must produce all documents that evidence the acceptance of the COM's students to participate at the affiliate site, including all executed affiliation agreements.~~

Candidate Standard 2: Leadership and Administration

Candidate Element 2.1: Dean Qualifications

A proposed COM must have a dean who is qualified for the position by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care. The dean must have:

1. An earned DO degree from a COCA-accredited college of osteopathic medicine;
2. An unrestricted medical license at some time in ~~his/her~~their career, free of disciplinary actions or sanctions while licensed;
3. AOA or ABMS board certification at some time in ~~his/her~~their career; and
4. ~~At least five~~at least five years ~~of proven, or demonstrated progressive leadership with UME,~~ experience ~~within the last ten years in academic leadership roles that includes~~ budget management authority, admissions, student disciplinary situations, GME, accreditation, and scholarly activity over the past 5 years.

Candidate Submission 2.1: Dean Qualifications

1. Provide a copy of the dean's diploma from a COCA-accredited college of osteopathic medicine.
2. Provide a copy of the dean's most recent medical license.
3. Provide a copy of the dean's AOA or ABMS board certification documents.
4. Provide a current and complete curriculum vitae for the dean.
5. Provide the current job description for the dean.
6. Provide the ~~dean/physician's most recent~~dean's current Practitioner Profile report from the Federation Credentials Verification Service.

Note: A proposed COM must notify the COCA within five business days of any change of dean (see COCA Policies and Procedures).

Candidate Element 2.2: Full-Time Dean

The dean must be employed full-time by the proposed COM and/or its parent institution.

Note: In carrying out the full-time responsibilities of the dean, the dean of a proposed COM is administratively responsible for the conduct and quality of the medical education program and for ensuring the adequacy of faculty at the proposed COM.

This element requires a dean to be employed full-time without any conflicting, secondary employment. Any activity for which remuneration is given must be: 1) under the auspices of the proposed COM, or its parent institution's authorization; and 2) not in conflict with the time commitments required to carry out the full-time responsibilities of the dean.

Candidate Submission 2.2: Full-Time Dean

1. Provide the employment contract (compensation redacted) demonstrating that the dean is employed full-time.

Candidate Element 2.3: Academic and Administrative Leadership

A proposed COM must have academic and administrative leadership to accomplish the mission of the medical school. Assistant/associate deans (at least one of which must be a board-certified DO) must have proven experience in teaching, educational design and evaluation, scholarly activity, and academic leadership in a medical education setting appropriate for the position.

Candidate Submission 2.3: Academic and Administrative Leadership

1. Provide an ~~organization~~organizational chart that shows the COM's leadership positions (include titles and names) and reporting relationships.
2. Provide the current job description for each member of the administrative leadership team (associate deans, assistant deans, senior level administrators).
3. Provide a ~~complete~~current curriculum vitae for each member of the administrative leadership team who has been hired (associate deans, assistant deans, senior level administrators; do not include department chairs).
4. Provide a copy of the employee's medical license (if a DO or MD) if required based on the position description.
5. Provide a copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date if required based on the position description.

Note: Reports from the American Osteopathic Information Association, the physician's primary state of licensure, or the American Board of Medical Specialties may be used as a primary source of verification to demonstrate current licensure and board certification.

Candidate Element 2.4: Diversity, Equity, and Inclusion (DEI) Leadership

A proposed COM or its parent institution must designate an individual with responsibility for oversight of diversity, equity, and inclusion (DEI) initiatives of the COM to the extent permitted by law.

Candidate Submission 2.4: DEI Leadership

1. Provide a copy of the job description for the DEI leader.

Candidate Standard 3: Finances

Candidate Element 3.1: Financial Resources

A proposed COM must ensure that the financial resources of the school are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals. Because of the potential financial consequences, if any proposed COM or its parent institution experiences a change in status regarding its future participation in the Title IV programs following its initial establishment of participation, it must notify the COCA.

Candidate Submission 3.1: Financial Resources

1. Provide the operational pro forma (income, revenue sources, and expenses including budget for faculty and staff) for the proposed COM from today (start-up costs) through the anticipated graduation of the first class of students.
2. Provide the proposed capital budget for the development of the proposed COM.
- ~~3. Provide the budget for personnel with a hiring plan addressing anticipated date of hire of each faculty and staff member.~~

Candidate Element 3.2: Feasibility Study (~~and Business Plan~~)

A proposed COM must submit a feasibility study, ~~including a business plan,~~ created by an external business consulting firm, and a business plan.

Candidate Submission 3.2: Feasibility Study (~~and Business Plan~~)

1. Provide the feasibility study for the proposed COM.
2. Provide a brief background on the company that created the feasibility study.
3. Provide the business plan for the proposed COM.

Candidate Element 3.3: Escrowed Reserve Funds

A proposed COM must demonstrate the existence of a minimum segregated, unencumbered reserve fund escrowed until ~~one year after~~ graduation of the first class of students and [achieving accreditation](#) equal to the *greater* cash value of 1) \$30,000,000; or 2) tuition multiplied by the approved number of students for the proposed COM multiplied by four years. Any future increase in tuition will require recalculation of the escrow amount and an increase in the amount of the escrowed funds. The escrowed reserve funds must: 1) not be borrowed or pledged funds; and 2) be funded by immediately available liquid assets that are wholly owned assets of the proposed COM or its parent institution. The proposed COM may not withdraw any interest that accrues in the escrowed funds. A proposed COM must replenish the escrow fund account in the event the value of the account decreases below the required minimum amounts stated above.

Clarification and explanation: The escrow fund is calculated based on the approved class size multiplied by four years of tuition, without considering any phased-in percentages. The tuition used for this calculation is determined based on the highest tuition charged throughout the four-year period. If there are any increases in tuition for any class, the calculated escrow amount will be adjusted as if the increase applies to all four classes. In cases where there are multiple tuition rates, such as in-state versus out-of-state, the escrow calculation will use the higher tuition rate.

Candidate Submission 3.3: Escrowed Reserve Funds

1. Provide evidence of availability of unencumbered funds equal to the escrow amount.
2. Provide a copy of the proposed escrow agreement substantially consistent with the form prescribed by the COCA.

Candidate Element 3.4: Operating Reserve Fund

A proposed COM must demonstrate the existence of a minimum operating reserve fund until graduation of the first class of students and equal to one-quarter (1/4) of the amount of the minimum segregated, unencumbered escrowed reserve fund. The minimum operating reserve fund must: 1) not be borrowed or pledged funds; and 2) be funded by immediately available liquid assets that are wholly owned assets of the proposed COM or its parent institution. The proposed COM may not withdraw any interest that accrues in the operating reserve fund. A proposed COM must replenish the operating reserve fund account in the event the value of the account decreases below the required minimum amount stated above.

Candidate Submission 3.4: Operating Reserve Fund

1. Provide evidence of availability of unencumbered funds equal to the operating reserve fund amount.
- ~~2.~~ Provide a copy of the proposed operating reserve fund agreement substantially consistent with the form prescribed by the COCA.
- ~~2.1. Provide evidence of availability of unencumbered funds equal to the operating reserve fund amount.~~

Candidate Standard 4: Facilities

Candidate Element 4.1: Facilities

A proposed COM must have planned facilities for the program of instruction that enable the authorized class size of students and faculty to pursue the mission, curriculum content and delivery, and [research](#)/scholarly activity of the proposed COM.

[A proposed COM must have access to facilities for simulated and standardized patient encounters and must demonstrate how the facilities will contribute to student achievement of learning outcomes of all components of its curriculum.](#)

[A proposed COM must have a mechanism to assess the adequacy of the core and required clinical rotation facilities that will involve students in the assessment.](#)

[A proposed COM must have space available for use by students in a manner intended to support diversity, equity, and inclusion to the extent permitted by law, and must consult with students in the process of establishing such a space.](#)

Candidate Submission 4.1: Facilities

- 1.- Complete and submit Candidate Table 4.1 to describe the on-campus facilities of the proposed COM dedicated ~~for~~to DO students.
2. Provide a facility floor plan with designations of how the space will be utilized (full architectural drawings are not required).
- ~~3.~~ [Provide a description of, and indicate on the floor plans provided, the facilities used for simulation and standardized patient encounters provided to students.](#)
4. Describe how the proposed COM will assess the adequacy of the core [and required](#) clinical rotation facilities, including how students will be involved in the assessment.
5. [Describe how the COM facilities will contribute to student achievement of learning outcomes of the curriculum.](#)
6. Describe how the proposed COM will assess the adequacy and efficacy of facilities intended to support diversity, equity, and inclusion, including how students will be involved in the assessment.

Candidate Element 4.2: Information Technology

A proposed COM must ~~provide~~ensure access to information technology to support its mission. ~~at all locations and ensure Wi-Fi availability at all core and required rotation sites. Students, faculty, and staff must be involved in the assessment of information technology services.~~

Candidate Submission 4.2: Information Technology

1. Provide the information technology strategic plan.

2. Describe how students, faculty, and staff will be involved in the assessment of information technology services.

Candidate Standard 5: Learning Environment

Candidate Element 5.1: Professionalism

A proposed COM must ensure that the learning environment of its osteopathic medical education program will be conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect. ~~This should also include exposure to aspects of patient safety, cultural competence, and interprofessional collaborative practice.~~

A proposed COM must have a committee, or other approved body, that oversees professionalism when operations begin at the new COM.

Candidate Submission 5.1: Professionalism

1. Provide a copy of the proposed COM's professionalism policies and procedures and a link to the public webpage where the documents ~~are~~will be published.
2. Provide the intended description and charge of the committee or approved body that ~~addresses~~will oversee issues of professionalism and ethics.
3. Provide the proposed membership (position titles) of the committee or approved body that will ~~address~~oversee issues of professionalism and ethics.

Candidate Element 5.2: Diversity

A proposed COM must ~~have~~publish policies ~~that demonstrate its intent to practice~~on and engage in ongoing, systematic, and focused recruitment and retention activities; ~~to the extent permitted by law~~ to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community. ~~The~~

A proposed COM must include in these activities the use of programs and/or partnerships ~~with other institutions and organizations~~ aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes.

Candidate Submission 5.2: Diversity

1. Provide the policies that demonstrate the proposed COM's intent to practice systematic and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.
2. Describe the proposed COM's planned programs and partnerships ~~with other institutions and organizations~~ aimed at achieving diversity among qualified applicants for medical school admission and the COM's evaluation of program outcomes.

Candidate Element 5.3: Office of Diversity, Equity, and Inclusion (DEI)

A proposed COM or its parent institution must have an Office of Diversity, Equity, and Inclusion (DEI) (or similar) to the extent permitted by law that will support students, faculty, and staff, and the proposed COM's efforts to promote recruitment, retention, and success of its students, faculty, and staff throughout the osteopathic medical education program.

The DEI Office must have a strategic plan that is developed with input from faculty and staff.

Candidate Submission 5.3: Office of Diversity, Equity, and Inclusion (DEI)

1. Describe the strategic plan for the proposed COM's DEI Office.

Candidate Standard 6: Curriculum

Candidate Element 6.1: Programmatic Level Educational Objectives

A proposed COM must define all programmatic level educational objectives.

Candidate Submission 6.1: Programmatic Level Educational Objectives

1. Provide the programmatic level educational objectives for the osteopathic medical education program.

Candidate Element 6.2: Osteopathic Core Competencies

A proposed COM must teach and educate students in order to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment.

Candidate Submission 6.2: Osteopathic Core Competencies

- 1 Provide a description of the proposed COM's plan for the delivery of its curriculum including teaching, educating, and assessing its students to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment. (Not to exceed 250 words.)
2. -Provide a curriculum map demonstrating ~~how~~ where the ~~content of these courses~~ osteopathic core competencies will be delivered.

Candidate Element 6.3: Teaching Methods

A proposed COM must define the teaching methods that will be employed for the delivery of the anticipated curriculum.

Candidate Submission 6.3: Teaching Methods

1. Provide a description of the anticipated teaching methods (lecture, team-based learning, problem-based learning, etc.) that will be employed by the proposed COM.

Candidate Element 6.4: Clinical Education

A proposed COM must define the types and length of clinical experiences that osteopathic medical students are required to encounter and the appropriate clinical setting for these experiences.

A proposed COM must submit a clinical rotation study demonstrating adequacy of rotations for 120% of its requested class size. The clinical rotation study must show whether other COMs', MD schools', or other health professions' students (for example: physician assistant, nurse practitioner, nurse anesthesia practice, anesthesia assistant, podiatry) will be rotating with students of the proposed COM.

Candidate Submission 6.4: Clinical Education

1. Describe how clinical skills will be taught and assessed throughout the curriculum of the proposed COM.
2. Provide ~~definitions for~~ the definition of an eligible OMS-II student and/or other student to enter clinical rotations.
- ~~4.3.~~ Define the types of patients and clinical conditions that osteopathic medical students will be- required to encounter, the skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student responsibilities.
- ~~2.4.~~ Provide policies and procedures (protocols) ~~demonstrating how~~ addressing methodologies by which students will be able to satisfactorily complete, including remediation activities, the entire clinical education ~~will be delivered to all students at the proposed COM~~ curriculum, including standardized/simulated and supervised patient encounters.

~~3.5. Provide a list of~~ Complete Candidate Table 6.4a listing all clinical rotations, (indicating core and required rotations) including the length of each rotation, the proposed COM will require students to complete to fulfill the requirements for graduation.

Note: Core clinical rotations must include family medicine, internal medicine, general surgery, and pediatrics. All core clinical rotations must be a minimum of four weeks long and must include in-person patient care.

Required clinical rotations must include psychiatry, obstetrics and gynecology, and emergency medicine. All required clinical rotations must be a minimum of four weeks long and must include in-person patient care.

Critical care medicine can be substituted for emergency medicine.

Psychiatry and obstetrics and gynecology will change from a required to a core rotation by July 1, 2027.

~~Candidate Element 6.5: Clinical Affiliation Agreements~~

~~6. A~~ Provide a copy of a COM-approved clinical education affiliation agreement.

Provide all documents (including executed affiliation agreements), that demonstrate the acceptance of the proposed COM must:

~~A. provide its definition of an eligible OMS II student and/or other student~~ COM's future students to enter clinical rotations;

~~7. B. — be able to provide~~ participate at the affiliate sites, demonstrating clinical education rotations, including ~~demonstration of~~ adequate anticipated faculty, for 120% of the rotational capacity of the proposed requested class size; ~~and~~.

~~C. have published policies and procedures (protocols) addressing methodologies by which students can complete the entire clinical education curriculum.~~

~~Candidate Submission 6.5: Clinical Affiliation Agreements~~

~~1. Provide the definition of an eligible OMS II student and/or other student to enter clinical rotations.~~

~~2. Provide a copy of a proposed COM approved affiliation agreement.~~

~~3. Complete Candidate Table 6.5.~~

Candidate Standard 7: Faculty and Staff

Candidate Element 7.1: Faculty and Staff Resources and Qualifications

At all educational teaching sites, including affiliated sites, a proposed COM must demonstrate that it will have sufficient faculty and clinical staff resources to achieve the proposed program mission, including part time and adjunct faculty, and preceptors who are appropriately trained and credentialed. The physician faculty, in the patient care environment at core rotation sites, must hold current medical licensure and have had AOA or ABMS board certification ~~at some time in their career or be currently~~ board ~~eligibility~~ eligible in the specialty being taught.

A proposed COM must have a mechanism to review and approve credentials of physician faculty that have never been board certified or are not board eligible by the AOA or ABMS at non-core rotations sites.

All non-physician faculty in the patient care environment must have demonstrated; appropriate qualifications in his/her disciplinary field.

Candidate Submission 7.1: Faculty and Staff Resources and Qualifications

1. Provide an organizational chart with title and names (where available) demonstrating how the faculty will be organized.
- ~~2. Submit a comprehensive statement providing the justification for the proposed COM's~~ Complete Candidate Tables 7.1a and 7.1b with anticipated ~~employment~~ date of hire of each faculty and staff member.
- ~~2.3. Provide a description of the mechanism to review and approve credentials of~~ physician faculty (both FTE and adjunct) in the patient care environment who are not/will not be that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.
- ~~3. Complete Candidate Tables 7.1a and 7.1b.~~
- ~~4. Submit the most recent and complete curricula vitae of all faculty, including adjunct faculty, if currently employed by the proposed COM or those who are anticipated to be employed.~~

Candidate Element 7.2: Faculty Appointment and Advancement

A proposed COM must have policies and procedures in place for faculty appointment, renewal of appointment, promotion, granting of tenure (if a tenure program exists), and remediation. The policies and procedures must provide each faculty member with written information about his or her term of appointment, responsibilities, lines of communication, privileges and benefits, performance evaluation and remediation, terms of dismissal, due process, and, if relevant, the policy on practice earnings.

A proposed COM or its parent institution must create a process to review pay and rank parity every three years consistent with its mission-appropriate diversity outcomes among its faculty.

Candidate Submission 7.2: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement for the proposed COM, including:
 - a. term of appointment;
 - b. responsibilities;
 - c. lines of communication;
 - d. privileges and benefits;
 - e. performance evaluation and remediation;
 - f. terms of dismissal;
 - g. due process; and

the policy on practice earnings (if relevant).

h.

Note: If these policies/procedures are part of a larger document, please provide a specific citation (e.g., page number/section number) to where the above policies can be located.

2. Provide a copy of the pay/rank equity review policy.

Candidate Standard 8: Scholarly Activity

Candidate Element 8.1: Research and Scholarly Activity Strategic Plan

A proposed COM must demonstrate a commitment to research and scholarly activity through its budgetary processes, support of faculty research (including the establishment of a research infrastructure, including an office of research, faculty and personnel to assist students in research and peer review through publication or grant application), and inclusion of its students in research throughout all four years of the osteopathic medical education. [The plan must include cultural competency and health disparities research/scholarly activities.](#)

Candidate Submission 8.1: Research and Scholarly Activity Strategic Plan

1. Provide a copy of the strategic plan for research and ~~or~~ scholarly activity at the proposed COM.

Candidate Element 8.2: Research and Scholarly Activity Budget

A proposed COM must ~~include~~have budgetary processes and a budget that will support research and scholarly activity of its faculty and students.

Candidate Submission 8.2: Research and Scholarly Activity Budget

1. Provide a description of the proposed COM's budgetary processes that will support research and scholarly activity by its faculty and students.
- ~~2.~~ Provide a copy of the proposed COM's research and scholarly activity budget through the anticipated graduation of the first class of students.

Candidate Element 8.3: OMM/OPP Research and Scholarly Activity

A proposed COM must demonstrate how its research ~~and/or~~ scholarly activity will include ~~and/or~~ incorporate osteopathic manipulative medicine (OMM) and osteopathic principles and practice (OPP) ~~as a component of the research and/or scholarly activity.~~

Candidate Submission 8.3: OMM/OPP Research and Scholarly Activity

1. The strategic plan for research and scholarly activity submitted under candidate element 8.1 must demonstrate how the proposed COM will include ~~and/or~~ incorporate OMM/OPP as a component of the research ~~and/or~~ scholarly activity.

Candidate Element 8.4: Student Participation in Research and Scholarly Activity

A proposed COM must publish and follow policies and procedures to support student driven research and scholarly activity, as well as student participation in the research and scholarly activities of the faculty.

Candidate Submission 8.4: Student Participation in Research and Scholarly Activity

1. Provide a copy of all student research and scholarly activity policies.

Candidate Standard 9: Students

Candidate Element 9.1: Admissions Policy

A proposed COM must establish admission requirements for potential applicants to the osteopathic medical education program and must use effective policies and procedures for osteopathic medical student selection for admission and enrollment, including demonstration of technical standards for admissions. A proposed COM must tie all admissions policies to its mission.

Candidate Submission 9.1: Admissions Policy

1. Provide all admission requirements and policies and procedures for osteopathic medical student selection and enrollment.
2. Provide a copy of the technical standards required of ~~matriculates~~ prospective students.

Candidate Element 9.2: Recruitment of Students

A proposed COM must demonstrate that a plan for recruitment of an applicant pool sizeable enough to generate the requested class size exists within the proposed COM's defined geographic region. A proposed COM must also demonstrate a plan ~~of~~for recruitment of a diverse student population.

Candidate Submission 9.2: Recruitment of Students

1. Provide at least three years ~~of~~of demographics for the proposed COM's defined region demonstrating the number of medical school applicants and ~~matriculates~~matriculants.
2. Provide a copy of the proposed recruitment plan for the proposed COM.

Candidate Standard 10: Graduate Medical Education (GME)

Candidate Element 10.1: GME Feasibility

A proposed COM must demonstrate an understanding of the obligations to ensure student entry into graduate medical education (GME) upon graduation from the proposed COM.

A proposed COM must demonstrate a plan to support development and growth of GME through establishment of a GME office with qualified personnel, expertise, and financial support focused on supporting new and established GME and osteopathic recognition. The proposed COM must have qualified personnel to assist students with the UME/GME transition.

The proposed COM may support development and growth of GME under strategies of its own design but must submit a feasibility study outlining available GME capacity and a plan, including development costs, outlining how the proposed COM will ensure sufficient residency positions (PGY-1) to equal the requested class size.

Class size ramp up may not be approved to progress past 50% of the requested class size until sufficient fulfillment of the COM's GME development plan has been demonstrated.

Candidate Submission 10.1: GME Feasibility

1. Provide the proposed COM's policies that include its structure and procedures to support the ~~continuum of osteopathic medical education~~development of GME.
2. Provide the proposed COM's pro forma that includes line items for the support of the ~~continuum~~development of ~~osteopathic medical education~~GME.
3. Provide ~~the anticipated public link where~~a feasibility study outlining available GME capacity, and a plan, including development costs, outlining how the proposed COM ~~intends to publish the average match rates for all~~will ensure sufficient residency ~~match programs~~positions (PGY-1) to equal the requested class size.

Note: -In states where ~~PGY-1 placement~~first-year residency development in GME is required by law ~~(e.g., Texas), a proposed,~~ a COM must demonstrate how it ~~intends to comply~~is complying with this requirement.

Candidate Standard 11: Intentionally Omitted

Candidate Standard 12: Institutional Accreditation (if applicable)

A proposed COM that is developing as part of a larger institution must demonstrate that the institution has accreditation by an institutional accrediting agency that is recognized by the USDE. The parent institution must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level. Otherwise, the proposed COM must demonstrate that the elements with candidate standard 12 are met. [As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.](#)

Candidate Element 12.1: Incorporation of the Institution

A proposed COM must demonstrate its incorporation as a non-profit or for-profit entity (e.g., corporation, limited liability company, etc.) with governing bylaws that are consistent with the COCA accreditation standards. The proposed COM must have an autonomously appointed functioning governing body that is broad in representation of expertise in education, [DEI](#), finance, law, health policy, and osteopathic medicine. [The majority of the members of the governing body must be independent of financial interest/benefit from the COM.](#)

Candidate Submission 12.1: Incorporation of the Institution

1. Provide the current registration documents demonstrating ongoing incorporation for the proposed COM.
2. Provide a copy of the bylaws of the [COM's](#) governing body.
3. Provide a list of members of the [COM's](#) governing body and their titles.
4. Provide a description of the proposed COM's procedures for annual assessment of the [COM's](#) governing body's conflicts of interest.

Candidate Element 12.2: Degree and Other Educational Offerings

A proposed COM ~~that is not affiliated with a parent institution~~ must demonstrate evidence of approval to grant the DO degree from all appropriate regulatory agencies whether it is a board of regents, a state regulatory agency, or any other regulatory agency charged with granting such authority under the laws of the state in which the proposed COM is located.

Candidate Submission 12.2: Degree and Other Educational Offerings

~~1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the proposed COM.~~

~~2.~~1. Provide a copy of all charters, licenses, or letters of approval from any educational or business agencies that grant authority to the proposed COM to offer the DO degree.

Candidate Element 12.3: Chief Executive Officer

A proposed COM ~~that is not affiliated with a parent institution~~ must employ a chief executive officer who is qualified by education, training, and experience to provide effective leadership to the proposed COM's administration, faculty, students, and staff. The chief executive officer must have a minimum of five years' experience in senior administration in an institution of higher education or healthcare setting.

Candidate Submission 12.3: Chief Executive Officer

1. Provide the current job description for the chief executive officer.
2. Provide a current and complete curriculum vitae for the chief executive officer.

Candidate Element 12.4: Chief Financial Officer

A proposed COM ~~that is not affiliated with a parent institution~~ must employ a chief financial officer who is qualified by education, training, and experience to provide organizational leadership related to the financial health of the institution. The chief financial officer must have a minimum of three years' experience in administration in financial management in an institution of higher education or healthcare setting.

Candidate Submission 12.4: Chief Financial Officer

1. Provide the current job description for the chief financial officer.
2. Provide a current and complete curriculum vitae for the chief financial officer.

Candidate Element 12.5: Course Credit Hours

A proposed COM must publish policies and procedures for the assignment of credit hours for all intended courses within its anticipated curriculum.

Candidate Submission 12.5: Course Credit Hours

1. Provide a copy of the proposed COM's credit hour assignment policy.
2. Provide ~~an anticipated~~ [a link to the](#) public ~~link to~~ [webpage](#) where the document is/will be published.

Candidate Element 12.6: Public Information

All public information published by a proposed COM ~~must~~ in its catalogs, student handbooks, advertising literature, or any other publicly available information must be presented in an accurate, fair, and complete manner.

Candidate Submission 12.6: Public Information

1. _ Provide all documentation that demonstrates the proposed COM's public information is/will be presented in an accurate, fair and complete manner.
2. _ Provide evidence of all communication that accurately ~~represent~~ represents the proposed COM's accreditation status. -This communication must include information on how to contact COCA.

Candidate Element 12.7: Public Notification of Opportunity to Comment

A proposed COM must seek third party comments addressing the quality of its proposed educational program [no later than 90 days](#) prior to the completion of the COCA's review of the proposed COM's application for candidate status. [The notice must include information on how the public can contact the COCA directly.](#)

Candidate Submission 12.7: Public Notification of Opportunity to Comment

1. Provide evidence ~~that~~[of](#) a public notice inviting any third-party comments prior to the COCA's review of the proposed COM's application for candidate status no later than 90 days before the review.
2. Provide [a link to](#) the public ~~link~~[webpage](#) where the public notice ~~that~~[is](#) available.
3. Provide evidence that the proposed COM's public notice includes, at a minimum, the date of the COCA's review and instructions for submitting any comments to the COCA at predoc@osteopathic.org.

Candidate Element 12.8: Academic Freedom

A proposed COM must develop policies regarding academic freedom the proposed COM intends [to](#) make publicly available. All such policies must be approved by the proposed COM's governing board.

Candidate Submission 12.8: Academic Freedom

1. Provide the proposed ~~institution's~~ [COM's](#) policies regarding academic freedom evidencing a commitment to academic freedom, intellectual freedom, freedom of expression, and respect for intellectual property rights.

Candidate Element 12.9: Campus Security

A proposed COM must develop policies ~~regarding~~ providing comprehensive information through a [link to a public ~~link~~ webpage](#) about its campus security to its students, faculty, staff, and to the public at large.

Candidate Submission 12.9: Campus Security

1. Provide a copy of the proposed COM's policy to provide annual campus security information to the public.
- ~~2. Provide the public link where the COM's campus security report will be published.~~
- ~~3. Provide the public link where the COM's campus security policies are/will be published.~~

Candidate Element 12.10: Title IV Responsibility

A proposed COM ~~that is not affiliated with a parent institution~~ must demonstrate ~~compliance with~~ all a commitment to comply with the requirements for participation in federal ~~funding~~ guidelines programs under Title IV of the Higher Education Act of 1965, as amended.

Candidate Submission 12.10: Title IV Responsibility

1. Provide evidence of commitment by the ~~institution~~ proposed COM to seek approval to participate in an HEA program.

Pre-Accreditation Status

Pre-accreditation status may be granted to COMs ~~who~~that have achieved candidate status and meet the standards of pre-accreditation status. In order to assure adequate self-study, timely consideration of information, and provide for faculty and administration development, an institution seeking COCA pre-accreditation status must conform to these provisions. The COCA may not waive compliance with these procedures.

A COM must submit the pre-accreditation self-study and non-refundable application fee at least 18 months prior to the anticipated matriculation of the first class of students.

Upon the receipt of pre-accreditation status, the COM will have the right and privilege to solicit applications and admit students, offer medical instruction within the approved osteopathic medical curriculum, and announce its pre-accreditation status. Pre-accreditation status may not be designated as accreditation until the COCA has granted accreditation status to the COM.

A pre-accredited COM may accept and matriculate students only in the following progressive enrollment:

- 1) Year 1 – no more than 50% of the approved class size;
- 2) Year 2 – no more than 75% of the approved class size; and
- 3) Years 3 and 4 – no more than 100% of the approved class size.

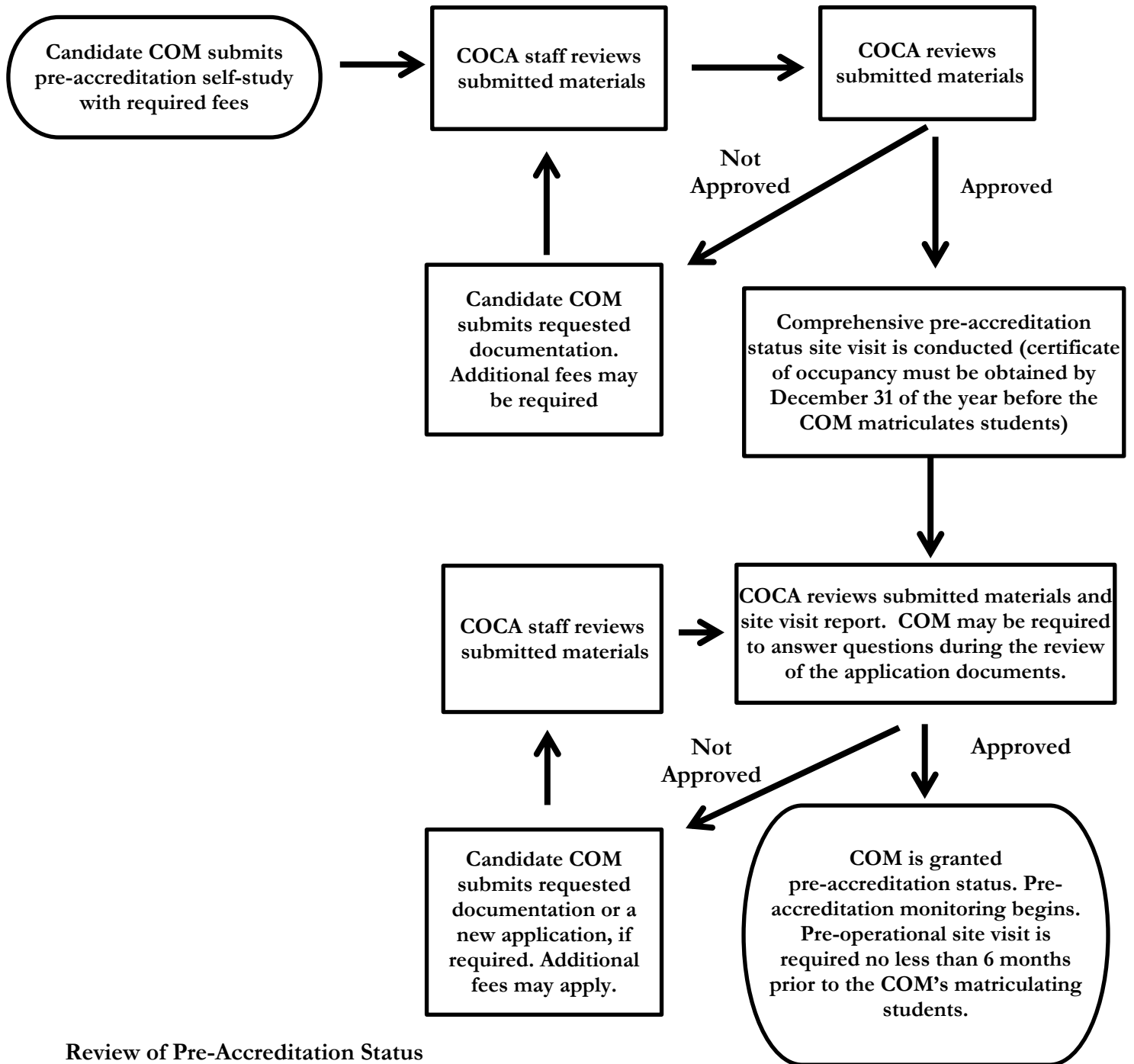
As required under 34 CFR § 602.16(a)(2), a COM may not hold the status of pre-accreditation for a period exceeding five years. During this five-year period, a pre-accredited COM must graduate its inaugural class in order to be eligible for consideration for accreditation status. Accordingly, the COCA may grant pre-accreditation status to be effective no earlier than July 1 of the calendar year prior to the matriculation of the first class of students. In the event the COCA ~~grants~~determines the proposed COM meets the requirements for pre-accreditation status prior to this date, the proposed COM must remain in candidate status until it is eligible to be granted pre-accreditation status. During this interim period, the proposed COM will be granted candidate status with the permission to recruit but not to admit students or to offer instruction.

Pre-Accreditation Status Process

1. Candidate COM submits pre-accreditation self-study at least 90 days prior to the COCA meeting at which the application will be considered.
2. Candidate COM remits non-refundable pre-accreditation application fee.

3. ~~Staff~~COCA staff reviews ~~pre-accreditation~~the self-study and all supporting documentation for accuracy and completeness.
4. COCA ~~reviews~~commissioners review the self-study and all supporting documentation.
5. At the time of full COCA review, the candidate COM may be required to answer questions about the self-study from COCA commissioners.
- ~~5.6.~~ Following the COCA's review of the pre-accreditation self-study, the COCA may authorize a site visit. In the event a candidate COM's campus is not yet ~~then~~ ready for a site visit, the site visit may occur at a location near the proposed campus, or the COCA may make a determination of the pre-accreditation self-study subject to a subsequent, satisfactory site visit.
- ~~6.7.~~ Upon completion of the site visit, the COCA reviews the site visit report.
- ~~7.8.~~ Candidate COM may offer testimony at At the time of COCA review, the candidate COM may be required to answer questions regarding the site visit findings.
- ~~8.9.~~ The COCA may receive third-party comments.
- ~~9.10.~~ _____ In order to achieve pre-accreditation status, a candidate COM must meet 100% of the pre-accreditation standards.
- ~~10.11.~~ _____ COCA approves or denies pre-accreditation status.
- ~~11.12.~~ _____ Notwithstanding procedure 911 above, in the event the COCA denies a pre-accreditation application, the COCA may direct that a new application for pre-accreditation status be submitted or that supplemental information be submitted. A new application will require the remittance of another non-refundable application fee.
13. The COCA's approval of pre-accreditation status authorizes the pre-accredited COM to begin soliciting, interviewing, and accepting students and fees
- ~~12.14.~~ _____ Matriculation of students and offering instruction is subject to ~~a~~ approval of pre-operationoperational site visit conducted no less than six months prior to the ~~COM's matriculating students~~ proposed matriculation date.
- _____ 15. A change of dean during pre-accreditation status, before graduation of the first class of students, requires a comprehensive site visit to be conducted no less than six months after the COCA is notified of the change of dean.

Pre-Accreditation Status Process



Review of Pre-Accreditation Status

Pre-accreditation status will be reviewed annually through [on-site visits and](#) written reports until the COM achieves accreditation [following in its fourth year of instruction prior to](#) graduating its first class. An on-site visit will occur during the first and fourth years of class offerings. If the COM has not been able to proceed to accreditation status within five years of the [grantgranting](#) of pre-accreditation status, the pre-accreditation status will be withdrawn. ~~A~~, [and a](#) teach-out agreement will then be initiated.

Pre-Accreditation Self-Study

The following pre-accreditation standards apply to both candidate COMs seeking pre-accreditation and to pre-accredited COMs maintaining pre-accreditation status. While the standards and elements refer to a “COM,” that reference is to both proposed candidate COMs and pre-accredited COMs.

Pre-Accreditation Standards

Pre-Accreditation Standard 1: Mission and Governance

A [College of Osteopathic Medicine \(COM\)](#) must have a written statement of mission and goals for the osteopathic medical education program, conduct ongoing planning and assessment, and have written bylaws that describe an effective organizational structure and governance processes. In the conduct of all internal and external activities, the COM must demonstrate integrity through its consistent and documented adherence to fair, impartial, and effective processes, policies, and practices.

Pre-Accreditation Element 1.1: Program Mission

A COM must have a mission statement that: 1) explains the overall purpose of the COM’s program; and 2) serves as guide for program planning and assessment. [A COM must include a commitment to advancing diversity, equity, and inclusion \(DEI\) in its mission, values, vision, goals, or objectives.](#) Where the COM is part of a larger educational institution or parent institution, the COM’s mission must be consistent with the institution’s mission. The COM must review its program mission at least once every five years and upon review, if the COM deems it appropriate to do so, the COM should revise its mission to meet the COM’s growth and continued development. The COM must consider the input of its [students, faculty, and staff](#), ~~and students~~ when reviewing and revising its mission [and any value, vision, goal or objective statements.](#)

Pre-Accreditation Submission 1.1: Program Mission

1. Provide ~~copies~~ [a copy](#) of the program mission ~~+~~.
2. [Provide a copy of the values, vision](#) ~~(optional) +~~, goals or objectives ~~(optional)~~ [and statements, if applicable.](#)
- ~~3.~~ [Provide a public](#) link to [the public webpage](#) where the documents are published.
- ~~2.~~ [4.](#) If the COM is part of a larger educational institution (parent institution), provide a copy of the parent institution’s mission statement. The documents should show [the](#) last updated date (or effective date).
- ~~3.~~ [5.](#) Provide documentation of the mission revision process, participants, [\(including faculty, staff, and students\)](#), and meeting minutes documenting the most recent governing board approval of the COM’s mission.

Note: An application for a Substantive Change: Change in Mission is required when the change in mission results in a need to alter the admissions policies, organizational chart, facilities, or financial plans as a result of the new mission or objectives.

Pre-Accreditation Element 1.2: Strategic Plan

A COM must produce and publish a current strategic plan addressing all core aspects of the COM's mission: ~~Faculty, including the advancement of diversity, equity, and students~~[inclusion \(DEI\)](#). ~~Students, faculty and staff~~ must be included in the strategic plan development, review, and revision~~-~~.

Pre-Accreditation Submission 1.2: Strategic Plan

1. Provide a copy of the COM strategic plan [through the anticipated graduation of the first class of students](#).
2. Provide the list of individuals who participated in the plan creation/[revision](#).
3. Provide a link to [the public webpage](#) where the documents are published.

Pre-Accreditation Element 1.3: Licensing and Regional/Institutional Accreditation

A COM must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level.

The parent/sponsoring institution under which the COM operates (or the independent COM itself) must be recognized by an institutional accrediting agency that is recognized by the USDE. ~~The~~ A COM must report to the COCA any adverse actions that are taken against it or its parent institution by its institutional accreditor within five business days of notification of such action.

Any COM, branch campus, or additional location on or adjacent to another institution's campus must clearly state that the DO degree is not affiliated with the host institution.

Pre-Accreditation Submission 1.3: Licensing and Regional/Institutional Accreditation

1. Provide a copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.
2. Provide a ~~public~~-link to the public webpage where the most recent institutional accreditation ~~documents are~~information is published.
3. Provide a link to the public webpage that describes the COM's relationship with a partner institution (if applicable).

Pre-Accreditation Element 1.4: Governance and Program Policies

A COM must have a governing body; or be part of a parent institution with a governing body, that defines the mission of the COM and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. ~~The COM must publish and abide by policies regarding:~~ The majority of the members of the governing body must be independent of financial interest/benefit from the COM. The COM must publish and abide by policies regarding conflict of interest for board members, employees, and institutionally employed faculty; due process for employees, students, and credentialed instructional staff; confidentiality of employee, student, and medical records; fiscal management; and ethics. The ethics policy must incorporate the American Osteopathic Association Code of Ethics.

- ~~1. Conflict of interest for board members, employees, and institutionally employed faculty;~~
- ~~2. Due process for all employees, students, faculty, and credentialed instructional staff;~~
- ~~3. Confidentiality of employment, student, and medical records;~~
- ~~4. Fiscal management and accountability; and~~
- ~~5. Ethics, incorporating the AOA code of ethics.~~

Pre-Accreditation Submission 1.4: Governance and Program Policies

1. Provide the bylaws of the COM (or parent institution).
- ~~4.2.~~ Provide a list of the governing body ~~and a list of~~ members, including titles, ~~of the body~~.
- ~~2.3.~~ Provide a copy of the policies for:
 - a. Conflict of interest for board members, employees, and institutionally employed faculty;
 - b. Due process for all employees, students, faculty, and credentialed instructional staff;
 - c. Confidentiality of employment, student, and medical records;
 - d. Fiscal management and accountability; and
 - e. Ethics, incorporating the AOA code of ethics.

Note: If these policies are part of a larger document, please provide a specific citation (e.g., page number/section number) to where the above policies can be located.

Pre-Accreditation Element 1.5a: Non-Discrimination

A COM must ~~demonstrate~~ have a policy of non-discrimination ~~in the selection of~~ and anti-sexual harassment with regard to students, administrative personnel, faculty and staff, ~~and students~~ based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age ~~or~~, disabilities, and religion. This must apply to all COM actions.

A COM, or its parent institution, must develop a mechanism for students, faculty, and staff to report alleged discrimination incidents and track their resolution.

Pre-Accreditation Submission 1.5a: Non-Discrimination

1. Provide a copy of the non-discrimination ~~policy~~ and anti-sexual harassment policies.
2. Provide a ~~public~~ link to the public webpage to where the ~~document is~~ policies are/will be published.

3. Describe and provide flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.
4. Provide a log of all COM-related reported discrimination and/or sexual harassment incidents and resolution for each incident since the last COCA accreditation cycle. (Not applicable to COMs applying for pre-accreditation)

Pre-Accreditation Element 1.5b: Non-Discrimination for Faith-Based Institutions

The COCA respects the religious mission of faith-based schools. A COM having a religious affiliation or purpose ~~may~~ must have a policy of non-discrimination and anti-sexual harassment with regard to students, administrative personnel, faculty, and staff but need not apply all selection criteria ~~and/or policies that are listed in Element 1.5a if each omission is~~ directly related to that affiliation or purpose, and so long as ~~any such criteria and/or the~~ policies are made known to applicants and the public and do not contravene any other COCA standard. This must apply to all proposed COM actions.

A COM, or its parent institution, must develop a mechanism for students, faculty, and staff to report alleged discrimination incidents and tracking their resolution, as appropriate for the COM's faith-based mission.

Pre-Accreditation Submission 1.5b: Non-Discrimination for Faith-Based Institutions

1. Provide ~~the~~ a faith-based mission for the COM or its parent institution.
2. Provide a copy of the non-discrimination ~~policy~~ and ~~procedures for the selection of students, faculty, and staff~~ anti-sexual harassment policies.
3. Provide a ~~public~~ link to the public webpage where the ~~document is~~ policies are/will be published.
4. Describe and provide flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.
5. Provide a log of all COM-related reported discrimination and/or sexual harassment incidents and resolution for each incident since the last COCA accreditation cycle. (Not applicable to COMs applying for pre-accreditation)

Note: ~~Element 1.5a. Whether or not a COM is intended for non-~~ a ~~faith-based schools, and Element~~ institution, once a COM elects to comply with either element 1.5a or 1.5b, the COM is intended for faith- expected to comply with all requirements based schools. on that election irrespective of its faith-based designation.

Pre-Accreditation Element 1.6: Degree-Granting Body

The governing body of the COM and/or institution must confer the degree of Doctor of Osteopathic Medicine (DO) upon those students who have satisfactorily completed the requirements for graduation and have been recommended for graduation by the COM's faculty.

Pre-Accreditation Submission 1.6: Degree-Granting Body

1. Provide a copy of the bylaws or governing documents that demonstrate the conferral of degree.
2. Provide a copy of the COM policy demonstrating that the faculty ~~senate~~[association](#) (or approved body) must recommend candidates for graduation.
3. Provide minutes from the faculty association meeting where this ~~occurred~~[recommendation was made](#) for the most recent graduates. (Not applicable to proposed COMs applying for pre-accreditation status.)

~~**Pre-Accreditation Element 1.7: Clinical Education Affiliation Agreements**~~

~~A COM must be able to produce agreements, including executed affiliation agreements, that support the clinical educational experience for its students.~~

~~**Pre-Accreditation Submission 1.7: Clinical Education Affiliation Agreements**~~

- ~~1. Provide a copy of a COM approved affiliation agreement.~~
- ~~2. Provide a list of all contracted clinical sites.~~
- ~~3. At the time of the site visit, a COM must produce all documents that evidence the acceptance of the COM's students to participate at the affiliate site, including all executed affiliation agreements.~~

Pre-Accreditation Standard 2: Leadership and Administration

A COM must have leadership and senior administrative staff with the knowledge, skills, time, and support necessary to achieve the goals of the osteopathic medical education program and to ensure the functional integration of all programmatic components.

Pre-Accreditation Element 2.1: Dean Qualifications

A COM must have a dean who is qualified for the position by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care. The dean must have:

1. An earned DO degree from a COCA-~~accredited~~ college of osteopathic medicine;
2. An unrestricted medical license at some time in ~~his/her~~[their](#) career, and free of disciplinary actions or sanctions while licensed;
3. AOA or ABMS board certification at some time in ~~his/her~~[their](#) career; and
4. At least five years of proven experience within the last ten years in academic leadership roles that includes budget management authority.

Pre-Accreditation Submission 2.1: Dean Qualifications

1. Provide a copy of the dean's diploma from a COCA-~~accredited~~ college of osteopathic medicine.
2. Provide a copy of the dean's most recent medical license.
3. Provide a copy of the dean's AOA or ABMS board certification documents.
4. Provide a [current and](#) complete curriculum vitae for the dean.—
5. Provide the current job description for the dean.
6. Provide the ~~dean/physician's most recent~~[dean's current Practitioner Profile](#) report from the Federation Credentials Verification Service.

[Note: A COM must notify the COCA within five business days of any change of dean. \(See COCA Policies and Procedures.\)](#)

Pre-Accreditation Element 2.2: Full-Time Dean

The dean must be employed full-time by the COM and/or its parent institution.

Note: In carrying out the full-time responsibilities of the dean, the dean of a COM is administratively responsible for the conduct and quality of the medical education program and for ensuring the adequacy of faculty at the COM and each of its additional locations.

Note:—This element requires a dean to be employed full-time without any conflicting, secondary employment. Any activity for which remuneration is given must be: 1) under the auspices of the COM, or its parent institution’s authorization; and 2) not in conflict with the time commitments required to carry out the full-time responsibilities of the dean.

Pre-Accreditation Submission 2.2: Full-Time Dean

1. Provide the employment contract (compensation redacted) demonstrating that the dean is employed full-time.

Pre-Accreditation Element 2.3: Academic and Administrative Leadership

A COM must have academic and administrative leadership to accomplish the COM's mission ~~of the medical school~~. Assistant/associate deans must have proven experience in teaching, educational design and evaluation, scholarly activity, and academic leadership in a medical education setting appropriate for the position.

A COM must have at least one leadership position at an assistant or associate dean level with oversight of the entire clinical education curriculum and assessment.

Pre-Accreditation Submission 2.3: Academic and Administrative Leadership

1. Provide an ~~organization~~ organizational chart that shows the COM's leadership positions, ~~(include names and titles of individuals already hired) and~~ reporting relationships, ~~and the completion of all leadership hiring prior to the submission of the pre-accreditation self-study.~~ Indicate (highlight) any changes or updates since the initial submission.

Note: As directed in the Candidate Status accreditation standards, a minimum of two associate deans (at least one of which must be a board-certified DO) must be under contract with the proposed COM.

2. Provide the current job description for each member of the administrative leadership team (associate deans, assistant deans, and senior level administrators); do not include department chairs.
3. Provide a complete curriculum vitae for each member of the administrative leadership team (associate deans, assistant deans, and senior level administrators); do not include department chairs.
4. Provide a copy of the employee's medical license (if a DO or MD); if required based on the position description.
- ~~5.~~ 5. Provide a copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date if required based on the position description.

Note: Reports from the American Osteopathic Information Association, the physician's primary state of licensure, or American Board of Medical Specialties may be used as a primary source of verification to demonstrate current licensure and board certification.

Pre-Accreditation Element 2.4: Accreditation Standard Complaint Policies and Procedures

A COM must publish policies and procedures that include a confidential accreditation standard complaint resolution process that includes a description of how these complaints are filed [with the COM](#), resolved through an adjudication process, without retaliation, and maintained through the COM's records retention system. The accreditation standard complaint filing process must [also](#) include a process for filing confidential complaints with the COCA and the contact information of the COCA.

Pre-Accreditation Submission 2.4: Accreditation Standard Complaint Policies and Procedures

1. Provide documentation of policies and procedures regarding accreditation standard complaints and their adjudication: [including an explanation of how the complainant's confidentiality is maintained throughout the process.](#)
2. Provide sample records of accreditation standard complaints that have been received, adjudicated, and resolved. (Not applicable to proposed COMs applying for pre-accreditation status.)
3. Provide a [link to the public ~~link to webpage~~](#) where the accreditation standard complaint policies and procedures are published. *(Not applicable to proposed COMs applying)*

[Note: COCA complaint policies and complaint form can be found at https://osteopathic.org/accreditation/accreditation-guidelines/.](#)

[The COCA contact information for ~~pre-accreditation status.\)~~filing complaints is:](#)

[American Osteopathic Association](#)

[Commission on Osteopathic College Accreditation](#)

[142 E. Ontario Street](#)

[Chicago, IL 60611](#)

[predoc@osteopathic.org](#)

[Phone: \(312\) 202-8124](#)

[Fax: \(312\) 202-8424](#)

Pre-Accreditation Element 2.5: Diversity, Equity, and Inclusion (DEI) Leadership

A COM or its parent institution must designate an individual with responsibility for oversight of diversity, equity, and inclusion (DEI) initiatives of the COM to the extent permitted by law.

Pre-Accreditation Submission 2.5: Diversity, Equity, and Inclusion (DEI) Leadership

1. Provide a copy of the job description for the DEI leader.
2. Provide a current curriculum vitae for the DEI leader.

~~3.~~

Pre-Accreditation Standard 3: Finances

A COM must have sufficient financial resources readily available to meet the needs of the COM and to achieve the COM mission, consistent with its projected and authorized student class size.

Pre-Accreditation Element 3.1: Financial Resources

A COM must ensure that the financial resources of the school ~~meet the requirements of Title IV of the Higher Education Act and~~ are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals. Because of the potential financial consequences, if any COM or its parent institution experiences a change in status regarding its participation in the Title IV programs following its initial establishment of participation, it must notify the COCA.

Pre-Accreditation Submission 3.1: Financial Resources

1. Provide the operational pro forma (budget for COMs in pre-accreditation status) showing income, revenue sources, and expenses) including budget for faculty and staff for the COM up through the anticipated graduation of the first class of students. Indicate (highlight) any changes or updates since the initial submission.
2. Provide the proposed capital budget for the development of the COM. Indicate (highlight) any changes or updates since the initial submission.
- ~~3. Provide the budget for personnel with a hiring plan addressing anticipated date of hire of each faculty and staff member. Indicate (highlight) any changes or updates since the initial submission.~~

Pre-Accreditation Element 3.2: Financial Planning and Budgeting

A COM must have a ~~budgeting~~budgetary process that is designed to support the mission of the COM.

Pre-Accreditation Submission 3.2: Financial Planning and Budgeting

1. Provide a flowchart demonstrating the budget development process indicating where the final budget approval occurs and clearly reflecting the dean's role in the process.
- ~~2. Provide information as to all persons with budgetary management and oversight.~~

Pre-Accreditation Element 3.3: Budgetary Authority

A COM or parent institution must provide the ~~Dean~~dean with the resources and budgetary authority necessary to fulfill his or her responsibility for the management of the COM.

Pre-Accreditation Submission 3.3: Budgetary Authority

1. Provide the current job description demonstrating that the dean possesses budgetary authority for the COM.
2. Provide the employment contract (compensation redacted) demonstrating that the dean possesses budgetary authority for the COM.

Pre-Accreditation Element 3.4: Financial Audit

A COM or its parent institution must commission an annual independent audit confirming financial viability and provide evidence of resolution of concerns cited in the audit's accompanying management letter.

Pre-Accreditation Submission 3.4: Financial Audit

1. Provide the annual audited financial statement and audit report ~~/management letter~~ for the COM or its parent institution for the latest complete fiscal year.

2. Provide evidence of resolution for any concerns cited in the audit's accompanying management letter.

Pre-Accreditation Standard 4: Facilities

A COM must have sufficient physical facilities, equipment, and resources for clinical, instructional, research, and technological functions of the COM. These resources must be readily available and accessible across all COM locations to meet ~~its~~the COM's needs, the needs of the students consistent with the approved class size, ~~and~~allowing the COM to achieve its mission.

Pre-Accreditation Element 4.1: Facilities

A COM must have facilities for the program of instruction that enable the authorized class size of students and faculty to pursue the mission, curriculum, content and delivery, and research/scholarly activity of the COM.

A COM must have access to facilities for simulation and standardized patient encounters and must demonstrate how the facilities contribute to student achievement of learning outcomes of all components of its curriculum.

A COM must assess the adequacy of the core and required clinical rotation facilities and involve students in the assessment.

A COM must have space available for use by students in a manner intended to support diversity, equity, and inclusion to the extent permitted by law, and must consult with students in the process of establishing such a space.

Pre-Accreditation Submission 4.1: Facilities

1. Complete and submit Pre-Accreditation Table 4.1 to describe the ~~on-campus~~ facilities the COM uses for instruction.
2. Provide a facility floor plan with designations of how the space will be utilized (full architectural drawings are not required).
3. Provide a description of, and indicate on the floor plans provided, the facilities used for simulation and standardized patient encounters provided to students.
4. Describe how the COM will assess the adequacy of the core and required clinical rotation facilities, including how students will be involved in the assessment.
5. Describe how the COM facilities contribute to student achievement of learning outcomes of the curriculum.
6. Describe how the COM will assess the adequacy and efficacy of facilities intended to support diversity, equity, and inclusion, including how students will be involved in the assessment.
- ~~7.~~ Provide the construction plan and timeline for all COM buildings. (Applicable only for COMs applying for pre-accreditation status)

- ~~4.~~8. Provide a contingency plan for COM facilities should the buildings not be completed on time. [\(Applicable only for COMs applying for pre-accreditation status\)](#)
- ~~5.~~9. Provide the permanent Certificate of Occupancy for all COM buildings, as obtained, and by December 31 of the year prior to the anticipated start of classes. [\(Applicable only for COMs applying for pre-accreditation status\)](#)
10. *Describe how the COM will assess the adequacy of the core clinical rotation facilities*

~~6., including how students will be involved in the assessment.~~

Pre-Accreditation Element 4.2: Security and Public Safety

A COM must ensure that adequate security systems are in place and publish and follow policies and procedures for security; student, faculty, and staff, ~~and student~~ safety; and emergency and disaster preparedness at all COM-operated teaching locations and core and required training ~~locations~~ sites.

The COM's policy must include methods of communication with students, faculty, and staff at all teaching and training locations.

Pre-Accreditation Submission 4.2: Security and Public Safety

1. Provide a copy of all security and safety related policies and procedures.
2. Provide a ~~public~~ link to the public webpage where ~~the policies are~~ security and safety information is published.
3. As required under 34 CFR §668.46, provide a copy of your most recent report required under the *Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act*, 20 U.S.C. §1092, ~~et al.~~ (f), as amended. (Not applicable to proposed COMs applying for pre-accreditation status.)

~~**Note:** COMs for which the COCA is the institutional accreditor, satisfying the evidentiary submissions under Element 4.2 will satisfy the required submissions under Element 12.7.~~

4. Provide a link to the public webpage where the COM's *Clery Report* is published.

Pre-Accreditation Element 4.3: Information Technology

A COM must ~~provide~~ensure access to information technology to support its mission- ~~at all locations and ensure Wi-Fi availability at all core and required rotation sites. Students, faculty, and staff must be involved in the assessment of information technology services.~~

Pre-Accreditation Submission 4.3: Information Technology

1. Provide a copy of the COM's information technology strategic plan.
2. Describe how students, faculty, and staff will be/are involved in the assessment of information technology services.
- ~~2.3.~~ Provide the most recent technology assessment report: including input from students, faculty, and staff. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 4.4: Learning Resources

A COM must ~~provide~~ensure students and faculty have access to in-person and electronic learning resources ~~to~~at all campus locations that support ~~its~~pre-clinical and clinical education that achieve the program objectives and support the COM's mission.

Pre-Accreditation Submission 4.4: Learning Resources

1. Complete Pre-Accreditation Table 4.4 to describe the COM's learning resources.

Pre-Accreditation Standard 5: Learning Environment

A COM must ensure that its educational program [at all teaching locations](#) occurs in professional, respectful, non-discriminatory, [culturally sensitive](#), and intellectually stimulating academic and clinical environments.

The school ~~also promotes~~[must promote](#) students' attainment of the osteopathic core competencies required of future osteopathic physicians.

Pre-Accreditation Element 5.1: Professionalism

A COM must ensure that the learning environment of its osteopathic medical education program is conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect. ~~This should also include exposure to aspects of patient safety, cultural competence, and interprofessional collaborative practice.~~

[A COM must have a committee, or other approved body that oversees professionalism.](#)

Pre-Accreditation Submission 5.1: Professionalism

1. Provide a copy of ~~all~~[the COM's](#) professionalism policies [and procedures](#).
2. Provide a ~~public~~ link to [the public webpage](#) where the professionalism policies are published.
- ~~3. Provide [public link to a list of the membership of the committee that addresses issues of professionalism and ethics](#).~~
- ~~4.3. Provide a [published](#)~~ description and charge of the committee [or approved body](#) that ~~addresses~~[oversees](#) issues of professionalism and ethics.
4. [Provide a list of the membership of the committee or approved body that oversees issues of professionalism and ethics. \(COMs applying for pre-accreditation status may use only job titles for unfilled positions.\)](#)

Pre-Accreditation Element 5.2: Diversity

A COM must publish policies ~~and have in place practices that~~ on and engage in ongoing, systematic, and focused recruitment and retention activities to the extent permitted by law, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.

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A COM must include in these activities the use of programs and/or partnerships with other institutions and organizations aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes.

A COM must make available by request three years of student, faculty, and staff demographics, at a minimum including race/ethnicity and gender. The mechanism to request this data must be published and easily identifiable on the COM's website. When applicable, for any value less than ten, the COM should indicate that value as "less than 10" in place of the value. (Not applicable to proposed COMs applying for pre-accreditation status.)

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Pre-Accreditation Submission 5.2: Diversity

~~Pre-Accreditation Submission 5.2: Diversity~~

~~1. COMs applying for pre-accreditation status must submit Pre-Accreditation Tables 5.2b and 5.2c. COMs in ongoing pre-accreditation must also submit Pre-Accreditation Table 5.2a.~~

- ~~2.1.~~ Provide the COM's policies that demonstrate its current practice of systematic and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.
- ~~2.2.~~ Describe the COM's programs and partnerships ~~(with other institutions and organizations)~~ aimed at achieving diversity among qualified applicants for medical school admission and the COM's evaluation of program and partnership outcomes.

3. Provide a link to the public webpage where student, faculty, and staff demographics can be requested.

Pre-Accreditation Element 5.3: Safety, Health, and Wellness

A COM must publish and follow policies and procedures that effectively mitigate [student](#), faculty, [and staff](#), ~~and student~~ exposure to infectious and environmental hazards, provide education on prevention of such exposures, and address procedures for care and treatment after such exposures.

A COM must ~~also~~ publish and follow policies related to student, faculty, and staff mental health and wellness and fatigue mitigation [in the clinical learning environment](#).

Pre-Accreditation Submission 5.3: Safety, Health, and Wellness

1. Provide the policies and procedures addressing safety and health issues.
2. Provide a link to ~~where the documents are~~ [the public webpage where safety, health, and wellness information is published](#).
3. ~~Demonstrate~~ [Describe](#) how this information is provided to students. ~~(Not applicable to proposed COMs applying for pre-accreditation status.)~~ [faculty, and staff](#).

Pre-Accreditation Element 5.4: Patient Care Supervision

A COM must ensure that osteopathic students in clinical learning situations involving patient care are under direct supervision by a licensed health care professional at all times in order to ensure [patient safety](#). The COM must ensure that all supervised activities are within the scope of practice of the supervising health care professional. Students must have clear guidelines on their role in care and the limits of their scope of authority.

Pre-Accreditation Submission 5.4: Patient Care Supervision

1. Provide the policies addressing student supervision during the provision of patient care, [including policies on the use of telemedicine, if applicable](#).
2. Provide a link to [the public webpage](#) where the documents are published.
3. ~~Demonstrate~~ [Describe](#) how this information is provided to students. ~~(Not applicable,~~ [faculty, and staff](#).

Pre-Accreditation Element 5.5: Office of Diversity, Equity, and Inclusion (DEI)

A COM or its parent institution must have an Office of Diversity, Equity, and Inclusion (DEI) (or similar) to the extent permitted by law that supports students, faculty, and staff, and the COM's efforts to promote recruitment, retention, and success of its students, faculty, and staff throughout the osteopathic medical education program.

The DEI Office must have a strategic plan that is developed with input from students, faculty, and staff.

Pre-Accreditation Submission ~~proposed COMs applying~~ **Element 5.5: DEI Office**

1. Provide a copy of the strategic plan for ~~pre-accreditation status.~~ the COM's DEI Office.
2. Describe how students, faculty and staff were/will be involved in the development and review of the strategic plan.

~~3.~~

Pre-Accreditation Standard 6: Curriculum

The faculty of a COM must define how the students will achieve the educational program objectives, including osteopathic core competencies, and is responsible for the detailed design and implementation of the components of a curriculum that enables its students to achieve those competencies and objectives. Educational program objectives are statements of the knowledge, skills, behaviors, and attitudes that osteopathic medical students are expected to demonstrate as evidence of their achievement prior to successful completion of the program.

The faculty of a COM must periodically and regularly review and revise the COM's curriculum and evaluate the COM's educational program to ensure that the quality of the program meets the current standards of osteopathic core competencies and that students achieve all program objectives and participate in required clinical training experiences and environments.

Pre-Accreditation Element 6.1: Curriculum Design and Management

A COM must have in place ~~a~~ an approved body (e.g., ~~a faculty~~ curriculum committee) that exercises collective responsibility for the education program as a whole, and has responsibility for the development, management, evaluation, and enhancement of the curriculum. This committee must include student and faculty representation from the pre-clinical (~~years 1 and 2~~) and clinical education (~~years 3 and 4~~) years. The curriculum must ensure that students attain the skills, including osteopathic core competencies, interprofessional education and humanistic skills, necessary to demonstrate GME readiness and meet the mission of the COM.

Pre-Accreditation Submission 6.1: Curriculum Design and Management

1. Provide the charge and responsibility of the approved body/curriculum committee.
2. Provide a list of the current members of the approved body/curriculum committee and their titles. (Proposed COM's applying for pre-accreditation status.)
3. ~~Submit~~ Provide a list of meeting dates, rosters of attendees, and meeting minutes for the past academic year. (~~Applicable only~~ (Not applicable to COMs in on going proposed COM's applying for pre-accreditation status.))
4. Provide a brief description of the COM's curriculum design and teaching methods. (Not to exceed 250 words.)

Pre-Accreditation Element 6.2: Programmatic Level Educational Objectives

A COM must define and make all programmatic level educational objectives known to students, faculty, and others with responsibility for student education and assessment.

Pre-Accreditation Submission 6.2: Programmatic Level Educational Objectives

1. Provide the programmatic level educational objectives [for the osteopathic medical education program](#).
2. Provide a ~~public~~ link to [the public webpage](#) where the ~~document~~[information](#) is published.

Pre-Accreditation Element 6.3: Maximum Length of Completion

A COM must ~~ensure~~have a policy that requires that each single degree ~~DO~~ student completes the DO degree within 150% of the standard time to achieve the degree (six years)~~)- following matriculation)~~ and describes any exceptions to the 150% time limit.

Pre-Accreditation Submission 6.3: Maximum Length of Completion

1. Provide the policy that describes that single degree DO students must complete their education within 150% of the standard time (six years following matriculation~~)-~~).
2. Provide ~~the~~a link to the public webpage where ~~the document~~this policy is published.

Pre-Accreditation Element 6.4: Osteopathic Core Competencies

A COM must teach and educate students in order to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment.

Pre-Accreditation Submission 6.4: Osteopathic Core Competencies

1. Provide a description of the COM's delivery of its curriculum including teaching ~~and~~, educating, and assessing its students to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment. (Not to exceed 250 words.)
2. ~~Provide a~~ curriculum map demonstrating how/where the ~~content of these courses is~~ osteopathic core competencies are/will be delivered ~~must be made available during any site visit.~~

Note: A single curriculum map may be provided for Elements 6.4 – 6.8 and 6.12.

Pre-Accreditation Element 6.5: Scientific Method

A COM must ensure that the curriculum includes instruction in the scientific method including data collection to test and verify hypotheses or address questions regarding biomedical phenomena and in the basic scientific and ethical principles of clinical and translational research. The curriculum must include the methods by which such research is conducted, evaluated, explained to patients who are part of clinical studies, and applied to patient care.

Pre-Accreditation Submission 6.5: Scientific Method

1. Provide a description of the COM's delivery of its curriculum including instruction in the scientific method addressing data collection, testing and verifying hypotheses or questions regarding biomedical phenomena and the basic scientific and ethical principles of clinical and translational research. The curriculum must include the methods by which such research is conducted, evaluated, explained to patients/subjects of a clinical study, and applied to patient care. (Not to exceed 250 words.)
2. ~~A~~ Provide a curriculum map demonstrating ~~how the~~ where scientific method content ~~of these courses is~~ will be delivered ~~must be made available during any site visit.~~

Pre-Accreditation Element 6.6: Principles of Osteopathic Medicine

In each year of the curriculum, a COM must provide each student with instruction in Osteopathic Principles and Practice (OPP), including both observation and hands-on application of ~~osteopathic manipulative medicine~~ Osteopathic Manipulative Medicine (OMM) supervised by COM-~~credentialed physicians (DO or MD)~~.

Pre-Accreditation Submission 6.6: Principles of Osteopathic Medicine

1. Provide a description of the COM's delivery of its OPP and OMM ~~curriculum~~ curricula including instruction in OPP, including both observational and hands-on application of OMM. (Not to exceed 250 words.)
2. ~~Provide a~~ Provide a curriculum map demonstrating ~~how the~~ where OPP and OMM content ~~of these courses~~ is/will be delivered ~~must be made available during any site visit.~~

Pre-Accreditation Element 6.7: Self-Directed Learning

A COM must ensure that the curriculum includes self-directed learning experiences and time for independent study to allow students to develop skills for lifelong learning. Self-directed learning includes students' self-assessment of learning needs; independent identification, analysis, and synthesis of relevant information; and appraisal of the credibility of sources of information.

Pre-Accreditation Submission 6.7: Self-Directed Learning

1. Provide a description of the COM's delivery of its curriculum including self-directed learning experiences and time for independent study allowing students to develop skills for lifelong learning. (Not to exceed 250 words.)
2. ~~Provide a~~ curriculum map demonstrating ~~how the content of these courses is~~ where self-directed learning experiences and time for independent study are/will be delivered ~~must be made available during any site visit.~~

Pre-Accreditation Element 6.8: Interprofessional Education for Collaborative Practice

~~COM faculty must ensure that, in~~In each year of the curriculum, ~~a COM must ensure that~~ the core curriculum prepares osteopathic medical students to function collaboratively on health care teams, adhering to the Interprofessional Education Collaborative (IPEC) core competencies, by providing learning ~~experiences in academic and clinical environments that permit interaction with students enrolled in other health professions degree programs.~~

~~Pre-Accreditation Submission 6.8: Interprofessional Education for Collaborative Practice~~

~~1. Provide a description of the COM's delivery of its curriculum detailing preparation of students to function collaboratively on health care teams by providing~~ experiences in academic and/or clinical environments that permit interaction with students enrolled in other health professions degree programs or other health professionals. ~~Not to exceed 250 words.~~

Pre-Accreditation Submission 6.8: Interprofessional Education for Collaborative Practice

1. Provide a description of the COM's delivery of its curriculum which includes preparation of students to function collaboratively on health care teams, adhering to IPEC core competencies. (Not to exceed 250 words.)
- ~~4~~Provide a curriculum map demonstrating ~~how the content of these courses~~where interprofessional education is/will be delivered ~~must be made available during any site visit.~~

Pre-Accreditation Element 6.9: Clinical Education

~~An already pre-accredited COM must:~~

~~A. A proposed COM applying for pre-accreditation status or a COM in pre-accreditation status must:~~

- ~~a. Describe how clinical skills are taught and assessed throughout its curriculum;~~
- ~~b. define eligibility for an OMS II and/or other requirements, including clinical skills, for a student to enter clinical rotations;~~
- ~~c. B. — define its core clinical rotations, core clinical rotations must include family medicine, internal medicine, general surgery, and pediatrics (all core clinical rotations must be a minimum of four weeks long and must include in-person patient care);~~
- ~~d. define its required clinical rotations, required clinical rotations must include psychiatry, obstetrics and gynecology, and emergency medicine (all required clinical rotations must be a minimum of four weeks long and must include in-person patient care);~~

~~Note: Critical care medicine can be substituted for emergency medicine.~~

~~Note: Psychiatry and obstetrics and gynecology will change from a required to a core rotation by July 1, 2027.~~

- ~~e. define the types of patients and clinical conditions that osteopathic medical students are required to encounter, the clinical skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student responsibilities;~~
- ~~f. C. be able to provide core clinical education rotations, including demonstration of adequate faculty, for 100% of the pre-accredited COM's second-year students and/or other students eligible to enter core and required clinical rotations; for the first time, students repeating core rotations, and off-cycle students (COM's applying for pre-accreditation should use the requested approved class size);~~
- ~~D. have published policies and procedures (protocols) addressing methodologies by which students can satisfactorily complete, including remediation activities, the entire clinical education curriculum;~~

~~A candidate COM applying for pre-accreditation must:~~

- ~~A. define eligibility for an OMS II, including standardized/simulated and/or other student to enter clinical rotations;~~
- ~~g. B. — define the types of patients supervised patient encounters; and clinical conditions that osteopathic medical students will be required to encounter, the skills to be performed by the students, the appropriate clinical setting for these experiences, and the expected levels of student responsibilities;~~

~~C. be able to provide~~ have executed affiliation agreements that support the clinical education rotations, ~~including demonstration of adequate faculty,~~ experience for its ~~intended approved~~ class size; and

~~h. D. have published policies and procedures (protocols) addressing methodologies by which~~ students ~~will be able to complete the entire clinical education curriculum.~~

Note: The distinction between core rotations and required rotations is that core rotations must be taught in the third year of the curriculum by the faculty who hold (or have held) board certification, or be board eligible, in the listed specialty. These stipulations do not apply to required rotations.

Pre-Accreditation Submission 6.9: Clinical Education

1. Provide a copy of a COM-approved clinical education affiliation agreement.
2. Provide a list of all contracted clinical sites for core and required clinical rotations. At the time of the site visit, a COM must produce all documents that evidence the acceptance of the COM's students to participate at the affiliate sites, including all executed affiliation agreements.
3. Provide the definition of ~~an~~ a student eligible ~~OAS II student~~ to enter clinical rotations.
- ~~4.~~ 4. Provide documentation (e.g., clinical education manual) listing core and required third- and ~~or other student to enter clinical~~ fourth-year rotations.
- ~~5.~~ 5. Provide ~~a sample syllabus~~ syllabi for all core and required clinical rotations.
6. Provide evidence that each student at a minimum must successfully complete core clinical rotations including family medicine, internal medicine, general surgery, and pediatrics.
7. Provide evidence that each student must successfully complete required clinical rotations including psychiatry, obstetrics and gynecology, and emergency medicine.
- ~~8.~~ 8. Provide policies and procedures (protocols) demonstrating how clinical education is/will be delivered to all students through the COM.
- ~~9.~~ 9. Complete and submit Pre-Accreditation Tables 6.9a ~~and 6.9b demonstrating adequacy of core clinical rotation capacity~~; detailing student population. (Not applicable to COMs applying for pre-accreditation status).
10. Complete and submit Pre-Accreditation Table 6.9b demonstrating adequacy of core and required clinical rotation capacity.

~~5~~11. Provide a contingency plan for all core and required rotations indicating how students will be placed in clinical education in the event opportunities are no longer available.

Pre-Accreditation Element 6.10: Clinical Experience

A COM must ensure that each ~~student participates in one or more required core rotation(s)~~student's rotations prior to the fourth-year clinical ~~clerkship experience that is~~clerkships include the following experiences: 1) at least one rotation conducted in a health care setting in which the student works with resident physicians currently enrolled in an accredited program of graduate medical education.~~In addition to the above expectation, a minimum of; 2) at least one required third-year clinical clerkship must be completed~~rotation under the supervision of an osteopathic physician; and ~~3) more than one of the required third-year clinical clerkship experiences must include~~rotation in an inpatient ~~component~~setting.

Pre-Accreditation Submission 6.10: Clinical Experience

~~1. Submit Pre-Accreditation Table 6.9b.~~

1. Provide de-identified documentation showing how the most recent set of students received these mandatory experiences prior to their fourth-year clinical clerkships from the system used by the COM to track compliance with these requirements. (Not applicable for COMs applying for pre-accreditation status)
2. Describe the process the COM will use to ensure students will receive the mandatory clinical rotation experiences prior to their fourth-year clinical clerkships. (Not required for COMs in pre-accreditation status).

Pre-Accreditation Element 6.11: Comparability ~~across~~ Across Clinical Education Sites

A COM must ensure that the curriculum includes comparable educational experiences and equivalent methods of assessment across all core and required clinical educational sites where students learn, ensuring all students achieve similar outcomes based on ~~core~~-educational learning objectives. This comparison of comparability must include a statistical analysis.

Pre-Accreditation Submission 6.11: Comparability ~~across~~ Across Clinical Education Sites

1. Provide ~~the~~ policies and procedures describing how student outcomes at clinical educational sites will be reviewed and utilized in the determination of the comparability of outcome of the clinical experiences.
2. Provide the most recent report assessing student outcomes across sites: including a statistical analysis and describe plans to address any issues found. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 6.12: ~~COMLEX-USA~~ Diversity, Equity, and Inclusion (DEI) Curriculum

~~All students must successfully pass COMLEX-USA Level 1, Level 2 CE, and Level 2 PE prior to graduation from an osteopathic medical school. The COM must publish to the public the COMLEX-USA Level 1, Level 2 CE, Level 2 PE, and Level 3 first time pass rate for all students in each class at the COM.~~

A COM must incorporate diversity, equity, and inclusion into its curriculum to the extent permitted by law.

Pre-Accreditation Submission 6.12: ~~COMLEX-USA~~ Diversity, Equity, and Inclusion (DEI) Curriculum

1. Provide ~~all COMLEX-USA~~ a description of the COM's curriculum that includes issues related ~~school policies~~ to diversity, equity, and ~~procedures~~ inclusion.
- ~~2. Provide the public link to the location~~ a curriculum map demonstrating where ~~future COMLEX-USA Level 1, Level 2 CE, Level 2 PE~~ the diversity, equity, and ~~Level 3 first time pass rates~~ inclusion content is/will be ~~published~~.

2. delivered.

Pre-Accreditation Standard 7: Faculty and Staff

The faculty members at a COM must be qualified through their education, training, experience, and continuing professional development and provide the leadership and support necessary to attain the ~~institution's~~institution's educational, research, and service goals.

A COM must ensure that its medical education program includes a comprehensive, fair, and uniform system of formative and summative medical student assessment and protects medical students' and patients' safety by ensuring that all persons who teach, supervise, and/or assess medical students are adequately prepared for those responsibilities.

Pre-Accreditation Element 7.1: Faculty and Staff Resources and Qualifications

At all educational teaching sites, including affiliated sites, a pre-accredited COM must have sufficient faculty and clinical staff resources to achieve the program mission, including part time and adjunct faculty, and preceptors who are appropriately trained and credentialed. The physician faculty, in the patient care environment at core rotations sites, must hold current medical licensure and have had AOA ~~OR~~ ABMS board certification / at some time in their career or be currently board ~~eligibility.~~ ~~All non-physician faculty must have demonstrated, appropriate qualifications in his/her disciplinary field.~~eligible in the specialty being taught.

A ~~candidate~~pre-accredited COM ~~applying for pre-accreditation~~ must have a pro forma plan for sufficient faculty~~mechanism to review~~ and ~~clinical staff resources to achieve the program mission, including part time and adjunct faculty, and preceptors who are appropriately trained and credentialed.~~approve credentials of physician faculty, ~~in the patient care environment, must hold current medical licensure and~~ that have never been board certified or are not board eligible by the AOA or ABMS ~~board certification/board eligibility.~~at non-core rotations sites.

All non-physician faculty in the patient care environment must have demonstrated, appropriate qualifications in ~~his/her~~their disciplinary field.

Pre-Accreditation Submission 7.1: Faculty and Staff Resources and Qualifications

1. Provide ~~the~~an organizational chart (titles and names, where available) demonstrating how the faculty are/will be organized. Indicate (highlight) any changes or updates since the initial submission.
- ~~2. For all OMM/OPP faculty provide current complete curriculum vitae, medical license and AOA board certification.~~
- ~~3.~~2. Complete Pre-Accreditation Tables 7.1a and 7.1b with anticipated date of hire of each faculty and staff member.

3. ~~Note: At~~ Provide a description of the ~~time of~~ mechanism to review and approve credentials of physician faculty that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.

In preparation of a site ~~visit~~ inspection and upon request by the COCA staff, the COM must have available ~~for inspection~~ the complete faculty file, including the most recent and complete curricula vitae and credentialing information, of all faculty, including all adjunct faculty.

Note: Reports from the American Osteopathic Information Association, the physician's primary state of licensure, or American Board of Medical Specialties may be used primary source verification to demonstrate current licensure and board certification.

Pre-Accreditation Element 7.2: Faculty Approvals at All Teaching Sites

A COM must academically credential and/or approve the faculty at all COM and COM-affiliated and educational teaching sites.

Pre-Accreditation Submission 7.2: Faculty Approvals at All Teaching Sites

1. Provide a copy of the policies and procedures for credentialing and appointment, or approval of all COM faculty.
2. Complete Pre-Accreditation Table 7.2: [listing credentials for all clinical faculty](#).

Pre-Accreditation Element 7.3: Department Chair Qualifications

A COM must employ (have under contract prior to the granting of Pre-accreditation Status) ~~Chairs~~chairs of department(s) or the equivalent of departments with ~~a minimum of five years of~~proven experience in teaching and academic leadership in a medical education setting. For clinical department chairs, the chair must have an active medical license and active AOA ~~OR~~or ABMS board certification in ~~his/her~~their specialty.

Pre-Accreditation Submission 7.3: Department Chair Qualifications

1. Provide the organizational chart (titles and names, where available) demonstrating the reporting hierarchy for each department.
2. Provide ~~the~~a current job description for each department chair ~~(s or equivalent)~~.
3. Provide a complete and current curriculum vitae for each department chair ~~(s or equivalent)~~.
4. For each clinical department chair ~~(s or equivalent)~~, provide a copy of the ~~chair's~~ medical license. (If a DO or MD)
5. For each clinical department chair ~~(s or equivalent)~~, provide a copy of the ~~chair's~~ AOA or ABMS board certification documents. (If a DO or MD)

Pre-Accreditation Element 7.4: Primary Care Leadership

A COM may organize its medical faculty under an organizational structure of its own design, but the leadership of the COM's clinical education must include one or more of actively licensed osteopathic physicians who are AOA or ABMS ~~or AOA~~ board certified in a primary care discipline (family medicine, internal medicine, or pediatrics) ~~discipline~~ with ~~a minimum of five years of~~ proven experience in teaching and academic leadership in a medical education setting.

—Pre-Accreditation Submission 7.4: Primary Care Leadership

1. Provide a copy of the job description for the chair of primary care ~~(or equivalent)~~.
2. Provide a complete and current curriculum vitae for the chair of primary care ~~(or equivalent)~~.
3. Provide a copy of the chair's ~~(or equivalent)~~ medical license.
4. Provide a copy of the chair's ~~(or equivalent)~~ AOA or ABMS board certification documents.

Pre-Accreditation Element 7.5: OMM/OPP Leadership

Osteopathic philosophy and principles (OPP) that include osteopathic manipulative medicine (OMM) are defining characteristics of a COM in maintaining its osteopathic distinction.

Accordingly, in a Department of OMM/OPP or equivalent, a COM must employ at least one full-time Doctor of Osteopathic Medicine with ~~a minimum of three years full-time faculty~~ proven experience in developing and delivering OMM/OPP curriculum at a COM, an active medical license, and active board certification from the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM) or a Certificate of Special Proficiency in OMM (C-SPOMM) whose principal duties include developing the osteopathic content of the COM's curriculum.

Pre-Accreditation Submission 7.5: OMM/OPP Leadership

1. Provide a copy of the job description for the chair of OMM/OPP*.
2. Provide a complete and current curriculum vitae for the chair of OMM/OPP*.
3. Provide a copy of the chair's* medical license.
4. Provide a copy of the chair's* -board certification documents.

_____ * or person responsible for developing the OMM/OPP curriculum

Pre-Accreditation Element 7.6: Faculty Development

A COM must develop and implement an assessment-driven faculty development program that is in keeping with the COM's mission.

Pre-Accreditation Submission 7.6: Faculty Development

1. Provide a ~~copy~~ report of the ~~faculty development needs assessment.~~ *(Applicable only to proposed COM's applying for pre-accreditation status.)*
- 2.1. Provide the most ~~report from the~~ recent annual faculty development needs assessment.
(Not ~~applicable~~ application to proposed COMs applying for pre-accreditation ~~status.~~)
- 3.2. Provide a roster of all faculty development activities for the past academic year, including documentation of the faculty participation at each activity. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 7.7: Faculty Association

A COM must have a faculty organization that serves as a representative forum for faculty participation for the free exchange of ideas and concerns of all faculty.

Pre-Accreditation Submission 7.7: Faculty Association

1. Provide a copy of the bylaws for the faculty association.
2. Provide a list of faculty association meeting dates, [rosters of attendees](#), and meeting minutes for the past academic year. -(Not applicable to proposed COMs applying for pre-accreditation status.)
- ~~2.~~3. [Provide a copy of or a link to the faculty handbook. \(COM's applying for pre-accreditation status may provide a draft copy of the faculty handbook.\)](#)

Pre-Accreditation Element 7.8: Faculty Appointment and Advancement

A COM must have clear policies and procedures in place for faculty appointment, renewal of appointment, promotion, granting of tenure (if a tenure program exists), and remediation. The policies and procedures must provide each faculty member with written information about his or her term of appointment, responsibilities, lines of communication, privileges and benefits, performance evaluation and remediation, terms of dismissal, due process, and, if relevant, the policy on practice earnings.

[A COM or its parent institution must create a process to review pay and rank parity every three years consistent with its mission-appropriate diversity outcomes among its faculty.](#)

Pre-Accreditation Submission 7.8: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement, including:
 - a. term of appointment;
 - b. responsibilities;
 - c. lines of communication;
 - d. privileges and benefits;
 - e. performance evaluation and remediation;
 - f. terms of dismissal;
 - g. due process; and
 - ~~h. the policy on practice earnings (if relevant).~~
 - [h. 2. the policy on practice earnings \(if relevant\).](#)

[Note: If these policies/procedures are part of a larger document, please provide a specific citation \(e.g., page number/section number\) to where the above policies can be located.](#)

- [2. Provide a link to the webpage where the documents are published.](#)
- [3. Provide a copy of the pay/rank equity review policy.](#)
- [4. Provide a copy of the most recent pay/rank equity study. \(Not applicable to COMs applying for pre-accreditation status\).](#)

Pre-Accreditation Element 7.9: Diversity, Equity, and Inclusion (DEI) Training

A COM must offer DEI training to employed faculty and staff at least annually to the extent permitted by law.

Pre-Accreditation Submission 7.9: Diversity, Equity, and Inclusion (DEI) Training

1. Provide documentation demonstrating that DEI training is offered to all COM-employed faculty and staff at least annually. (Not applicable for proposed COMs applying for pre-accreditation status.)
2. Describe the COM's plans to offer DEI training to all employed faculty and staff at least annually. (Not to exceed 250 words.) (Not applicable to COMs in pre-accreditation status.)

Pre-Accreditation Standard 8: [Research and Scholarly Activity](#)

A COM must demonstrate a commitment to research and scholarly activity through its budgetary processes, support of faculty research (including the establishment of a research infrastructure, including an office of research, faculty and personnel to assist students in research and peer review through publication or grant application), and inclusion of its students in research throughout all four years of the osteopathic medical education.

Pre-Accreditation Element 8.1 Research and Scholarly Activity Strategic Plan

A COM must produce and publish a strategic plan for research and scholarly activities that ~~document~~[documents](#) how the COM intends to contribute to the advancement of knowledge through research and scholarly contributions. [The plan must include cultural competency and health disparities research/scholarly activities.](#)

Pre-Accreditation Submission 8.1: Research and Scholarly Activity Strategic Plan

1. Provide a copy of the [COM's](#) research and scholarly [activity](#) strategic plan.
2. Provide a ~~public~~ link to [the public webpage](#) where the research and scholarly [activity](#) strategic plan ~~may be accessed~~ [is published](#).

Pre-Accreditation Element 8.2: Research and Scholarly Activity Budget

A COM must ~~include~~have budgetary processes and a budget that ~~support~~supports research ~~of~~and scholarly activity by its faculty and students.

Pre-Accreditation Submission 8.2: Research and Scholarly Activity Budget

1. Provide a description of the COM's budgetary processes that support research and scholarly activity by its faculty and students.
- ~~4.~~2. Provide a copy of the COM's research and scholarly activity budget through the anticipated graduation of the first class of students.

Pre-Accreditation Element 8.3: OMM/OPP Research and Scholarly Activity

A COM must demonstrate how its research and/or scholarly activity includes and/or incorporates osteopathic manipulative medicine (OMM) and osteopathic principles and practice (OPP) ~~as a component of the research and/or scholarly activity.~~

Pre-Accreditation Submission 8.3: OMM/OPP Research and Scholarly Activity

1. Provide a description of how OMM and OPP are /will be incorporated into the COM's research and scholarly activity.
2. Complete and submit Pre-Accreditation Table 8 to identify the OMM/OPP research/scholarly activity of the COM's faculty (and students and staff, if applicable) over the past three years. (Not applicable to ~~proposed~~ COMs applying for pre-accreditation status).

Pre-Accreditation Element 8.4: Student Participation [in Research and Scholarly Activity](#)

A COM must publish and follow policies and procedures to support student driven research and scholarly activity, as well as student participation in the research and scholarly activities of the faculty.

Pre-Accreditation Submission 8.4: Student Participation [in Research and Scholarly Activity](#)

1. Provide a copy of all student research and scholarly activity policies.
2. Provide a link to [the public webpage](#) where the policies are published.
3. Submit Pre-Accreditation Table 8. (Not applicable to proposed COMs applying for pre-accreditation status).

Pre-Accreditation Standard 9: Students

A COM must establish and publish admission requirements for potential applicants to the osteopathic medical education program; and must develop and apply effective policies and procedures for medical student selection and enrollment: consistent with the COM's mission, vision, and values.

A COM must develop and implement policies and procedures as well as provide the human and physical resources required to support and promote health and wellness in order to meet and advance the physical, emotional, mental, career, academic and professional needs of its students, faculty and staff. All osteopathic medical students of the COM have the same rights to and must receive comparable services.

Pre-Accreditation Element 9.1: Admissions Policy

A COM must establish and publish, to the public, admission requirements for potential applicants to the osteopathic medical education program and must use effective policies and procedures for osteopathic medical student selection for admission and enrollment, including demonstration of technical standards for admissions. A COM must tie all admissions policies to the COM mission.

Pre-Accreditation Submission 9.1: Admissions Policy

1. Provide all admission requirements and policies and procedures for osteopathic medical student selection and enrollment.
2. Provide a copy of the technical standards required of ~~matriculates~~prospective students.
3. Provide a link to the public webpage where the ~~documents~~policies are published.

Pre-Accreditation Element 9.2: Academic Standards

A COM must publish and follow policies and procedures on academic standards that include grading, class attendance, tuition and fees, refunds, student promotion, retention, graduation, students' rights and responsibilities, and the filing of grievances and appeals.

Pre-Accreditation Submission 9.2: Academic Standards

1. Provide copies of policies and procedures on academic standards- including:
 - a. grading;
 - b. class attendance;
 - c. tuition and fees;
 - d. refunds;
 - e. student promotion;
 - f. retention;
 - g. graduation;
 - h. students' rights and responsibilities; and
 - i. filing of grievances and appeals.

Note: If these policies/procedures are part of a larger document, please provide a specific citation (e.g., page number/section number) to where the above policies can be located.

2. Provide a link to the public webpage where the documents are published.

Pre-Accreditation Element 9.3: Transfer Policies

A COM must publish and follow policies regarding transfer or admissions with advanced standing. A COM may only accept credits from a school accredited by the COCA or [the](#) Liaison Committee on Medical Education (LCME) where the student is eligible for readmission. The COM must ensure that if [a](#) transfer occurs from an LCME accredited school of medicine, the student must acquire OMM/OPP competency prior to graduation from the COM. The last two years of education must be completed at the COM granting the degree.

Pre-Accreditation Submission 9.3: Transfer Policies

1. ~~Pursuant to 34 CFR §688.43(a)(11), provide~~ Provide copies of all transfer policies and procedures, ~~including those made available to students pursuant to 34 CFR §~~ [668.43\(a\)\(11\)](#).
2. Provide ~~the~~ a link to [the public webpage](#) where the ~~documents~~ COM's transfer policies are published.

Pre-Accreditation Element 9.4: Secure Student Recordkeeping

A COM must develop an accurate, confidential and secure system for official student record keeping that includes admissions, advisement, academic and career counseling, evaluation, grading, credits and the training of faculty and staff in the regulations ~~surrounding~~ regarding these records.

Pre-Accreditation Submission 9.4: Secure Student Recordkeeping

1. Provide the policies and procedures on student recordkeeping.
2. Provide the policy and procedure for training of faculty and staff pursuant to the Family Educational Rights and Privacy Act (FERPA) (20 USC 1232g; 34 CFR part 99).

Pre-Accreditation Element 9.5: Academic Counseling

A COM must provide academic counseling to assist ~~its~~all students in study skills, learning styles, learning resources, and other assistance for academic success.

Pre-Accreditation Submission 9.5: Academic Counseling

1. Describe the process for ensuring that academic counseling ~~that is/~~will be ~~(or is)~~ provided to students. (Not to exceed 250 words.)
- ~~2.~~ 2. Complete Pre-Accreditation Table 9.5 (~~Applicable only~~Not applicable to COMs ~~is~~applying for pre-accreditation status.)

Pre-Accreditation Element 9.6: Career Counseling

A COM must provide career counseling to assist ~~its~~all students in evaluating career options and applying to graduate medical education training programs.

Pre-Accreditation Submission 9.6: Career Counseling

1. Describe the process for ensuring that career counseling, including GME readiness, ~~that~~ is/will be provided to students. (Not to exceed 250 words.)
2. Complete Pre-Accreditation Table 9.6. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 9.7: Financial Aid and Debt Management Counseling

A COM must provide ~~its students with~~ financial aid counseling to all students to assist them with financial aid applications and debt management.

A COM must publish annually a list of active scholarship opportunities made available by the institution to COM students.

Pre-Accreditation Submission 9.7: Financial Aid and Debt Management Counseling

1. Provide a description (not to exceed 250 words) of all financial aid and debt counseling sessions that are/will be provided to its students, including:
 - a. When the financial aid and debt counseling sessions are/were provided to the students;
 - b. The OMS year during which students are required to receive these sessions; and
 - c. A roster of students that received financial aid and debt counseling (Not applicable to proposed COMs applying for pre-accreditation status. COMs).
2. Provide a link to the public webpage where scholarship opportunities are made available by the institution to COM students.

Pre-Accreditation Element 9.8: Mental Health Services

A COM must have policies and procedures to provide its students with confidential access to an effective system of counseling and mental ~~healthcare.~~health care from a mental health care provider.

A mental health ~~representative~~provider must be accessible 24 hours a day, 365 days a year, from all locations where students receive education from the COM.

Pre-Accreditation Submission 9.8: Mental Health Services

1. Provide the policies and procedures for students seeking counseling and mental health services.
2. Provide a link to the public webpage where ~~the documents are published.~~students can/will be able to access mental health care information.
3. Provide a list of the mental health services available to students at all teaching locations with service locations and hours.

Pre-Accreditation Element 9.9: Physical Health Services

A COM must have policies and procedures to provide its students with access to diagnostic, preventive and therapeutic health services ~~24 hours a day, 365 days a year,~~ accessible in all locations where students receive education from the COM.

Pre-Accreditation Submission 9.9: Physical Health Services

1. Provide the policies and procedures for students seeking diagnostic, preventive, and therapeutic health services.
2. Provide a link to ~~where the documents are published.~~ public webpage where students can/will be able to access physical health services information.
3. Provide a list of the health service locations where students may seek care at all teaching locations.

Pre-Accreditation Element 9.10: Non-Academic Health Professionals

A COM must ensure that any health professional providing health services, through a ~~physician~~provider-patient relationship, must recuse ~~him/herself~~themselves from the academic assessment or promotion of the student receiving those services.

A COM must provide a copy of the recusal policy annually to students and faculty.

Pre-Accreditation Submission 9.10: Non-Academic Health Professionals

1. Provide the policies and procedures on recusal from student assessment and promotion for health professionals providing services to students.
2. Provide a link to the public webpages where these policies and procedures are published for faculty and students.

3. Describe how this information is provided to students and faculty annually.
(Not to exceed 250 words.)

Pre-Accreditation Element 9.11: Health Insurance

A COM must require that all students have health insurance.

[A COM, or its parent institution, must offer a health insurance plan option to all students.](#)

Pre-Accreditation Submission 9.11: Health Insurance

1. Provide the policies and procedures regarding health insurance for students, [including the annual verification process.](#)
2. Provide a link to [the public webpage](#) where the ~~documents~~ [health insurance policies](#) are published.

Pre-Accreditation Standard 10:- Graduate Medical Education (GME)

The faculty of a COM must ensure that the curriculum provides content of sufficient breadth and depth to prepare students for entry into a graduate medical education program for the subsequent practice of medicine. The COM must strive to develop graduate medical education to meet the needs of its graduates within the defined service area, consistent with the mission of the COM.

Pre-Accreditation Element 10.1: ~~GME Development~~ Osteopathic Educational Continuum

~~The~~ A COM must ~~demonstrate its~~ have policies, procedures, personnel and budgetary resources to support the continuum of osteopathic education ~~in both undergraduate and~~ , including graduate medical education (~~GME~~), ~~as well as in~~ and continuing medical education (~~for all GME faculty~~). ~~A COM must demonstrate and publicly evidence the placement of its students in graduate medical education programs, including through the publication of match rates of its students in the National Residency Matching Program (NRMP).~~

Pre-Accreditation Submission 10.1: ~~GME Development~~ Osteopathic Educational Continuum

1. ~~Submit~~ Provide the COM's policies that ~~include its structure and~~ describe COM's procedures ~~to~~ , personnel, and budgetary resources that support/will support the continuum of osteopathic medical education.
2. ~~Provide the COM's pro forma that includes line items for the support the continuum of osteopathic medical education.~~
3. ~~Provide the anticipated public link where future placement match data may be accessed.~~

Note: In states where ~~PGY-1 placement~~ first-year residency development in GME is required by law (e.g., Texas), a ~~proposed~~ COM must demonstrate how it ~~intends to comply~~ is complying with this requirement.

Pre-Accreditation Element 10.2: ~~ACGME~~ Accredited GME

A COM must provide a mechanism to assist new and existing ~~graduate medical education (GME)~~GME programs in meeting the requirements for accreditation ~~by the Accreditation Council for Graduate Medical Education (ACGME).~~

A COM seeking pre-accreditation status must support development and growth of GME through establishment of a GME office with qualified personnel, expertise, and financial support focused on supporting new and established GME in obtaining accreditation. The COM must have qualified personnel to assist students with the UME/GME transition.

A candidate COM applying for pre-accreditation may support development and growth of GME under strategies of its own design, but the COM should provide evidence of approval of any new PGY-1 positions supported by the COM consistent with its GME development plan. (New PGY-1 positions may not be claimed by other COMs.)

Class size ramp up may not be approved to progress past 50% of the requested class size if the COM fails to demonstrate sufficient fulfillment of its GME development plan.

Pre-Accreditation Submission 10.2: ~~ACGME~~ Accredited GME

1. Provide the COM's policy ~~(ies)~~ and description of its mechanism for ~~developing~~assisting new ~~GME programs~~ and ~~continuing to assist~~ existing GME ~~programs~~in meeting the requirements for accreditation.

2. Submit table 10.2a for all affiliated ACGME programs for which the COM has supported development and growth.
3. Provide evidence of ACGME approval of new PGY-1. positions supported by the proposed COM.

Pre-Accreditation Element 10.3: Osteopathic Recognition of GME

A COM must provide a mechanism to assist ~~graduate medical education~~ GME programs ~~accredited by the ACGME~~ in meeting the requirements of osteopathic recognition.

Pre-Accreditation Submission 10.3: Osteopathic Recognition GME

1. Provide documentation demonstrating the COM's processes and commitment of resources to assist GME programs to achieve osteopathic recognition.

Pre-Accreditation Standard 11: Program and Student Assessment and Outcomes

A COM must define and assess both programmatic and individual student outcomes including attainment of osteopathic core competencies and skills, to ensure ~~that the COM meets~~ GME readiness, including its DEI mission. ~~Additionally, a, vision, and goals.~~

A COM must use the data from programmatic and individual outcomes to continuously improve all aspects of the COM and to meet its mission.

Pre-Accreditation Element 11.1: Program Assessment

A COM must ~~connect its~~ conduct learning outcomes ~~assessment~~ assessments that connect to its program mission, goals, and objectives to continuously improve the educational quality of its osteopathic medical education program.

Pre-Accreditation Submission 11.1: Program Assessment

1. Provide the guiding documents which govern how the COM conducts ~~systematic program review~~ learning outcomes assessments. This may be in the form of a program review manual or guide that has been adopted by the faculty. This ~~should include the manner in which the core~~ must describe an assessment of the osteopathic core competencies ~~are embedded~~ in the curriculum ~~and assessed as an aspect of the review~~.
2. Provide a list of the ~~most recent and scheduled program reviews for~~ learning outcome assessments performed over the past three academic years ~~preceding a site visit or any submission to the COCA for any monitoring purposes (e.g., annual report, mid-cycle report, supplemental report, etc.)~~. (Not applicable for ~~proposed~~ COMs applying for pre-accreditation status.)
3. Provide examples of changes in curriculum, pedagogy, counseling, or other aspects of the student experience that have been made as a result of recent program reviews in order to more fully support ~~the~~ student learning ~~of~~ including the core competencies. (Not applicable for ~~proposed~~ COMs applying for pre-accreditation status.)

Pre-Accreditation Element 11.2: Student Evaluation of Instruction

A COM must have policies and procedures in place to collect and consider confidential student evaluations of their courses, clerkships, faculty, and other relevant student experiences. The COM must demonstrate that these results are incorporated into the COM's self-assessment to improve curriculum; promote diversity, equity, and inclusion; and address deficiencies in student experiences.

Pre-Accreditation Submission 11.2: Student Evaluation of Instruction

1. Describe the processes for obtaining student evaluation of classroom and clinical instruction.
2. Describe how student evaluations are/will be kept confidential. (Not to exceed 250 words.)
- ~~2.~~3. Provide a copy of the evaluation forms that are/will be ~~are~~ used by the students for these purposes.
- ~~3.~~4. Provide a flowchart demonstrating how the evaluation data are utilized in curricular improvement.

Pre-Accreditation Element 11.3: ~~Program and Student Outcomes~~—COCA Annual and Mid-Cycle Reports

A COM having pre-accreditation status must submit specified annual ~~and mid-cycle~~ reports to the COCA.

Pre-Accreditation Submission 11.3: ~~Program and Student Outcomes~~—COCA Annual and Mid-Cycle Reports

1. ~~Complete and submit~~COCA staff will confirm that the ~~Annual COCA Data and Mid-Cycle Update Report~~COM has completed and submitted the required COCA annual reports by the established deadlines. (Not applicable for proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 11.4: Student Outcomes

11.4a COMLEX-USA

Prior to graduation, all students must demonstrate osteopathic medical knowledge and osteopathic clinical skills by passing the Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX-USA) undergraduate examinations (Level 1 and Level 2) and meeting a national standard for osteopathic clinical skills competency.

The COM must continually publish to the public the first-time pass rates for all students in each of the competency assessments in the COMLEX-USA examination series (Level 1, Level 2, and Level 3) as reported by the NBOME. COMs must update their public websites within 30 days of receiving their annual update for each COMLEX-USA level testing cycle.

Pre-Accreditation Submission 11.4a: COMLEX-USA

1. Provide all COM policies and procedures related to the COMLEX-USA exam.
2. Provide a link to the public webpage where the COM's last four years of COMLEX-USA Level 1, Level 2, and Level 3 first time pass rates are/will be published.

Note: COMLEX-USA outcomes will be reviewed annually through annual reporting protocols as posted on the COCA webpage <https://osteopathic.org/index.php?aam-media=/wp-content/uploads/Minimum-Standards-Student-Achievement-Policy.pdf>

11.4b: GME Placement Rates

A COM must continually publish publicly the placement rates of its students in graduate medical education programs.

A COM must make available by request four years of student GME placement rates including, at a minimum, race/ethnicity and gender demographic data (as permitted by law). The mechanism to request this data must be published and easily identifiable on the COM's website. When applicable, for any value less than ten, the COM should indicate that value as "less than 10" in place of the value.

Pre-Accreditation Submission 11.4b: GME Placement Rates

1. Provide a link to the public webpage where the COM's GME placement rates are/will be published. The placement rate must be calculated by dividing the number of students who entered into a PGY-1 position by the number of students that applied to enter into a PGY-1 position.

2. Provide a link to the public webpage where student GME placement rates by race/ethnicity and gender demographic data (as permitted by law) can be requested.
3. Submit Table 11.4b.

Note: GME Placement rate outcomes will be reviewed annually through annual reporting protocols as posted on the COCA webpage <https://osteopathic.org/index.php?aam-media=/wp-content/uploads/Minimum-Standards-Student-Achievement-Policy.pdf>

11.4c: Cohort Graduation Rates

A COM must continually publish publicly the graduation rates by matriculation cohort at years 4, 5, and 6 for students only pursuing the DO degree.

Pre-Accreditation Submission 11.4c: Cohort Graduation Rates

1. Provide a link to the public webpage where the COM's cohort graduation rates at years 4, 5, and 6 are/will be published.
2. Submit Table 11.4c.

11.4d: Cohort Retention Rates

A COM must continually publish publicly the retention rates (as defined in the glossary) by matriculation cohort.

Pre-Accreditation Submission 11.4d: Cohort Graduation Rates

1. Provide a link to the public webpage where the COM's cohort retention rates are/will be published.
2. Submit Table 11.4d.

Pre-Accreditation Element 11.5: Student Survey

A COM must cooperate with the administration of the COCA student survey as part of the comprehensive accreditation process.

Pre-Accreditation Submission 11.45: Student Survey

1. Describe the methods the COM used/will use to support the completion of the COCA student survey.
2. Provide a report of the COM's review of the findings from the COCA student survey highlighting any actions planned to address noted concerns. (Not to exceed 500 words.)

Pre-Accreditation Standard 12: Institutional Accreditation

For any COM that is not affiliated with a parent institution, the COCA may serve as both institutional and programmatic accreditor. [As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.](#) When the COCA serves as the institutional accreditor, the COM must demonstrate that it is compliant with this standard and its supporting elements. [A COM may not add another program of study in addition to the osteopathic medicine program while the COCA serves as its institutional accreditor.](#)

Pre-Accreditation Element 12.1: Incorporation of the Institution

A COM must demonstrate its incorporation as a non-profit or for-profit entity (e.g., corporation, limited liability company, etc.) with governing bylaws that are consistent with the COCA accreditation standards. The COM must have an autonomously appointed functioning governing body that is broad in representation of expertise in education, [DEI](#), finance, law, health policy, and osteopathic medicine. [The majority of the members of the governing body must be independent of financial interest/benefit from the COM.](#)

Pre-Accreditation Submission 12.1: Incorporation of the Institution

1. Provide the current registration documents for ongoing incorporation for the COM.
2. Provide a copy of the bylaws of the [COM's](#) governing body.
3. Provide a list of members of the [COM's](#) governing body and their titles.
4. Provide evidence of an annual assessment of the [COM's](#) governing body's conflicts of interest.

Pre-Accreditation Element 12.2: Degree and Other Educational Offerings

~~A COM that is not affiliated with a parent institution~~ A COM must demonstrate evidence of approval to grant the Doctor of Osteopathic Medicine (DO) degree and any other educational offerings from all appropriate regulatory agencies whether it is a board of regents, a state regulatory agency, or any other regulatory agency charged with granting such authority under the laws of the state in which the COM is located.

Pre-Accreditation Submission 12.2: Degree and Other Educational Offerings

~~1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the COM.~~

~~2.~~ 1. Provide a copy of all charters, licenses, or letters of approval from any educational or business agencies that grant authority to the COM to offer the DO degree.

Pre-Accreditation Element 12.3: Chief Executive Officer

A COM ~~that is not affiliated with a parent institution~~ must employ a ~~Chief Executive Officer~~[chief executive officer](#) who is qualified by education, training, and experience to provide effective leadership to the COM's administration, faculty, students, and staff. The ~~Chief Executive Officer~~[chief executive officer](#) must have a minimum of five years' experience in senior administration in an institution of higher education or healthcare setting.

Pre-Accreditation Submission 12.3: Chief Executive Officer

1. Provide the current job description for the chief executive officer.
2. Provide a complete [and current](#) curriculum vitae for the chief executive officer.

Pre-Accreditation Element 12.4: Chief Financial Officer

A COM ~~that is not affiliated with a parent institution~~ must employ a ~~Chief Financial Officer~~[chief financial officer](#) who is qualified by education, training, and experience to provide organizational leadership related to the financial health of the institution. The ~~Chief Financial Officer~~[chief financial officer](#) must have a minimum of three years' experience in administration in financial management in an institution of higher education or healthcare setting.

Pre-Accreditation Submission 12.4: Chief Financial Officer

1. Provide the current job description for the chief financial officer.
2. Provide a complete [and current](#) curriculum vitae for the chief financial officer.

Pre-Accreditation Element 12.5: Course Credit Hours

~~A COM that is not affiliated with a parent institution~~ A COM must publish and follow policies and procedures for the assignment of credit hours for all courses within the curriculum.

Pre-Accreditation Submission 12.5: Course Credit Hours

1. Provide ~~the~~a copy of the COM's credit hour assignment policy.
2. Provide ~~the~~a link to the public webpage where the document is/will be published.

Pre-Accreditation Element 12.6: Public Information

All public information published by a COM in its catalogs, student handbooks, advertising literature, or any other publicly available information must be presented in an accurate, fair, and complete manner.

A COM's catalog must include a diversity statement and the student handbook must include a description of the discrimination/bias incident reporting system and how such situations are resolved.

Pre-Accreditation Submission 12.6: Public Information

1. Provide all applicable documents demonstrating information about the institution's calendar, grading, admissions, academic program requirements, DEI training, discrimination incident report, tuition~~and~~, fees, and refund policies.
2. Provide evidence of all communication that accurately ~~represent~~represents the COM's accreditation status. This communication must include information on how to contact COCA.

Pre-Accreditation Element 12.7: Public Notification of Opportunity to Comment

A COM must seek third party comments addressing the quality of the COM's educational program prior to the completion of a comprehensive or focused review by the COCA. The notice must include information on how the public can contact the COCA directly.

This element is applicable only to COMs in ongoing pre-accreditation.

Pre-Accreditation Submission 12.7: Public Notification of Opportunity to Comment

1. Provide ~~the evidence that a public announcement notifying stakeholders of~~ notice inviting any third-party comments prior to an ~~upcoming~~ impending comprehensive or focused site visit, ~~pre-accreditation site visit, substantive change request or a request to enter into a teach-out agreement,~~ was posted on the institution's website no later than ~~three months before the site visit.~~
- 2.1. ~~The COM must include~~ 90 days prior to the date ~~of the site visit, purpose of the visit, and contact is scheduled to commence, including~~ information ~~for~~ on how to contact the COCA (~~predoc@osteopathic.org~~) ~~within the public announcement~~ directly.

Pre-Accreditation Element 12.8: Academic Freedom

A COM must include in its publications policies regarding academic freedom. All such policies must be approved by the COM's governing board.

Pre-Accreditation Submission 12.8: Academic Freedom

1. Provide the ~~institution's~~ COM's policies regarding academic freedom evidencing a commitment to academic freedom, intellectual freedom, freedom of expression, and respect for intellectual property rights.

Pre-Accreditation Element 12.9: ~~Campus Security~~

~~A COM must provide comprehensive information through a public link about its campus security to its students, faculty, staff, and to the public at large.~~

~~Pre-accreditation Submission 12.9: Campus Security~~

- ~~1. Provide the public link where the COM's annual security report is/ will be published.~~
- ~~2. Provide the public link where the COM's campus security policies are/ will be published.~~

~~Pre-Accreditation Element 12.10: Title IV Responsibility~~

A COM ~~that is not affiliated with a parent institution~~ must demonstrate compliance ~~with all~~ or its intent to comply with the requirements for participation in federal ~~funding guidelines~~ programs under Title IV of the Higher Education Act of 1965, as amended.

~~Pre-Accreditation Submission 12.10: Title IV Responsibility~~

1. Provide a copy of the most recent ~~filing of the~~ annual audit ~~pursuant to~~ meeting the requirements of the Single Audit Act Amendments of 1996, OMB Circular A-133, if applicable.
2. Provide the date of the most recent program review conducted pursuant to Title IV of the HEA and the final action letter from that review. ~~-, if applicable.~~
3. Provide ~~institutional~~ a copy of the most recent audit(s) performed in connection with any state financial aid programs, if applicable.
4. Provide copies of all relevant correspondence submitted to, and received from, the U.S. Department of Education for ongoing noncompliance issues, including liabilities owed, if applicable.
5. Provide negotiated settlement agreements for the payoff of any fines or monies owed in connection with program reviews, if applicable.
- ~~3.6. Provide COM~~ responses to all financial audits and/or findings, if applicable.
- ~~4.7.~~ If the COM has not yet been approved to participate in an HEA program, provide evidence of commitment by the institution to ~~so~~ do so.

END OF STANDARDS

Glossary

The glossary is available on the COCA website <https://osteopathic.org/accreditation/standards/>