Accreditation of Colleges of Osteopathic Medicine:
COCA Policies and Procedures

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TABLE OF CONTENTS

Introduction .......................................................................................................................................................... 6

General Information ........................................................................................................................................... 6

Scope of Accreditation
The History of Osteopathic Medical College Accreditation
COCA Mission, Goals, and Objectives

Commission on Osteopathic College Accreditation ...................................................................................... 11

Composition of the COCA
Qualifications for Membership on the COCA
COCA Leadership
Training of COCA Members
COCA Staff
Information on COCA Members and Staff Made Available to the Public

Standing and Ad Hoc Committees of the COCA............................................................................................ 15

Executive Committee
Standards Review Committee
Committee on College Accreditation Training
Policies and Procedure Committee
Data Committee
COCA Appeals Panel
Ad Hoc Committees and Work Groups

COCA Meetings ................................................................................................................................................... 17

Regular Meetings
Special Meetings
Parliamentary Procedure and Quorum

COCA Policies ..................................................................................................................................................... 18

Confidentiality of Information Collected During the Accreditation Process
Conflict of Interest
Consultations
Development and Review of Accreditation Standards
Fraud and Abuse
Interpretation of Standards
Publishing of Accreditation Actions
Record Retention
Reporting of COM Accreditation Actions
Research
Revision of this Policy and Procedure Manual
Third Party Comment
Willful Deception

Accreditation Process

Applicant Status
Candidate Status
Pre-Accreditation Status
Accreditation Status
Monitoring of Accreditation

Accreditation Fees

Records for COCA Decision Making

Comprehensive Reviews with Self-Study
Progress Reports and Compliance Monitoring
Requests for Substantive Change

Reconsideration and Appeal Process

Reconsideration
Appeals

Complaints

About Program Quality or Accreditation Standards
About the COCA

Substantive Change Submission Details

Additional Location
Branch Campus
Change in Legal Status of Form of Control
Planned Class Size Increase
Unplanned Class Size Increase

Teach Out Plans and Agreements

Conditions That Require Approval of a Teach Out Plan
Evaluation of a Teach Out Plan
Evaluation of a Teach Out Agreement
Closed Institutions Without a Teach Out Plan or Agreement

Requirements of the United States Department of Education
Activities by the COCA
Adverse Decisions
Annual Information
Correspondence with the USDE
Distance Education
Noncompliance
Proposed Changes in Standards or Procedures
Responses to Actions of Other Oversight and Accrediting Bodies
Title IV
USDE Notification of Initial and Continuing Accreditation Decisions
Withdrawal or Lapses of Accreditation
INTRODUCTION

These Policies and Procedures govern the implementation of the Commission on Osteopathic College Accreditation (COCA) processes, and articulate the procedures used in the process of accrediting DO-granting medical education programs. These Policies and Procedures are issued to provide information to the public and to promote transparency and consistency of decisions in COCA accreditation actions.

GENERAL INFORMATION

Overview of Accreditation

As practiced in the United States today, accreditation is a process by which institutions and programs voluntarily submit to an extensive peer-based evaluation of their compliance with accepted standards for educational quality. Higher education in the United States relies on accreditation to ensure quality and to foster a culture of continuous improvement. Accreditation offers a mark of distinction for academic programs and institutions, signaling high quality and a commitment to excellence.

There are two distinct types of accreditation in higher education:

1. Programmatic (specialized and professional) accreditation conducts an in-depth assessment of specialized or professional programs at a college, university or independent institutions.

2. Institutional accreditation reviews academic and organizational structures of a college or university as a whole.

Through accreditation, the COCA provides assurance to osteopathic medical students and graduates, the medical profession, healthcare institutions, and the public that: (1) educational programs culminating in the award of the DO degree meet reasonable, generally-accepted, and appropriate national standards for educational quality; and (2) graduates of such programs have a complete and valid educational experience sufficient to prepare them for the next stage of their training. COCA standards for educational program quality are contained in the documents “Accreditation of Colleges of Osteopathic Medicine: COM New & Developing Accreditation Standards” and “Accreditation of Colleges of Osteopathic Medicine: COM Continuing Accreditation Standards” available electronically from our website (www.aoacoca.org). Programs judged by the COCA to meet national standards of quality are designated as “accredited” for a usual term of seven years.

Scope of Recognition (Institutional and Programmatic Accreditation)

The American Osteopathic Association Commission on Osteopathic College Accreditation (COCA) is the only accrediting agency for pre-doctoral osteopathic medical education, and is recognized by the United States Department of Education (USDE). The COCA is recognized as both an institutional accrediting agency for free-standing colleges of osteopathic medicine and a programmatic accrediting agency for COMs that exist within larger institutions with a regional accreditor.

The Secretary of the USDE has recognized the COCA as an accrediting agency. Under 34 C.F.R. §602.3, this grant of recognition is a determination by the USDE that the COCA is “a reliable authority
regarding the quality of education or training offered by institutions or programs it accredits[.]” The COCA’s scope of recognition, as granted by the USDE, is “the accreditation and pre-accreditation (“Provisional Accreditation”) throughout the United States of freestanding institutions of osteopathic medicine and of osteopathic medical programs leading to the degree Doctor of Osteopathy or Doctor of Osteopathic Medicine. Title IV Note: Only freestanding schools or colleges of osteopathic medicine may use accreditation by this agency to establish eligibility to participate in Title IV programs.”

https://ope.ed.gov/accreditation/ViewAgencyInfo.aspx?agencyId=6167656e637949643d3438267264743d382f312f3230313720313a33323a414d&tp=undefined

The History of Osteopathic Medical College Accreditation

The history of the accreditation of colleges of osteopathic medicine shows that, from the very start in the late nineteenth century, the osteopathic profession has been interested and active in assisting colleges in the attainment and maintenance of high educational standards.

The American School of Osteopathy was established by Dr. Andrew Taylor Still, a registered physician and surgeon in Kirksville, Missouri. The college's corporate charter (May 11, 1892) granted the right to confer the Doctor of Medicine (M.D.) degree. However, the governing body of the school chose to award the Doctor of Osteopathy (D.O.) degree.

Several osteopathic colleges were then established by 1898. However, there was a lack of uniformity in the admission and graduation requirements of the various colleges. In these early years, osteopathic educators and leaders recognized the fact that the attainment and maintenance of high educational standards was essential. The American School of Osteopathy issued an invitation to all osteopathic colleges to attend a meeting in Kirksville, Missouri, on June 28, 1898, to form an association of osteopathic colleges.

In 1897, the first Constitution of the American Association for the Advancement of Osteopathy (forerunner of the American Osteopathic Association) was adopted, and among the several committees that were established was the Committee on Education. The 1901 Constitution of the American Osteopathic Association provided that the Committee on Education, together with the Executive Committee of the Associated Colleges of Osteopathy, should constitute a joint committee to:

a. Investigate schools applying for membership in the Associated Colleges of Osteopathy;

b. Make an annual investigation of schools who were already members; and

c. Make an annual report on these schools to the Board of Trustees of the American Osteopathic Association.

The Committee on Education was charged with the duty of reporting annually on the condition of each school. The Board and members of the Association were primarily interested in the following queries:

a. Do the charter, equipment and work of a particular school correctly represent osteopathy?
b. What kind of person, both as to general character and professional qualifications, who just from school, has opened an office in the vicinity for the practice of the same profession?

In 1901, the joint committee adopted the policy of appointing a member of the profession to serve as a "college inspector," sometimes referred to as a "censor". In 1902, the Bylaws of the American Osteopathic Association, for the first time, provided a mechanism for the inspection and approval of osteopathic colleges. The first college inspection was made in 1903, and on the basis of the report to the Board of Trustees, the members of the Associated Colleges of Osteopathy were approved. By 1915, it was agreed that expenses of college accreditation would be borne by the American Osteopathic Association.

In 1923, the AOA Department of Education was changed to the Bureau of Professional Education, and two years later, the Bureau of Colleges was added. In 1928, the two bureaus were joined together, and in 1930, the Bureau of Professional Education and Colleges was established. In the following year the Board of Trustees approved a recommendation that the Chair of the Bureau of Professional Education and Colleges and the Chair of the Committee on College Inspection, a sub-committee of the Bureau, should be one in the same person.

In 1938, a policy was adopted to create official inspection committees of two or three members to inspect each osteopathic college at least once every two years. In 1949, a new policy of college inspection, known as the Survey Committee, was adopted, which provided for a complete survey of each college to be performed by a survey team of from four to seven members at least every three years.

In 1952, the USDE recognized the American Osteopathic Association as an accrediting agency. In 1959 - 1960, after several years of study, a reorganization of the education structure of the American Osteopathic Association took place. In order to bring all facets of osteopathic education into one body, a new Bureau of Professional Education was organized.

The National Commission on Accrediting recognized the American Osteopathic Association in 1967. The National Commission on Accrediting was the predecessor to the Council on Postsecondary Accreditation. On January 1, 1994, the Council on Postsecondary Accreditation was reorganized as the Commission on Recognition of Postsecondary Accreditation. On January 1, 1997, the Commission on Recognition of Postsecondary Accreditation (CORPA) was reorganized as Council on Higher Education Accreditation (CHEA), which is the non-governmental agency recognized by higher education institutions to approve, and recognize national agencies for accreditation purposes.

In 1993, the Bureau renamed its committees and coordinated four councils that dealt with various phases of osteopathic education:

a. The Council on Predoctoral Education, the evaluating unit of undergraduate medical education;

b. The Council on Postdoctoral Training, the evaluating unit of internships, residencies, preceptorships and other post-graduate medical education programs;

c. The Council on Continuing Medical Education, the unit which evaluates programs and recommends approval of CME credits; and
d. The Council on International Osteopathic Medical Education and Affairs.

These councils were responsible for evaluating the programs under their purview and making initial recommendations to the AOA Bureau. The AOA Bureau served as the accrediting and final approval agency for colleges of osteopathic medicine. The Board of Trustees was the final appeal body for decisions of the Council on Postdoctoral Training, and was the final approving and appeal body for the Council on Continuing Medical Education.

In 2001, the Task Force to Study the Structure of the Department of Educational Affairs began to broadly review the structure of the Department of Educational Affairs, with an emphasis on the AOA Bureau. In February 2003, the Task Force presented its final report to the AOA Board of Trustees for approval. The result of this Task Force was to divide the functions of the AOA Bureau into two separate decision making bodies.

The Bureau of Osteopathic Education (BOE) was responsible for postdoctoral education and continuing medical education and had five committees reporting to it. Of those five committees, three were new. The five committees were: 1) Council of Hospitals (new); Osteopathic Medical Educators Council (new); Council of Osteopathic Specialty Societies (new); Council on Postdoctoral Training; and Council on Continuing Medical Education. The BOE began its new functions in July 2004.

The college accreditation process was re-organized into the Commission on Osteopathic College Accreditation (COCA), a single purpose committee that functions as the final decision making body for college accreditation.

In February 2004, the AOA Board of Trustees voted to approve the recommended structure of the COCA, which included the elimination of the Council on Predoctoral Education. The COCA is now the sole accrediting body for colleges of osteopathic medicine that reviews, evaluates and establishes the accreditation status of a COM.

**COCA Mission, Goals, and Objectives**

The COCA serves the public by establishing, maintaining, and applying accreditation standards and procedures to ensure that the academic quality and continuous quality improvement of the education delivered by the COMs reflect the evolving practice of osteopathic medicine. The scope of the COCA’s work encompasses the accreditation of COMs.

**Goal 1**

To serve the public and interested communities (e.g., colleges of osteopathic medicine, osteopathic medical community, etc.) by ensuring the continued effectiveness of the COCA.

**Objectives:**

1. Maintain an independent and objective accreditation process.
2. Inform the public and the communities of interest regarding the accreditation status of programs and institutions.
3. Develop and implement policies with integrity and high ethical standards.
4. Continue to seek the most cost-effective way to provide the services of the COCA.
5. Develop and disseminate information that demonstrates the effectiveness of the COCA's operations.
6. Maintain liaison between the COCA and its constituents.
7. Keep the community of interest informed of current trends and developments in specialized accreditation.
8. Serve as a resource on accreditation.

**Goal 2**

To develop, maintain, apply, and periodically review the COCA's accreditation processes and the accreditation standards for COMs.

Objectives:

1. Review COM programs and institutions and make accreditation decisions in accordance with COCA's standards and procedures.
2. Establish and disseminate standards, policies and procedures for the COMs accredited by the COCA.
3. Comprehensively review the accreditation standards at least every five years.
4. Solicit suggestions from accrediting teams relative to standards, procedures, and processes.
5. Solicit suggestions from the community of interest relative to standards, procedures, and processes.
6. Identify competent individuals and provide appropriate training so they can participate in accreditation on-site visits.
7. Evaluate the performance of all evaluators and use the results of the evaluations to identify areas needing emphasis in the training process.
8. Monitor programs in the interim between on-site visits through the use of annual reports, mid-cycle reports, progress reports, interim progress reviews, and focused visitations.

**Goal 3**

To foster continuous quality improvement of osteopathic medical education by encouraging innovation and creativity in COM programs and institutions.

Objectives:

1. Communicate to the community of interest that the COCA encourages innovation and creativity in the COM.
2. Ensure that the policies and the procedures of the COCA do not inhibit innovation.
3. Ensure that the COCA and Evaluators Registry members perceive innovation as a necessary and positive approach to foster continuous quality improvement in osteopathic medical education.
4. Create standards which tie institutional planning to ongoing assessment of a COM's effectiveness.
Goal 4

To assure the continued effectiveness of the accreditation process by the development and application of continuous quality assurance, self-assessment, and external review of the COCA.

Objectives:

1. Maintain recognition by the USDE, by meeting all federal regulations for accreditation as found in the Code of Federal Regulations.
2. Seek external review by organizations that recognize accrediting bodies and follow accepted codes of good practice.
3. Engage in planning and conduct periodic self-assessments.
4. Evaluate and test the validity and reliability of the COCA's processes.
5. Maintain a committee structure that involves COCA members, and other experts in planning, quality improvement, and self-assessment.
6. Seek regular input from the community of interest relative to planning, quality improvement, and self-assessment.

COMMISSION ON OSTEOPATHIC COLLEGE ACCREDITATION (COCA)

Composition of the COCA

The COCA has 17 voting members whose appointment will be staggered and be limited to no more than three consecutive three-year terms. Membership terms are limited to a maximum of nine years in total. No member of the AOA Board of Trustees will serve as a member of the COCA. COMs may only have one representative from their institution serving on the Commission, except in cases of an individual having changed job positions resulting in two representatives from the same institution. The Commission shall never have more than two representatives from the same COM. If this situation occurs, an individual will need to resign after completion of their current three-year term of appointment to resolve the circumstance.

The COCA will have one non-voting Secretary. AOA Department of Accreditation staff will serve in this position.

Based upon the qualifications established by the COCA, nominations for open positions are solicited from AOA membership and stakeholder groups. The nominees are reviewed by the Education Nominating Committee consisting of representatives from the AOA and AACOM. Final approval of membership is by recommendation of the AOA President-Elect and approval of the AOA Board of Trustees. COCA voting members include the following:

- Public college dean (1)
- Private college dean (1)
- Educators from colleges of osteopathic medicine, but who are not the dean (2)
- Director of medical education (1)
- Hospital administrator (1)
- Public members (3)
- Members-at-large (8)
Public college dean (Chief Academic Officer)  One position; three year term. Must be a dean from one of the public colleges of osteopathic medicine.

Private college dean (Chief Academic Officer)  One position; three year term. Must be a dean from one of the private colleges of osteopathic medicine.

Educators from the colleges of osteopathic medicine Two positions; staggered three year terms. Educators from the colleges of medicine, but who are not deans of a college of osteopathic medicine. Educators may hold other academic administrative positions including associate dean, assistant dean, department chair, course director, course coordinator or other similar positions.

Director of Medical Education One position; three year term. Must be from an internship or residency program approved by the AOA Program and Trainee Review Committee (PRTC).

Hospital Administrator One position; three year term.

Public Members Three positions; staggered three year terms. Must have experience in higher education or accreditation, or public service that allow the public member to bring the perspective of one or more “external publics” to the evaluation of colleges of osteopathic medicine. Public members must further meet the criteria set forth by the US Department of Education.

At the time of appointment, each public member of the COCA will execute a sworn affidavit attesting to his/her compliance with the requirements of the U.S. Department of Education for public members.

At the beginning of each new year of the COCA following the AOA annual meeting in July, each public member will execute a sworn affidavit attesting to his/her compliance with requirements of the U.S. Department of Education for public members.

AOA Members-at-large Eight positions; staggered three year terms. Must be osteopathic physicians who are AOA members in good standing.

A vacancy in a member position will be filled in the same manner as described above. A newly appointed Commissioner will fill the remaining time in the unexpired term and may stand for reappointment at the culmination of the term. The reappointment will be considered as their first term.
Qualifications for Membership on the COCA

1. Professional (non-Public) Members
   a. Professional members must hold the DO degree, or an advanced degree in basic medical sciences, social or population health science; educational science; or hospital or healthcare administration.
   b. A practitioner member must hold or recently have held an active medical license and, if licensed, must be actively and significantly engaged in the临床 practice of medicine while serving as a member of the COCA.
   c. An educator professional member must hold an administrative or faculty position at a COCA accredited college of osteopathic medicine and must be significantly engaged in teaching or supervising medical students and/or resident physicians while serving as a member of the COCA.
   d. Professional members must be knowledgeable about and experienced with the processes of osteopathic medical education and accreditation in the United States.

2. Public Members
   a. Public members must, by education, experience, and public service, possess qualifications that allow them to provide a public perspective to the assessment of osteopathic medical education program quality. Public members should possess professional experience and stature in their field, be regarded as community leaders, and be seen as trusted agents of the public.
   b. To ensure the requisite impartiality to represent the public at large, members of the medical profession or their spouses, persons otherwise eligible for selection as professional members, or anyone else with financial, political, professional, or other interests in the programs being evaluated by the COCA, are ineligible for service as a public member.
   c. The COCA will not appoint as a public member any person who is (1) an employee, member of the governing board, owner, shareholder of, or consultant to any program that is accredited by the COCA, or, is actively seeking accreditation by the COCA; (2) a staff or board of trustees member of any trade association or membership organization related to, affiliated with, or associated with the COCA; or (3) a spouse, domestic partner, parent, child, or sibling of an individual who meets criterion (1) or (2) above.

COCA Leadership

COCA Chair

The AOA President appoints the chair, for a one-year term, from within the membership of the COCA. The AOA Board of Trustees then approves the appointment. The chair may be re-appointed to serve another one-year term. To be eligible to serve as chair, a COCA commissioner must have served at least two years on the COCA.
Duties of the Chair

The chair presides over all meetings of the COCA. The chair appoints the membership of the committees described in this COCA Policies and Procedures Manual. The chair is an ex officio member of all COCA committees. The chair may also, with approval of the COCA, establish and appoint the membership of ad hoc subcommittees, for which the chair is an ex officio member.

The chair also oversees the selection of qualified evaluators to serve on site visits to COMs and COCA members to review progress reports, self-study reports, and annual reports/mid-cycle reviews.

COCA Vice Chair

The AOA President appoints the vice chair, for a one-year term, from within the membership of the COCA. The AOA Board of Trustees then approves the vice chair. The vice chair may be re-appointed to serve another one-year term. The vice chair may assume the role of Chair in the subsequent year. To be eligible to serve as vice chair, a COCA commissioner must have served at least one year on the COCA.

Duties of the Vice Chair

The vice chair will assume the duties of chair in the event the chair is absent for cause, or if the chair so designates. The vice chair will also assume the duties of the chair, temporarily, when a conflict of interest arises for the chair.

Training of COCA Members

New members of the COCA are supplied with all relevant standards documents, policy and procedure documents, handbooks, and manuals prior to assuming their duties. New members of the COCA shall undergo training before commencing a term of service. Such training shall focus on outcomes and competencies that COCA members should have and shall include training on the COCA’s standards, policies, and procedures and U.S. Department of Education requirements for recognized accreditors.

Formal orientation sessions for new members are held prior to the first meeting they will attend as voting members.

In addition, all COCA members are expected to attend orientation sessions and webinars conducted by the COCA staff for site visit team members and colleges of osteopathic medicine.

COCA Staff

The formal responsibilities for managing the COCA are held by the Department of Accreditation at the American Osteopathic Association.

Legal counsel attends all COCA meetings and advises the membership and staff as needed on legal issues relating to accreditation activities.
The Department of Accreditation supports the operation of the COCA and manages the accreditation system, including development of COCA documents and maintenance of the website, design and implementation of activities for programs undergoing accreditation review, selection of site visit teams, and ongoing training programs for site visit team members.

Information on COCA Members and Staff Made Available to the Public

The COCA maintains on its website the names and current academic/professional affiliations of commission members and principal administrative staff.

STANDING AND AD HOC COMMITTEES OF THE COCA

All standing and ad hoc committees of the COCA must include at least one public member.

Executive Committee (COCA-EC)

The purpose of the Executive Committee is to function in well-defined, limited roles between regularly scheduled meetings of the COCA. The Executive Committee will include five COCA members, including the chair and vice chair and will meet by teleconference as needed.

The Executive Committee will provide the following:

- Regular review the COCA accreditation documents and policies and procedures, with recommendation to the COCA for consideration of areas for revision
- Technical review of substantive change applications
- Technical review of applications for new COMs
- Authorization of focused visitations based upon information obtained between regularly scheduled meetings
- Standards interpretation

The Executive Committee will also address and handle any business arising between COCA meetings to be ratified at the next scheduled meeting of the COCA.

COCA-EC members will be appointed by the COCA chair. Between three and five COCA members serve on this committee. The COCA chair serves as the chair of the COCA-EC.

Standards Review Committee (SRC)

The purpose of the SRC is to review all proposed changes to the COM Accreditation Standards. The SRC develops draft language for new and amended standards and elements and forwards them to the COCA for consideration. Technical amendments (minor changes in wording that do not alter the content or requirements of the standard or element) are also developed by the SRC when appropriate.

This committee meets at least on an annual basis to review proposed changes to the Standards of Accreditation. All proposed changes to the Standards of Accreditation will be open for public comment, either in written format or via a public Standards Forum. The SRC chair will report on all
recommendations to the COCA.

All SRC members and the committee chair will be appointed annually by the COCA chair. Between three and five COCA members, plus one student, serve on this committee. No more than three additional members with expertise in accreditation standards and processes may be appointed to the committee by the COCA Chair. The COCA chair serves as an ex-officio member.

Committee on College Accreditation Training (CCAT)

The purpose of the CCAT is to develop and implement educational programs to assist COCA Evaluators, the COMs, and others involved in the accreditation process in completion of accreditation documents and conduct of on-site accreditation visits.

The CCAT recommends COM accreditation training workshop programs to the COCA for its approval.

The CCAT will ordinarily meet via teleconference. Special meetings may be conducted face-to-face at the direction of the COCA chair. The CCAT chair will report on all recommendations to the COCA.

All CCAT members and the committee chair will be appointed annually by the COCA chair. Three members will be COCA members. Two individuals will be members of the evaluator’s registry. There will be one student member. The COCA chair serves as an ex-officio member.

Policies & Procedures Committee (P&P)

The purpose of the Policy and Procedures Committee is the development and revision of COCA policies as well as periodic review of the policy document, and monitoring of changes in the environment of academic medicine and accreditation that may affect COCA policies or procedures.

All P & P committee members and the committee chair will be appointed annually by the COCA chair. Between three and five COCA members, and one student, serve on this committee. No more than three additional members with expertise in accreditation policies and procedures may be appointed to the committee by the COCA Chair. The COCA chair serves as an ex-officio member.

Data Committee

The purpose of the Data Committee is the development and revision of student achievement and programmatic outcomes data metrics and report forms for annual COCA review.

All Data Committee members and the committee chair will be appointed annually by the COCA chair. Between three and five COCA members, and one student, serve on this committee. No more than three additional members with expertise in assessment and data may be appointed to the committee by the COCA Chair. The COCA chair serves as an ex-officio member.

All additional members of committees appointed by the COCA Chair are subject to the conflict of interest and confidentiality policies of the COCA.
**COCA Appeals Panel**

The COCA Appeals Panel consists of five members, including one (1) public member. These members will be selected from a list of former COCA members who were not COCA members when the COCA made the adverse decision under appeal. The list of former COCA members eligible for participation on the Appeals Panel will be reviewed and approved annually by the COCA and will be chosen based upon the following considerations:

- When the COCA is serving as an institutional accreditor of the COM, the panel will include at least one member with an academic background and one member with an administrative background;
- When the COCA is serving as a programmatic accreditor of the COM, the panel will include at least one educator and one practitioner.

A quorum (simple majority) of the panel must be present for a hearing.

If vacancies occur on the COCA Appeals Panel list, the COCA may fill those vacancies at any time during the year by action of the COCA-EC.

The COCA Appeal Panel is subject to the COCA’s Conflict of Interest Policy.

**Ad Hoc Committees and Work Groups**

The COCA Chair may designate *ad hoc* committees, subcommittees, or working groups to address policy issues, accreditation standards, or other matters deemed important for the effective functioning of the organization.

**COCA MEETINGS**

**Regular Meetings**

The COCA meets in regular session three times a year, in the months of August, December, and April, unless the members agree to a different schedule. The review of COMs and accreditation actions will occur in closed session. A portion of each COCA meeting will be devoted to procedural items and will be held in open session to allow public input into these issues.

**Special Meetings**

The chair and vice chair, in consultation with the COCA staff, may call a special in-person meeting or conference call to deal with any issue(s) that they determine cannot wait until the next scheduled regular meeting.

Formal action may be taken without an in-person meeting per the following process:
• With a telephone conference call or other communications medium by means of which all members participating can simultaneously communicate with each other. Participation and voting at such a meeting will follow the same rules as those followed at COCA meetings.

• By mail, facsimile, electronic mail ballot, or other asynchronous communications medium, provided that such actions will require the affirmative vote of all COCA members.

Parliamentary Procedure and Quorum

All meetings of the COCA are conducted in accordance with the current edition of Robert’s Rules of Order. A quorum shall consist of a majority of the voting members of the COCA.

COCA POLICIES

Confidentiality of Information Collected During the Accreditation Process

The purpose of accreditation is to protect the public by advancing the quality of osteopathic medical education. Accreditation information is submitted to or generated by the COCA with the expectation of confidentiality. All information collected from the COMs is held in strict confidence by the COCA Staff, Commissioners, and Evaluators.

Premature and/or unauthorized disclosure of information reflecting visiting team or COCA views concerning the accreditation status of a COM is not permitted.

Except for the information that is presented in open sessions of the COCA, members of the COCA and visiting team members are not authorized under any circumstances to disclose any information obtained during on-site visits.

With the exception of the reporting required by the Secretary of the USDE, it is the obligation of the COCA to maintain the confidentiality of its relationships with its COMs and not to announce publicly any action with respect to a COM other than its accreditation status, including public probationary status, or its removal from the accredited list.

Conflict of Interest

The policy statement governs treatment of actual, apparent and alleged conflicts of interest and appearances of impropriety that may arise during the deliberations and actions of the COCA. The policy is intended to facilitate the disclosure and resolution of conflicts of interest. These policies are applicable to members of the COCA, the COCA Appeals Panel, COCA staff, and members of the Evaluators Registry participating as site visit team members.

With respect to conflicts of interest, the policy of the COCA shall be to err on the side of caution to safeguard the integrity of the COCA. Members of the COCA, the COCA Appeals Panel, the Evaluators Registry, and COCA staff should be sensitive not only to the existence of a conflict of interest, but also to the possible appearance of improper conduct where no conflict of interest may exist.
Conflict of interest statements are collected from COCA commissioners, Appeals Panel members, members of the Evaluators Registry, and administrative staff.

What is a Conflict of Interest?

A conflict of interest arises where an individual on the COCA, COCA staff, or a member of the Evaluators Registry participating as a site visit team member, due to a financial, personal or other relationship with an entity under consideration, or an expression of bias / prejudice, may be unable to act based solely on an objective analysis of the information presented. The presence, or even the perceived presence, of a conflict of interest suggests that the conflicted individual may not have acted consistent with the legal duties of loyalty and/or obedience. This, in turn, raises the question of whether the COCA’s discussion and eventual decision may have been influenced by factors other than the information presented to the COCA. For example, bias may be present from consideration of information that is not entered into the record, but is known only to one or more members of the decision-making body. More seriously, prejudice, a literal pre-judgment in advance of the proceeding itself, may have occurred with one or more members of the decision-making body. Although courts typically grant considerable deference to the professional judgment used to reach substantive decisions made by private accrediting and certifying agencies, the presence of bias and/or prejudice or the failure to follow the defined procedures for handling conflicts of interest may provide the basis for overturning the decision of the accrediting or certifying body.

What Circumstances May Create a Conflict of Interest?

A conflict of interest arises where an individual member of a bureau, council or committee may be influenced in her or his decision-making process due to a relationship with an individual or entity under consideration. Some examples of situations that could create conflicts of interest include:

1. A business or financial relationship with an individual or program under consideration

2. A direct familial relationship with an individual under consideration or with an officer of an entity under consideration

3. An employment or consulting (past or current) relationship with an entity under consideration

4. Employment or other relationship with a competitor of a program under consideration

Unfortunately, the list of potential conflicts may include some situations in which there is no conflict present and not identify situations in which there are actual conflicts. Although, we cannot provide an all-encompassing, perfectly accurate list of situations that constitute a conflict of interest, the principles of disclosure and resolution of conflict of interest are understood and can be clearly stated and explained. It is then incumbent upon the COCA members, COCA staff, and members of the Evaluators Registry participating as site visit team members to understand and comply with the disclosure and resolution process discussed in greater detail below. Because of the primary role that staff plays in the daily conduct of business of the COCA, it is particularly important that they exhibit the highest degree of professional conduct with strict adherence to this policy.

No COCA representative (defined as a member of the COCA, the Accreditation staff, the Evaluator’s
Registry, or the Appeals Panel) will participate in a site visit, in discussions or voting at COCA meetings, or in an appeal if the program being visited or discussed is:

1. One in which the representative or an immediate family member (defined as a spouse, life partner, child, parent, or sibling) has been connected as a student, graduate, faculty member, administrative officer, staff member, employee, or contracted agent within the past five years.

2. Located in the same state as the COM or institution of the representative, or in such close geographic proximity that the programs or institutions involved can reasonably be considered as competing with each other for financial advantage (for example, in the operation of hospitals or clinics operated by the programs).

3. Part of a university system where the representative is employed.

4. Engaged in substantial cooperative or contractual arrangements with the program or institution of the representative or an immediate family member.

5. One which has engaged the representative or an immediate family member as a paid consultant within the past five years. Provision of short-term educational services (such as guest lectures) is not considered consulting that poses a conflict of interest.

6. One in which the representative or an immediate family member has any financial, political, professional, or other interest that may conflict with the interests of the COCA.

7. One in which the representative believes that there may be a conflict due to other circumstances, such as participation in accreditation or review of the program for other agencies, close personal relationships with individuals at the program, etc.

8. One in which the program has reason to believe, and can document to the satisfaction of the Accreditation staff, that the participation of the representative could be unfairly prejudicial.

The determination that a conflict of interest exists and the resolution of existent conflicts of interest rest with the COCA, and not with the individual member. Ordinarily, this decision will be made by the Executive Committee. However, upon request from any voting member of the COCA, the decision that a conflict of interest exists will be subject to debate and decision by the voting members. The individual member under discussion will have the right to respond regarding the alleged conflict, but will be recused from deliberating and voting on the determination that a conflict exists. Affected COMs also have the right to raise a question of conflict of interest for these groups before the entire COCA for determination and resolution.

Consultations

No COCA commissioner or member of the Evaluator Registry will act as a paid or unpaid external consultant on COCA accreditation matters to any program or institution subject to COCA accreditation. A COCA site visit team member will not act as a consultant on accreditation matters to a school the evaluator has visited as a site visit team member within the past five years.

Development and Review of Accreditation Standards

The COCA, in establishing procedures for the review of the accreditation documents, recognizes the need for an ongoing review process. Therefore, the COM Accreditation Standards and Procedures will be
reviewed for relevancy on a continuous basis. Suggestions for new standards or modifications to existing standards may be brought to the COCA from any source. Recommended changes most commonly originate from the students, faculty, and COM administration.

A major review of the Accreditation Standards will be undertaken approximately every five years. The COCA will announce the review process via the COCA website, http://www.aoacoca.org. This announcement will include information about the process and its timeline.

A survey of the standards will be conducted prior to the initiation of the accreditation document review process. The survey document will query respondents to evaluate the accreditation document as it relates to the a) quality of osteopathic medical education, and b) the relevancy of the educational training needs of the osteopathic medical student. The COCA will solicit comments from a representative group of constituents.

Changes to the documents Accreditation of Colleges of Osteopathic Medicine: COM Continuing Accreditation Standards and Accreditation of Colleges of Osteopathic Medicine: COM New & Developing Accreditation Standards will be made only after providing notice and opportunity for comment by affected persons, institutions, and organizations. Substantive changes to existing standards and elements (which impose new or additional requirements on programs) will undergo review by the public before being adopted. If the COCA determines that reviews indicate a need to revise one or more standards and/or elements, the COCA will act within 12 months to initiate the needed change(s).

Final decision on the content of any accreditation standard or element is at the sole determination of the COCA.

Any new or revised standard or element adopted by the COCA will be published on the website and in the documents Accreditation of Colleges of Osteopathic Medicine: COM Continuing Accreditation Standards and Accreditation of Colleges of Osteopathic Medicine: COM New & Developing Accreditation Standards, along with the academic year in which the standard will be effective.

**Fraud or Abuse**

An institution shall not engage in fraud or abuse, as proscribed under state and federal laws and regulations, or in practices or procedures that are designed, or have the tendency, to create a falsification or to deceive students. If the COCA receives an allegation of fraud or abuse concerning an institution from the federal government, any state entity or other party, the COCA will determine whether the alleged fraud or abuse constitutes a violation of any of the criteria for accreditation, particularly related to institutional integrity. The COCA will review such allegations through its complaint process or through other mechanisms provided for in the policies and procedures. An institution that has been determined to have engaged in fraud or abuse shall be considered to be in violation of COCA standards related to institutional integrity and shall be subject to sanctions or withdrawal of accreditation. The COCA will report suspected incidents of fraud or abuse to the USDE as outlined in its policy on the COCA’s relations with the USDE.

**Interpretation of Standards**
The evidence noted from a site visit report will be considered the gold standard of evidence of compliance with a standard of accreditation. Final interpretation of compliance with elements or standards rests in the sound discretion of the COCA. The COCA, typically, does not issue advisory or hypothetical opinions on the interpretation of standards.

**Publishing of Accreditation Actions**

The COM retains the right to publicize accreditation reports for the institution. If a COM releases part or all of an accreditation report in such a manner as to misrepresent or distort the report of the COCA, the COCA may release either appropriate parts of a report or the full report to correct the misinformation. The COCA will inform the COM in advance of the release and the substance of the release of any such information.

If the COM elects to publicly disclose its Candidate, Pre-Accreditation, or Accreditation status received from the COCA, it must state the following:

*The college has received Candidate, Pre-Accreditation, or Accreditation status from the American Osteopathic Association’s Commission on Osteopathic College Accreditation, which is the recognized accrediting agency for the approval of colleges and programs leading to the Doctor of Osteopathic Medicine (DO) degree. The address and phone number of the accrediting agency are: Department of Accreditation; American Osteopathic Association; 142 East Ontario Street; Chicago, IL 60611; Telephone 312/202-8124; Fax 312/202-8209; email predoc@osteopathic.org.*

**Record Retention Policy**

The United States Department of Education requires that all accrediting agencies recognized by the U.S. Secretary of Education meet requirements as specified at 34 CFR part 602. Among the requirements is to maintain records under 34 CFR §602.15(b):

> The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that—

(b) The agency maintains complete and accurate records of—

1. Its last full accreditation or pre-accreditation review of each institution or program, including on-site evaluation team reports, the institution’s or program’s responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution’s or program’s most recent self-study; and

2. All decisions made throughout an institution’s or program’s affiliation with the agency regarding the accreditation and pre-accreditation of any institution or program and substantive changes, including all correspondence that is significantly related to those decisions.

**Accreditation Documents**

Accreditation documents, including but not limited to: accreditation reports (site visits, progress
reports, and appeals), self-studies, substantive change, and other related correspondence will be
maintained in the COCA office for two accreditation cycles (14 years).

Other Accreditation documents that must be kept for 14 years are:

1. AOA Commission on Osteopathic College Accreditation Handbook;
2. Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures, including all tables and appendices; and
3. USDE files.

When archiving these documents, only the final approved document will be archived. All other
supporting material will be discarded (i.e., draft copies, individual responses from the public comment
period). USDE material to be archived includes all accreditation petitions, interim progress reports, and
all official USDE correspondence (to and from the AOA COCA). All other documents will be
discarded.

AOA COCA meeting material and related correspondence will be maintained for two years. All other
material related to meeting arrangements will be maintained for one year and discarded thereafter.

Other committee materials and related correspondence will be maintained for two years and discarded
thereafter.

Miscellaneous correspondence will be maintained for five years and then discarded. Examples of this
type of correspondence could be inquiry letters or requests for information.

Reporting of COCA Accreditation Actions

To Institutions

Within 30 days of any final COCA action on the reports of full or limited visits, the Accreditation staff
will send a Letter of Accreditation conveying the COCA’s action, and a copy of the final site visit team
report to the president or equivalent chief executive of the institution, with a copy to the dean of the
COM. The Letter of Accreditation includes the COCA’s accreditation action regarding the COM, the
COCA’s findings regarding the program’s compliance with accreditation standards, performance related
to accreditation elements, and any required follow-up. The Letter of Accreditation and final team
report are held confidential by the COCA, but may be disclosed by the COM at its discretion.

To External Groups and the Public

The COCA will notify the Secretary of USDE, the relevant state medical licensing boards, the relevant
regional (institutional) accreditation body(ies), and the public of actions affecting accreditation status
taken at a COCA meeting within 30 days of the meeting, including the decision to award initial
accreditation or to renew a COM’s accreditation status.

For actions subject to reconsideration (e.g., probation, etc.) or appeal (e.g., denial of accreditation,
withdrawal of accreditation, etc.), the COCA will notify Secretary of USDE, the relevant state medical licensing boards, and the relevant regional (institutional) accrediting body(ies) of the final action at the same time as when the COM is notified, but no later than 30 days after the decision is made final. Such decisions will be conveyed to the public by posting of the accreditation action on the COCA website within 24 hours of the notification to the COM.

In decisions to deny or withdraw accreditation, the COCA will provide the Secretary of Education, the relevant state medical licensing board, the relevant regional (institutional) accrediting body, and the public with a summary of the facts of its review no later than 60 days after the decision is made final, along with any comments made by the program or the statement that the program has been offered the opportunity to make comments. The COCA website also will reflect the program has been offered the opportunity to provide comments.

If an accredited program withdraws its accreditation status voluntarily or otherwise allows its accreditation status to lapse, the COCA staff will inform the Department of Education and the relevant regional accrediting body and state licensing agency within 30 days of the date of withdrawal or lapse.

The accreditation information posted on the COCA’s web site made available to the general public includes the current accreditation status of an accredited program and the date and type of its next accreditation survey, if it has been set, but does not include site visit team reports, correspondence with or documentation submitted by a program in connection with its accreditation status, nor the basis for COCA’s actions regarding a program’s accreditation status.

If a school makes a public disclosure of its accreditation status, the COM must disclose the status accurately. Any incorrect or misleading statements made by a COM about accreditation actions or accreditation status must immediately be corrected. Failure to make timely correction or clarification may result in reconsideration of the COM’s accreditation status. The public information also must include contact information for the COCA so that the information can be verified.

Research

The Department of Accreditation staff may conduct research based on confidential information in a de-identified form contained in annual reports, self-study documents, and site visit reports. The source documents used for such research may not be shared or made available to other individuals or organizations. Data obtained from the annual reports may be shared or made available to other individuals or organizations to the extent that confidentiality requirements and data-sharing agreements of the American Osteopathic Association, as the sponsoring organization, permits.

Revision of this Policy and Procedure Manual

At the discretion of the COCA and by majority vote, the COCA may modify the application of these Policies and Procedures.

Third-Party Comment

The COCA provides opportunity for third-party comment related to a COM undergoing review for candidacy status, preliminary accreditation, or full accreditation. The COCA will also provide
opportunity for third-party comment on requests for substantive change or requests to enter into a teach-out agreement. The COCA includes on its website the academic year in which such review will occur, along with the process by which third-party comment may be submitted. Comments must be focused on potential areas of noncompliance with accreditation standards/elements or other related matters that could impact the school’s ability to provide a quality program.

Third party comment must be submitted at least thirty (30) days prior to the COCA meeting using the online third-party comment form. Employees and students of the COM under consideration may not submit third-party comment. While the comment form must identify the commenter, the COCA will maintain the identity of the individual in a confidential manner. The COM will be notified of the third-party comment so that it can have an opportunity to comment. Notice of an opportunity to submit third party comment will be provided with announcements of the COCA meeting on the COCA website at www.aoacoca.org.

Willful Deception

The provision of false or misleading information or the failure to provide material information may affect accreditation status. If the COCA determines that a program knowingly has supplied false or misleading information or has failed to supply relevant material information to the COCA or to a site visit team or on any required report, the COCA will reconsider the program’s accreditation status and term, and determine any appropriate follow-up action, which may include a change in the COM’s accreditation status or term. Similar action may be taken if a COM knowingly takes actions that result in misleading information being provided to the COCA or site visit teams, makes misleading or incorrect public statements or disclosures regarding its accreditation status, or fails to notify interested parties of an adverse accreditation action.

ACCREDITATION PROCESS

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 (Applicant Status Form) submitted by the Chief Executive Officer of the applicant COM.

Candidate Status (previously known as COCA Pre-Accreditation)

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 COMs that demonstrate the planning and resources necessary to be expected to be able to proceed to Pre-Accreditation status within two years.

Candidate Status Self-Study and Feasibility Study Evaluation

Upon receipt of a completed Candidate Status Self-Study and Feasibility Study, the documents will be reviewed by the COCA Executive Committee (COCA-EC) to determine whether the materials are technically complete. A Feasibility Study is technically complete if, in the event a site visit were to be
authorized, a site visit team could reasonably expect to find evidence on-site to corroborate the contents of the Feasibility Study and to assess the proposed COM's compliance with the standards and procedures required to achieve Candidate Status. The COCA-EC will review the Feasibility Study within sixty (60) days of receipt of the materials followed by the Accreditation staff's review and analysis.

In the review of the materials, the COCA-EC may determine that one or more elements are not technically complete and may request additional information before authorizing a site visit. The COCA-EC reserves the right to review this information either by (a) teleconference, or (b) vote by electronic mail.

Upon determination by the COCA-EC that the documents are acceptable and appear to be compliant, the on-site visit will be scheduled by the staff. The initial visit for Candidate Status will occur within 60 to 90 days after notifying the applicant COM.

**Candidate On-Site Visit**

The Candidate Status on-site visit will be conducted to ensure the accuracy of the Candidate Status Self-Study and to assess the Standards and Elements of Candidate Status.

The application, which includes the Feasibility Study, COCA-EC review of the documents (including materials requested to establish technical completeness), and the on-site visit report, will be transmitted to the COCA for action whether to grant Candidate status. This review will occur at the next regularly scheduled meeting of the COCA.

**Candidate Status Accreditation Decisions**

Upon receipt of the application for Candidate Status from COMs with Applicant Status, the COCA will either:

- Approve the request if the requirements for Candidate status are exceeded or met;
- Defer the request if the COCA finds that there are a limited number of requirements for Candidate Status that are not met, and the COCA believes that the applicant may be expected to meet the requirements for Candidate Status at the next meeting of the COCA;
- Deny the request if the COM fails to meet the requirements for Candidate status or fails to make proper application. In an adverse decision, the COCA will specify which requirements were not met.

**Activities Prohibited During Candidate Status**

A COM having a Candidate status may not recruit, accept applications from, or admit, prospective students. A COM having a Candidate status may not do any of the following:

a. Recruit students in any manner, including by solicitation;
b. Solicit or collect application fees;

c. Collect application information, including academic transcripts, Medical College Admissions Test (MCAT) scores, and letters of recommendations;

d. Initiate the admission review process;

e. Schedule interviews for any potential applicants;

f. Offer advice on financial aid; or

g. Issue letters of admission into the COM.

Review of Candidate Status

The COCA will review a COM's Candidate Status annually through written reports submitted by the COM until the COM achieves Pre-Accreditation Status. If the COM has not been able to proceed to Pre-Accreditation Status within 24 months of achieving Candidate Status, the COCA will withdraw the COM's Candidate Status. In the event a COM's Candidate Status is withdrawn, and the COM desires to achieve that status again, the COM must file a new application along with a new Candidate Status Self Study and application fee.

Pre-Accreditation Status (Previously Known as Provisional Accreditation)

Pre-Accreditation status may be granted to COMs that have achieved Candidate Status and meet the standards of Pre-Accreditation. A Candidate COM must submit a Pre-Accreditation Self-Study to demonstrate that it meets the standards for Pre-Accreditation status.

Timetable to Achieve Pre-Accreditation

The Pre-Accreditation Self-Study may be submitted as soon as Candidate Status is granted and the Escrowed Teach-out and Operating Reserve Accounts are funded. However, the Pre-Accreditation Self-Study must be submitted at least 18 months prior to the intended opening date of the COM. This schedule will permit the orderly progression for the COM to begin its inaugural class.

Pre-Accreditation On-Site Visit

The Pre-Accreditation on-site visit will be conducted to ensure the accuracy of the Pre-Accreditation Self-Study. This on-site visit will occur within 60 to 90 days of receipt of the Pre-Accreditation Self-Study.

Following receipt of the visiting team’s report, the request for the Pre-Accreditation Status will be considered by the COCA at its next regularly scheduled meeting.

Pre-Accreditation Status Accreditation Decisions

Upon the application for Pre-Accreditation Status from COMs with Candidate Status, the COCA will
either:

- Approve the request if the accreditation standards are met or exceeded;

- Defer the request until the next meeting if the COCA finds that there are a limited number of requirements for Pre-Accreditation not met, and the COCA believes that the applicant may be expected to meet the requirements for Pre-Accreditation status at the next meeting of the COCA;

- Deny the request, cite the accreditation standards that have not been met by the COM, and continue Candidate Status if the COM fails to meet the standards for Pre-Accreditation, but has not exceeded the maximum term of the Candidate Status; or

- Deny the request, cite the accreditation standards that have not been met by the COM, and withdraw recognition if the COM fails to meet the accreditation standards and has exceeded the maximum term of the Candidate Status.

Activities Allowed During Pre-Accreditation

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 COM has received “Accreditation” from the COCA.

Pursuant to 34 CFR §602.16(a)(2), a COM may not hold Pre-Accreditation Status for more than five years. Pre-Accreditation Status will be awarded to become effective no earlier than July 1 of the calendar year prior to the matriculation of the first class of students. If the COCA makes a decision to award Pre-Accreditation Status at a meeting that occurs prior to the effective date specified above, the Candidate Status will remain until the effective date of Pre-Accreditation Status. During this interim period, the COM's Candidate Status will be stated as: “Candidate Status with permission to recruit, but not to admit students or offer instruction.”

Review of Pre-Accreditation Status

Pre-Accreditation Status will be reviewed annually via submitted written reports until the COM achieves Accreditation. An on-site visit will occur during the first year of class offerings.

Upon review for renewal of Pre-Accreditation status, the COCA will either:

- Approve the request for a renewal period of one year if the accreditation standards are clearly being exceeded or met; or

- Deny the request and deny Pre-Accreditation status citing the accreditation standards that have not been met by the COM. Such termination will be published within 30 days of final action.

If the COM has not been able to proceed to Accreditation status within five years of the granting of
Pre-Accreditation Status, the Pre-Accreditation Status will be withdrawn. The teach-out agreement will then be implemented.

**Timetable to Achieve Accreditation**

COMs holding Pre-Accreditation status will undergo a Comprehensive Accreditation visit to be scheduled prior to March 31 of the second year of education. Pre-Accreditation status will expire following the COCA’s grant of Accreditation status to the COM.

Upon the initial review for accreditation status, the COCA will either:

- Award Accreditation if the accreditation standards are exceeded or met. The date of accreditation will be established as the first business day following the COCA meeting at which the decision is made; or

- Terminate Pre-Accreditation Status if the accreditation standards are not met. Such termination will be published within 30 days of final action.

**Accreditation Status**

Accreditation status is the highest level of accreditation awarded, and confers all rights and privileges of accreditation. An educational program leading to the DO degree, once accredited, remains accredited until the program voluntarily terminates its accreditation status or the COCA terminates the program’s accreditation through a formal accreditation action. Renewal of accreditation is subject to an on-site visit.

The COCA may grant the COM one of the following types of accreditation.

- **Accreditation with Exceptional Outcome:** This status indicates that a COM is compliant with all standards and meets all elements. For schools with this status, accreditation will be granted for ten years.

- **Accreditation:** This status indicates that a COM is compliant with all standards. However, there may be unmet elements that must be addressed through progress reporting. For COMs with this status, accreditation will be granted for seven years.

- **Accreditation with Heightened Monitoring:** This status indicates that a COM is compliant with all but three or fewer standards and ongoing monitoring will occur via progress reporting. For schools with this status, accreditation will be granted for four years.

- **Accreditation with Warning:** This status indicates that a COM is complaint with all but five or fewer standards and ongoing monitoring will occur via progress reporting. For schools with this status, accreditation will be granted for two years.

- **Accreditation with Probation:** This status indicates a COM is not compliant with more than five standards. For COMs with this status, the accreditation will be granted for no more than one year.
Withdrawal of Accreditation: This status indicates that the quality of a COM's educational program is compromised and the school was unable to come into compliance with all standards within the allotted timeframe.

While a COM's failure to comply with the Standards is the typical reason for any reduction of status of accreditation, the COCA may order a COM to show cause why its accreditation status should not be reduced or withdrawn following a COM failure to comply with any Standard or Element, Policies and Procedures, or directive of the COCA.

Accreditation

Accreditation is granted when the COM meets the accreditation standards or has a sound overall educational program, despite a limited number of accreditation standards that are out of compliance. The COCA will specify the standard(s) and element(s) that are not met. The COM must provide documentation of compliance with the standards, including all elements, within 24 months or sooner as determined by the COCA. The COCA will specify procedures for monitoring compliance, which may include an on-site visit within two years.

All COMs, regardless of accreditation status, must bring all Standards and Elements into compliance within 24 months of the initial award of the status. If a COM should have its accreditation status reduced (e.g., Accreditation to Accreditation with Probation, etc.), any then existing unmet standard or element must still be met within the initial period of the award of the status. Failure to comply with the standards and elements as directed by the COCA during the 24 month period may result in withdrawal of accreditation.

Accreditation with Warning

Accreditation with Warning is granted when the COM is found to be non-compliant with more than three but no more than five standards and the COM exhibits weaknesses that threaten the quality of the total program. The COCA will specify the accreditation standard(s) not being met and specify the procedures for monitoring compliance. Accreditation with warning status, once final, is public and the COCA will notify all interested parties, including the USDE. The COCA and COM will publicly describe the COM's status as "accreditation with warning."

The COCA may elect to extend this period for the following good causes:

- Change in Chief Executive Officer;
- Change in Chief Academic Officer;
- Demonstration of progress on a plan whose fulfillment would require an extension in time; or
- Other substantive financial or administrative changes, which affect the operation of the COM.

Failure to bring all Standards and Elements into compliance within 24 months may result in a withdrawal of accreditation. At any time during the period a COM has accreditation with warning
status, the COCA may require that COM to show cause why accreditation should not be withdrawn. The COCA will state, in writing, its reasons for taking this action. The COM will have 30 days in which to respond. The COCA will take action upon the COM’s response within 30 days after its receipt.

**Accreditation with Probation**

Accreditation with Probation is granted when a COM is non-compliant with more than five standards or the COM is found to exhibit serious weaknesses in meeting the accreditation standards such that the quality of the total program is in jeopardy. The COCA will specify the accreditation standard(s) that are not met and will specify the procedures for monitoring compliance. Accreditation with Probation status is public and the COCA will notify all interested parties, including the USDE. The COCA and COM will publicly describe the COM's status as "accreditation with probation."

The COCA may elect to extend this period for the following good causes:

- Change in Chief Executive Officer;
- Change in Chief Academic Officer;
- Demonstration of progress on a plan whose fulfillment would require an extension in time; or
- Other substantive financial or administrative changes, which affect the operation of the COM.

The COCA will determine the extension period, but the extension must not exceed 12 months. Failure to bring Standards into compliance within 12 months and the Elements into compliance within 24 months may result in withdrawal of accreditation.

**Teach-Out Plan**

A teach-out plan is a written plan developed by an institution that provides for the equitable treatment of a COM's students, if that COM ceases to offer its educational program before all students enrolled in that program complete their program of study. A COM placed on Accreditation with Probation must submit a written teach-out plan to the COCA within 90 days of receipt of an Accreditation with Probation decision. The plan must specify what additional charges, if any, will need to be paid by the students, and must further notify the students of those charges. The plan must also contain a signed agreement with one or more COMs to accept the students to teach-out the students at the COM under probation, if needed.

At any time during the period a COM has Accreditation with Probation status, the COCA may require that COM to show cause why accreditation should not be denied or withdrawn. The COCA will state, in writing, its reasons for taking this action. The COM will have 30 days in which to respond. The COCA will take action upon the COM's response within thirty 30 days after its receipt.

**Monitoring of Accredited Programs**

**Annual Data and Mid-Cycle Update Report**
The principal purpose of the Annual Data and Mid-Cycle Update Report review will be to determine whether there is credible information to cause the COCA to further investigate whether a COM remains in compliance with the standards and elements. Such investigation may consist of any one or more of the following:

- Request for additional written information;
- Request to show cause as to why a COM is not in violation of a standard(s);
- Request for COM representatives to appear before the COCA;
- Focused visitation as directed; or
- Reduction in approved class size as directed by the COCA.

Failure to submit the Annual Report by the due date may jeopardize the COM’s accreditation status.

**Progress Report**

A Progress Report may be requested when Standard(s) or Element(s) are determined not to be met. The Progress Report must be submitted via the electronic accreditation system by the due date listed in the Site Visit Report. The COCA will review progress reports at the next regularly scheduled meeting of the commission and determine one of the following:

- The Requirements will be determined to be met; or
- The Requirements will be determined to be “not met”. The COCA will document any recommendations for further Progress Reports. The COCA may also determine if an on-site Focused Visitation be conducted in lieu of another Progress Report.

**Interim Progress Review**

An Interim Progress Review is utilized to examine a COM’s response to the findings of a previous on-site visit in which requirements for compliance with the accreditation standards and elements were stated.

**Self-Study**

The primary purpose of the self-assessment activity and culminating self-study report is to enable COMs to devise a system for self-appraisal and improvement consistent with both the COM’s mission and the COCA’s standards and procedures. Self-appraisal involves a collaborative process with all areas of the COM to identify the strengths and weaknesses within the COM. The COM can then use the self-assessment process and its results as tools for continuous, on-going assessment and improvement.

The COM’s self-study must be submitted via the COCA electronic accreditation system at least 90 days
prior to the scheduled on-site visit. Access to the self-study in the electronic accreditation system is granted by the COCA accreditation staff; the staff may be contacted via email to predoc@osteopathic.org.

Site Visit

The evaluation process for COMs which are fully accredited or in the process of seeking accreditation includes the completion of a self-study, on-site evaluation by a team of site reviewers, and a COCA review of the self-study and site visit report. For programs in one of the continuing accreditation statuses, the COCA accreditation staff will contact the institution approximately 12 months prior to the anticipated date of a routine accreditation visit to establish specific dates for the on-site review.

Two to three days on-site are typically required for the completion of a comprehensive on-site visit.

COCA staff considers a number of criteria in selecting team members, including area of expertise, availability, geographical location, conflict of interest, and level of experience. Team members are multi-faceted individuals who have broad knowledge and experience in higher education, including COM administration, with expertise in one or more of the following areas identified by the United States Department of Education:

- Administration
- Education
- Academics
- Osteopathic Medical Practice

A site visit team may also include a site visit evaluator trainee and/or an observer when appropriate. Observers may, upon formal request and approval by the COCA chair accompany, on-site visit teams. Each observer must not be in violation of the conflict of interest standards as adopted by the COCA. Observers from the USDE, and the Council for Higher Education Accreditation, and those who represent Federal or State agencies or organizations, which may have a legitimate accreditation responsibility, may also accompany on-site visit teams. Costs incurred by this observer will be paid by the observer’s organization.

If the COCA directs an on-site visit and the COM refuses to permit the visit to occur, the COCA will reduce the COM’s status to Accreditation with Probation. If the COM already has a status of Accreditation with Probation, the COCA will withdraw accreditation for reasons of non-compliance with the policies and procedures of accreditation.

Focused On-Site Visit

A focused on-site visit may be required by the COCA on the basis of problems noted in an accreditation report, complaint, progress report, or site visit which have been determined not to have been adequately addressed. A focused on-site visit may also be required when deemed necessary by the COCA.

A focused on-site visit will typically require one to two days on-site and will focus on specific standards and elements as determined by the COCA. However, if during the conduct of a focused on-site visit,
the team identifies critical information pertinent to other standards and elements, the team may document these observations in the site visit report. These observations may then by addressed by the COCA for further review.

If the COCA directs an on-site visit and the COM refuses to permit the visit to occur, the COCA will reduce the COM’s status to Accreditation with Probation. If the COM already has a status of Accreditation with Probation, the COCA will withdraw accreditation for reasons of non-compliance with the policies and procedures of accreditation.

Notifications to the COCA

A COM must notify the COCA within five business days of any change in the following:

1. Dean and Chief Academic Officer;
2. Decrease in resources available to the COM for its medical education program, including faculty, physical facilities, or finances; or
3. Anticipated change in affiliation agreements affecting ten percent or more of the clinical education rotations.

ACCREDITATION FEES

COCA Accreditation Fees are set by the Board of Trustees of the American Osteopathic Association upon recommendation from the COCA and accreditation staff. The following fees have been approved effective July 1, 2017. Application fees are due upon submission of an application for accreditation. Annual fees are billed to each COM in December.

<table>
<thead>
<tr>
<th>Description</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notice of Intent to File Application</td>
<td>$6,000</td>
</tr>
<tr>
<td>Application fee for a new College of Osteopathic Medicine (each stage)</td>
<td>$36,000</td>
</tr>
<tr>
<td>Additional location application fee</td>
<td>$36,000</td>
</tr>
<tr>
<td>Branch campus application fee</td>
<td>$36,000</td>
</tr>
<tr>
<td>Candidate fee, to be charged each year a new College of Osteopathic Medicine holds Candidate status</td>
<td>$26,000</td>
</tr>
<tr>
<td>Pre-Accreditation fee, to be charged each time a College of Osteopathic Medicine holds Pre-Accreditation status</td>
<td>$46,000</td>
</tr>
<tr>
<td>Accreditation fee, to be charged each fully accredited College of Osteopathic Medicine and each Branch campus and/or Additional Location annually</td>
<td>$36,000</td>
</tr>
</tbody>
</table>

The direct cost of all on-site accreditation visits is charged to each COM. The program being evaluated is responsible for transporting the site visit team to and from the team’s hotel, for arranging for site
visit team meals during the day, and for arranging and funding any transportation to affiliated hospitals and to regional campuses.

RECORDS FOR COCA DECISION MAKING

Comprehensive Reviews with Self-Study

The official COCA record for decision making on comprehensive review with a self-study consists of the following:

1. Self-Study Document and Supplemental Documents as submitted by the COM;
2. Student Survey;
3. Additional Needed Information Identified by the Staff or Site Visit Team;
4. Site Visit Report as submitted by the Site Visit Team Chair;
5. Historical Accreditation Decisions and Longitudinal Tracking of Non-Compliant Standards and Elements;
6. Factual Corrections and Supporting Documents as submitted by the COM;
7. Third Party Comment;
8. COCA Commissioner Review (completed by two reviewers); and
9. COCA Staff Review.

All commissioners will receive all of the foregoing documents for decision making about a COM’s accreditation status. No additional information will be accepted by the COCA, including verbal testimony at the commission meeting or additional documents submitted at the time of the COCA meeting.

Progress Reports and Compliance Monitoring

A COM must submit its progress reports no later than 60 days prior to the COCA meeting at which the progress report will be reviewed.

The official COCA record for decision making on a progress report consists of the following:

1. Progress Report and Supplemental Documents as submitted by the COM;
2. Historical Accreditation Decisions and Longitudinal Tracking of Non-Compliant Standards and Elements;
3. COCA Commissioner Review; and

4. COCA Staff Review.

All commissioners will receive all of the above documents for decision making about a COM's accreditation status. No additional information will be accepted by the COCA, including verbal testimony at the commission meeting or additional documents submitted at the time of the COCA meeting.

Requests for Substantive Change

The official COCA record for decision making on a request for substantive change consists of the following:

1. Self-Study Document and Supplemental Documents as submitted by the COM;

2. Site Visit Report, if applicable, as submitted by the Site Visit Team Chair;

3. Factual Corrections and Supporting Documents as submitted by the COM;

4. Third Party Comment;

5. COCA Commissioner Review (completed by two reviewers); and

6. COCA Staff Review.

All commissioners will receive all of the above documents for decision making about a COM's accreditation status. No additional information will be accepted by the COCA, including verbal testimony at the commission meeting or additional documents submitted at the time of the COCA meeting.

THE RECONSIDERATION AND APPEAL PROCESS

Reconsideration of a Decision

A COM may request for reconsideration of an adverse COCA accreditation decision or denial of a substantive change request. A request for reconsideration must be completed prior to filing an appeal.

A request for reconsideration may be filed by the COM's Chief Executive Officer or Chief Academic Officer within seven business days of receipt of the final action letter from the COCA. A request for reconsideration is limited to:

- Alleged bias, injustice or factual error of sufficient magnitude to warrant a reconsideration of the decision; or

- Significant departure from the standards of accreditation or established policies and procedures as defined in the document Accreditation of Colleges of Osteopathic Medicine.
A request for reconsideration should be submitted electronically to the Secretary of the COCA at predoc@osteopathic.org. The request should be accompanied by documentation including the reason for reconsideration and specific alleged issues. While a reconsideration action will not include new information, materials that were initially submitted and believed to have not been considered properly may be emphasized in the reconsideration request.

Reconsideration Review

The reconsideration review will occur by the COCA Executive Committee within 7 business days of receipt. This will be a review of the submitted documents, including request for reconsideration. There will be no verbal testimony from the COM at the time of reconsideration review.

COCA Reconsideration Decision

The decisions to be made by the COCA following a reconsideration hearing are as follows:

- Maintain the original action of the COCA; or
- Modify the original action of the COCA.

The COCA, through the Secretary, will issue a final decision in writing to the COM on its request for reconsideration within 7 business days of the review of the request for reconsideration.

Appeal of a COCA Accreditation Decision

The Chief Executive Officer or Chief Academic Officer of a COM may appeal a COCA decision within 14 days of receipt of the COCA’s final action on a request for reconsideration. A COM may not file an appeal unless it has first requested reconsideration of a COCA action. The COM’s then current accreditation status, if applicable, will be maintained throughout the appeal process. The basis of an appeal will be limited to whether the COCA's decision was based on substantial evidence, and if not, whether there was:

- Alleged bias, injustice or error of sufficient magnitude to warrant a change in the COCA's action; or
- A significant departure from the standards of accreditation or established policies and procedures as defined by the COCA.

An appeal is intended to serve as a review of the COCA decision and is not a de novo review. The COM appealing the COCA’s decision bears the burden to demonstrate that the decision of the COCA was in error and the decision of the COCA is not supported by substantial evidence.

Request for appeal must be accompanied by an appeal filing fee in the amount of $10,000, payable by check to the order of “AOA-COCA.”

Requests for appeal must be submitted electronically to the Secretary of the COCA at predoc@osteopathic.org. The request should be accompanied by documentation including the reason
for appeal and specific alleged issues. While an appeal action will not include new information, materials that were initially submitted and believed to have not been considered properly may be emphasized in the appeal request. If a request for appeal is not made, the decision of the COCA becomes final and is immediately published.

**COCA Appeal Panel Composition**

The COCA Appeal Panel consists of five members, including one public member. The appeal panel should consist of one academic, one educator, one administrator, and one practitioner, in addition to the public member. These members will be selected from a list of former COCA members who were not COCA members when the COCA made the adverse decision being appealed. The list of former COCA members eligible for participation in the COM Appeal Panel will be reviewed and approved annually by the COCA. The COCA Appeal Panel is subject to the COCA’s Conflict of Interest Policy.

**COCA Appeal Panel Hearing**

Within 45 business days after receipt of the appeal, the COCA Appeal Panel will convene an appeal hearing, unless the COM agrees to a different timeline. The COM will be notified once the hearing date is established. The Appeal Panel considers the COM’s basis for appeal and any written documentation submitted in support of the appeal.

The COM may be represented by counsel if desired. The COCA will be represented by legal counsel for all appeals.

The appeal record will consist of the following:

1. Self-Study Document and Supplemental Documents as submitted by the COM;
2. Site Visit Report as submitted by the Site Visit Team Chair;
3. Historical Accreditation Decisions and Longitudinal Tracking of Non-Compliant Standards and Elements;
4. Factual Corrections and Supporting Documents as submitted by the COM;
5. Third Party Comment;
6. COCA Final Action Letter;
7. Reconsideration Request;
8. Final Reconsideration Action Letter; and
9. Request for Appeal.

A quorum (simple majority) of the Appeal Panel must be present for a hearing. A quorum must include a public member.

Hearings may be held in person or via videoconference technology.
The Appeal Panel Chair shall serve as the presiding member of the Appeal Panel. The duties of the Presiding Member are:

1. Make the opening statement for the Appeal Panel;
2. Direct the course of the appeal hearing; and
3. Close the hearing.

Preliminary matters such as concerns about adequacy of the record must be handled in writing at least 14 business days prior to the appeal hearing.

The appellant COM will have 15 minutes to present its position. The COCA may offer up to 15 minutes of rebuttal to the COM presentation. The COM will then have 5 minutes to respond to the COCA rebuttal. Following presentation by the appellant COM and the COCA, the Appeal Panel may question both parties. After the presentations, the Appeal Panel will deliberate in executive session and reach a decision.

**COCA Appeal Panel Decisions**

The Appeal Panel will take final action on the appeal and provide a written decision, including a statement of the reasons for the decision, to the COCA and the COM. The Appeal Panel shall issue its decision in writing within 30 business days of the appeal hearing.

The decision of the COCA Appeal Panel shall be final and binding.

The Appeal Panel may take one of the following actions:

- Affirm the original action of the COCA;
- Reverse the original action of the COCA; or
- Remand the matter to the COCA for further consideration, with specific issues to be addressed by the COCA only upon a finding of bias, injustice, error or significant departure from the standards and procedures.

A decision to affirm or reverse adverse action is implemented by the COCA upon notification by the Appeal Panel. In a decision to remand the matter to the COCA for further consideration, the Appeal Panel must identify specific issues that the COCA must address. In a decision that is implemented by, or remanded to, the COCA, the COCA must act in a manner consistent with the Appeal Panel’s decisions or instructions.

If the appeal is an appeal of a COCA decision denying accreditation, and after the exhaustion of all administrative remedies, and in the event the Appeal Panel affirms the COCA’s decision, the COM may seek reinstatement of accreditation by complying with the requirements for Candidacy Status.
COMMISSION ON OSTEOPATHIC COLLEGE ACCREDITATION COMPLAINT REVIEW PROCEDURES

This complaint review procedure is established to protect the integrity and the maintenance of accreditation standards and procedures as they relate to COMs accredited by the COCA. The following complaint procedures provide a mechanism for concerned individuals or organizations to bring to the COCA's attention information concerning specific actions and programs, which may be in non-compliance with the COCA's accreditation standards. The COCA recognizes its responsibility to provide complainants the opportunity to utilize the COCA as a vehicle to deal with specific grievances as well as being a mechanism for reviewing and finally resolving complaints against the COCA or the administrative staff.

Complaints may be filed by any individual or group including, but not limited to, the following:

- An osteopathic medical student;
- An individual, organization, or institution affected by the accreditation program academically or professionally; and
- A member of the general public.

Complaint Submission about a COM

The complaint must be in writing and signed by the complainant. All signed complaints must be submitted to the Secretary, COCA; American Osteopathic Association; 142 E. Ontario St.; Chicago, IL 60611 or via email to predoc@osteopathic.org. Complaints that are received that are not signed by the complainant(s) or are submitted anonymously will not be processed. Note: While a complaint must be signed by the complainant, the COCA does not disclose the identity of the complainant to any other third party.

A complaint must contain facts that support an allegation that violation(s) of accreditation standards or procedures has/have occurred. The facts upon which any allegation is made must: 1) be based upon direct and responsible information; 2) provide a narrative of the allegations, as they relate to the accreditation standards or procedures; and 3) include any documentation that supports the allegations. A complaint must clearly identify the standards that the complainant alleges to have been violated.

The complainant must provide evidence that an effort has been made to resolve the problem through the recommended route through COM administration, and must include information about all other actions initiated to resolve the problems before the complaint has been filed with the COCA.

Within ten (10) business days of receipt of a signed complaint, copies of the complaint will be sent to the COM's Chief Executive Officer or Chief Academic Officer for response to the complaint. The COM's Chief Executive Officer or Chief Academic Officer will have fifteen (15) business days to respond. The complaint and the COM's response will be reviewed by the COCA Executive Committee to determine whether the complaint merits further investigation.

Complaint Investigation

In the event the COCA Executive Committee determines that further investigation is warranted, the
COCA Secretary, in conjunction with AOA general counsel, will initiate a formal review within thirty (30) days from the decision to initiate an investigation. The COCA Executive Committee will determine the method and mode of investigation, which may include an on-site visit.

Following the investigation, the COCA Executive Committee’s findings will be forwarded to the COCA. Based upon these findings, the COCA may take either of the following actions:

- Dismiss the complaint and report that the COM is in compliance with the accreditation standards; or
- Notify the COM in question that, on the basis of an investigation, the COCA has determined that the COM is failing to meet the accreditation standards.

If the COM has been found to be out of compliance with any accreditation standard, the COCA may determine any one or more of the following methods of review:

- A report outlining the COM’s plans to address the deficiencies outlined by the COCA; and/or
- A Progress Report documenting the COM’s planning and its implementation of the plans; or
- An on-site visit may be recommended to determine whether a change in the accreditation status of the COM is warranted.

These procedures should be completed and the COM notified within fifteen (15) days of the COCA decision. Any such accreditation decision or action of the COCA will be subject to the reconsideration and appeal procedures set forth in these procedures.

The COCA Executive Committee’s findings will be forwarded to the COCA. Based upon these findings, the COCA may take either of the following actions.

- Dismiss the complaint and report that the COM is in compliance with the accreditation standards; or
- Notify the COM in question that, on the basis of an investigation, the COCA has determined that the COM is failing to meet the accreditation standards.

If the COM has been found to be out of compliance with the accreditation standards, the COCA may determine any one or more of the following methods of review:

- A report outlining the COM’s plans to address the deficiencies outlined by the COCA;
- A Progress Report documenting the COM’s planning and its implementation of the plans; or
- An on-site visit may be recommended to determine whether a change in the accreditation status of the COM is warranted.

These procedures should be completed and the COM notified within fifteen (15) days of the COCA decision. Any such accreditation decision or action of the COCA will be subject to the reconsideration and appeal procedures set forth in these procedures.
Investigation and Resolution of a Complaint Against the COCA or Administrative Staff

The complaint must be in writing and signed by the complainant. All signed complaints must be submitted to the Secretary, COCA; American Osteopathic Association; 142 E. Ontario St.; Chicago, IL 60611, or via email to predoc@osteopathic.org.

The COCA Secretary will present the complaint, in conjunction with AOA corporate counsel, to the COCA chair, vice-chair, and, when applicable, to affected staff members. A subcommittee of the COCA will be appointed by the COCA chair to formally review the complaint and develop a response to the complaint. This subcommittee review process and response will be completed and forwarded to the COCA within thirty (30) days of the date the subcommittee is convened.

The COCA will consider the complaint and the response at its next regularly scheduled meeting. The complainant will be invited to appear before the COCA to present respective views in order to attempt an agreed resolution. The final action of the COCA will be communicated to the complainant within fifteen (15) business days of the COCA decision.

Approved: 8/29/2016
Revised: 12/19/2017

SUBSTANTIVE CHANGE SUBMISSION DETAILS

If a COM wishes to implement a substantive change, the COM must receive prior approval from the COCA 120 days before the implementation of the substantive change. Please also refer to the document Accreditation of Colleges of Osteopathic Medicine: COCA Substantive Change Policies and Procedures for additional information.

Additional Location (Further information may be found in the COCA Substantive Change Policies and Procedures located at http://www.osteopathic.org/inside-aoa/accreditation/COM-accreditation/Documents/coca-substantive-change-processes.pdf)

An Additional Location is geographically apart from the main campus and offers at least 50 percent of an educational program. The Additional Location will not have separate administration, faculty, or budgetary independence. The additional location must have a common Chief Academic Officer, faculty, budget, and curriculum with the parent COM. Students may be admitted directly to the Additional Location as their primary place of enrollment.

The accreditation for an additional location is under the parent COM and is extended to the additional location following review of documents and completion of a site visit prior to the time permission to enroll students is granted. Reporting to the COCA will occur as a combined cohort for all sites as a singular COM. Each cohort should include the students in that graduating year across all sites.

Application/Self Study

1. Feasibility Study (Business Plan) that is completed by an external business consulting group;
2. Additional Location Substantive Change Self-Study

3. Approval from the Institutional Accréditor and all State Licenses to Operate/ Offer the Degree at the Additional Location site;

4. Submit the Application Fee;

5. Site Visit: A pre-operations site visit will be completed to assess the adequacy of the application.

The Self Study should address the following:

1. Cover Letter with campus name, campus location, class size requested, and anticipated start date;

2. Introduction to the COM – include history and mission;

3. Need for a campus in this location – include healthcare/workforce needs in the region; and

4. Discuss Compliance with the Following Standards:
   a. Candidate Element 1.2: Licensing and Regional/Institutional Accreditation;
   b. Candidate Element 2.3: Academic and Administrative Leadership;
   c. Candidate Element 3.1: Financial Resources (include both operating budget and capital budget discussion);
   d. Candidate Element 3.2: Feasibility Study (Business Plan);
   e. Candidate Element 4.1: Facilities;
   f. Candidate Element 4.2: Information Technology;
   g. Candidate Element 6.5: Clinical Affiliation Agreements;
   h. Candidate Element 7.1: Faculty and Staff Resources and Qualifications;
   i. Candidate Element 9.2: Recruitment of Students;
   j. Pre-Accreditation Element 3.4: Financial Audit;
   k. Pre-Accreditation Element 9.5: Academic Counseling;
   l. Pre-Accreditation Element 9.6: Career Counseling;
   m. Pre-Accreditation Element 9.7: Financial Aid and Debt Management Counseling;
   n. Pre-Accreditation Element 9.8: Mental Health Services;
   o. Pre-Accreditation Element 9.9: Physical Health Services; and

Any Standards or Elements not specifically identified are expected to be the same as those on the parent campus.

Monitoring
1. Year 1 Focused Site Visit, within six months after establishment of the Additional Location, to assess the Facilities, Faculty, Student Services, Finances, and Administrative Capacity to operate the Additional Location.

   a. Continuing accreditation elements that will be addressed:

      i. Element 3.1: Financial Resources;
      ii. Element 4.1: Facilities;
      iii. Element 6.9: Clinical Education;
      iv. Element 7.1: Faculty and Staff Resources and Qualifications;
      v. Element 9.5: Academic Counseling;
      vi. Element 9.6: Career Counseling;
      vii. Element 9.7: Financial Aid and Debt Management Counseling;
      viii. Element 9.8: Mental Health Services; and

   b. Adherence to the MOU with the hosting institution will also be evaluated.

2. Year 2 Progress Report to assess the readiness for clinical education

   a. Continuing Accreditation Elements That Will Be Addressed:

      i. Element 4.1: Facilities;
      ii. Element 5.4: Patient Care Supervision;
      iii. Element 6.9: Clinical Education;
      iv. Element 6.10: Clinical Experience; and
      v. Element 7.1: Faculty and Staff Resources and Qualifications.

Branch Campus - (Further information may be found in the COCA Substantive Change Policies and Procedures located at http://www.osteopathic.org/inside-aoa/accreditation/COM-accreditation/Documents/coca-substantive-change-processes.pdf)

A branch campus is a location that is geographically apart from the COM and is:

1. Permanent in nature;
2. Offers courses in educational programs leading to a DO degree;
3. Has its own faculty and administrative or supervisory organization; and
4. Has its own budgetary and hiring authority.

The accreditation for a branch campus is under the parent COM and is granted at the time permission to enroll students is granted. Reporting to the COCA will occur as separate campuses.

The COCA may serve as the programmatic or institutional accreditor for COMs wishing to request a
Branch Campus.

**Application/ Self Study**

1. Feasibility Study (Business Plan) that is completed by an external business consulting group;

2. Branch campus Substantive Change Self-Study

3. Approval from the Institutional Accreditor and all State Licenses to Operate/ Offer the Degree at the Branch Campus;

4. Submit the Application Fee;

5. Site Visit: A Pre-operations site visit will be completed to assess the adequacy of the application.

6. Escrow Fund: To ensure adequate funding, a proposed Branch campus must place both an Escrowed Reserve Fund and Operating Reserve Fund.

The Self-Study should address the following:

1. Cover Letter with campus name, campus location, class size requested, and anticipated start date;

2. Introduction to the COM – include history and mission;

3. Need for a campus in this location – include healthcare needs in the region;

4. Rationale for a Branch Campus versus Additional Location; and

5. Discuss compliance with the following Standards:

   a. Candidate Element 1.2: Licensing and Regional/ Institutional Accreditation;
   b. Candidate Element 2.1: Dean Qualifications;
   c. Candidate Element 2.2: Full Time Dean;
   d. Candidate Element 2.3: Academic and Administrative Leadership;
   e. Candidate Element 3.1: Financial Resources (include both operating budget and capital budget discussion);
   f. Candidate Element 3.2: Feasibility Study (Business Plan);
   g. Candidate Element 3.3: Escrowed Reserve Funds;
   h. Candidate Element 3.4: Operating Reserve Fund;
   i. Candidate Element 4.1: Facilities;
   j. Candidate Element 4.2: Information Technology;
k. Candidate Element 6.5: Clinical Affiliation Agreements;
l. Candidate Element 7.1: Faculty and Staff Resources and Qualifications;
m. Candidate Element 9.2: Recruitment of Students;
n. Pre-Accreditation Element 3.3: Budgetary Authority;
o. Pre-Accreditation Element 3.4: Financial Audit;
p. Pre-Accreditation Element 4.2: Security and Public Safety;
q. Pre-Accreditation Element 4.4: Learning Resources;
r. Pre-Accreditation Element 6.1: Curriculum Design and Management;
s. Pre-Accreditation Element 6.2: Programmatic Level Educational Objectives;
t. Pre-Accreditation Element 6.5: Scientific Method;
u. Pre-Accreditation Element 6.6: Principles of Osteopathic Medicine;
v. Pre-Accreditation Element 6.7: Self-Directed Learning;
w. Pre-Accreditation Element 6.8: Interprofessional Education for Collaborative Practice;
x. Pre-Accreditation Element 6.9: Clinical Education;
y. Pre-Accreditation Element 6.10: Clinical Experience;
z. Pre-Accreditation Element 6.11: Comparability across Clinical Education Sites;
aa. Pre-Accreditation Element 7.3: Department Chair Qualifications;
bb. Pre-Accreditation Element 7.4: Primary Care Leadership;
cc. Pre-Accreditation Element 7.5: OMM/OPP Leadership;
dd. Pre-Accreditation Element 7.6: Faculty Development;
ee. Pre-Accreditation Element 7.7: Faculty Association;
ff. Pre-Accreditation Element 9.5: Academic Counseling;
gg. Pre-Accreditation Element 9.6: Career Counseling;
hh. Pre-Accreditation Element 9.7: Financial Aid and Debt Management Counseling;
i. Pre-Accreditation Element 9.8: Mental Health Services;
jj. Pre-Accreditation Element 9.9: Physical Health Services;
kk. Pre-Accreditation Element 10.1: GME Development; and
ll. Pre-Accreditation Element 11.1: Program Assessment.

Any Standards/Elements not specifically addressed are expected to be the same as those on the parent campus.

**Monitoring**

1. **Year 1 Focused Site Visit**, within six months after establishment of the Branch Campus, to assess the Facilities, Faculty, Student Services, Finances, Curriculum, and Administrative Capacity to operate the Branch Campus.

   a. **Continuing Accreditation Standards and Elements That Will Be Assessed: ALL**

   b. Adherence to the MOU with the hosting institution will also be evaluated.

2. **Year 2 Progress Report** to assess the readiness for clinical education

   a. **Continuing Accreditation Elements That Will Be Addressed: ALL**
i. Element 4.1: Facilities;
ii. Element 5.4: Patient Care Supervision;
iii. Element 6.9: Clinical Education;
iv. Element 6.10: Clinical Experience; and
v. Element 7.1: Faculty and Staff Resources and Qualifications.

Change in Legal Status or Form of Control

Monitoring

1. Element 1.2: Strategic Plan;

2. Element 1.3: Licensing and Regional/Institutional Accreditation;

3. Element 1.4: Governance & Program Policies;

4. Element 1.5a: Non-Discrimination;

5. Element 1.5b: Non-Discrimination for Faith Based Institutions;

6. Element 1.6: Degree Granting Body;

7. Element 3.1: Financial Resources;

8. Element 3.2: Financial Planning and Budgeting; and


Additional elements may be evaluated based on the need noted by the COCA.

Planned Class Size Increase

Monitoring

1. Year 1 Focused Site Visit to assess the Facilities, Faculty, Student Services, and Finances

   c. Continuing accreditation elements that will be assessed:

      i. Element 3.1: Financial Resources;
      ii. Element 4.1: Facilities;
      iii. Element 6.9: Clinical Education;
      iv. Element 7.1: Faculty and Staff Resources and Qualifications;
      v. Element 9.5: Academic Counseling;
      vi. Element 9.6: Career Counseling;
vii. Element 9.7: Financial Aid and Debt Management Counseling;
viii. Element 9.8: Mental Health Services; and

2. Year 2 Progress Report to assess the readiness for clinical education
   a. Continuing accreditation elements that will be addressed:
      i. Element 4.1: Facilities;
      ii. Element 5.4: Patient Care Supervision;
      iii. Element 6.9: Clinical Education;
      iv. Element 6.10: Clinical Experience;
      v. Element 7.1: Faculty and Staff Resources and Qualifications; and
      vi. Element 11.4: Student Survey.

3. A COCA Accreditation Student Survey must be completed as part of the Year 2 Reporting.

Unplanned Class Size Increase

Monitoring

1. Year 1 Focused Site Visit to assess the Facilities, Faculty, Student Services, and Finances
   a. Continuing accreditation elements that will be assessed:
      i. Element 3.1: Financial Resources;
      ii. Element 4.1: Facilities;
      iii. Element 6.9: Clinical Education;
      iv. Element 7.1: Faculty and Staff Resources and Qualifications;
      v. Element 9.5: Academic Counseling;
      vi. Element 9.6: Career Counseling;
      vii. Element 9.7: Financial Aid and Debt Management Counseling;
      viii. Element 9.8: Mental Health Services; and

2. Year 2 Progress Report to assess the readiness for clinical education
   a. Continuing Accreditation Elements That Will Be Addressed:
      i. Element 4.1: Facilities;
      ii. Element 5.4: Patient Care Supervision;
      iii. Element 6.9: Clinical Education;
      iv. Element 6.10: Clinical Experience;
      v. Element 7.1: Faculty and Staff Resources and Qualifications; and
vi. Element 11.4: Student Survey.

3. A COCA Accreditation Student Survey must be completed as part of the Year 2 Reporting.

TEACH OUT PLANS AND AGREEMENTS

Conditions That Require Approval of a Teach-out Plan

The COCA requires a COM for which it is the institutional accreditor and has granted pre-accreditation or accreditation to submit a teach-out plan to the COCA for approval upon the occurrence of any of the following events:

- The Secretary of Education notifies the COCA that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the Higher Education Act of 1965 (HEA), as amended, or an action to limit, suspend or terminate an institution participating in any title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA, and that a teach-out plan is required;

- The COCA acts to withdraw, terminate, or suspend the pre-accreditation or accreditation of the COM, including placement on Accreditation with Probation;

- The COM notifies the COCA that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program; or

- A state licensing or authorizing agency notifies the COCA that an institution’s license or legal authorization to provide an educational program has been or will be revoked.

Evaluation of a Teach-Out Plan

The COCA will evaluate the teach-out plan to ensure that it provides for equitable treatment of students under the criteria listed below for teach-out agreements. The plan must specify what additional charges, if any, will need to be paid by the students, and will provide notification to the students of those charges.

If the COCA approves a teach-out plan that includes a program that is also accredited by another recognized accrediting agency, then the COCA must notify that accrediting agency of the COCA’s approval of the teach-out plan. The COCA may require a COM to which it has granted Pre-Accreditation or Accreditation to enter into a teach-out agreement as part of its teach-out plan.

Evaluation of a Teach-out Agreement

The COCA will only approve teach-out agreements that are between COCA accredited COMs. A COM may enter into a teach-out agreement with another institution provided that:

1. The agreement is submitted to the COCA, at least 120 days prior to the beginning of transfer of students under the agreement, for its review and approval;
2. The agreement is consistent with the accreditation standards and procedures;

3. The agreement will provide that students will receive all of the instruction promised by the closed institution but not provided because of the closure;

4. The COCA will review the teach-out plan to ensure that it provides for equitable treatment of all students. In assessing whether the plan provides for such equitable treatment, the COCA will consider the following factors:

   - All correspondence to students regarding the closing of the COM will be given to all students at the same time;

   - All students from the closed program will be notified of all potential receiving COMs;

   - In general, such instruction will be provided without additional costs and tuition charges to the student. If the program determines that additional charges are needed, the plan will specify those charges and the basis for them and such additional charges will be directly related to the cost of instruction;

   - All students are specifically notified, in writing, of any additional costs and tuition charges for each of the potential receiving COMs; and

   - Any additional costs and tuition charges for a receiving COM will be the same for all students who transfer to that COM;

5. The recipient teach-out institution will demonstrate that it has the necessary experience, resources, and support services to provide an educational program that is of acceptable quality and is reasonably similar in its content, structure, and scheduling to that of the institution that is ceasing operations either entirely or at one of its locations;

6. The recipient teach-out institution will demonstrate that, during the period of the teach-out agreement, it will remain stable, carry out its mission, and meet all obligations to its existing students.

7. The closed institution will strive to provide for student placement in geographic proximity to the closed institution; and

8. The recipient institution COM(s), in order to take additional students from the closed institution, must request an increase in class size through the substantive change process.

Closed Institutions Without A Teach-Out Plan or Agreement

In the event that a COM having any accreditation status from the COCA closes without a teach-out plan or agreement, the COCA will collaborate with the USDE and the appropriate state agency(ies), to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.
REQUIREMENTS OF THE UNITED STATES DEPARTMENT OF EDUCATION

Activities by the COCA

The COCA will submit to the USDE the following:

- A summary of the COCA’s major accrediting activities during the previous year (an annual data summary), if requested by the Secretary;

- A decision by the COCA to expand its scope of recognition to include distance education or correspondence education as provided in section 496(a)(4)(B)(i)(I) of the HEA, which will become effective on the date the USDE receives the notification;

- The name of any COM that the COCA accredits that the COCA has reason to believe is failing to meet its Title IV, HEA program responsibilities, or is engaged in fraud or abuse, along with the COCA’s reasons for concern about the institution or program; and

- If the Secretary requests, information that may bear upon a provisionally accredited or accredited COM’s compliance with its Title IV or HEA program responsibilities, including the eligibility of the institution or program to participate in these programs.

Ordinarily, the COCA will copy the affected COM on any correspondence with the USDE as described in this section. The need for confidentiality of that contact, based upon the circumstances, will be considered on a case-by-case review. Upon request by the USDE, the COCA must consider that contact confidential.

Adverse Decisions

The COCA will provide written notification regarding its accreditation decisions to the Secretary of the USDE, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public at the same time as provided to the COM, and within 30 days after it makes either of the following decisions:

- Final decision of warning or probation or equivalent status of an institution or program; or

- Final decisions to deny, withdraw, suspend, revoke, or terminate the candidate status, pre-accreditation, or accreditation of an institution or program.

A brief statement summarizing the reasons for the agency’s decision, describing the evidence that the affected institution or program was given the opportunity to provide comments, and the comments, if any, that the affected institution or program may have made with regard to that decision will be provided to the Secretary of the USDE, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public, no later than 30 days after the final decisions.

Annual Information

The COCA will make available to the USDE, on an annual basis, a copy of the following:
• A copy of the COCA’s annual report to the AOA House of Delegates; and

• An updated copy of the directory of COMs having recognition status from the COCA.

Correspondence with the USDE

The COCA is required to provide the USDE with specific information as prescribed in 34 CFR 602.27.

Distance Education

The USDE gives accrediting agencies the authority to conduct accreditation of programs offered solely by distance education. The COCA accredits osteopathic medical schools. The COCA encourages all its accredited schools to be innovative and to use multiple methods of instruction to deliver their curriculum. The COCA, however, does not accredit stand-alone on-line medical school programs. The COCA believes that the science and art of osteopathic medicine must be gained by direct, in person interaction with instructors and clinical education supervisors. For this reason, the COCA will not accredit programs offered by distance education as defined at 34 CFR 602.3.

Noncompliance

Noncompliance with any accreditation standard must be corrected promptly. The COCA is bound by the regulations of the USDE to ensure that each area of non-compliance cited in a letter of accreditation has been brought into compliance within two years. If the COCA determines that a program is out of compliance with any standard or element, the USDE requires that the COCA must:

• Require the program to take appropriate action to bring itself into compliance with the standard within two years, or

• Immediately initiate an adverse action against the COM.

For purposes of meeting this regulatory requirement, the USDE defines an adverse action as denying or withdrawing the accreditation of a program. Probation is not considered an adverse action that would trigger the USDE requirement for the COCA to take the actions noted above.

Failure to achieve compliance within two years constitutes grounds for denial or withdrawal of accreditation unless the period for achieving compliance is extended, at the discretion of the COCA, for good cause shown.

Extensions for good cause are made in the COCA’s sole discretion according to the following criteria:

• The COM has demonstrated significant progress towards the resolution of its non-compliance issues (for example, a program addressing non-compliance with multiple standards has achieved compliance with the majority of those standards);
• The COM has provided written and compelling evidence describing its plans to come into compliance within the period of extension (for example, a COM has documented the commitment of financial and human resources to resolve all remaining non-compliance issues within the period of extension);

• The COM has provided written and compelling evidence that the nature of the change that must be made (such as facilities construction or renovation, fundraising for scholarships) reasonably requires a time period exceeding twenty-four months; or

• The COM has provided documentation of the need for actions by groups external to the medical education program (such as decisions by university or legislative bodies).

The COCA may, in its sole discretion, extend the period to permit a COM to achieve compliance for good cause up to 12 months beyond the standard two-year period within which to achieve compliance. In its communication with a COM, the COCA will specify the reason(s) that an extension for good cause has been granted and the period within which the medical education program must come into compliance with the cited standard(s).

**Proposed Changes in Standards and Procedures**

The COCA will notify the USDE of any proposed changes in its standards and procedures that might alter:

• Its scope of recognition, or

• Its compliance with the criteria for recognition by the Secretary.

**Responses to Actions of Other Oversight and Accrediting Bodies**

The COCA will not grant accreditation to, or continue the accreditation of, programs within institutions where a state chartering authority or a regional accrediting agency has made a decision to: 1) deny accreditation, pre-accreditation, or a charter to operate to the institution; or 2) suspend, revoke, withdraw, or terminate the institution’s accreditation or charter to operate.

The COCA will reconsider the accreditation status of a program when the institution offering the program has been placed on probation by a regional accrediting agency or state chartering authority. In the case of a probation decision, the COCA will determine whether to grant or continue accreditation based on a review to determine if the areas cited by the regional accreditation agency or state chartering authority as the reasons for the probation action represent noncompliance with one or more COCA accreditation standards.

If the COCA decides to grant or continue accreditation, it will provide to the Secretary of Education, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, of why the actions of the other agency to place the institution on probation do not preclude the granting of COCA accreditation.

**Title IV**
The COM and, where applicable, its parent institution will document performance of its students and graduates relative to Title IV default rates based on the most recent data provided by the Secretary of the USDE. The COM and, where applicable, its parent institution must document compliance with all necessary responsibilities under Title IV of the 1965 Higher Education Act as most recently amended, and the resulting regulations issued by the Secretary at 34 CFR Part 602, 34 CFR 667, and 34 CFR 668 and other enabling regulations.

USDE Notification of Initial and Continuing Accreditation Decisions

The COCA will provide written notification regarding its accreditation decisions to the Secretary of the USDE, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public within 30 days after the decision to:

- Award initial and continuing Candidate Status;
- Award initial and continuing Pre-Accreditation; and
- Award initial and continuing Accreditation.

Withdrawal or Lapses of Accreditation

The COCA will notify the Secretary of the USDE, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public within 30 days of receiving notification from the institution or program if it has decided to withdraw voluntarily from Candidate Status, Pre-Accreditation or Accreditation. The COCA will notify the Secretary of the USDE, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public within 30 days of the date on which accreditation or pre-accreditation lapses if the institution or program notifies the COCA that it will not request renewal of its pre-accreditation or accreditation status.