COCA Substantive Change Request: Branch Campus

Effective for reviews submitted on or after October 1, 2024

These policies were updated in July 2026 to reflect changes made to the *Accreditation of Colleges of Osteopathic Medicine: COM Continuing Accreditation Standards* referenced in this document. No changes were made to the substantive change policies.

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For general information regarding COCA substantive change policies and procedures, please refer to the *COCA Substantive Change Requests General Information* document.

Branch Campus

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

1. Is 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 curriculum at the branch campus may be the same or different as at the parent COM but the Dean and leadership at the branch campus is responsible for developing and managing the curriculum. The branch campus must have a Dean and leadership distinct and separate from the parent COM with no reporting structure to the Dean at the parent COM. The branch campus has a separate and distinct budget, and the Dean has full control and independent management of the budget.

The branch campus Dean must be hired at least 12 months prior to the submission of the branch campus substantive change request documents and will provide the principal guidance and direction in the development of the proposed branch campus through all steps of branch campus substantive change request process and beyond.

The accreditation for a branch campus is under the parent COM and is granted at the time permission to enroll students is granted. Annual and mid-cycle reporting to the COCA will occur as separate campuses. Future comprehensive site evaluations of the COM will include all campuses.

The COCA may serve as the programmatic or institutional accreditor for COMs requesting a Branch Campus.[1] As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.

As a component of the application for a branch campus, the COM must specify if the parent COM is requesting a class size increase or if students from the current approved class size will be re-located from an existing campus. A branch campus with a class size increase will be considered two substantive change requests.

A branch campus is required to accept and matriculate students in the following progressive enrollment:

Year 1 – no more than 50% of the approved class size;

Year 2 – no more than 75% of the approved class size; and

Years 3 and 4 – no more than 100% of the approved class size.

[1] COCA has limited authority for institutional accreditation. It is only recognized as an institutional accreditor for freestanding COMs that offer only the DO degree.

If a COM's request for a branch campus fails to progress forward in a satisfactory manner evidenced by outstanding unmet elements, the COCA reserves the right to adjust or revoke the progressive enrollment.

Escrowed Reserve Funds

A proposed branch campus must demonstrate the existence of a minimum segregated, unencumbered reserve fund escrowed until graduation of the first class of students from the branch campus and achieving accreditation equal to the highest tuition multiplied by the approved class size increase for the proposed branch campus multiplied by four years. Any future increase in tuition at the branch campus will require recalculation of the escrow amount and an increase in the amount of escrowed funds.

The escrowed reserve funds must: 1) not be borrowed or pledged funds; and 2) be funded by immediately available liquid assets that are wholly owned assets of the proposed branch campus or its parent institution. The governing body of the proposed branch campus may not withdraw any interest that accrues in the escrowed funds. The governing body of the proposed branch campus must replenish the escrow fund account in the event the value of the account decreases below the required minimum amounts stated above.

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

Operating Reserve Fund

A proposed branch campus must demonstrate the existence of a minimum operating reserve fund until graduation of the first class of students and equal to one-quarter (1/4) of the amount of the minimum segregated, unencumbered escrowed reserve fund as described above.

Notes on Reserve Funds

Reserve funds must: 1) not be borrowed or pledged funds; and 2) be funded by immediately available liquid assets that are wholly owned assets of the parent COM or its parent institution. The branch campus or its parent institution may not withdraw any interest that accrues in the account and must replenish the funds in the event the value of the account decreases below the required minimum amounts stated above. Any changes in the required escrow amount will result in a required change in the operational reserve fund calculation.

The branch campus will undergo a comprehensive evaluation in year 4 of operation. If all standards are met at that time, the escrow reserve and operating reserve accounts will be released upon graduation of the first class of students. If any standards are unmet, the branch campus will be monitored (via progress reports and focused visits, if deemed necessary by the COCA) until all standards are met. At the time all standards are met, the reserve funds will be released.

Timing

The request for a branch campus must be reviewed at a COCA meeting held at least 36 months prior to the planned matriculation of the first class of students. Application materials must be submitted at least 90 days prior to the COCA meeting where the substantive change will be reviewed. The application for a branch campus must be completed within 36 months. A sample timeline for the application of a branch campus can be found in Appendix C.

A COM applying for approval of a branch campus must have an accreditation status of Accreditation or Accreditation with Exceptional Outcome at the time of application and continue to maintain such accreditation status throughout the time that its application is pending. A COM with a status of Accreditation with Finding may demonstrate through a progress report, focused site visit, or any other monitoring the COCA may require, that it complies with the required standards for an accreditation status of Accreditation or Accreditation with Exceptional Outcome for the purpose of applying for a substantive change.

A COM applying for a branch campus must have completed a comprehensive site visit within three years of application. If the COM's last comprehensive site visit was more than three years prior to the request, a comprehensive site visit must be completed as part of the application of the branch campus request. The COCA retains discretionary authority to require a comprehensive site visit even if the COM has undergone a comprehensive site visit less than 3 years prior to the time of application.

Application and Monitoring

The application (Steps I-III) and monitoring (Steps IV-VII) for a branch campus is a seven-step process. The COM must successfully complete the application for a branch campus within 36 months or the application will be deemed expired. The COCA may, at its discretion, direct that a new application or supplemental information be submitted. In either event, the fees required by the COCA fee schedule shall apply.

A non-refundable branch campus application fee must be submitted prior to beginning the application.

Successful completion of all seven steps and approval by COCA completes the branch campus process.

Step I: Branch Campus Application

A. Submission of a written narrative that includes the following:

1. Introduction to the parent COM, including history and mission;
2. Introduction to the branch campus including campus name, location, class size requested and anticipated start date;
3. Explanation of the need for a branch campus in this location, including healthcare needs in the region;
4. Rationale for a branch campus versus additional location;

5. Feasibility study (Business Plan) completed by an external business consulting group;
6. Admissions policies and procedures at the branch campus, a description of the student recruitment plan, and anticipated interaction with the parent COM;
7. Anticipated impact of the branch campus on parent COM's resources;
8. Anticipated impact of the branch campus on the parent COM's curriculum;
9. Anticipated impact of the branch campus on existing clinical rotation capacity at the parent COM;
10. COMLEX-USA pass rates for the parent COM for the last three years (The COM must demonstrate that for the previous three years, its first-time pass rate on all levels of the COMLEX USA have been within two standard deviations of the national mean and above 90%. If the COM does not meet these criteria, the application for the branch campus will not be approved.);
11. GME placement rates for the parent COM for the last three years (The COM must demonstrate that for the past three years the GME placement rates have been above 95%. If the COM does not meet this criterion, the application for the branch campus will not be approved.);
12. Anticipated impact of GME needs for the branch campus on the parent COM's GME needs;
13. A description of how the parent COM will fund the required escrowed reserve funds for the branch campus, including providing draft escrow agreements;
14. Substantive Change – Planned Class Size Increase application, if required.

B. Completion of a self-study demonstrating compliance with the following **Candidate accreditation elements** at the branch campus:

1. **Element 1.1: Program Mission**
   A branch campus must develop a mission statement that: 1) explains the overall purpose of the program at the branch campus; and 2) serves as guide for program planning and assessment. Where the branch campus is part of a larger educational institution or parent institution, the mission of the branch campus must be consistent with the institution's mission. The branch campus must have a mechanism in place that will require future periodic review of its program mission to meet the anticipated potential growth and continued development of the branch campus. The branch campus must have a mechanism in place that will consider the input of its future students, faculty, and staff, when its mission and any value, vision, goal, or objectives statements will be reviewed for future, potential revision.

   Provide:
   a. A copy of the program mission for the branch campus.
   b. A copy of the values, vision, goals or objectives statements, if applicable, for the branch campus.
   c. A copy of the parent institution's mission statement, if applicable. The documents

should show the last updated date (or effective date).
d. The proposed mechanism that will require future periodic review of its program mission to meet the anticipated potential growth and continued development of the branch campus.

2. **Element 1.2: Licensing and Regional/ Institutional Accreditation**
A branch campus must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level.

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

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

Provide:
a. A copy of the charter, license, or letter of approval from all states and agencies issuing such approvals, including evidence of approval from an institutional accreditor for the COM or the parent institution.
b. If institutionally accredited, a link to the public webpage where the most recent institutional accreditation documents are published.
c. A link to the public webpage that describes the branch campus's relationship with a partner institution (if applicable).

3. **Element 1.3: Governance and Program Policies**
A branch campus must have a governing body or be part of a parent institution with a governing body, that defines the mission of the branch campus and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. The majority of the members of the governing body must be independent of financial interest/benefit from the branch campus. The branch campus must publish and abide by policies regarding conflict of interest for board members, employees, and institutionally employed faculty; due process for employees, students, and credentialed instructional staff; confidentiality of employee, student, and medical records; fiscal management; and ethics. The ethics policy must incorporate the American Osteopathic Association Code of Ethics.

Provide:
a. The bylaws of the governing body of the branch campus (or the parent institution) and a list of members, including titles, of the body.
b. A copy of the policies at the branch campus for:
    i. Conflict of interest for board members, employees, and institutionally employed faculty;

ii. Due process for all employees, students, faculty, and credentialed instructional staff;
iii. Confidentiality of employment, student, and medical records;
iv. Fiscal management and accountability; and
v. Ethics, incorporating the AOA code of ethics.

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

4. **Element 1.4a: Non-Discrimination**
A branch campus must have a policy of non-discrimination and anti-sexual harassment with regard to students, administrative personnel, faculty and staff based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age, disability, and religion. This must apply to all branch campus actions.

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

Provide:
a. A copy of the non-discrimination and anti-sexual harassment policies.
b. A description with flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

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

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

Provide:
a. The faith-based mission for the branch campus or its parent institution.
b. A copy of the non-discrimination and anti-sexual harassment policies.
c. A description with flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

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

faith-based designation.

5. **Element 2.1: Dean Qualifications**
A branch campus must have a Dean who is qualified for the position by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care.
The branch campus Dean must have:
1. An earned DO degree from a COCA-accredited college of osteopathic medicine;
2. An unrestricted medical license at some time in their career, free of disciplinary actions or sanctions while licensed;
3. AOA or ABMS board certification at some time in their career; and
4. Experience as a Dean of a college of osteopathic medicine for at least 5 years, or demonstrated progressive leadership with UME, experience in budget management authority, admissions, student disciplinary situations, GME, accreditation, and scholarly activity over the past 5 years.

Provide:
a. A copy of the branch campus Dean's diploma from a COCA-accredited college of osteopathic medicine.
b. A copy of the branch campus Dean's most recent medical license.
c. A copy of the branch campus Dean's AOA or ABMS board certification documents.
d. A current and complete curriculum vitae for the branch campus Dean.
e. The current job description for the branch campus Dean.
f. The branch campus Dean's current Practitioner Profile report from the Federation Credentials Verification Service.

Note: A branch campus must notify the COCA within five business days of any change of Dean (see COCA Policies and Procedures).

6. **Element 2.2: Full-Time Dean**
The branch campus Dean must be employed full-time by the branch campus and/or its parent institution.

Note: In carrying out the full-time responsibilities of the branch campus Dean, the Dean is administratively responsible for the conduct and quality of the medical education program and for ensuring the adequacy of faculty at the branch campus.

This element requires a branch campus Dean to be employed full-time without any conflicting, secondary employment. Any activity for which remuneration is given must be:
a. Under the auspices of the branch campus, or its parent institution's authorization; and
b. Not in conflict with the time commitments required to carry out the full-time responsibilities of the branch campus Dean.

Provide:
a. The employment contract (compensation redacted) demonstrating that the branch campus Dean is employed full-time.

7. **Element 2.3: Academic and Administrative Leadership**
A branch campus must have academic and administrative leadership to accomplish the mission of the medical school. Associate/Associate Deans (at least one of which must be a board-certified DO) must have proven experience in teaching, educational design and evaluation, scholarly activity, and academic leadership in a medical education setting appropriate for the position.

Provide:
a. An organizational chart that shows the leadership positions of the branch campus including titles, names, and reporting relationships.
b. The current job description for each member of the administrative leadership team at the branch campus (Associate Deans, Associate Deans, senior level administrators).
c. A current curriculum vitae for each member of the administrative leadership team who has been hired at the branch campus (Associate Deans, Associate Deans, senior level administrators; do not include department chairs).
d. A copy of the employee's medical license (if a DO or MD) if required based on the position description.
e. A copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date if required based on the position description.

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

8. **Element 3.1: Financial Resources**
A branch campus must ensure that the financial resources of the school are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals. Because of the potential financial consequences, if any branch campus or its parent institution experiences a change in status regarding its future participation in the Title IV programs following its initial establishment of participation, it must notify the COCA.

Provide:
a. The operational pro forma (income, revenue sources, and expenses including budget for faculty and staff) for the branch campus from today (start-up costs) through the anticipated graduation of the first class of students.
b. The proposed capital budget for the development of the branch campus.

9. **Element 3.2: Feasibility Study and Business Plan**
   A branch campus must submit a feasibility study, created by an external business consulting firm, and a business plan.

   Provide:
   a. The feasibility study for the branch campus.
   b. A brief background on the company that created the feasibility study.
   c. The business plan for the branch campus.

10. **Element 3.3: Escrowed Reserve Funds** (Referenced on p. 6 above)
    Provide:
    a. Evidence of availability of unencumbered funds equal to the escrow amount.
    b. A copy of the proposed escrow agreement substantially consistent with the form prescribed by the COCA.

11. **Element 3.4: Operating Reserve Fund** (Referenced on p. 6 above)
    Provide:
    a. Evidence of availability of unencumbered funds equal to the operating reserve fund amount.
    b. A copy of the proposed operating reserve fund agreement substantially consistent with the form prescribed by the COCA.

12. **Element 4.1: Facilities**
    A branch campus must have planned facilities for the program of instruction that enable the authorized class size of students and faculty to pursue the mission, curriculum content and delivery, and research/scholarly activity of the branch campus. A branch campus must have access to facilities for simulated and standardized patient encounters and must demonstrate how the facilities will contribute to student achievement of learning outcomes of all components of its curriculum.

    Note: COMs that have met the qualifications to request a substantive change are expected to expand facility resources or demonstrate current facility resources can accommodate the requested change and ensure the same level of student success that was achieved prior to the request. Special attention must be paid to student study space.

    A branch campus must have a mechanism to assess the adequacy of the clinical core and required rotation facilities that will involve students in the assessment.

    Provide:
    a. A completed Candidate Table 4.1 to describe the on-campus facilities of the branch campus dedicated to DO students.
    b. Floor plans of the branch campus facilities with designations of how the space will be utilized (full architectural drawings are not required).
    c. A description of, and indicate on the floor plans provided, the facilities used for

simulation, study space, and standardized patient encounters provided to students at the branch campus.
d. A description of how the branch campus will assess the adequacy of the clinical core and required rotation facilities, including how students will be involved in the assessment.
e. A description of how the branch campus facilities will contribute to student achievement of learning outcomes of the curriculum.

g. The construction plan and timeline for any alterations or additions to existing facilities that will be required to accomplish the requested change(s).
h. A contingency plan for COM facilities should the buildings, (in submission "g" above) not be completed on time.
i. The permanent Certificate of Occupancy for all COM buildings, that will be required to accomplish the requested change(s) and by December 31 of the year prior to the anticipated start of classes.

13. **Element 4.2: Information Technology** (Details on the branch campus only)
A branch campus must ensure access to information technology to support its mission and ensure Wi-Fi availability at all core and required clinical rotation sites. Students, faculty, and staff must be involved in the assessment of information technology services.

Provide:
a. The information technology strategic plan for the branch campus and core and required clinical rotation sites.
b. A description of how students, faculty, and staff will be involved in the assessment of information technology services at the branch campus.

14. **Element 5.1: Professionalism**
A branch campus must ensure that the learning environment of its osteopathic medical education program will be conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff and is one in which all individuals are treated with respect. A branch campus must have a committee, or other approved body, that oversees professionalism when operations begin at the branch campus.

Provide:
a. A copy of the professionalism policies and procedures for the branch campus and a link to the public webpage where the documents will be published.
b. The intended description and charge of the committee or approved body at the branch campus that will oversee issues of professionalism and ethics.
c. The proposed membership (position titles) of the committee or approved body at the branch campus that will oversee issues of professionalism and ethics.

15. **Element 6.1: Programmatic Level Educational Objectives**
A branch campus must define all programmatic level educational objectives.

Provide:
a. The programmatic level educational objectives for the osteopathic medical education program at the branch campus.

16. **Element 6.2: Osteopathic Core Competencies**
A branch campus must teach and educate students in order to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment.

Provide:
a. A description of the plan for the delivery of curriculum including teaching, educating, and assessing its students to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment at the branch campus. (Not to exceed 250 words.)
b. A curriculum map demonstrating where the osteopathic core competencies will be delivered at the branch campus.

17. **Element 6.3: Teaching Methods**
A branch campus must define the teaching methods that will be employed for the delivery of the anticipated curriculum.

Provide:
a. A description of the anticipated teaching methods (lecture, team-based learning, problem-based learning, etc.) that will be employed by the branch campus.

18. **Element 6.4: Clinical Education**
A branch campus must define the types and length of clinical experiences that osteopathic medical students are required to encounter and the appropriate clinical setting for these experiences.

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

Provide:
a. A description of how clinical skills will be taught and assessed throughout the curriculum of the branch campus.
b. The definition of an eligible OMS-II student and/or other student to enter clinical

rotations.
c. A definition of the types of patients and clinical conditions that osteopathic medical students will be required to encounter, the skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student responsibilities.
d. Policies and procedures (protocols) addressing methodologies by which students will be able to satisfactorily complete, including remediation activities, the entire clinical education curriculum, including standardized/simulated and supervised patient encounters.
e. A completed Candidate Table 6.4a listing all clinical rotations, (indicating core and noncore rotations) including the length of each rotation, the branch campus will require students to complete to fulfill the requirements for graduation.
f. A copy of a COM or branch campus-approved clinical education affiliation agreement.
g. All documents (including executed affiliation agreements), that demonstrate the acceptance of the future students of the branch campus to participate at the affiliate sites, demonstrating clinical education rotations, including adequate anticipated faculty, for 120% of the rotational capacity of the proposed requested class size.

19. **Element 7.1: Faculty and Staff Resources and Qualifications**
At all educational teaching sites, including affiliated sites, a branch campus must demonstrate that it will have sufficient faculty and clinical staff resources to achieve the proposed program mission, including part time and adjunct faculty, and preceptors who are appropriately trained and credentialed.

Note: COMs that have met the qualifications to request a substantive change are expected to uphold the same level of faculty and staff resources to ensure success of the branch campus. If these levels are not to be maintained due to differences in the educational delivery models, a full explanation must accompany the documentation for 7.1.

The physician faculty, in the patient care environment at core and required rotation sites, must hold current medical licensure and have had AOA or ABMS board certification at some time in their career or be currently board eligible in the specialty being taught.

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

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

Provide:
a. An organizational chart with title and names (where available) demonstrating how the faculty will be organized at the branch campus.
b. A completed Candidate Tables 7.1a and 7.1b with anticipated date of hire of each

faculty and staff member at the branch campus.
c. A description of the mechanism to review and approve credentials of physician faculty that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.

20. **Element 7.8: Faculty Appointment and Advancement**
A branch campus must have policies and procedures in place for faculty appointment, renewal of appointment, promotion, granting of tenure (if a tenure program exists), and remediation. The policies and procedures must provide each faculty member with written information about his or her term of appointment, responsibilities, lines of communication, privileges and benefits, performance evaluation and remediation, terms of dismissal, due process, and, if relevant, the policy on practice earnings.

A branch campus or its parent institution must have a policy to review pay and rank parity.

Provide:
a. The policies and procedures for faculty appointment and advancement for the branch campus, including:
    i. term of appointment;
    ii. responsibilities;
    iii. lines of communication;
    iv. privileges and benefits;
    v. performance evaluation and remediation;
    vi. terms of dismissal;
    vii. due process; and
    viii. the policy on practice earnings (if relevant).

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

b. A copy of the pay/rank parity review policy.

21. **Element 8.1: Research and Scholarly Activity Strategic Plan**
A branch campus must demonstrate a commitment to research and scholarly activity through its budgetary processes, support of faculty research (including the establishment of a research infrastructure, including an office of research, faculty and personnel to assist students in research and peer review through publication or grant application), and inclusion of its students in research throughout all four years of the osteopathic medical education. The plan must include cultural competency and health disparities research/scholarly activities.

Provide:
a. A copy of the strategic plan for research and scholarly activity at the branch

campus.

22. **Element 8.2: Research and Scholarly Activity Budget**
A branch campus must have budgetary processes and a budget that will support research and scholarly activity of its faculty and students.

Provide:
a. A description of the budgetary processes at the branch campus that will support research and scholarly activity by its faculty and students.
b. A copy of the research and scholarly activity budget at the branch campus through the anticipated graduation of the first class of students.

23. **Element 8.3: OMM/OPP Research and Scholarly Activity**
A branch campus must demonstrate how its research/scholarly activity will include or incorporate osteopathic manipulative medicine (OMM) and osteopathic principles and practice (OPP).

Provide:
a. A strategic plan for research and scholarly activity that demonstrates how the branch campus will include or incorporate OMM/OPP as a component of the research/scholarly activity.

24. **Element 8.4: Student Participation in Research and Scholarly Activity**
A branch campus must publish and follow policies and procedures to support student driven research and scholarly activity, as well as student participation in the research and scholarly activities of the faculty.

Provide:
a. A copy of all student research and scholarly activity policies at the branch campus.

25. **Element 9.1: Admissions Policy**
A branch campus must establish admission requirements for potential applicants to the osteopathic medical education program and must use effective policies and procedures for osteopathic medical student selection for admission and enrollment, including demonstration of technical standards for admissions. A branch campus must tie all admissions policies to its mission.

Provide:
a. All admission requirements and policies and procedures for osteopathic medical student selection and enrollment at the branch campus.
b. A copy of the technical standards required of prospective students at the branch campus.

26. **Element 9.2: Recruitment of Students**
A branch campus must demonstrate that a plan for recruitment of an applicant pool sizeable enough to generate the requested class size exists within the defined

geographic region of the branch campus. A branch campus must also demonstrate a plan for recruitment of a diverse student population.

Provide:
a. At least three years of demographics for the defined region of the branch campus demonstrating the number of medical school applicants and matriculants.
b. A copy of the proposed recruitment plan for the branch campus.

27. **Element 10.1: GME Feasibility**
A branch campus must demonstrate an understanding of the obligations to ensure student entry into graduate medical education (GME) upon graduation from the proposed branch campus.

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

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

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

Provide:
a. The policies for the branch campus that include its structure and procedures to support the development of GME.
b. The pro forma for the branch campus that includes line items for the support of the development of GME.
c. A feasibility study outlining available GME capacity, and a plan, including development costs, outlining how the branch campus will ensure sufficient residency positions (PGY-1) to equal the requested class size.

Note: In states where first-year residency development in GME is required by law, a COM/branch campus must demonstrate how it is complying with this requirement.

Note: Elements 12.1-12.10 are for branch campuses that the COCA will serve as institutional accreditor. These elements can be found at the following web page: https://osteopathic.org/index.php?aam-media=/wp-content/uploads/2023-COM-New-and-Developing-Accreditation-Standards.pdf

As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional

accreditor.

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

Upon successful completion of the Step I application materials, the COCA may approve the branch campus to advance to Step II of the application process or request additional information.

The COCA may require periodic written reports from the COM to demonstrate progress in developing the branch campus.

Step II: Branch Campus Self-Study and Site Visit

Not less than 18 months prior to the planned matriculation of students at the branch campus, the branch campus must submit a self-study demonstrating 100% compliance on each of the **Pre-Accreditation elements** listed below. The report must be submitted no later than 90 days prior to the meeting at which it will be reviewed. When the self-study is approved, a Step II site visit will be scheduled.

The branch campus self-study and the Step II site visit report will be reviewed by the COCA not less than 12 months prior to the matriculation of students at the branch campus. Upon approval, and funding of the required escrow accounts, the COM may begin advertising and recruiting students at the branch campus.

Note: Facilities must be in a state of substantial completion as demonstrated by submission of a government-issued Certificate of Occupancy by December 31st the year prior to matriculation of students at the branch campus and the COM must be on-time with the approved construction and hiring timelines.

1. **Element 1.1: Program Mission**
   A branch campus must have a mission statement that: 1) explains the overall purpose of the program at the branch campus; and 2) serves as guide for program planning and assessment. Where the branch campus is part of a larger educational institution or parent institution, the mission of the branch campus must be consistent with the institution's mission. The branch campus must review its program mission at least once every five years and upon review, if the branch campus deems it appropriate to do so, the branch campus should revise its mission to meet the growth and continued development of the branch campus. The branch campus must consider the input of its students, faculty, and staff when reviewing and revising its mission and any value, vision, goal or objective statements.

   Provide:
   a. A copy of the program mission for the branch campus.
   b. A copy of the values, vision, goals or objectives statements, if applicable, for the branch campus.

c. A link to the public webpage where the documents are published.
d. A copy of the parent institution's mission statement, if applicable. The documents should show the last updated date (or effective date).
e. Documentation of the mission revision process, participants (including faculty, staff, and students), and meeting minutes documenting the most recent governing board approval of the mission for the branch campus.

2. **Element 1.2: Strategic Plan**
A branch campus must produce and publish a current strategic plan addressing all core aspects of the mission for the branch campus. Students, faculty and staff must be included in the strategic plan development, review, and revision.

Provide:
a. A copy of the strategic plan for the branch campus through the anticipated graduation of the first class of students.
b. The list of individuals who participated in the plan creation/revision, and an explanation of how students, faculty, and staff will be included in future revisions.
c. A link to the public webpage where the documents are published.

3. **Element 1.3: Licensing and Regional/Institutional Accreditation**
A branch campus must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level.

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

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

Provide:
a. A copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.
b. A link to the public webpage where the most recent institutional accreditation information is published.
c. A link to the public webpage that describes the relationship a branch campus has with a partner institution (if applicable).

4. **Element 1.4: Governance and Program Policies**
A branch campus must have a governing body or be part of a parent institution with a governing body, that defines the mission of the branch campus and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. The majority of the members of the governing body must be independent of financial

interest/benefit from the branch campus. The branch campus must publish and abide by policies regarding conflict of interest for board members, employees, and institutionally employed faculty; due process for employees, students, and credentialed instructional staff; confidentiality of employee, student, and medical records; fiscal management; and ethics. The ethics policy must incorporate the American Osteopathic Association Code of Ethics.

Provide:
a. The bylaws of the governing body of the branch campus (or the parent institution) and a list of members, including titles, of the body.
b. A copy of the policies for:
   i. Conflict of interest for board members, employees, and institutionally employed faculty;
   ii. Due process for all employees, students, faculty, and credentialed instructional staff;
   iii. Confidentiality of employment, student, and medical records;
   iv. Fiscal management and accountability; and
   v. Ethics, incorporating the AOA code of ethics.

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

5. **Element 1.5a: Non-Discrimination**
   A branch campus must have a policy of non-discrimination with regard to students, administrative personnel, faculty and staff based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age, disability, and religion. This must apply to all branch campus actions.

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

   Provide:
   a. A copy of the non-discrimination and anti-sexual harassment policies.
   b. A description with flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

   Element 1.5b: Non-Discrimination for Faith-Based Institutions
   The COCA respects the religious mission of faith-based schools. A branch campus having a religious affiliation or purpose must have a policy of non-discrimination with regard to students, administrative personnel, faculty, and staff but need not apply all selection criteria listed in Element 1.4a if each omission is directly related to that affiliation or purpose, and so long as the policies are made known to applicants and the public and do not contravene any other COCA standard. This must apply to all branch campus actions.

   A branch campus or its parent institution, must develop a mechanism for students,

faculty, and staff to report alleged discrimination incidents and track their resolution, as appropriate for the faith-based mission of the branch campus.

Provide:
a. The faith-based mission for the branch campus or its parent institution.
b. A copy of the non-discrimination and anti-sexual harassment policies.
c. A description with flowcharts of the processes for reporting alleged discrimination and sexual harassment incidents and tracking their resolution.

6. **Element 1.6: Degree-Granting Body**
The governing body of the branch campus and/or institution must confer the degree of Doctor of Osteopathic Medicine (DO) upon those students who have satisfactorily completed the requirements for graduation and have been recommended for graduation by the faculty of the branch campus.

Provide:
a. A copy of the bylaws or governing documents that demonstrate the conferral of degree.
b. A copy of the branch campus policy demonstrating that the faculty association (or approved body) must recommend candidates for graduation.
c. Minutes from the faculty association meeting where this recommendation was made for the most recent graduates.

7. **Element 2.1: Dean Qualifications**
A branch campus must have a Dean who is qualified for the position by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care.

The branch campus Dean must have:
1. An earned DO degree from a COCA-accredited college of osteopathic medicine;
2. An unrestricted medical license at some time in their career, and free of disciplinary actions or sanctions while licensed;
3. AOA or ABMS board certification at some time in their career; and
4. At least five years of proven experience within the last ten years in academic leadership roles that includes budget management authority.

Provide:
a. A copy of the branch campus Dean's diploma from a COCA-accredited college of osteopathic medicine.
b. A copy of the branch campus Dean's most recent medical license.
c. A copy of the branch campus Dean's AOA or ABMS board certification documents.
d. A current and complete curriculum vitae for the branch campus Dean.
e. The current job description for the branch campus Dean.
f. The branch campus Dean's current Practitioner Profile report from the Federation Credentials Verification Service.

Note: A branch campus must notify the COCA within five business days of any change

of Dean. (See COCA Policies and Procedures.)

8. **Element 2.2: Full-Time Dean**
The branch campus Dean must be employed full-time by the branch campus and/or its parent institution.

Note: In carrying out the full-time responsibilities of the branch campus Dean, the Dean is administratively responsible for the conduct and quality of the medical education program and for ensuring the adequacy of faculty at the branch campus.

This element requires a branch campus Dean to be employed full-time without any conflicting, secondary employment. Any activity for which remuneration is given must be:
a. Under the auspices of the branch campus, or its parent institution's authorization; and
b. Not in conflict with the time commitments required to carry out the full-time responsibilities of the branch campus Dean.

Provide:
a. The employment contract (compensation redacted) demonstrating that the branch campus Dean is employed full-time.

Note: A change of branch campus Dean during the Step II process, before graduation of the first class of students, requires a comprehensive site visit to be conducted no less than six months after the COCA is notified of the change of branch campus Dean.

9. **Element 2.3: Academic and Administrative Leadership**
A branch campus must have academic and administrative leadership to accomplish the mission of the branch campus. Associate/Associate Deans must have proven experience in teaching, educational design and evaluation, scholarly activity, and academic leadership in a medical education setting appropriate for the position.

A branch campus must have at least one leadership position at an Associate or Associate Dean level with oversight of the entire clinical education curriculum and assessment.

Provide:
a. An organizational chart that shows the leadership positions of the branch campus (include names and titles of individuals already hired) and reporting relationships. Indicate (highlight) any changes or updates since the initial submission.

Note: As directed in Step I of the Branch Campus Substantive Change Request, a minimum of two associate deans (at least one of which must be a board-certified DO) must be under contract with the proposed branch campus.

b. The current job description for each member of the administrative leadership team (Associate Deans, Associate Deans, and senior level administrators; do not include department chairs).
c. A complete curriculum vitae for each member of the administrative leadership team

(Associate Deans, Associate Deans, and senior level administrators; do not include department chairs).
d. A copy of the employee's medical license (if a DO or MD) if required based on the position description.
e. A copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date if required based on the position description.

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

10. **Element 2.4: Accreditation Standard Complaint Policies and Procedures**
A branch campus must publish policies and procedures that include a confidential accreditation standard complaint resolution process that includes a description of how these complaints are filed with the branch campus, resolved through an adjudication process, without retaliation, and maintained through the COM's records retention system. The accreditation standard complaint filing process must also include a process for filing confidential complaints with the COCA and the contact information of the COCA.

Provide:
a. Documentation of policies and procedures regarding accreditation standard complaints and their adjudication including an explanation of how the complainant's confidentiality is maintained throughout the process.
b. Sample records of accreditation standard complaints that have been received, adjudicated, and resolved.
c. A link to the public webpage where the accreditation standard complaint policies and procedures are published.

Note: The COCA complaint policies and complaint form can be found at https://osteopathic.org/accreditation/accreditation-guidelines/.

The COCA contact information for filing complaints is: American Osteopathic Association Commission on Osteopathic College Accreditation 142 E. Ontario Street Chicago, IL 60611 predoc@osteopathic.org Phone: (312) 202-8124 Fax: (312) 202-8424

11. **Element 3.1: Financial Resources**
A branch campus must ensure that the financial resources are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals. Because of the potential financial consequences, if any branch campus or its parent institution experiences a change in status regarding its participation in the Title IV programs following its initial establishment of participation, it must notify the COCA.

Provide:
a. The operational budget showing income, revenue sources, and expenses including budget for faculty and staff for the branch campus up through the anticipated graduation of the first class of students.
b. The proposed capital budget for the development of the branch campus.

12. **Element 3.2: Financial Planning and Budgeting**
A branch campus must have a budgetary process that is designed to support the mission of the branch campus.

Provide:
a. A flowchart demonstrating the budget development process indicating where the final budget approval occurs and clearly reflecting the Dean's role in the process.

13. **Element 3.3: Budgetary Authority**
A branch campus or parent institution must provide the Dean with the resources and budgetary authority necessary to fulfill his or her responsibility for the management of the branch campus.

Provide:
a. The current job description demonstrating that the Dean possesses budgetary authority for the branch campus.
b. The employment contract (compensation redacted) demonstrating that the Dean possesses budgetary authority for the branch campus.

14. **Element 3.4: Financial Audit**
A branch campus or its parent institution must commission an annual independent audit confirming financial viability and provide evidence of resolution of concerns cited in the audit's accompanying management letter.

Provide:
a. The annual audited financial statement and audit report for the branch campus or its parent institution for the latest complete fiscal year.
b. Evidence of resolution for any concerns cited in the audit's accompanying management letter.

15. **Element 4.1: Facilities**
A branch campus must have facilities for the program of instruction that enable the authorized class size of students and faculty to pursue the mission, curriculum content and delivery, and research/scholarly activity of the branch campus.

Note: COMs that have met the qualifications to request a substantive change are expected to expand facility resources or demonstrate current facility resources can accommodate the requested change and ensure the same level of student success that was achieved prior to the request. Special attention must be paid to student study space.

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

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

Provide:
a. A completed Pre-Accreditation Table 4.1 to describe the facilities the branch campus uses for instruction.
b. A facility floor plan with designations of how the space will be utilized (full architectural drawings are not required).
c. A description of, and indicate on the floor plans provided, the facilities used for simulation, study space, and standardized patient encounters provided to students.
d. A description of how the branch campus will assess the adequacy of the core and required clinical rotation facilities, including how students will be involved in the assessment.
e. A description of how the branch campus facilities contribute to student achievement of learning outcomes of the curriculum.
f.
g. The construction plan and timeline for all branch campus buildings.
h. A contingency plan for branch campus facilities should the buildings not be completed on time.
i. The permanent Certificate of Occupancy for all branch campus buildings, as obtained, and by December 31 of the year prior to the anticipated start of classes.

16. **Element 4.2: Security and Public Safety**
A branch campus must ensure that adequate security systems are in place and publish and follow policies and procedures for security; student, faculty, and staff safety; and emergency and disaster preparedness at all branch campus-operated teaching locations and core training sites.

The policy of the branch campus must include methods of communication with students, faculty, and staff at all teaching and training locations.

Provide:
a. A copy of all security and safety related policies and procedures.
b. A link to the public webpage where security and safety information is/will be published.
c. A link to the public webpage where the Clery Report for the branch campus will be published.

17. **Element 4.3: Information Technology**
A branch campus must ensure access to information technology to support its mission at all locations and ensure Wi-Fi availability at all core and required clinical rotation sites. Students, faculty, and staff must be involved in the assessment of information technology services.

Provide:
a. The information technology strategic plan for the branch campus and core and required clinical rotation sites.
b. Describe how students, faculty, and staff will be/are involved in the assessment of information technology services.

18. **Element 4.4: Learning Resources**
A branch campus must ensure students and faculty have access to in-person and electronic learning resources at all campus locations that support pre-clinical and clinical education that achieve the program objectives and support the mission of the branch campus.

Provide:
a. A completed Pre-Accreditation Table 4.4 to describe the learning resources of the branch campus.

19. **Element 5.1: Professionalism**
A branch campus must ensure that the learning environment of its osteopathic medical education program is conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect.

A branch campus must have a committee, or other approved body that oversees professionalism.

Provide:
a. A copy of the professionalism policies and procedures of the branch campus.
b. A link to the public webpage where the professionalism policies is/will be published.
c. A description and charge of the committee or approved body that oversees issues of professionalism and ethics.
d. A list of the membership of the committee or approved body that oversees issues of professionalism and ethics.

20. **Element 5.3: Safety, Health, and Wellness**
A branch campus must publish and follow policies and procedures that effectively mitigate student, faculty, and staff, exposure to infectious and environmental hazards, provide education on prevention of such exposures, and address procedures for care and treatment after such exposures.

A branch campus must publish and follow policies related to student, faculty, and staff mental health and wellness and fatigue mitigation in the clinical learning environment.

Provide:
a. The policies and procedures addressing safety and health issues.
b. A link to the public webpage where safety, health, and wellness information is/will be

published.
c. A description of how this information is/will be provided to students, faculty, and staff.

21. **Element 5.4: Patient Care Supervision**
A branch campus must ensure that osteopathic students in clinical learning situations involving patient care are under direct supervision by a licensed health care professional at all times in order to ensure patient safety. The branch campus must ensure that all supervised activities are within the scope of practice of the supervising health care professional. Students must have clear guidelines on their role in care and the limits of their scope of authority.

Provide:
a. The policies addressing student supervision during the provision of patient care, including policies on the use of telemedicine, if applicable.
b. A link to the public webpage where the documents are published.
c. A description of how this information is/will be provided to students, faculty, and staff.

22. **Element 6.1: Curriculum Design and Management**
A branch campus must have in place an approved body (e.g., curriculum committee) that exercises collective responsibility for the education program as a whole, and has responsibility for the development, management, evaluation, and enhancement of the curriculum. This committee must include student and faculty representation from the pre-clinical and clinical education years. The curriculum must ensure that students attain the skills, including osteopathic core competencies, interprofessional education and humanistic skills, necessary to demonstrate GME readiness and meet the mission of the branch campus.

Provide:
a. The charge and responsibility of the approved body/curriculum committee.
b. A list of the current members of the approved body/curriculum committee and their titles.
c. A list of meeting dates, rosters of attendees, and meeting minutes for the past academic year.
d. A brief description of the curriculum design and teaching methods of the branch campus. (Not to exceed 250 words.)

23. **Element 6.2: Programmatic Level Educational Objectives**
A branch campus must define and make all programmatic level educational objectives known to students, faculty, and others with responsibility for student education and assessment.

Provide:
a. The programmatic level educational objectives for the osteopathic medical education program.

b. A link to the public webpage where the information is/will be published.

24. **Element 6.3: Maximum Length of Completion**
A branch campus must have a policy that requires that each single degree student completes the DO degree within 150% of the standard time to achieve the degree (six years following matriculation) and describes any exceptions to the 150% time limit.

Provide:
a. The policy that describes that single degree DO students must complete their education within 150% of the standard time (six years following matriculation).
b. A link to the public webpage where this policy is/will be published.

25. **Element 6.4: Osteopathic Core Competencies**
A branch campus must teach and educate students in order to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment.

Provide:
a. A description of the delivery of the curriculum of the branch campus including teaching, educating, and assessing its students to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment. (Not to exceed 250 words.)
b. A curriculum map demonstrating where the osteopathic core competencies are/will be delivered.

A single curriculum map can be provided for elements 6.4-6.8 and 6.12.

26. **Element 6.5: Scientific Method**
A branch campus must ensure that the curriculum includes instruction in the scientific method including data collection to test and verify hypotheses or address questions regarding biomedical phenomena and in the basic scientific and ethical principles of clinical and translational research. The curriculum must include the methods by which such research is conducted, evaluated, explained to patients who are part of clinical studies, and applied to patient care.

Provide:
a. A description of the delivery of the curriculum of the branch campus including instruction in the scientific method addressing data collection, testing and verifying hypotheses or questions regarding biomedical phenomena and the basic scientific and ethical principles of clinical and translational research. The curriculum must include the methods by which such research is conducted, evaluated, explained to patients/subjects of a clinical study, and applied to patient care. (Not to exceed 250 words.)
b. curriculum map demonstrating where scientific method content is/will be delivered.

27. **Element 6.6: Principles of Osteopathic Medicine**

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

Provide:
a. A description of the delivery of the OPP and OMM curricula of the branch campus including instruction in OPP, including both observational and hands-on application of OMM. (Not to exceed 250 words.)
b. A curriculum map demonstrating where OPP and OMM content are/will be delivered.

28. **Element 6.7: Self-Directed Learning**

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

Provide:
a. A description of the delivery of curriculum of the branch campus including self-directed learning experiences and time for independent study allowing students to develop skills for lifelong learning. (Not to exceed 250 words.)
b. A curriculum map demonstrating where self-directed learning experiences and time for independent study are/will be delivered.

29. **Element 6.9: Clinical Education**

A branch campus must:
a. Describe how clinical skills are taught and assessed throughout its curriculum
b. Define eligibility requirements, including clinical skills, for a student to enter clinical rotations
c. Define its core clinical rotations, core clinical rotations must include family medicine, internal medicine, general surgery, and pediatrics (all core clinical rotations must be a minimum of four weeks long and must include in-person patient care);
d. Define its required clinical rotations, required clinical rotations must include psychiatry, obstetrics and gynecology, and emergency medicine (all required clinical rotations must be a minimum of four weeks long and must include in-person patient care).
Note: Critical care medicine can be substituted for emergency medicine.

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

e. Define the types of patients and clinical conditions that osteopathic medical students are required to encounter, the clinical skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student

responsibilities
f. Clinical education rotations, including demonstration of adequate faculty, for 100% of the students of the branch campus eligible to enter core and required clinical rotations for the first time, students repeating core and required rotations, and off-cycle students.
g. Have published policies and procedures (protocols) addressing methodologies by which students can satisfactorily complete, including remediation activities, the clinical education curriculum, including standardized/simulated and supervised patient encounters
h. Have executed affiliation agreements that support the clinical education experience for its students.

Provide:
a. A copy of a branch campus-approved clinical education affiliation agreement.
b. A list of all contracted sites for core and required clinical rotations. At the time of the site visit, a branch campus must produce all documents that evidence the acceptance of the students of the branch campus to participate at the affiliate sites, including all executed affiliation agreements.
c. The definition of a student eligible to enter clinical rotations.
d. Documentation (e.g., clinical education manual) listing core and required third- and fourth-year rotations.
e. Syllabi for all core and required clinical rotations.
f. Evidence that each student at a minimum must successfully complete core clinical rotations including family medicine, internal medicine, general surgery, and pediatrics.
g. Evidence that each student must successfully complete required clinical rotations including psychiatry, obstetrics and gynecology, and emergency medicine.
h. Policies and procedures (protocols) demonstrating how clinical education is/will be delivered to all students through the branch campus.
i. A completed Pre-Accreditation Table 6.9b demonstrating adequacy of core and required clinical rotation capacity.
j. A contingency plan for all core and required rotations indicating how students will be placed in clinical education in the event opportunities are no longer available.

30. **Element 6.10: Clinical Experience**
A branch campus must ensure that each student's required core rotations prior to the fourth-year clinical clerkships include the following experiences:
1. At least one rotation conducted in a health care setting in which the student works with resident physicians currently enrolled in an accredited program of graduate medical education;
2. At least one rotation under the supervision of an osteopathic physician; and
3. More than one rotation in an inpatient setting.

Provide:
a. Describe the process the branch campus will use to ensure students will receive the required clinical rotation experiences prior to their fourth-year clinical clerkships.

31. **Element 6.11: Comparability Across Clinical Education Sites**
A branch campus must ensure that the curriculum includes comparable educational

experiences and equivalent methods of assessment across all core and required clinical educational sites where students learn, ensuring all students achieve similar outcomes based on core educational learning objectives. This comparison of comparability must include a statistical analysis.

Provide:
a. Policies and procedures describing how student outcomes at clinical educational sites will be reviewed and utilized in the determination of the comparability of outcome of the clinical experiences.

32. **Element 7.1: Faculty and Staff Resources and Qualifications**
At all educational teaching sites, including affiliated sites, a branch campus must have sufficient faculty and clinical staff resources to achieve the program mission, including part time and adjunct faculty, and preceptors who are appropriately trained and credentialed. The physician faculty, in the patient care environment at core rotations sites, must hold current medical licensure and have had AOA or ABMS board certification at some time in their career or be currently board eligible in the specialty being taught.

A branch campus must have a mechanism to review and approve credentials of physician faculty that have never been board certified or are not board eligible by the AOA or ABMS at noncore rotations sites.

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

Note: COMs that have met the qualifications to request a substantive change are expected to uphold the same level of faculty and staff resources to ensure success of the branch campus. If these levels are not to be maintained due to differences in the educational delivery models, a full explanation must accompany the documentation for 7.1.

Provide:
a. An organizational chart (titles and names, where available) demonstrating how the faculty is organized and the reporting hierarchy for each department.
b. A completed Pre-Accreditation Tables 7.1a and 7.1b with anticipated date of hire of each faculty and staff member.
c. A description of the mechanism to review and approve credentials of physician faculty that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.

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

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

33. **Element 7.2: Faculty Approvals at All Teaching Sites**
A branch campus must academically credential and/or approve the faculty at all branch campus and branch campus-affiliated and educational teaching sites.

Provide:
a. A copy of the policies and procedures for credentialing and appointment, or approval of all branch campus faculty.
b. A completed Pre-Accreditation Table 7.2 listing credentials for all clinical faculty.

34. **Element 7.3: Department Chair Qualifications**
A branch campus must employ chairs of department(s) or the equivalent of departments with proven experience in teaching and academic leadership in a medical education setting. For clinical department chairs, the chair must have an active medical license and active AOA or ABMS board certification in their specialty.

Provide:
a. A current job description for each department chair, or equivalent.
b. A complete and current curriculum vitae for each department chair, or equivalent.
c. For each clinical department chair, or equivalent, provide a copy of the medical license. (If a DO or MD)
d. For each clinical department chair, or equivalent, provide a copy of the AOA or ABMS board certification documents. (If a DO or MD)

35. **Element 7.4: Primary Care Leadership**
A branch campus may organize its medical faculty under an organizational structure of its own design, but the leadership of the clinical education of the branch campus must include one or more of actively licensed osteopathic physicians who are AOA or ABMS board certified in a primary care discipline (family medicine, internal medicine, or pediatrics) with proven experience in teaching and academic leadership in a medical education setting.

Provide:
a. A copy of the job description for the chair of primary care, or equivalent.
b. A complete and current curriculum vitae for the chair of primary care, or equivalent.
c. A copy of the chair's, or equivalent, medical license.
d. A copy of the chair's, or equivalent, AOA or ABMS board certification documents.

36. **Element 7.5: OMM/OPP Leadership**
Osteopathic philosophy and principles (OPP) that include osteopathic manipulative medicine (OMM) are defining characteristics of a branch campus in maintaining its osteopathic distinction. Accordingly, in a Department of OMM/OPP or equivalent, a branch campus must employ at least one fulltime Doctor of Osteopathic Medicine with

proven experience in developing and delivering OMM/OPP curriculum, an active medical license, and active board certification from the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM) or a Certificate of Special Proficiency in OMM (C-SPOMM) whose principal duties include developing the osteopathic content of the curriculum of the branch campus.

Provide:
a. A copy of the job description for the chair of OMM/OPP*.
b. A complete and current curriculum vitae for the chair of OMM/OPP*.
c. A copy of the chair's* medical license.
d. A copy of the chair's* board certification documents.

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

37. **Element 7.6: Faculty Development**
A branch campus must develop and implement an assessment-driven faculty development program that is in keeping with the mission of the branch campus.

Provide:
a. A report of the most recent annual faculty development needs assessment.
b. A roster of all faculty development activities for the past academic year, including documentation of the faculty participation at each activity.

38. **Element 7.7: Faculty Association**
A branch campus may have a faculty association independent from its parent COM. If independent from its parent COM, a branch campus must have a faculty organization that serves as a representative forum for faculty participation for the free exchange of ideas and concerns of all faculty.

Provide:
a. A copy of the bylaws for the faculty association.
b. A list of faculty association meeting dates, rosters of attendees, and meeting minutes for the past academic year.
c. A copy of or a link to the faculty handbook.

39. **Element 7.8: Faculty Appointment and Advancement**
A branch campus must have clear policies and procedures in place for faculty appointment, renewal of appointment, promotion, granting of tenure (if a tenure program exists), and remediation. The policies and procedures must provide each faculty member with written information about his or her term of appointment, responsibilities, lines of communication, privileges and benefits, performance evaluation and remediation, terms of dismissal, due process, and, if relevant, the policy on practice earnings.

A branch campus or its parent institution must have a policy to review pay and rank

parity.

Provide:
a. The policies and procedures for faculty appointment and advancement, including:
i. term of appointment;
ii. responsibilities;
iii. lines of communication;
iv. privileges and benefits;
v. performance evaluation and remediation;
vi. terms of dismissal;
vii. due process; and
viii. the policy on practice earnings (if relevant).

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

b. A link to the webpage where the documents are/will be published.
c. A copy of the pay/rank parity review policy.

40. **Element 8.1 Research and Scholarly Activity Strategic Plan**
A branch campus must produce and publish a strategic plan for research and scholarly activities that documents how the branch campus intends to contribute to the advancement of knowledge through research and scholarly contributions. The plan must include cultural competency and health disparities research/scholarly activities.

Provide:
a. A copy of the research and scholarly activity strategic plan of the branch campus.
b. A link to the public webpage where the research and scholarly activity strategic plan is/will be published.

41. **Element 8.2: Research and Scholarly Activity Budget**
A branch campus must have budgetary processes and a budget that supports research and scholarly activity by its faculty and students.

Provide:
a. A description of the budgetary processes of the branch campus that support research and scholarly activity by its faculty and students.
b. A copy of the research and scholarly activity budget of the branch campus through the anticipated graduation of the first class of students.

42. **Element 8.3: OMM/OPP Research and Scholarly Activity**
A branch campus must demonstrate how its research and/or scholarly activity includes and/or incorporates osteopathic manipulative medicine (OMM) and osteopathic principles and practice (OPP).

Provide:
a. A description of how OMM and OPP are/will be incorporated into the research and scholarly activity of the branch campus.

43. **Element 8.4: Student Participation in Research and Scholarly Activity**
A branch campus must publish and follow policies and procedures to support student driven research and scholarly activity, as well as student participation in the research and scholarly activities of the faculty.

Provide:
a. A copy of all student research and scholarly activity policies.
b. A link to the public webpage where the policies are/will be published.
c. A completed Pre-Accreditation Table 8.

44. **Element 9.1: Admissions Policy**
A branch campus must establish and publish, to the public, admission requirements for potential applicants to the osteopathic medical education program and must use effective policies and procedures for osteopathic medical student selection for admission and enrollment, including demonstration of technical standards for admissions. A branch campus must tie all admissions policies to the branch campus mission.

Provide:
a. All admission requirements and policies and procedures for osteopathic medical student selection and enrollment.
b. A copy of the technical standards required of prospective students.
c. A link to the public webpage where the policies are published.

45. **Element 9.2: Academic Standards**
A branch campus must publish and follow policies and procedures on academic standards that include grading, class attendance, tuition and fees, refunds, student promotion, retention, graduation, students' rights and responsibilities, and the filing of grievances and appeals.

Provide:
a. Copies of policies and procedures on academic standards including:
    i. grading;
    ii. class attendance;
    iii. tuition and fees;
    iv. refunds;
    v. student promotion;
    vi. retention;
    vii. graduation;
    viii. students' rights and responsibilities; and
    ix. filing of grievances and appeals.

    Note: If these policies/procedures are part of a larger document, please provide a

specific citation (e.g., page number/section number) to where the above policies can be located.

b. A link to the public webpage where the documents are published.

46. **Element 9.3: Transfer Policies**
A branch campus must publish and follow policies regarding transfer or admissions with advanced standing. A branch campus may only accept credits from a school accredited by the COCA or the Liaison Committee on Medical Education (LCME) where the student is eligible for readmission. The branch campus must ensure that if a transfer occurs from an LCME accredited school of medicine, the student must acquire OMM/OPP competency prior to graduation from the COM/branch campus. The last two years of education must be completed at the branch campus granting the degree.

Provide:
a. Copies of all transfer policies and procedures, including those made available to students pursuant to 34 CFR § 668.43(a)(11).
b. A link to the public webpage where the transfer policies of the branch campus are published.

47. **Element 9.4: Secure Student Recordkeeping**
A branch campus must develop an accurate, confidential and secure system for official student record keeping that includes admissions, advisement, academic and career counseling, evaluation, grading, credits and the training of faculty and staff in the regulations regarding these records.

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

48. **Element 9.5: Academic Counseling**
A branch campus must provide academic counseling to assist all students in study skills, learning styles, learning resources, and other assistance for academic success.

Provide:
a. A description of the process for ensuring that academic counseling is/will be provided to students. (Not to exceed 250 words.)

Note: COMs that have met the qualifications to request a substantive change are expected to uphold the same level of service provided to students, faculty, and staff to ensure success of the branch campus.

49. **Element 9.6: Career Counseling**
A branch campus must provide career counseling to assist all students in evaluating

career options and applying to graduate medical education training programs.

Provide:
a. A description of the process for ensuring that career counseling, including GME readiness, is/will be provided to students. (Not to exceed 250 words.)

Note: COMs that have met the qualifications to request a substantive change are expected to uphold the same level of service provided to students, faculty, and staff to ensure success of the branch campus.

50. **Element 9.7: Financial Aid and Debt Management Counseling**
A branch campus must provide financial aid counseling to all students to assist them with financial aid applications and debt management.

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

Provide:
a. A description (not to exceed 250 words) of all financial aid and debt counseling sessions that are/will be provided to its students, including:
i. When the financial aid and debt counseling sessions are/were provided to the students;
ii. The OMS year during which students are required to receive these sessions; and
b. A link to the public webpage where scholarship opportunities are made available by the institution to branch campus students.

Note: COMs that have met the qualifications to request a substantive change are expected to uphold the same level of service provided to students, faculty, and staff to ensure success of the branch campus.

51. **Element 9.8: Mental Health Services**
A branch campus must have policies and procedures to provide its students with confidential access to an effective system of counseling and mental health care from a mental health care provider. A mental health provider must be accessible 24 hours a day, 365 days a year, from all locations where students receive education from the branch campus.

Provide:
a. The policies and procedures for students seeking counseling and mental health services.
b. A link to the public webpage where students can/will be able to access mental health care information.
c. A list of the mental health services available to students at all teaching locations with service locations and hours.

52. **Element 9.9: Physical Health Services**
A branch campus must have policies and procedures to provide its students with access

to diagnostic, preventive and therapeutic health services accessible in all locations where students receive education from the branch campus. The policies and procedures should include a list of the health service locations where students may seek care at all teaching locations.

Provide:
a. The policies and procedures for students seeking diagnostic, preventive, and therapeutic health services.
b. A link to the public webpage where students can/will be able to access physical health services information.
c. A list of the health service locations where students may seek care at all teaching locations.

53. **Element 9.10: Non-Academic Health Professionals**
A branch campus must ensure that any health professional providing health services, through a provider-patient relationship, must recuse themselves from the academic assessment or promotion of the student receiving those services.

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

Provide:
a. The policies and procedures on recusal from student assessment and promotion for health professionals providing services to students.
b. A link to the public webpages where these policies and procedures are published for faculty and students.
c. Describe how this information is/will be provided to students and faculty annually. (Not to exceed 250 words.)

54. **Element 9.11: Health Insurance**
A branch campus must require that all students have health insurance.

A branch campus, or its parent institution, must offer a health insurance plan option to all students.

Provide:
a. The policies and procedures regarding health insurance for students, including the annual verification process.
b. A link to the public webpage where the health insurance policies are published.

55. **Element 10.1: Osteopathic Educational Continuum**
The branch campus must have policies, procedures, personnel, and budgetary resources to support the continuum of osteopathic education, including graduate medical education.

Provide:
a. The policies of the branch campus that describe the procedures, personnel, and budgetary resources of the branch campus to support the continuum of osteopathic medical education.

Note: In states where first-year residency development in GME is required by law, a branch campus must demonstrate how it is complying with this requirement.

56. **Element 10.2: Accredited GME**
A branch campus must provide a mechanism to assist new and existing GME programs in meeting the requirements for accreditation.

A branch campus must support development and growth of GME through establishment of a GME office with qualified personnel, expertise, and financial support focused on supporting new and established GME in obtaining accreditation. A branch campus may share GME development personnel with the COM or parent institution. The branch campus must have qualified personnel to assist students with the UME/GME transition.

The branch campus may support development and growth of GME under strategies of its own design, but the branch campus should provide evidence of approval of any new PGY-1 positions supported by the branch campus consistent with its GME development plan. (New PGY-1 positions may not be claimed by other COMs.)

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

Provide:
a. The policy and description of the mechanism of a branch campus for assisting new and existing GME in meeting the requirements for accreditation.
b. A completed Pre-Accreditation Table 10.2a for all affiliated ACGME programs for which the branch campus has supported development and growth.
c. Evidence of ACGME approval of new PGY-1 positions supported by the branch campus.

57. **Element 10.3: Osteopathic Recognition of GME**
A branch campus must provide a mechanism to assist GME programs in meeting the requirements of osteopathic recognition

Provide:
a. Documentation demonstrating the processes and commitment of resources of a branch campus to assist GME programs to achieve osteopathic recognition.

58. **Element 11.1: Program Assessment**
A branch campus must conduct learning outcomes assessments that connect to its program mission, goals, and objectives to continuously improve the educational quality

of its osteopathic medical education program.

Provide:
a. The guiding documents which govern how the branch campus conducts learning outcomes assessments. This may be in the form of a program review manual or guide that has been adopted by the faculty. This must describe an assessment of the osteopathic core competencies in the curriculum.

59. **Element 11.2: Student Evaluation of Instruction**
A branch campus must have policies and procedures in place to collect and consider confidential student evaluations of their courses, clerkships, faculty, and other relevant student experiences. The branch campus must demonstrate that these results are incorporated into the self-assessment of the branch campus to improve curriculum; and address deficiencies in student experiences.

Provide:
a. A description of the processes for obtaining student evaluation of classroom and clinical instruction.
b. A description of how student evaluations are/will be kept confidential. (Not to exceed 250 words.)
c. A copy of the evaluation forms that are/will be used by the students for these purposes.
d. A flowchart demonstrating how the evaluation data are utilized in curricular improvement.

60. **Element 11.3: COCA Annual and Mid-Cycle Reports**
A branch campus must submit specified annual reports to the COCA.
a. COCA staff will confirm that the branch campus has completed and submitted the required COCA annual reports by the established deadlines.

61. **Element 11.4a: COMLEX-USA**
Prior to graduation, all students must demonstrate osteopathic medical knowledge and osteopathic clinical skills by passing the Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX-USA) undergraduate examinations (Level 1 and Level 2) and meeting a national standard for osteopathic clinical skills competency.

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

Provide:
a. All branch campus policies and procedures related to the COMLEX-USA exam.
b. A link to the public webpage where four years of COMLEX-USA Level 1, Level 2, and Level 3 first time pass rates of the branch campus will be published.

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

Element 11.4b: GME Placement Rates
A branch campus must continually publish publicly the placement rates of its students in graduate medical education programs.

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

Provide:
a. A link to the public webpage where four years of GME placement rates of the branch campus will be published. The placement rate must be calculated by dividing the number of students who entered into a PGY-1 position by the number of students that applied to enter into a PGY-1 position.
b. A link to the public webpage where student GME placement rates by race/ethnicity and gender demographic data as permitted by law can be requested.

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

Element 11.4c: Cohort Graduation Rates
A branch campus must continually publish publicly the graduation rates by matriculation cohort at years 4, 5, and 6 for students only pursuing the DO degree.

Provide:
a. A link to the public webpage where the cohort graduation rates of the branch campus at years 4, 5, and 6 are/will be published.

Element 11.4d: Cohort Retention Rates
A branch campus must continually publish publicly the retention rates (as defined in the glossary) by matriculation cohort.

Provide:
a. A link to the public webpage where the cohort retention rates of the branch campus will be published.

62. **Element 11.5: Student Survey**
A branch campus must cooperate with the administration of the COCA student survey

as part of the comprehensive accreditation process.

Provide:
a. A description of the methods the branch campus will use to support the completion of the COCA student survey.

Note: Elements 12.1-12.10 are for branch campuses that the COCA will serve as institutional accreditor. These elements can be found at the following web page: https://osteopathic.org/index.php?aam-media=/wp-content/uploads/2023-COM-New-and-Developing-Accreditation-Standards.pdf

As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.

Step III: Branch Campus Pre-Operational Site Visit

Not less than six months prior to the matriculation of students at the branch campus, a pre-operational site visit will be completed and reviewed by the COCA (refer to Appendix A for additional information). Upon approval of the pre-operational site visit report, the application phase of the branch campus substantive change request concludes and operations may begin at the branch campus. In the event the pre-operational site report is not approved, the COCA may require that the contingency plan be implemented, that all accepted students be notified, and the contingency status be posted with a public link on the COM's website.

Progress reports may be required by the COCA. These may require information about the parent campus and the branch campus, as specified by the COCA.

Step IV: Year 1 Focused Site Visit
Step IV commences the monitoring phase of the branch campus substantive change request.

Within six months after the matriculation of students at the branch campus, a Year 1 Focused Site Visit will be conducted to assess the facilities, faculty, student services, finances, curriculum, and administrative capacity to operate the branch campus. Ninety (90) days prior to the site visit, a self-study must be submitted demonstrating compliance with the following **Pre-Accreditation elements**:

1. **Element 1.1: Program Mission**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The program mission.
   b. The values, vision, goals or objectives statements, if applicable.
   c. The public webpage where the documents are published.
   d. A copy of the parent institution's mission statement. The documents should show the last updated date (or effective date).
   e. Documentation of the mission revision process, participants (including faculty, staff, and students), and meeting minutes documenting the most recent governing board approval of

the COM's mission.

2. **Element 1.2: Strategic Plan**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The branch campus strategic plan through the anticipated graduation of the first class of students.
   b. The list of individuals who participated in the plan creation/revision.
   c. The link to the public webpage where the documents are published.

3. **Element 1.3: Licensing and Regional/Institutional Accreditation**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The charter, license, or letter of approval from all states and agencies issuing such approvals.
   b. The link to the public webpage where the most recent institutional accreditation information is published.
   c. The link to the public webpage that describes the COM's relationship with a partner institution (if applicable).

4. **Element 1.4: Governance and Program Policies**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The bylaws of the COM's (or parent institution's) governing body and a list of members, including titles, of the body.
   b. The policies for:
      i. Conflict of interest for board members, employees, and institutionally employed faculty;
      ii. Due process for all employees, students, faculty, and credentialed instructional staff;
      iii. Confidentiality of employment, student, and medical records;
      iv. Fiscal management and accountability; and
      v. Ethics, incorporating the AOA code of ethics.

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

5. **Element 1.5a: Non-Discrimination or 1.5b: Non-Discrimination for Faith-Based Institutions**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The non-discrimination and anti-sexual harassment policies.
   b. The link to the public webpage to where the policies are/will be published.
   c. The flowcharts of the processes for reporting alleged discrimination and sexual

harassment incidents and tracking their resolution.

6. **Element 1.6: Degree-Granting Body**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The bylaws or governing documents that demonstrate the conferral of degree.
   b. The COM policy demonstrating that the faculty association (or approved body) must recommend candidates for graduation.
   c. Minutes from the faculty association meeting where this recommendation was made for the most recent graduates.

7. **Element 2.1: Dean Qualifications**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The branch campus Dean's diploma from a COCA-accredited college of osteopathic medicine.
   b. branch campus
   c. The branch campus Dean's AOA or ABMS board certification documents.
   d. A current and complete curriculum vitae for the branch campus Dean.
   e. The current job description for the branch campus Dean.
   f. The branch campus Dean's current Practitioner Profile report from the Federation Credentials Verification Service.

   Note: A branch campus must notify the COCA within five business days of any change of branch campus Dean. (See COCA Policies and Procedures.)

8. **Element 2.2: Full-Time Dea**n
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. The employment contract (compensation redacted) demonstrating that the branch campus Dean is employed full-time.

9. **Element 2.3: Academic and Administrative Leadership**
   Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
   a. An organizational chart that shows the COM's and branch campus's leadership positions (including titles and names) and reporting relationships.

   Note: As directed in Steps I and II of the Branch Campus Substantive Change Request, a minimum of two associate deans (at least one of which must be a board-certified DO) must be under contract with the proposed branch campus.

   b. The current job description for each member of the administrative leadership team (Associate Deans, Associate Deans, and senior level administrators; do not include department chairs).
   c. A current curriculum vitae for each member of the administrative leadership team

(Associate Deans, Associate Deans, and senior level administrators; do not include department chairs).
d. A copy of the employee's medical license (if a DO or MD) if required based on the position description.
e. A copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date if required based on the position description.

10. **Element 2.4: Accreditation Standard Complaint Policies and Procedures**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures regarding accreditation standard complaints and their adjudication including an explanation of how the complainant's confidentiality is maintained throughout the process.
b. Sample records of accreditation standard complaints that have been received, adjudicated, and resolved.
c. The link to the public webpage where the accreditation standard complaint policies and procedures are published.

11. **Element 3.1: Financial Resources**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The operational pro forma showing income, revenue sources, and expenses including budget for faculty and staff for the COM up through the anticipated graduation of the first class of students. Indicate (highlight) any changes or updates since the initial submission.
b. The proposed capital budget for the development of the COM. Indicate (highlight) any changes or updates since the initial submission.

12. **Element 3.2: Financial Planning and Budgeting**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The flowchart demonstrating the budget development process indicating where the final budget approval occurs and clearly reflecting the Dean's role in the process.

13. **Element 3.3: Budgetary Authority**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The current job description demonstrating that the Dean possesses budgetary authority for the COM.
b. The employment contract (compensation redacted) demonstrating that the Dean possesses budgetary authority for the COM.

14. **Element 3.4: Financial Audit**
Provide:
a. The annual audited financial statement and audit report for the COM or its parent institution for the latest complete fiscal year.
b. Evidence of resolution for any concerns cited in the audit's accompanying management

letter.

15. **Element 4.1: Facilities**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. Pre-Accreditation Table 4.1 to describe the facilities the branch campus uses for instruction, highlight any that will be required to accomplish the requested change(s).
    b. Facility floor plan demonstrating any alterations or additions to existing facilities that will be required to accomplish the requested change(s). Include designations of how the space will be utilized (full architectural drawings are not required).
    c. A description and indicate on the floor plans provided, the facilities used for simulation, study space, and standardized patient encounters provided to students, noting any alterations or additions to existing facilities that will be required to accomplish the requested change(s).
    d. How the branch campus will assess the adequacy of the core and required clinical rotation facilities, including how students will be involved in the assessment.

16. **Element 4.2: Security and Public Safety**
    Provide:
    a. A copy of all security and safety related policies and procedures.
    b. A link to the public webpage where security and safety information is published.
    c. A copy of the most recent report required under the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, 20 U.S.C. §1092(f), as amended.
    d. A link to the public webpage where the COM's Clery Report is published.

17. **Element 4.3: Information Technology**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The COM's information technology strategic plan.
    b. How students, faculty, and staff will be/are involved in the assessment of information technology services.
    c. The most recent technology assessment report including input from students, faculty, and staff.

18. **Element 4.4: Learning Resources**
    Provide:
    a. A completed Pre-Accreditation Table 4.4 to describe the learning resources of the branch campus.

19. **Element 5.1: Professionalism**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The COM's professionalism policies and procedures.
    b. The link to the public webpage where the professionalism policies are published.
    c. The description and charge of the committee or approved body that oversees issues of professionalism and ethics.
    d. The list of the membership of the committee or approved body that oversees issues of

professionalism and ethics.

20. **Element 5.3: Safety, Health, and Wellness**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The policies and procedures addressing safety and health issues.
    b. The link to the public webpage where safety, health, and wellness information is published.
    c. How this information is provided to students, faculty, and staff.

21. **Element 5.4: Patient Care Supervision**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The policies addressing student supervision during the provision of patient care, including policies on the use of telemedicine, if applicable.
    b. The link to the public webpage where the documents are published.
    c. How this information is provided to students, faculty, and staff.

22. **Element 6.1: Curriculum Design and Management**
    Provide:
    a. The charge and responsibility of the approved body/curriculum committee.
    b. A list of the current members of the approved body/curriculum committee and their titles.
    c. A list of meeting dates, rosters of attendees, and meeting minutes for the past academic year.
    d. A brief description of the COM's curriculum design and teaching methods. (Not to exceed 250 words.)

23. **Element 6.2: Programmatic Level Educational Objectives**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The programmatic level educational objectives for the osteopathic medical education program.
    b. The link to the public webpage where the information is published.

24. **Element 6.3: Maximum Length of Completion**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The policy that describes that single degree DO students must complete their education within 150% of the standard time (six years following matriculation).
    b. The link to the public webpage where this policy is published.

25. **Element 6.4: Osteopathic Core Competencies**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The branch campus' delivery of its curriculum including teaching, educating, and assessing

its students to ensure the development of the seven osteopathic core competencies of medical knowledge, patient care, communication, professionalism, practice-based learning, systems-based practice, and osteopathic principles and practice/osteopathic manipulative treatment. (Not to exceed 250 words.)
b. The curriculum map demonstrating where the osteopathic core competencies are/will be delivered.

Note: A single curriculum map can be provided for elements 6.4-6.8 and 6.12.

26. **Element 6.5: Scientific Method**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The branch campus' delivery of its curriculum including instruction in the scientific method addressing data collection, testing and verifying hypotheses or questions regarding biomedical phenomena and the basic scientific and ethical principles of clinical and translational research. The curriculum must include the methods by which such research is conducted, evaluated, explained to patients/subjects of a clinical study, and applied to patient care. (Not to exceed 250 words.)
b. The curriculum map demonstrating where scientific method content is/will be delivered.

27. **Element 6.6: Principles of Osteopathic Medicine**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The branch campus' delivery of its OPP and OMM curricula including instruction in OPP, including both observational and hands-on application of OMM. (Not to exceed 250 words.)
b. The curriculum map demonstrating where OPP and OMM content is/will be delivered.

28. **Element 6.7: Self-Directed Learning**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The branch campus' delivery of its curriculum including self-directed learning experiences and time for independent study allowing students to develop skills for lifelong learning. (Not to exceed 250 words.)
b. The curriculum map demonstrating where self-directed learning experiences and time for independent study are/will be delivered.

29. **Element 6.8: Interprofessional Education for Collaborative Practice**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The branch campus' delivery of its curriculum which includes preparation of students to function collaboratively on health care teams, adhering to IPEC core competencies. (Not to exceed 250 words.)
b. The curriculum map demonstrating where interprofessional education is/will be delivered.

30. **Element 6.9: Clinical Education**
Provide documentation of any changes to the following that may have occurred since Step II

of the branch campus request:
a. A copy of a branch campus-approved clinical education affiliation agreement.
b. A list of all contracted sites for core and required clinical rotations. At the time of the site visit, a branch campus must produce all documents that evidence the acceptance of the students of the branch campus to participate at the affiliate sites, including all executed affiliation agreements.
c. The definition of a student eligible to enter clinical rotations.
d. Documentation (e.g., clinical education manual) listing core and required third- and fourth-year rotations.
e. Syllabi for all core and required clinical rotations.
f. Policies and procedures (protocols) demonstrating how clinical education is/will be delivered to all students through the branch campus.
g. A completed Pre-Accreditation Tables 6.9a detailing student population.
h. A completed Pre-Accreditation Table 6.9b demonstrating adequacy of core and required clinical rotation capacity.
i. A contingency plan for all core and required rotations indicating how students will be placed in clinical education in the event opportunities are no longer available.

31. **Element 6.10: Clinical Experience**

A branch campus must ensure that each student's core and required rotations prior to the fourth-year clinical clerkships include the following experiences:

i. at least one rotation conducted in a health care setting in which the student works with resident physicians currently enrolled in an accredited program of graduate medical education;
ii. at least one rotation under the supervision of an osteopathic physician; and
iii. more than one rotation in an inpatient setting.

Provide:
a. De-identified documentation showing how the current set of students will receive these experiences prior to their fourth-year clinical clerkships from the system used by the branch campus to track compliance with these requirements.
b. Describe the process the branch campus will use to ensure students will receive the required clinical rotation experiences prior to their fourth-year clinical clerkships.

32. **Element 6.11: Comparability Across Clinical Education Sites**

Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. Policies and procedures describing how student outcomes at clinical educational sites will be reviewed and utilized in the determination of the comparability of outcome of the clinical experiences.

33. **Element 7.1: Faculty and Staff Resources and Qualifications**

Provide:
a. An organizational chart (titles and names, where available) demonstrating how the faculty is organized and the reporting hierarchy for each department.
b. A completed Pre-Accreditation Tables 7.1a and 7.1b with anticipated date of hire of each

faculty and staff member.
c. A description of the mechanism to review and approve credentials of physician faculty that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.

34. **Element 7.2: Faculty Approvals at All Teaching Sites**
Provide:
a. A copy of the policies and procedures for credentialing and appointment, or approval of all branch campus faculty.
b. A completed Pre-Accreditation Table 7.2 listing credentials for all clinical faculty.

35. **Element 7.3: Department Chair Qualifications**
Provide:
a. A copy of job description for each department chair, or equivalent.
b. A complete and current curriculum vitae for each department chair, or equivalent.
c. For each clinical department chair, or equivalent, provide a copy of the medical license. (If a DO or MD)
e. For each clinical department chair, or equivalent, provide a copy of the AOA or ABMS board certification documents. (If a DO or MD).

36. **Element 7.4: Primary Care Leadership**
Provide:
a. A copy of the job description for the chair of primary care, or equivalent.
b. A complete and current curriculum vitae for the chair of primary care, or equivalent.
c. A copy of the chair's, or equivalent, medical license.
d. A copy of the chair's, or equivalent, AOA or ABMS board certification documents.

37. **Element 7.5: OMM/OPP Leadership**
Provide:
a. A copy of the job description for the chair of OMM/OPP*.
b. A complete and current curriculum vitae for the chair of OMM/OPP*.
c. A copy of the chair's* medical license.
d. A copy of the chair's* board certification documents.

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

38. **Element 7.6: Faculty Development**
Provide:
a. A report of the most recent annual faculty development needs assessment.
b. A roster of all faculty development activities for the past academic year, including documentation of the faculty participation at each activity.

39. **Element 7.7: Faculty Association**
Provide:
a. A list of faculty association meeting dates, rosters of attendees, and meeting minutes for

the past academic year.

40. **Element 7.8: Faculty Appointment and Advancement**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures for faculty appointment and advancement, including:
    i. term of appointment;
    ii. responsibilities;
    iii. lines of communication;
    iv. privileges and benefits;
    v. performance evaluation and remediation;
    vi. terms of dismissal;
    vii. due process; and
    viii. the policy on practice earnings (if relevant).

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

b. The link to the webpage where the documents are published.
c. A copy of the pay/rank parity review policy.

41. **Element 8.1 Research and Scholarly Activity Strategic Plan**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The research and scholarly activity strategic plan of the branch campus.
b. The link to the public webpage where the research and scholarly activity strategic plan is/will be published.

42. **Element 8.2: Research and Scholarly Activity Budget**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The budgetary processes of the branch campus that support research and scholarly activity by its faculty and students.
b. The research and scholarly activity budget of the branch campus through the anticipated graduation of the first class of students.

43. **Element 8.3: OMM/OPP Research and Scholarly Activity**
Provide:
a. A description of how OMM and OPP are/will be incorporated into the research and scholarly activity of the branch campus.
b. A completed Pre-Accreditation Table 8 to identify the OMM/OPP research/scholarly activity of the faculty of the branch campus (and students and staff, if applicable) over the past three years.

44. **Element 8.4: Student Participation in Research and Scholarly Activity**
    Provide:
    a. A copy of all student research and scholarly activity policies.
    b. A link to the public webpage where the policies are/will be published.
    c. A completed Pre-Accreditation Table 8.

45. **Element 9.1: Admissions Policy**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The admission requirements and policies and procedures for osteopathic medical student selection and enrollment.
    b. The technical standards required of prospective students.
    c. The public webpage where the policies are published.

46. **Element 9.2: Academic Standards**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The policies and procedures on academic standards including:
        i. grading;
        ii. class attendance;
        iii. tuition and fees;
        iv. refunds;
        v. student promotion;
        vi. retention;
        vii. graduation;
        viii. students' rights and responsibilities; and
        ix. filing of grievances and appeals.

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

    b. The public webpage where the documents are published.

47. **Element 9.3: Transfer Policies**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The transfer policies and procedures, including those made available to students pursuant to 34 CFR § 668.43(a)(11).
    b. The public webpage where the transfer policies of the branch campus are published.

48. **Element 9.4: Secure Student Recordkeeping**
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The policies and procedures on student recordkeeping.
    b. The policy and procedure for training of faculty and staff pursuant to the Family

Educational Rights and Privacy Act (FERPA) (20 USC 1232g; 34 CFR part 99).

49. **Element 9.5: Academic Counseling**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The process for ensuring that academic counseling is/will be provided to students. (Not to exceed 250 words.)

50. **Element 9.6: Career Counseling**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The process for ensuring that career counseling, including GME readiness, is/will be provided to students. (Not to exceed 250 words.)

51. **Element 9.7: Financial Aid and Debt Management Counseling**
Provide:
a. When financial aid and debt counseling sessions are/were provided to the students.
b. The OMS year during which students are required to receive these sessions.
c. A roster of students that received financial aid and debt counseling.

52. **Element 9.8: Mental Health Services**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures for students seeking counseling and mental health services.
b. The link to the public webpage where students can/will be able to access mental health care information.
c. The list of the mental health services available to students at all teaching locations with service locations and hours.

53. **Element 9.9: Physical Health Services**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures for students seeking diagnostic, preventive, and therapeutic health services.
b. The link to the public webpage where students can/will be able to access physical health services information.
c. The list of the health service locations where students may seek care at all teaching locations.

54. **Element 9.10: Non-Academic Health Professionals**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures on recusal from student assessment and promotion for health professionals providing services to students.
b. The link to the public webpages where these policies and procedures are published for faculty and students.

c. How this information is/will be provided to students and faculty annually. (Not to exceed 250 words.)

55. **Element 9.11: Health Insurance**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures regarding health insurance for students, including the annual verification process.
b. The link to the public webpage where the health insurance policies are published.

56. **Element 10.1: Osteopathic Educational Continuum**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies of the branch campus that describe the procedures, personnel, and budgetary resources of the branch campus to support the continuum of osteopathic medical education.

Note: In states where first-year residency development in GME is required by law, a branch campus must demonstrate how it is complying with this requirement.

57. **Element 10.2: Accredited GME**
A branch campus must provide a mechanism to assist new and existing GME programs in meeting the requirements for accreditation.

A branch campus must support development and growth of GME through establishment of a GME office with qualified personnel, expertise, and financial support focused on supporting new and established GME in obtaining accreditation. A branch campus may share GME development personnel with the COM or parent institution. The branch campus must have qualified personnel to assist students with the UME/GME transition.

The branch campus may support development and growth of GME under strategies of its own design, but the branch campus should provide evidence of approval of any new PGY-1 positions supported by the branch campus consistent with its GME development plan. (New PGY-1 positions may not be claimed by other COMs.)

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

Provide:
a. The policy and description of the mechanism of a branch campus for assisting new and existing GME in meeting the requirements for accreditation.
b. A completed Pre-Accreditation Table 10.2a for all affiliated ACGME programs for which the branch campus has supported development and growth.
c. Evidence of ACGME approval of new PGY-1 positions supported by the branch campus.

58. **Element 10.3: Osteopathic Recognition of GME**
Provide documentation of any changes to the following that may have occurred since Step II

of the branch campus request:
a. The processes and commitment of resources of a branch campus to assist GME programs to achieve osteopathic recognition.

59. **Element 11.1: Program Assessment**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The guiding documents which govern how the branch campus conducts learning outcomes assessments. This may be in the form of a program review manual or guide that has been adopted by the faculty. This must describe an assessment of the osteopathic core competencies in the curriculum.

60. **Element 11.2: Student Evaluation of Instruction**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The processes for obtaining student evaluation of classroom and clinical instruction.
b. How student evaluations are/will be kept confidential. (Not to exceed 250 words.)
c. The evaluation forms that are/will be used by the students for these purposes.
d. The flowchart demonstrating how the evaluation data are utilized in curricular improvement.

61. **Element 11.3: COCA Annual and Mid-Cycle Reports**
A branch campus must submit specified annual reports to the COCA.
a. COCA staff will confirm that the branch campus has completed and submitted the required COCA annual reports by the established deadlines.

62. **Element 11.4a: COMLEX-USA**
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The policies and procedures related to the COMLEX-USA exam.
b. The public webpage where four years of COMLEX-USA Level 1, Level 2, and Level 3 first time pass rates of the branch campus will be published.

11.4b: GME Placement Rates
Provide:
a. A link to the public webpage where the four years of GME placement rates of the branch campus are/will be published. The placement rate must be calculated by dividing the number of students who entered into a PGY-1 position by the number of students that applied to enter into a PGY-1 position.
b. A link to the public webpage where student GME placement rates can be requested.

11.4c: Cohort Graduation Rates
Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
a. The link to the public webpage where the cohort graduation rates of the branch campus at years 4, 5, and 6 are/will be published.

11.4d: Cohort Retention Rates

Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:

a. The link to the public webpage where the cohort retention rates of the branch campus are/will be published.

63. **Element 11.5: Student Survey**

Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:

a. The methods the branch campus used/will use to support the completion of the COCA student survey if this has changed since Step II of the branch campus request.

Note: Elements 12.1-12.10 are for branch campuses that the COCA will serve as institutional accreditor. These elements can be found at the following web page: https://osteopathic.org/index.php?aam-media=/wp-content/uploads/2023-COM-New-and-Developing-Accreditation-Standards.pdf

As of March 1, 2024, the COCA will no longer accept applications to serve as an institutional accreditor.

Step V: Year 2 Progress Report

During the second year of operation at the branch campus, a Year 2 Progress Report will be required to assess the readiness for clinical education. Materials must be submitted at least 90 days prior to the COCA meeting where the substantive change monitoring will be reviewed. The following **Pre-Accreditation elements** will be reviewed:

1. **Element 4.1: Facilities**

   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:

   a. If there will be any changes in the core and required rotation facilities, describe how the branch campus will assess the adequacy of the core and required clinical rotation facilities, including how students will be involved in the assessment.

2. **Element 4.3: Information Technology**

   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:

   a. The COM's information technology strategic plan.

   b. How students, faculty, and staff will be/are involved in the assessment of information technology services.

   c. The most recent technology assessment report including input from students, faculty, and staff.

3. **Element 5.4: Patient Care Supervision**
   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
   a. The policies addressing student supervision during the provision of patient care, including policies on the use of telemedicine, if applicable.
   b. The link to the public webpage where the documents are published.
   c. How this information is provided to students, faculty, and staff.

4. **Element 6.1: Curriculum Design and Management**
   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
   a. The charge and responsibility of the approved body/curriculum committee.
   b. A list of the current members of the approved body/curriculum committee and their titles.
   c. A list of meeting dates, rosters of attendees, and meeting minutes for the past academic year.
   d. A brief description of the curriculum design and teaching methods of the branch campus. (Not to exceed 250 words.)

5. **Element 6.9: Clinical Education**
   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
   a. A copy of a branch campus-approved clinical education affiliation agreement.
   b. A list of all contracted sites for core and required clinical rotations. At the time of the site visit, a branch campus must produce all documents that evidence the acceptance of the students of the branch campus to participate at the affiliate sites, including all executed affiliation agreements.
   c. The definition of a student eligible to enter clinical rotations.
   d. Documentation (e.g., clinical education manual) listing core and required third- and fourth-year rotations.
   e. Syllabi for all core and required clinical rotations.
   f. Policies and procedures (protocols) demonstrating how clinical education is/will be delivered to all students through the branch campus.
   g. A completed Pre-Accreditation Tables 6.9a detailing student population.
   h. A completed Pre-Accreditation Table 6.9b demonstrating adequacy of core and required clinical rotation capacity.
   i. A contingency plan for all core and required rotations indicating how students will be placed in clinical education in the event opportunities are no longer available.

6. **Element 6.10: Clinical Experience**
   A branch campus must ensure that each student's required core rotations prior to the fourth-year clinical clerkships include the following experiences:
   i. At least one rotation conducted in a health care setting in which the student works with resident physicians currently enrolled in an accredited program of graduate medical education;
   ii. At least one rotation under the supervision of an osteopathic physician; and

iii. More than one rotation in an inpatient setting.

Provide:
a. De-identified documentation showing how the most recent set of students received these experiences prior to their fourth-year clinical clerkships from the system used by the branch campus to track compliance with these requirements.
b. Describe the process the branch campus will use to ensure students will receive the required clinical rotation experiences prior to their fourth-year clinical clerkships.

7. **Element 6.11: Comparability Across Clinical Education Sites**
Provide:
a. Policies and procedures describing how student outcomes at clinical educational sites will be reviewed and utilized in the determination of the comparability of outcome of the clinical experiences.
b. The most recent report assessing student outcomes across sites, including a statistical analysis and describe plans to address any issues found.

8. **Element 7.1: Faculty and Staff Resources and Qualifications**
Provide:
a. An organizational chart (titles and names, where available) demonstrating how the faculty is organized and the reporting hierarchy for each department.
b. A completed Pre-Accreditation Tables 7.1a and 7.1b with anticipated date of hire of each faculty and staff member.
c. A description of the mechanism to review and approve credentials of physician faculty that have never been board certified or are not currently board eligible by the AOA or ABMS at non-core rotations sites.

9. **Element 7.2: Faculty Approvals at All Teaching Sites**
Provide:
a. A copy of the policies and procedures for credentialing and appointment, or approval of all branch campus faculty.
b. A completed Pre-Accreditation Table 7.2 listing credentials for all clinical faculty.

10. **Element 7.3: Department Chair Qualifications**
Provide:
a. A copy of job description for each department chair, or equivalent.
b. A complete and current curriculum vitae for each department chair, or equivalent.
c. For each clinical department chair, or equivalent, provide a copy of the medical license. (If a DO or MD)
d. For each clinical department chair, or equivalent, provide a copy of the AOA or ABMS board certification documents. (If a DO or MD).

11. **Element 7.4: Primary Care Leadership**
Provide:
a. A copy of the job description for the chair of primary care, or equivalent.
b. A complete and current curriculum vitae for the chair of primary care, or equivalent.

c. A copy of the chair's, or equivalent, medical license.
d. A copy of the chair's, or equivalent, AOA or ABMS board certification documents.

12. **Element 7.5: OMM/OPP Leadership**
    Provide:
    a. A copy of the job description for the chair of OMM/OPP*.
    b. A complete and current curriculum vitae for the chair of OMM/OPP*.
    c. A copy of the chair's* medical license.
    d. A copy of the chair's* board certification documents.

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

13. **Element 9.5: Academic Counseling**
    Provide:
    a. Any changes in the process for ensuring that academic counseling is provided to students at the branch campus. (Not to exceed 250 words)
    b. A completed Continuing Table 9.5.

14. **Element 9.6: Career Counseling**
    Provide:
    a. Any changes in the process for ensuring that academic counseling is provided to students at the additional location. (Not to exceed 250 words)
    b. A completed Continuing Table 9.6.

15. **Element 9.7: Financial Aid and Debt Management Counseling**
    Provide:
    a. When financial aid and debt counseling sessions are/were provided to the student.
    b. The OMS year during which students are required to receive these sessions.
    c. A roster of students that received financial aid and debt counseling.

16. **Element 9.8: Mental Health Services**
    Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
    a. The policies and procedures for students seeking counseling and mental health services.
    b. The link to the public webpage where students can/will be able to access mental health care information.
    c. The list of the mental health services available to students at all teaching locations with service locations and hours.

17. **Element 9.9: Physical Health Services**
    Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
    a. The policies and procedures for students seeking diagnostic, preventive, and therapeutic health services.
    b. The link to the public webpage where students can/will be able to access physical

health services information.
c. The list of the health service locations where students may seek care at all teaching locations.

18. **Element 9.11: Health Insurance**
    Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
    a. The policies and procedures regarding health insurance for students, including the annual verification process at the branch campus.
    b. The link to the public webpage where the health insurance policies are published.

19. **Element 10.2: ACGME GME**
    Provide:
    a. Any changes in the number of ACGME approved PGY-1 residency positions.
    b. A completed Pre-Accreditation Table 10.2a for all affiliated ACGME programs for which the COM/branch campus has supported development and growth.
    c. Evidence of ACGME approval of new PGY-1 positions supported by the COM/additional location.

20. **Element 11.1: Program Assessment**
    Provide:
    a. The guiding documents which govern how the COM conducts learning outcomes assessments. This may be in the form of a program review manual or guide that has been adopted by the faculty. This must describe an assessment of the osteopathic core competencies in the curriculum.
    b. A list of the learning outcome assessments performed over the past three academic years.
    c. Examples of changes in curriculum, pedagogy, counseling, or other aspects of the student experience that have been made as a result of recent program reviews in order to more fully support student learning, including the core competencies.

21. **Element 11.5: Student Survey** (COCA will conduct a survey of students)
    Provide documentation of any changes to the following that may have occurred since Step II of the branch campus request:
    a. The methods the branch campus used/will use to support the completion of the COCA student survey if this has changed since Step II of the branch campus request.

In addition, a review of the branch campus' COMLEX-USA pass rates will be conducted as part of the annual report.

Step VI: Year 3 Progress Report

During the third year of operation, a Year 3 Progress Report to assess readiness for graduate medical education will be required. Materials must be submitted at least 90 days prior to the COCA meeting

where the substantive change monitoring will be addressed demonstrating compliance with the following **Pre-Accreditation elements**:

1. **Element 4.1: Facilities**
   Provide documentation of any changes to the following that may have occurred since Step V of the branch campus request:
   a. Any changes in the core and required rotation facilities, describe how the branch campus will assess the adequacy of the core and required clinical rotation facilities, including how students will be involved in the assessment.

2. **Element 9.5: Academic Counseling**
   Provide:
   a. The description of the process for ensuring that academic counseling is/will be provided to students at the branch campus. (Not to exceed 250 words)
   b. A completed Pre-Accreditation Table 9.5.

3. **Element 9.6: Career Counseling**
   Provide:
   a. The description of the process for ensuring that career counseling, including GME readiness, is/will be provided to students (Not to exceed 250 words).
   b. A completed Pre-Accreditation Table 9.6.

4. **Element 9.7: Financial Aid and Debt Management Counseling**
   Provide:
   a. When financial aid and debt counseling sessions are/were provided to the students.
   b. The OMS year during which students are required to receive these sessions.
   c. A roster of students that received financial aid and debt counseling.

5. **Element 9.8: Mental Health Services**
   Provide documentation of any changes to the following that may have occurred since Step V of the branch campus request:
   a. The policies and procedures for students seeking counseling and mental health services.
   b. The link to the public webpage where students can/will be able to access mental health care information.
   c. The list of the mental health services available to students at all teaching locations with service locations and hours.

6. **Element 9.9: Physical Health Services**
   Provide documentation of any changes to the following that may have occurred since Step V of the branch campus request:
   a. The policies and procedures for students seeking diagnostic, preventive, and therapeutic health services.
   b. The link to the public webpage where students can/will be able to access physical health services information.
   c. The list of the health service locations where students may seek care at all teaching

locations.

7. **Element 10.1: Osteopathic Educational Continuum**
   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
   a. The policies of the branch campus that describe the procedures, personnel, and budgetary resources of the branch campus to support the continuum of osteopathic medical education.

   Note: In states where first-year residency development in GME is required by law, a branch campus must demonstrate how it is complying with this requirement.

8. **Element 10.2: ACGME Accredited GME**
   Provide:
   a. Any changes in the number of ACGME approved PGY-1 residency positions.
   b. A completed Pre-Accreditation Table 10.2a for all affiliated ACGME programs for which the COM/branch campus has supported development and growth.
   c. Evidence of ACGME approval of new PGY-1 positions supported by the COM/additional location.

9. **Element 10.3: Osteopathic Recognition of GME**
   Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
   a. The processes and commitment of resources of a branch campus to assist GME programs to achieve osteopathic recognition.

10. **Element 11.1: Program Assessment**
    Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
    a. The guiding documents which govern how the branch campus conducts learning outcomes assessments. This may be in the form of a program review manual or guide that has been adopted by the faculty. This must describe an assessment of the osteopathic core competencies in the curriculum.

11. **Element 11.4a: COMLEX-USA**
    Provide documentation of any changes to the following that may have occurred since Step IV of the branch campus request:
    a. The policies and procedures related to the COMLEX-USA exam.
    b. The public webpage where four years of COMLEX-USA Level 1, Level 2, and Level 3 first time pass rates of the branch campus will be published.

In addition, a review of the branch campus' COMLEX-USA pass rates will be conducted as part of the annual survey.

Step VII: Student Survey and Comprehensive Site Visit

During the 4th year of operation at the branch campus, and prior to the graduation of its first class, a student survey will be conducted by the COCA and a comprehensive site visit will be conducted. The branch campus must submit a self-study demonstrating compliance with all the elements in the Continuing accreditation standards 90 days prior to the site visit.

In addition, a review of the branch campus' COMLEX-USA pass rates will be conducted as part of the annual survey.

Other monitoring will occur as part of the routine annual reporting to the COCA. In addition, the COCA may require a progress report, student survey, or a focused site visit.