Accreditation of Colleges of Osteopathic Medicine:

COM New & Developing Accreditation Standards

Effective July 1, 2017
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Introduction

The American Osteopathic Association’s Commission on Osteopathic College Accreditation (COCA) accredits osteopathic medical education programs leading to the DO degree in the United States (programmatic accreditation). The COCA also accredits free-standing colleges of osteopathic medicine where no other educational program is offered (institutional accreditation) and serves as the federal Title IV gatekeeper for those institutions. By assessing the compliance of osteopathic medical education programs based on the nationally accepted standards of the COCA, we serve the interests of the public and of the students enrolled in our Colleges of Osteopathic Medicine (COMs).

To achieve and maintain accreditation, an osteopathic medical education program leading to the Doctor of Osteopathic Medicine (DO) degree must meet the standards contained in this document.

The COCA regularly reviews the accreditation standards, and seeks feedback from the osteopathic community and public. Changes to the COCA standards are considered at a public hearing before a final vote for adoption is made by the COCA. Once approved, new or revised standards are published in Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards, which indicates when the changes become effective.

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

1. Applicant Status
2. Candidate Status
3. Pre-Accreditation Status

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

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

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

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

The Applicant Status Request Form is to be completed and submitted to the COCA at least 36 months and no more than 60 months prior to the anticipated matriculation date of the first class of students. An application for Applicant Status must also be accompanied by a non-refundable application fee of $6,000.
Candidate Status

Candidate status is the second step in seeking accreditation by an applicant COM and is conferred with the privilege of recognition by the COCA, which will be publicly announced. Candidate status may be granted to COMs that demonstrate the planning and resources necessary to be expected to be able to proceed to Pre-Accreditation Status within two (2) years.

An applicant for Candidate Status must submit a Candidate Status Self Study along with a Feasibility Study (Business Plan) that assesses the viability of the proposed new COM. The Feasibility Study (Business Plan) must be developed in partnership with a professional nationally known external business consulting firm. The COM Dean and administrative team must play an integral role in the development of these documents. An application for Candidate Status must also be accompanied by a non-refundable application fee of $36,000.

It is expected that a Dean will be hired at least 12 months prior to the submission of the Candidate Status documents and will provide the principal guidance and direction in the development of the COM through all steps of the Candidate Status process and beyond through Pre-Accreditation Status and into Accreditation. A change in the Dean during this time period requires re-initiation of the Candidate Status application process.

It is also expected that the Dean will hire qualified individuals at the Associate/Assistant Dean level to assist him/her in the development of the COM through Candidate Status and into Pre-Accreditation Status and ultimate progress to Accreditation. A minimum of two Associate Deans must be under contract with the COM before Candidate Status will be granted.

The COM holding Candidate Status will not recruit, accept applications from, or admit prospective students. This means that a COM holding this status must not do any of the following:

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

Candidate Status Process

1. COM Submits Candidate Status Self-Study and Feasibility Study (Business Plan) and Check for the $36,000 non-refundable Application Fee
2. Staff Review
3. COCA Commission (or Executive Committee) Self-Study and Feasibility Study Review
4. Once all feasibility procedures are met based on paper submission, a Candidate Status Site Visit is authorized
5. Escrow Contracts are developed.
6. Candidate Status Self Study, Site Visit Report, and Escrow Contracts are presented to the entire COCA for review
7. COM Testimony may be offered
8. Third Party Testimony may be offered
9. Decision by the COCA regarding the granting of Candidate Status; the Escrow Accounts must be funded prior to the granting of Candidate Status

Review of Candidate Status

Candidate Status will be reviewed annually via submitted written reports until the COM achieves Pre-Accreditation Status. If the COM has not been able to proceed to Pre-Accreditation Status within 24 months of the granting of Candidate Status, the Candidate Status will be withdrawn. A re-application will require a new Candidate Status Self Study and Application Fee.
Candidate Status Self Study

Introductory Materials

Site Proposed and Why a School is Needed in This Location

Class Size Requested

Academic Year to Enroll

Feasibility Study (Business Plan)

Candidate Standard 1: Mission and Governance

Candidate Element 1.1: Program Mission

A proposed College of Osteopathic Medicine (COM) must produce a written mission statement for the program that explains the overall purpose of the program and serves as guide for program planning and assessment. If the COM is part of a larger educational institution or parent institution, the COM’s mission shall be consistent with the institution’s mission.

Candidate Element 1.2: Licensing and Regional/Institutional Accreditation

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

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

Candidate Element 1.3: Governance and Program Policies

A proposed COM must have a governing body, or be part of a parent institution with a governing body, that defines the mission of the proposed COM and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. The proposed COM must publish and abide by policies regarding:
a. Conflict of Interest for board members, employees, and institutionally employed faculty.
b. Due process for all employees, students, faculty, and credentialed instructional staff.
c. Confidentiality of employment, student, and medical records.
d. Fiscal management and accountability.
e. Ethics, incorporating the AOA Code of Ethics.

**Candidate Element 1.4a:** Non-Discrimination

A proposed COM must demonstrate non-discrimination in the selection of administrative personnel, faculty and staff, and students based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age or disabilities, and religion.

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

The COCA respects the religious mission of faith-based schools. A proposed COM having a religious affiliation or purpose may apply selection criteria and/or policies that are directly related to that affiliation or purpose so long as any such criteria and/or policies are made known to applicants and the public and do not contravene any other COCA standard.

*Editor's Note: Standard 1.4a is intended for non-faith based schools, and Standard 1.4b is intended for faith based school.*

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

A COM must be able to demonstrate executed affiliation agreements addressing the required clinical educational experiences for students.

**Candidate Standard 2: Leadership and Administration**

**Candidate Element 2.1:** Dean Qualifications

A proposed COM must have a Dean who is qualified by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care. The Dean shall have an earned DO degree from a COCA accredited College of Osteopathic Medicine, medical license, board certification (at some time in his/her career), and at least five years’ experience in academic leadership roles that include budget management authority.

**Candidate Element 2.2:** Full-Time Dean

The Dean must be employed full time by the COM and/or its parent institution.
Candidate Element 2.3: Academic and Administrative Leadership

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

Candidate Standard 3: Finances

Candidate Element 3.1: Financial Resources

A proposed COM must ensure that the financial resources of the school are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals.

Candidate Element 3.2: Feasibility Study (Business Plan)

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

Candidate Element 3.3: Escrowed Reserve Funds

A proposed COM must demonstrate the existence of a minimum segregated, unencumbered reserve fund escrowed until one year after graduation of the first class of students and equal to the greater cash value of 1) $30,000,000; or 2) tuition multiplied by the approved number of students for the COM multiplied by four years. An increase in tuition will require recalculation of the escrow amount and an increase in the amount of the escrowed funds. The escrowed reserve fund must not be borrowed or pledged funds and must be 100% wholly owned assets of the COM or its parent institution.

Candidate Element 3.4: Operating Reserve Fund

A proposed COM must demonstrate the existence of a minimum operating reserve fund until graduation of the first class of students and equal to one-quarter (1/4) of the amount of the minimum segregated, unencumbered escrowed reserve fund. The minimum operating reserve fund must not be borrowed or pledged funds and must be 100% wholly owned assets of the COM or its parent institution.
Candidate Standard 4: Facilities

Candidate Element 4.1: Facilities

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

Candidate Element 4.2: Information Technology

A proposed COM must provide access to information technology to support its mission.

Candidate Standard 5: INTENTIONALLY OMITTED

Candidate Standard 6: Curriculum

Candidate Element 6.1: Programmatic Level Educational Objectives

A proposed COM must define all programmatic level educational objectives.

Candidate Element 6.2: Osteopathic Core Competencies

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

Candidate Element 6.3: Teaching Methods

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

Candidate Element 6.4: Clinical Education

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

Candidate Element 6.5: Clinical Affiliation Agreements

A proposed COM must be able to provide clinical education rotations, including demonstration of adequate faculty, for at least 120% of the approved class size.
Candidate Standard 7: Faculty and Staff

Candidate Element 7.1: Faculty and Staff Resources and Qualifications

A proposed COM must have sufficient faculty and staff resources to achieve the program mission.

Candidate Element 7.2: Faculty Appointment and Advancement

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

Candidate Standard 8: Scholarly Activity

Candidate Element 8.1: Research and Scholarly Activity

A proposed COM must make a commitment to research and scholarly activity.

Candidate Standard 9: Students

Candidate Element 9.1: Admissions Policy

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

Candidate Element 9.2: Recruitment of Students

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

Candidate Standard 10: Graduate Medical Education

Candidate Element 10.1: GME Feasibility

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

Candidate Standard 11: INTENTIONALLY OMITTED
Candidate Standard 12: Institutional Accreditation (if applicable)

A proposed COM that is developing as a part of a larger institution must demonstrate that the institution has accreditation by an institutional accrediting agency that is recognized by the USDE. The parent institution must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level.

Otherwise, the proposed COM must demonstrate that the elements with Candidacy Standard 12 are met.

Candidate Element 12.1: Incorporation of the Institution

A proposed COM that is not affiliated with a parent institution must demonstrate incorporation as a non-profit or for-profit corporation with bylaws consistent with the COCA accreditation standards. The proposed COM must have an autonomous appointed, functioning governing body that is broad in representation of education, finance, legal, health policy, and osteopathic medical expertise. The governing board must be responsible for appointing the Chief Executive Officer.

Candidate Element 12.2: Degree and Other Educational Offerings

A proposed COM that is not affiliated with a parent institution must demonstrate evidence of approval to grant the Doctor of Osteopathic Medicine (DO) degree from all appropriate agencies.

Candidate Element 12.3: Chief Executive Officer

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

Candidate Element 12.4: Chief Financial Officer

A proposed COM that is not affiliated with a parent institution must employ a Chief Financial Officer who is qualified by education, training, and experience to provide organizational leadership related to the financial health of the institution. The Chief Financial Officer shall have a minimum of three years’ experience in administration in financial management in an institution of higher education or healthcare setting.
Pre-Accreditation Status

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

A COM should submit the Pre-Accreditation Self-Study and non-refundable application fee at least 18 months prior to the anticipated matriculation of the first class of students.

Upon the receipt of Pre-Accreditation Status, the COM will have the right and privilege to solicit applications and admit students, offer medical instruction within the approved osteopathic medical curriculum, and announce its Pre-Accreditation Status. Pre-Accreditation Status may not be designated as "Accreditation" until the COM has received “Accreditation” from the COCA.

A COM with Pre-Accreditation Status will be allowed to matriculate the first class at fifty percent (50%) of the approved class size and the second class at not greater than seventy-five percent (75%) of the approved class size. The third class may enroll not greater than one hundred percent (100%) of the approved class size.

In compliance with 34 CFR 602.16(a)(2), Pre-Accreditation Status will be for a period of time not to exceed five (5) years. Pre-Accreditation Status will be awarded to become effective no earlier than July 1 of the calendar year prior to the matriculation of the first class of students. If the COCA makes a decision to award Pre-Accreditation Status at a meeting that occurs prior to the effective date specified above, the Candidate Status will remain until the effective date of Pre-Accreditation Status. During this interim period, the COM’s Candidate Status will be stated as: “Candidate Status with permission to recruit, but not to admit students or offer instruction.”

Pre-Accreditation Status Process

1. COM Submits Pre-Accreditation Self-Study
2. COM Submits Pre-Accreditation Application Fee of $46,000 (non-refundable)
3. Pre-Accreditation Status Site Visit is conducted
4. Pre-Accreditation Self-Study and Site Visit Report presented to COCA for review
5. COM Testimony may be offered
6. Third Party Testimony may be offered
7. Decision by COCA regarding Pre-Accreditation Status (right to recruit and enroll students)

Review of Pre-Accreditation Status

Pre-Accreditation Status will be reviewed annually via submitted written reports until the COM achieves Accreditation. An on-site visit will occur during the first year of class offerings. If the COM
has not been able to proceed to Accreditation status within five (5) years of the granting of Pre-Accreditation Status, the Pre-Accreditation Accreditation Status will be withdrawn. A teach-out agreement will then be initiated.
Pre-Accreditation Self Study

Pre-Accreditation Standard 1: Mission and Governance

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

Pre-Accreditation Element 1.1: Program Mission (CORE)

A College of Osteopathic Medicine (COM) must produce and publish a written mission statement for the program that explains the overall purpose of the program and serves as guide for program planning and assessment. If the COM is part of a larger educational institution or parent institution, the COM’s mission shall be consistent with the institution’s mission. The COM must review the program mission periodically and revise it as appropriate, including faculty and students, at a minimum, in the process.

Pre-Accreditation Element 1.2: Strategic Plan

A COM must produce and publish a current strategic plan addressing all core aspects of the COM mission.

Pre-Accreditation Element 1.3: Licensing and Regional / Institutional Accreditation (CORE)

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

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

Pre-Accreditation Element 1.4: Governance and Program Policies (CORE)

A COM must have a governing body, or be part of a parent institution with a governing body, that defines the mission of the COM and/or institution, approves the strategic plan, provides financial oversight, and approves requisite policies. The COM must publish and abide by policies regarding:
a. Conflict of Interest for board members, employees, and institutionally employed faculty.

b. Due process for all employees, students, faculty, and credentialed instructional staff.

c. Confidentiality of employment, student, and medical records.

d. Fiscal management and accountability.

e. Ethics, incorporating the AOA Code of Ethics.

**Pre-Accreditation Element 1.5a:** Non-Discrimination (CORE)

A COM must demonstrate non-discrimination in the selection of administrative personnel, faculty and staff, and students based on race, ethnicity, color, sex, sexual orientation, gender, gender identity, national origin, age or disabilities, and religion.

**Pre-Accreditation Element 1.5b:** Non-Discrimination for Faith-Based Institutions (CORE)

The COCA respects the religious mission of faith-based schools. A COM having a religious affiliation or purpose may apply selection criteria and/or policies that are directly related to that affiliation or purpose so long as any such criteria and/or policies are made known to applicants and the public and do not contravene any other COCA standard.

*Editor's Note: Standard 1.5a is intended for non-faith based schools, and Standard 1.5b is intended for faith based school.*

**Pre-Accreditation Element 1.6:** Degree-Granting Body

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

**Pre-Accreditation Element 1.7:** Clinical Education Affiliation Agreements (CORE)

A COM must be able to demonstrate executed affiliation agreements addressing the required clinical educational experiences for students (see Element 6.9 for the required number of affiliation agreements).

**Pre-Accreditation Standard 2:** Leadership and Administration

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

**Pre-Accreditation Element 2.1:** Dean Qualifications (CORE)
A COM must have a Dean who is qualified by education, training, and experience to provide effective leadership in education, scholarly activity, and patient care. The Dean shall have an earned DO degree from a COCA accredited College of Osteopathic Medicine, medical license, board certification (at some time in his/her career), and at least five years’ experience in academic leadership roles that include budget management authority.

**Pre-Accreditation Element 2.2:** Full-Time Dean *(CORE)*

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

**Pre-Accreditation Element 2.3: Academic and Administrative Leadership**

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

**Pre-Accreditation Element 2.4:** Accreditation Standard Complaint Policies and Procedures *(CORE)*

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

**Pre-Accreditation Standard 3: Finances**

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

**Pre-Accreditation Element 3.1:** Financial Resources *(CORE)*

A COM must ensure that the financial resources of the school meet the requirements of Title IV of the Higher Education Act and are adequate to sustain a sound program of osteopathic medical education and to accomplish the programmatic and institutional goals.

**Pre-Accreditation Element 3.2:** Financial Planning and Budgeting

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

**Pre-Accreditation Element 3.3:** Budgetary Authority
A COM 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 COM.

**Pre-Accreditation Element 3.4: Financial Audit (CORE)**

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

**Pre-Accreditation Standard 4: Facilities**

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

**Pre-Accreditation Element 4.1: Facilities (CORE)**

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

**Pre-Accreditation Element 4.2: Security and Public Safety**

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

**Pre-Accreditation Element 4.3: Information Technology**

A COM must provide access to information technology to support its mission.

**Pre-Accreditation Element 4.4: Learning Resources**

A COM must provide access to learning resources to support its mission.

**Pre-Accreditation Standard 5: Learning Environment**

A COM must ensure that its educational program occurs in professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environments. The school also promotes students’ attainment of the osteopathic core competencies required of future osteopathic physicians.
Pre-Accreditation Element 5.1: Professionalism (CORE)

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

Pre-Accreditation Element 5.2: Diversity

A COM must publish and follow policies to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of the academic community.

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

A COM must publish and follow policies and procedures that effectively mitigate faculty, staff, and student exposure to infectious and environmental hazards, provide education on prevention of such exposures, and address procedures for care and treatment after such exposures. A COM must also publish and follow policies related to student, faculty, and staff mental health and wellness and fatigue mitigation.

Pre-Accreditation Element 5.4: Patient Care Supervision (CORE)

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

Pre-Accreditation Standard 6: Curriculum

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

The faculty of a COM must periodically and regularly review and revise the COM’s curriculum and evaluate the COM’s educational program to ensure that the quality of the program meets the current standards of osteopathic core competencies and that students achieve all program objectives and participate in required clinical training experiences and environments.
Pre-Accreditation Element 6.1: Curriculum Design and Management (CORE)

A COM must have in place a body (e.g., a faculty committee) that exercises collective responsibility for the education program as a whole, and has responsibility for the development, management, evaluation, and enhancement of the curriculum. This committee must include student and faculty representation from the pre-clinical (years 1 and 2) and clinical education (years 3 and 4) years. The curriculum must meet the mission of the COM.

Pre-Accreditation Element 6.2: Programmatic Level Educational Objectives (CORE)

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

Pre-Accreditation Element 6.3: Maximum Length of Completion

A COM must ensure that each single degree DO student completes the DO degree within 150% of the standard time to achieve the degree (six years).

Pre-Accreditation Element 6.4: Osteopathic Core Competencies (CORE)

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

Pre-Accreditation Element 6.5: Scientific Method

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

Pre-Accreditation Element 6.6: Principles of Osteopathic Medicine (CORE)

A COM must provide each student, in each year of the curriculum, with opportunities for learning Osteopathic Principles and Practice (OPP), including both observation and hands-on application of osteopathic manipulative medicine (OMM) supervised by COM credentialed physicians (DO or MD).
**Pre-Accreditation Element 6.7: Self-Directed Learning**

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

**Pre-Accreditation Element 6.8: Interprofessional Education for Collaborative Practice (CORE)**

COM faculty must ensure that the core curriculum prepares osteopathic medical students to function collaboratively on health care teams, adhering to the IPEC core competencies, by providing opportunities, in each year of the curriculum, to learn in academic and clinical environments that permit interaction with students enrolled in other health professions degree programs.

**Pre-Accreditation Element 6.9: Clinical Education (CORE)**

COM faculty must define the types of patients and clinical conditions that osteopathic medical students are 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. COMs must be able to provide clinical education rotations, including demonstration of adequate faculty, for at least 120% of the approved class size. A COM must also have published policies and procedures (protocols) addressing methodologies by which students can complete the entire clinical education curriculum.

**Pre-Accreditation Element 6.10: Clinical Experience**

A COM must ensure that each student participates in one or more required third year clinical clerkship experiences conducted in a health care setting in which the student works with resident physicians currently enrolled in an accredited program of graduate medical education. In addition to the above expectation, a minimum of one required third year clinical clerkship must be completed under the supervision of an osteopathic physician and a minimum of one required third year clinical clerkship must be completed in an inpatient facility.

**Pre-Accreditation Element 6.11: Comparability across Clinical Education Sites**

A COM must ensure that the curriculum includes comparable educational experiences and equivalent methods of assessment across all core clinical educational sites where students learn, ensuring all students achieve similar outcomes based on core educational learning objectives.
Pre-Accreditation Element 6.12: COMLEX-USA

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

Pre-Accreditation Standard 7: Faculty and Staff

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

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

Pre-Accreditation Element 7.1: Faculty and Staff Resources and Qualifications (CORE)

At all educational teaching sites, including affiliated sites, a COM must have sufficient faculty and staff resources to achieve the program mission, including part time and adjunct faculty, who are appropriately trained and degreed. The physician faculty, in the patient care environment, must hold current medical licensure and board certification/ board eligibility. The non-physician faculty must have appropriate qualifications in their fields.

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

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

Pre-Accreditation Element 7.3: Department Chair Qualifications

A COM must employ (have under contract prior to the granting of Pre-accreditation Status) Department Chairs, or their equivalent, 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 board certification in the discipline in which they serve as chair.
**Pre-Accreditation Element 7.4: Primary Care Leadership**

A COM must employ a Doctor of Osteopathic Medicine with an active medical license and active board certification from a primary care discipline to serve as the Department Chair of Primary Care (or equivalent). If the COM does not have an organized Department of Primary Care, the Department Chair of either Family Medicine or Internal Medicine or Pediatrics must be a Doctor of Osteopathic Medicine with active board certification.

**Pre-Accreditation Element 7.5: OMM/OPP Leadership (CORE)**

A COM must employ a Doctor of Osteopathic Medicine with 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) to serve as the Department Chair of OMM/OPP, or equivalent.

**Pre-Accreditation Element 7.6: Faculty Development**

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

**Pre-Accreditation Element 7.7: Faculty Association**

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

**Pre-Accreditation Element 7.8: Faculty Appointment and Advancement**

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

**Pre-Accreditation Standard 8: Scholarly Activity**

A COM must make contributions to the advancement of knowledge and the development of osteopathic medicine through scientific research and scholarly activity.

**Pre-Accreditation Element 8.1: Research and Scholarly Activity**

A COM must make a commitment to research and scholarly activity.
Pre-Accreditation Element 8.2: Student Participation

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

Pre-Accreditation Standard 9: Students

A COM must establish and publish admission requirements for potential applicants to the osteopathic medical education program, and must develop and apply effective policies and procedures for medical student selection and enrollment.

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

Pre-Accreditation Element 9.1: Admissions Policy (CORE)

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

Pre-Accreditation Element 9.2: Academic Standards (CORE)

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

Pre-Accreditation Element 9.3: Transfer Policies

A COM must publish and follow policies regarding transfer or admissions with advanced standing. A COM may only accept credits from a school accredited by the COCA or Liaison Committee on Medical Education (LCME) where the student is eligible for readmission. The COM must ensure that if transfer occurs from an LCME accredited school of medicine, the student must acquire OMM/OPP competency prior to graduation from the COM. The last two years of education must be completed at the COM granting the degree.
**Pre-Accreditation Element 9.4:** Secure Student Recordkeeping

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

**Pre-Accreditation Element 9.5:** Academic Counseling (CORE)

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

**Pre-Accreditation Element 9.6:** Career Counseling (CORE)

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

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

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

**Pre-Accreditation Element 9.8:** Mental Health Services (CORE)

A COM must provide its students with confidential access to an effective system of counseling and mental healthcare. A mental health representative must be accessible 24 hours a day, 365 days a year, from all locations where students receive education from the COM.

**Pre-Accreditation Element 9.9:** Physical Health Services (CORE)

A COM must provide its students with access to diagnostic, preventive and therapeutic health services, accessible in all locations where students receive education from the COM.

**Pre-Accreditation Element 9.10:** Non-Academic Health Professionals

A COM must ensure that any health professional providing health services, via a therapeutic relationship, must recuse him/herself from the academic assessment or promotion of the student receiving those services.

**Pre-Accreditation Element 9.11:** Health Insurance

A COM must require that all students have health insurance.
**Pre-Accreditation Standard 10: Graduate Medical Education (GME)**

The faculty of a COM must ensure that the curriculum provides content of sufficient breadth and depth to prepare students for entry into a graduate medical education program for the subsequent practice of medicine.

**Pre-Accreditation Element 10.1: GME Development**

The COM must strive to develop graduate medical education to meet the needs of its graduates within the defined service area, consistent with the mission of the COM.

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

A COM must assess both programmatic and individual student outcomes to ensure that the COM meets its mission. Additionally, a COM must use the data from programmatic and individual outcomes to continuously improve all aspects of the COM.

**Pre-Accreditation Element 11.1: Program Assessment (CORE)**

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

**Pre-Accreditation Element 11.2: Student Evaluation of Instruction**

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

**Pre-Accreditation Element 11.3: Program and Student Outcomes – Annual Data and Mid-Cycle Update Reports (CORE)**

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

**Pre-Accreditation Standard 12: Institutional Accreditation**

For any COM that is not affiliated with a parent institution, the COCA may serve as both institutional and programmatic accreditor. When the COCA serves as the institutional accreditor, the COM must demonstrate that it is compliant with this standard and its supporting elements.
Pre-Accreditation Element 12.1: Incorporation of the Institution (CORE)

A COM that is not affiliated with a parent institution must demonstrate incorporation as a non-profit or for-profit corporation with bylaws consistent with the COCA accreditation standards. The COM must have an autonomous appointed, functioning governing body that is broad in representation of education, finance, legal, health policy, and osteopathic medical expertise. The governing board must be responsible for appointing the Chief Executive Officer.

Pre-Accreditation Element 12.2: Degree and Other Educational Offerings

A COM that is not affiliated with a parent institution must demonstrate evidence of approval to grant the Doctor of Osteopathic Medicine (DO) degree from all appropriate agencies.

Pre-Accreditation Element 12.3: Chief Executive Officer (CORE)

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

Pre-Accreditation Element 12.4: Chief Financial Officer

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

Pre-Accreditation Element 12.5: Title IV Responsibility (CORE)

A COM that is not affiliated with a parent institution must demonstrate compliance with all federal funding guidelines under Title IV of the Higher Education Act (HEA).

Pre-Accreditation Element 12.6: Course Credit Hours

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

Evidentiary Submission for Addressing the COCA New and Developing COM Standards

Effective July 1, 2017
Evidentiary Submission for Addressing the COCA Candidate Status Accreditation Standards

Candidate Standard 1: Mission and Governance

Candidate Submission 1.1: Program Mission

1. Provide copies of program mission / vision (optional) / goals or objectives (optional).

2. If the COM is part of a larger educational institution (parent institution), provide a copy of the parent institution’s mission statement. The documents should show last updated date (or effective date) and revision history.

Candidate Submission 1.2: Licensing and Regional/Institutional Accreditation

1. Provide a copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.

2. If institutionally accredited, provide a public link to where the most recent institutional accreditation documents are published.

Candidate Submission 1.3: Governance and Program Policies

1. Provide the bylaws of the governing body and a list of members, including titles, of the body.

2. Provide a copy of the policies for:
   a. Conflict of interest for board members, employees, and institutionally employed faculty.
   b. Due process for all employees, students, faculty, and credentialed instructional staff.
   c. Confidentiality of employment, student, and medical records.
   d. Fiscal management and accountability.
   e. Ethics, incorporating the AOA Code of Ethics.

Candidate Submission 1.4a: Non-Discrimination

1. Provide a copy of the non-discrimination policy.

Candidate Submission 1.4b: Non-Discrimination

1. Provide the faith-based mission for the COM.

2. Provide a copy of the non-discrimination policy and procedures for the selection of students, faculty, and staff.

Candidate Submission 1.5: Clinical Education Affiliation Agreements

1. Provide a copy of COM approved affiliation agreement.
Candidate Standard 2: Leadership and Administration

Candidate Submission 2.1: Dean Qualifications

1. Provide the current job description for the Dean.
2. Provide a full CV for the Dean.
3. Provide a copy of the Dean’s diploma from a COCA accredited college of osteopathic medicine.
4. Provide a copy of the Dean’s medical license.
5. Provide a copy of the Dean’s board certification documents.

Candidate Submission 2.2: Full Time Dean

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

Candidate Submission 2.3: Academic and Administrative Leadership

1. Provide an organization chart that shows the leadership positions and reporting relationships.
2. Provide the current job description for each member of the administrative leadership team (Associate Deans, Assistant Deans, senior level administrators).
3. Provide a full CV for each member of the administrative leadership team who has been hired (Associate Deans, Assistant Deans, senior level administrators).
4. Provide a copy of the employee’s medical license (if a DO or MD).
5. Provide a copy of the employee’s board certification documents (if a DO or MD).
Candidate Standard 3: Finances

Candidate Submission 3.1: Financial Resources

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

Candidate Submission 3.2: Feasibility Study (Business Plan)

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

Candidate Submission 3.3: Escrowed Reserve Funds

1. Provide a copy of the proposed Escrow Contract
2. Provide evidence of availability of unencumbered funds equal to the escrow amount.

Candidate Submission 3.4: Operating Reserve Fund

1. Provide a copy of the proposed Operating Reserve Fund Contract
2. Provide evidence of availability of unencumbered funds equal to the operating reserve fund amount.
Candidate Standard 4: Facilities

Candidate Submission 4.1: Facilities

1. Provide a copy of the Architectural Plans (interior and exterior) for the proposed COM.

Candidate Submission 4.2: Information Technology

1. Provide the information technology strategic plan.
Candidate Standard 6: Curriculum

Candidate Submission 6.1: Programmatic Level Educational Objectives

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

Candidate Submission 6.2: Osteopathic Core Competencies

1. Describe how the proposed COM plans to incorporate the osteopathic core competencies into the curriculum and assessment methodologies.

Candidate Submission 6.3: Teaching Methods

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

Candidate Submission 6.4: Clinical Education

1. Provide policies and procedures (protocols) demonstrating how students will obtain all clinical education through the COM.
2. Provide a listing of all clinical rotations that a student must complete, including length of each rotation.

Candidate Submission 6.5: Clinical Affiliation Agreements

1. Complete and submit the Clinical Affiliation Agreement Table.
2. Provide a copy of all signed clinical affiliation agreements.
3. Provide a copy of all signed preceptor applications.
Candidate Standard 7: Faculty and Staff

Candidate Submission 7.1: Faculty and Staff Resources and Qualifications

1. Provide the organizational chart demonstrating how the faculty will be organized.
2. Complete and submit the Faculty and Staff Hiring Tables.

Candidate Submission 7.2: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement.
Candidate Standard 8: Scholarly Activity

Candidate Submission 8.1: Research and Scholarly Activity

1. Complete and submit the faculty hiring table demonstrating assignment of time for research and scholarly activity.

2. Submit the architectural plans showing space dedicated for research and scholarly activity.

3. Submit the financial pro forma demonstrating line items for research and scholarly activity funding.
Candidate Standard 9: Students

Candidate Submission 9.1: Admissions Policy

1. Provide all admission requirements and policies and procedures for osteopathic medical student selection and enrollment.

Candidate Submission 9.2: Recruitment of Students

1. Provide at least 3 years or demographics for the COM defined region demonstrating the number of medical school applicants and matriculants.

2. Provide a proposed recruitment plan for the COM.
Candidate Standard 10: Graduate Medical Education (GME)

Candidate Submission 10.1: GME Feasibility

1. Complete and submit a GME feasibility plan that addresses the following items:
   a. An awareness of the existing GME in the region and how those positions are currently filled.
   b. The potential for GME development in the region.
   c. Demonstration of hiring plan for a position(s) dedicated to GME Development and Maintenance.
   d. Demonstration of line items in the pro forma for GME Development and Maintenance.
Candidate Standard 12: Institutional Accreditation

Candidate Submission 12.1: Incorporation of the Institution

1. Provide the current registration documents demonstrating ongoing incorporation for the COM.
2. Provide a copy of the bylaws of the governing body.
3. Provide a list of members of the governing body and their titles.

Candidate Submission 12.2: Degree and Other Educational Offerings

1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the proposed COM.
2. Provide a copy of all charters, licenses, or letters of approval from any educational or business agencies that grant authority to the proposed COM.

Candidate Submission 12.3: Chief Executive Officer

1. Provide the current job description for the Chief Executive Officer.
2. Provide a full CV for the Chief Executive Officer.

Candidate Submission 12.4: Chief Financial Officer

1. Provide the current job description for the Chief Financial Officer.
2. Provide a full CV for the Chief Financial Officer.
Evidentiary Submission for Addressing the COCA Pre-Accreditation Status Accreditation Standards

Pre-Accreditation Standard 1: Mission and Governance

Pre-Accreditation Submission 1.1: Program Mission

1. Provide copies of program mission / vision (optional) / goals or objectives (optional) and a public link to where the documents are published.

2. If the COM is part of a larger educational institution (parent institution), provide a copy of the parent institution’s mission statement. The documents should show last updated date (or effective date) and revision history.

3. Provide documentation of the revision process for the COM’s mission.

Pre-Accreditation Submission 1.2: Strategic Plan

1. Provide a copy of the COM strategic plan.

2. Provide the list of individuals who participated in the plan creation.

3. Provide a link to where the documents are published.

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

1. Provide a copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.

2. Provide a public link to where the most recent institutional accreditation documents are published.

Pre-Accreditation Submission 1.4: Governance and Program Policies

1. Provide the bylaws of the governing body and a list of members, including titles, of the body.

2. Provide a copy of the policies for:
   a. Conflict of Interest for board members, employees, and institutionally employed faculty.
   b. Due process for all employees, students, faculty, and credentialed instructional staff.
   c. Confidentiality of employment, student, and medical records.
   d. Fiscal management and accountability.
   e. Ethics, incorporating the AOA Code of Ethics.

Pre-Accreditation Submission 1.5a: Non-Discrimination

1. Provide a copy of the non-discrimination policy.

2. Provide a public link to where the document is published.
Pre-Accreditation Submission 1.5b: Non-Discrimination for Faith Based Institutions

1. Provide the faith-based mission for the COM.
2. Provide a copy of the non-discrimination policy and procedures for the selection of students, faculty, and staff.
3. Provide a public link to where the document is published.

Pre-Accreditation Submission 1.6: Degree-Granting Body

1. Provide a copy of the bylaws or governing documents that demonstrate the conferral of degree.
2. Provide a copy of the COM policy demonstrating that the faculty senate (or approved body) must recommend candidates for graduation.
3. Provide minutes from the Faculty Association meeting where this occurred for the most recent graduates.

Pre-Accreditation Submission 1.7: Clinical Education Affiliation Agreements

1. Provide a copy of the COM approved affiliation agreement. (All signed agreements may be evaluated on site)
Pre-Accreditation Standard 2: Leadership and Administration

Pre-Accreditation Submission 2.1: Dean Qualifications

1. Provide the current job description for the Dean.
2. Provide a full CV for the Dean.
3. Provide a copy of the Dean’s diploma from a COCA accredited college of osteopathic medicine.
4. Provide a copy of the Dean’s medical license.
5. Provide a copy of the Dean’s board certification documents.

Pre-Accreditation Submission 2.2: Full-Time Dean

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

Pre-Accreditation Submission 2.3: Academic and Administrative Leadership

1. Provide an organization chart that shows the leadership positions, reporting relationships, and the completion of all leadership hiring prior to the submission of the Pre-Accreditation self-study. Indicate (highlight) any changes or updates since the initial submission.
2. Provide the current job description for each member of the administrative leadership team (Associate Deans, Assistant Deans, senior level administrators).
3. Provide a full CV for each member of the administrative leadership team (Associate Deans, Assistant Deans, senior level administrators).

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

1. Provide documentation of policies and procedures regarding accreditation standard complaints and their adjudication.
2. Provide a public link to where the accreditation standard complaint policies and procedures are published.
Pre-Accreditation Standard 3: Finances

Pre-Accreditation Submission 3.1: Financial Resources

1. Provide the operational pro forma (income, revenue sources, and expenses) for the COM up through the anticipated graduation of the first class of students. Indicate (highlight) any changes or updates since the initial submission.

2. Provide the proposed capital budget for the development of the COM. Indicate (highlight) any changes or updates since the initial submission.

3. Provide the budget for personnel with a hiring plan addressing anticipated date of hire of each faculty and staff member. Indicate (highlight) any changes or updates since the initial submission.

Pre-Accreditation Submission 3.2: Financial Planning and Budgeting

1. Provide a copy of the flowchart demonstrating the budget development process.

2. Provide information as to all persons with budgetary management and oversight.

3. Demonstrate in the flowchart where final budget approval occurs.

Pre-Accreditation Submission 3.3: Budgetary Authority

1. Provide the current job description demonstrating that the Dean possesses budgetary authority for the COM.

2. Provide the employment contract (compensation redacted) demonstrating that the Dean possesses budgetary authority for the COM.

Pre-Accreditation Submission 3.4: Financial Audit

1. Provide the annual audited financial statement and audit report/management letter for the COM or its parent institution for the latest complete fiscal year.
Pre-Accreditation Standard 4: Facilities

Pre-Accreditation Submission 4.1: Facilities

1. Provide the floorplan diagrams of all buildings used by the COM on all campuses utilized by the COM.
2. Provide the construction plan and timeline for all COM buildings.
3. Provide a contingency plan for facility use if the final facility is not completed on time.
4. Provide the permanent Certificate of Occupancy for all COM buildings, as obtained, and by December 31 of the year prior to the anticipated start of classes.

Pre-Accreditation Submission 4.2: Security and Public Safety

1. Provide a copy of all security and safety related policies and procedures.
2. Provide a link to where the policies are published.

Pre-Accreditation Submission 4.3: Information Technology

1. Provide the information technology strategic plan.
2. Provide the most recent technology assessment report.

Pre-Accreditation Submission 4.4: Learning Resources

1. Provide the learning resources table.
Pre-Accreditation Standard 5: Learning Environment

Pre-Accreditation Submission 5.1: Professionalism

1. Provide a copy of all professionalism policies. The professionalism policies should extend to items including, but not limited to, patient safety, cultural competence, and interprofessional collaborative practice.

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

3. Provide a copy of the membership of any professionalism committee and a copy of the charge or purpose of the committee.

Pre-Accreditation Submission 5.2: Diversity

1. Provide a copy of the policies addressing diversity for students, faculty, senior administrative staff, and other relevant members of the academic community.

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

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

1. Provide the policies and procedures addressing safety and health issues.

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

Pre-Accreditation Submission 5.4: Patient Care Supervision

1. Provide the policies addressing student supervision during the provision of patient care.

2. Provide a link to where the documents are published.
Pre-Accreditation Standard 6: Curriculum

Pre-Accreditation Submission 6.1: Curriculum Design and Management

1. Provide the charge and responsibility of the curriculum committee.
2. Provide a list of the current members of the curriculum committee and their titles.

Pre-Accreditation Submission 6.2: Programmatic Level Educational Objectives

1. Provide the programmatic level educational objectives.
2. Provide a public link to where the document is published.

Pre-Accreditation Submission 6.3: Maximum Length of Completion

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

Pre-Accreditation Submission 6.4: Osteopathic Core Competencies

1. Describe how the proposed COM plans to incorporate the osteopathic core competencies into the curriculum and assessment methodologies.

Pre-Accreditation Submission 6.5: Scientific Method

1. Complete the curricular elements table demonstrating where this element will be introduced, continue to be taught, and assessed throughout the osteopathic medical education curriculum.

Pre-Accreditation Submission 6.6: Principles of Osteopathic Medicine

1. Complete the curricular elements table demonstrating where this element will be introduced, continue to be taught, and assessed throughout the osteopathic medical education curriculum.

Pre-Accreditation Submission 6.7: Self-Directed Learning

1. Complete the curricular elements table demonstrating where this element will be introduced, continue to be taught, and assessed throughout the osteopathic medical education curriculum.

Pre-Accreditation Submission 6.8: Interprofessional Education for Collaborative Practice

1. Complete the curricular elements table demonstrating where this element will be introduced, continue to be taught, and assessed throughout the osteopathic medical education curriculum.

Pre-Accreditation Submission 6.9: Clinical Education

1. Provide a sample syllabus for a required clinical rotation.
2. Provide policies and procedures (protocols) demonstrating how students will obtain all clinical education through the COM.
3. Provide a listing of all clinical rotations that a student must complete, including length of each rotation.
4. Complete and submit the Clinical Affiliation Agreement Table.
5. Provide a copy of all signed clinical affiliation agreements.
6. Provide a copy of all signed preceptor applications/ agreements.

**Pre-Accreditation Submission 6.10: Clinical Experience**

1. Complete and submit the Clinical Affiliation Agreement Table.
2. Provide a copy of all signed clinical affiliation agreements.
3. Provide a copy of all signed preceptor applications/ agreements.

**Pre-Accreditation Submission 6.11: Comparability across Clinical Education Sites**

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

**Pre-Accreditation Submission 6.12: COMLEX-USA**

1. Provide all COMLEX-USA related school policies and procedures.
Pre-Accreditation Standard 7: Faculty and Staff

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

1. Provide the organizational chart demonstrating how the faculty will be organized. Indicate (highlight) any changes or updates since the initial submission.

2. Complete and submit the Faculty and Staff Hiring Tables.

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

1. Provide a copy of the policies and procedures for credentialing and/or approval of all COM faculty.

Pre-Accreditation Submission 7.3: Department Chair Qualifications

1. Provide the organizational chart demonstrating the reporting hierarchy for each department.

2. Provide the current job description and complete CV for each Department Chair or its equivalent.

3. Provide a complete CV for each Department Chair or its equivalent.

4. For each clinical department chair, provide a copy of the Chair's medical license.

5. For each clinical department chair, provide a copy of the Chair's board certification documents.

Pre-Accreditation Submission 7.4: Primary Care Leadership

1. Provide a copy of the job description for the Chair of Primary Care (or equivalent).

2. Provide a complete CV for the Chair of Primary Care (or equivalent).

3. Provide a copy of the Chair's medical license.

4. Provide a copy of the Chair's board certification documents.

Pre-Accreditation Submission 7.5: OMM/OPP Leadership

1. Provide a copy of the job description for the Chair of OMM/OPP (or equivalent).

2. Provide a complete CV for the Chair of OMM/OPP (or equivalent).

3. Provide a copy of the Chair's medical license.

4. Provide a copy of the Chair's board certification documents.

Pre-Accreditation Submission 7.6: Faculty Development

1. Provide a roster of all faculty development activities for the past year, including documentation of the faculty participation at each activity.

Pre-Accreditation Submission 7.7: Faculty Association

1. Provide a copy of the bylaws for the faculty organization.
Pre-Accreditation Submission 7.8: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement.

2. Provide a link to where the documents are published.
Pre-Accreditation Standard 8: Scholarly Activity

Pre-Accreditation Submission 8.1: Research and Scholarly Activity

1. Provide a copy of the research and scholarly activity plan.
2. Complete and submit the table of research and scholarly activities for faculty and staff.
3. Provide a public web link to a site discussing research at the COM, including active projects.

Pre-Accreditation Submission 8.2: Student Participation

1. Provide a copy of all student research and scholarly activity policies.
2. Provide a link to where the policies are published.
3. Complete and submit the table of research and scholarly activities documenting student inclusion (after student matriculation) in appropriate projects.
Pre-Accreditation Standard 9: Students

Pre-Accreditation Submission 9.1: Admissions Policy

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

Pre-Accreditation Submission 9.2: Academic Standards

1. Provide copies of policies and procedures on academic standards.
2. Provide a link to where the documents are published.

Pre-Accreditation Submission 9.3: Transfer Policies

1. Pursuant to 34 CFR part 688.43(a) (11), provide all transfer policies and procedures.
2. Provide a link to where the documents are published.

Pre-Accreditation Submission 9.4: Secure Student Recordkeeping

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

Pre-Accreditation Submission 9.5: Academic Counseling

1. Describe the process for academic counseling that will be (or is) provided to students.

Pre-Accreditation Submission 9.6: Career Counseling

1. Describe the process for career counseling, including GME Readiness, that will be (or is) provided to students.

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

1. Provide a list of financial aid and debt counseling sessions that are (or will be) offered to students.
2. Provide an attendance list documenting that each student who received financial aid under Title IV of the Higher Education Act participated in a minimum of two counseling sessions while enrolled in the COM.

Pre-Accreditation Submission 9.8: Mental Health Services

1. Provide the policies and procedures for students seeking counseling and mental health services.
2. Provide a link to where the documents are published.
3. Provide a list of the mental health services available to students and service locations and hours.

Pre-Accreditation Submission 9.9: Physical Health Services

1. Provide the policies and procedures for students seeking diagnostic, preventive and therapeutic health services.
2. Provide a link to where the documents are published.
3. Provide a list of the health service locations where students may seek care.

Pre-Accreditation Submission 9.10: Non-Academic Health Professionals

1. Provide the policies and procedures on recusal from student assessment and promotion for health professionals providing services to students.

Pre-Accreditation Submission 9.11: Health Insurance

1. Provide the policies and procedures regarding health insurance for students.
2. Provide a link to where the documents are published.
Pre-Accreditation Standard 10: Graduate Medical Education (GME)

Pre-Accreditation Submission 10.1: GME Development

1. Complete and submit your GME feasibility plan that addresses the following items and demonstrates progress:

   a. An awareness of the existing GME in the region and how those positions are currently filled.

   b. Provide the table assessing GME Growth and/or Development at all hospitals for which the COM has a clinical education affiliation agreement, contract, or commitment.

   c. Demonstration of hiring completion for a position(s) dedicated to GME Development and Maintenance.

   d. Demonstration of line items in the pro forma for GME Development and Maintenance.
Pre-Accreditation Standard 11: Program and Student Assessment and Outcomes

Pre-Accreditation Submission 11.1: Program Assessment

1. Submit a copy of the COM’s assessment plan.

Pre-Accreditation Submission 11.2: Student Evaluation of Instruction

1. Describe the processes for obtaining student evaluation of classroom and clinical instruction.
2. Provide a copy of the evaluation forms used by the students for these purposes.
3. Provide a flowchart demonstrating how the evaluation data are utilized in curricular improvement.

Pre-Accreditation Submission 11.3: Program and Student Outcomes – Annual Data and Mid-Cycle Update Reports

1. Complete and submit the Annual COCA Data and Mid-Cycle Update Report by the established deadlines.
Pre-Accreditation Standard 12: Institutional Accreditation

Pre-Accreditation Submission 12.1: Incorporation of the Institution

1. Provide the current registration documents for ongoing incorporation for the COM.
2. Provide a copy of the bylaws of the governing body.
3. Provide a list of members of the governing body and their titles.

Pre-Accreditation Submission 12.2: Degree and Other Educational Offerings

1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the COM.
2. Provide a copy of all charters, licenses, or letters of approval from any educational or business agencies that grant authority to the COM.

Pre-Accreditation Submission 12.3: Chief Executive Officer

1. Provide the current job description for the Chief Executive Officer.
2. Provide a full CV for the Chief Executive Officer.

Pre-Accreditation Submission 12.4: Chief Financial Officer

1. Provide the current job description for the Chief Financial Officer.
2. Provide a full CV for the Chief Financial Officer.

Pre-Accreditation Submission 12.5: Title IV Responsibility

1. Provide a copy of the most recent filing of the annual audit pursuant to the Single Audit Act Amendments of 1996, OMB Circular A-133.
2. Provide the date of the most recent program review conducted pursuant to Title IV of the HEA and the final action letter from that review.

Pre-Accreditation Submission 12.6: Course Credit Hours

1. Provide a copy of the credit hour assignment policy.
2. Provide a link to where the document is published.