

|

Commission on Osteopathic College Accreditation

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

Effective August 1, 2023

**Commission on Osteopathic College Accreditation
American Osteopathic Association
142 E. Ontario Street
Chicago, IL 60611-6824
Telephone: (312) 202-8124
E-mail: predoc@osteopathic.org**

© 2023 American Osteopathic Association. All rights reserved. No part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of the publisher.

Contents

Introduction..... 9

Applicant Status 11

Candidate Status..... 12

Candidate Status Process 13

Review of Candidate Status 14

Candidate Status Self-Study..... 15

 Introductory Materials 15

Candidate Standard 1: Mission and Governance 15

 Candidate Element 1.1: Program Mission 15

 Candidate Element 1.2: Licensing and Regional/ Institutional Accreditation 16

 Candidate Element 1.3: Governance and Program Policies 16

 Candidate Element 1.4a: Non-Discrimination..... [1817](#)

 Candidate Element 1.4b: Non-Discrimination for Faith-Based Institutions [1817](#)

Candidate Standard 2: Leadership and Administration [1918](#)

 Candidate Element 2.1: Dean Qualifications [1918](#)

 Candidate Element 2.2: Full-Time Dean [2019](#)

 Candidate Element 2.3: Academic and Administrative Leadership..... [2019](#)

 Candidate Element 2.4: Diversity, Equity, and Inclusion Leadership [2120](#)

Candidate Standard 3: Finances..... [2221](#)

 Candidate Element 3.1: Financial Resources..... [2221](#)

 Candidate Element 3.2: Feasibility Study and Business Plan [2221](#)

 Candidate Element 3.3: Escrowed Reserve Funds..... [2322](#)

 Candidate Element 3.4: Operating Reserve Fund [2322](#)

Candidate Standard 4: Facilities..... [2423](#)

 Candidate Element 4.1: Facilities [2423](#)

 Candidate Element 4.2: Information Technology [2423](#)

Candidate Standard 5: Learning Environment..... [2624](#)

Candidate Element 5.1: Professionalism.....	2624
Candidate Element 5.2: Diversity.....	2624
Candidate Element 5.3: Office of Diversity, Equity, and Inclusion	2725
Candidate Standard 6: Curriculum	2826
Candidate Element 6.1: Programmatic Level Educational Objectives	2826
Candidate Element 6.2: Osteopathic Core Competencies	2826
Candidate Element 6.3: Teaching Methods.....	2826
Candidate Element 6.4: Clinical Education	2927
Candidate Standard 7: Faculty and Staff.....	3028
Candidate Element 7.1: Faculty and Staff Resources and Qualifications.....	3028
Candidate Element 7.2: Faculty Appointment and Advancement.....	3028
Candidate Standard 8: Scholarly Activity	3129
Candidate Element 8.1: Research and Scholarly Activity Strategic Plan	3129
Candidate Element 8.2: Research and Scholarly Activity Budget.....	3129
Candidate Element 8.3: OMM/OPP Research and Scholarly Activity	3129
Candidate Element 8.4: Student Participation in Research and Scholarly Activity.....	3230
Candidate Standard 9: Students	3334
Candidate Element 9.1: Admissions Policy	3334
Candidate Element 9.2: Recruitment of Students.....	3334
Candidate Standard 10: Graduate Medical Education (GME)	3432
Candidate Element 10.1: GME Feasibility	3432
Candidate Standard 11: Intentionally Omitted.....	3533
Candidate Standard 12: Institutional Accreditation (if applicable).....	3634
Candidate Element 12.1: Incorporation of the Institution.....	3634
Candidate Element 12.2: Degree and Other Educational Offerings	3634
Candidate Element 12.3: Chief Executive Officer	3735
Candidate Element 12.4: Chief Financial Officer.....	3735
Candidate Submission.....	3735
Candidate Element 12.5: Course Credit Hours.....	3735
Candidate Element 12.6: Public Information.....	3836
Candidate Element 12.7: Public Notification of Opportunity to Comment	3836

Candidate Element 12.8: Academic Freedom	3836
Candidate Element 12.9: Campus Security	3937
Candidate Element 12.10: Title IV Responsibility.....	3937
Pre-Accreditation Status	4038
Pre-Accreditation Status Process.....	4038
Review of Pre-Accreditation Status.....	4240
Pre-Accreditation Self-Study	4344
Pre-Accreditation Standards.....	4344
Pre-Accreditation Standard 1: Mission and Governance	4344
Pre-Accreditation Element 1.1: Program Mission.....	4344
Pre-Accreditation Element 1.2: Strategic Plan	4442
Pre-Accreditation Element 1.3: Licensing and Regional/Institutional Accreditation.....	4442
Pre-Accreditation Element 1.4: Governance and Program Policies.....	4543
Pre-Accreditation Element 1.5a: Non-Discrimination	4543
Pre-Accreditation Element 1.5b: Non-Discrimination for Faith-Based Institutions	4644
Pre-Accreditation Element 1.6: Degree-Granting Body.....	4644
Pre-Accreditation Standard 2: Leadership and Administration	4845
Pre-Accreditation Element 2.1: Dean Qualifications.....	4845
Pre-Accreditation Element 2.2: Full-Time Dean.....	4946
Pre-Accreditation Element 2.3: Academic and Administrative Leadership.....	4946
Pre-Accreditation Element 2.4: Accreditation Standard Complaint Policies and Procedures ...	5047
Pre-Accreditation Element 2.5: Diversity, Equity, and Inclusion (DEI) Leadership.....	5148
Pre-Accreditation Standard 3: Finances	5249
Pre-Accreditation Element 3.1: Financial Resources	5249
Pre-Accreditation Element 3.2: Financial Planning and Budgeting.....	5249
Pre-Accreditation Element 3.3: Budgetary Authority	5350
Pre-Accreditation Element 3.4: Financial Audit	5350
Pre-Accreditation Standard 4: Facilities.....	5451
Pre-Accreditation Element 4.1: Facilities.....	5451
Pre-Accreditation Element 4.2: Security and Public Safety.....	5552
Pre-Accreditation Element 4.3: Information Technology.....	5552

Pre-Accreditation Element 4.4: Learning Resources.....	5653
Pre-Accreditation Standard 5: Learning Environment	5754
Pre-Accreditation Element 5.1: Professionalism	5754
Pre-Accreditation Element 5.2: Diversity	5754
Pre-Accreditation Element 5.3: Safety, Health, and Wellness	5855
Pre-Accreditation Element 5.4: Patient Care Supervision.....	5855
Pre-Accreditation Element 5.5: Diversity, Equity, and Inclusion (DEI) Office (CORE).....	6057
Pre-Accreditation Standard 6: Curriculum.....	6158
Pre-Accreditation Element 6.1: Curriculum Design and Management	6158
Pre-Accreditation Element 6.2: Programmatic Level Educational Objectives	6259
Pre-Accreditation Element 6.3: Maximum Length of Completion	6259
Pre-Accreditation Element 6.4: Osteopathic Core Competencies.....	6259
Pre-Accreditation Element 6.5: Scientific Method.....	6360
Pre-Accreditation Element 6.6: Principles of Osteopathic Medicine.....	6360
Pre-Accreditation Element 6.7: Self-Directed Learning.....	6464
Pre-Accreditation Element 6.8: Interprofessional Education for Collaborative Practice.....	6464
Pre-Accreditation Element 6.9: Clinical Education.....	6562
Pre-Accreditation Element 6.10: Clinical Experience.....	6663
Pre-Accreditation Element 6.11: Comparability across Clinical Education Sites	6663
Pre-Accreditation Element 6.12: COMLEX-USA	6764
Pre-Accreditation Element 6.13: Diversity, Equity, and Inclusion (DEI) Curriculum.....	6764
Pre-Accreditation Standard 7: Faculty and Staff.....	6865
Pre-Accreditation Element 7.1: Faculty and Staff Resources and Qualifications	6865
Pre-Accreditation Element 7.2: Faculty Approvals at All Teaching Sites.....	6966
Pre-Accreditation Element 7.3: Department Chair Qualifications	6966
Pre-Accreditation Element 7.4: Primary Care Leadership.....	7067
Pre-Accreditation Element 7.5: OMM/OPP Leadership.....	7067
Pre-Accreditation Element 7.6: Faculty Development.....	7168
Pre-Accreditation Element 7.7: Faculty Association.....	7168
Pre-Accreditation Element 7.8: Faculty Appointment and Advancement	7269
Pre-Accreditation Element 7.9: Diversity, Equity, and Inclusion (DEI) Training	7269

Pre-Accreditation Standard 8: Scholarly Activity.....	7370
Pre-Accreditation Element 8.1 Research and Scholarly Activity Strategic Plan.....	7370
Pre-Accreditation Element 8.2: Research and Scholarly Activity Budget.....	7370
Pre-Accreditation Element 8.3: OMM/OPP Research and Scholarly Activity.....	7474
Pre-Accreditation Element 8.4: Student Participation	7474
Pre-Accreditation Standard 9: Students.....	7572
Pre-Accreditation Element 9.1: Admissions Policy.....	7572
Pre-Accreditation Element 9.2: Academic Standards	7673
Pre-Accreditation Element 9.3: Transfer Policies.....	7673
Pre-Accreditation Element 9.4: Secure Student Recordkeeping	7774
Pre-Accreditation Element 9.5: Academic Counseling.....	7774
Pre-Accreditation Element 9.6: Career Counseling.....	7774
Pre-Accreditation Element 9.7: Financial Aid and Debt Management Counseling	7875
Pre-Accreditation Element 9.8: Mental Health Services.....	7875
Pre-Accreditation Element 9.9: Physical Health Services.....	7976
Pre-Accreditation Element 9.10: Non-Academic Health Professionals.....	7976
Pre-Accreditation Element 9.11: Health Insurance.....	7976
Pre-Accreditation Standard 10: Graduate Medical Education (GME)	8077
Pre-Accreditation Element 10.1: Osteopathic Educational Continuum	8077
Pre-Accreditation Element 10.2: Accredited GME.....	8077
Pre-Accreditation Element 10.3: Osteopathic Recognition of GME.....	8178
Pre-Accreditation Element 10.4: GME Placement Rates	8178
Pre-Accreditation Standard 11: Program and Student Assessment and Outcomes	8279
Pre-Accreditation Element 11.1: Program Assessment.....	8279
Pre-Accreditation Element 11.2: Student Evaluation of Instruction.....	8380
Pre-Accreditation Element 11.3: COCA Annual and Mid-Cycle Reports.....	8380
Pre-Accreditation Element 11.4: Student Outcomes	84
Pre-Accreditation Element 11.4 5 : Student Survey	8480
Pre-Accreditation Standard 12: Institutional Accreditation	8684
Pre-Accreditation Element 12.1: Incorporation of the Institution	8684
Pre-Accreditation Element 12.2: Degree and Other Educational Offerings.....	8684

Pre-Accreditation Element 12.3: Chief Executive Officer	8782
Pre-Accreditation Element 12.4: Chief Financial Officer	8782
Pre-Accreditation Element 12.5: Course Credit Hours	8782
Pre-Accreditation Element 12.6: Public Information	8883
Pre-Accreditation Element 12.7: Public Notification of Opportunity to Comment.....	8883
Pre-Accreditation Element 12.8: Academic Freedom.....	8984
Pre-Accreditation Element 12.9: Title IV Responsibility	8984
Glossary.....	9085

Introduction

The American Osteopathic Association’s Commission on Osteopathic College Accreditation (COCA) accredits osteopathic medical education programs leading to the Doctor of Osteopathic Medicine (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 DO degree must meet the standards contained in this document. The COCA regularly reviews the accreditation standards and seeks feedback from the osteopathic community and the public. Substantive changes to existing COCA standards which impose new or additional requirements on programs will be made only after providing notice and opportunity for comment by affected persons, institutions, and organizations. Once approved, new or revised standards are published in *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards*, which indicates when the changes become effective.

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

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

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

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

NOTICE TO ALL COMs

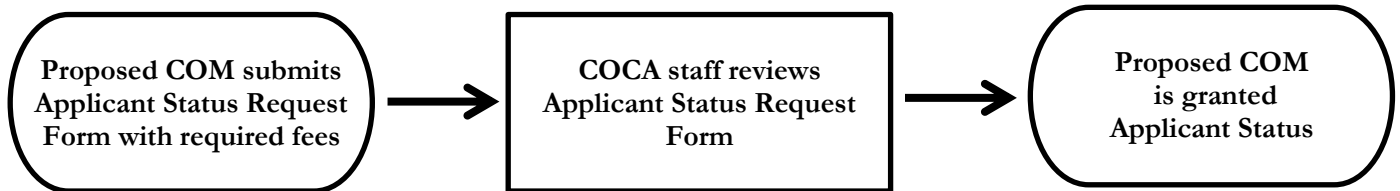
The submission of any information pursuant to the following accreditation standards is subject to the COCA's submission of that information to the United States Department of Education (USDE) in compliance with the Department's regulatory requirements to determine recognition of the COCA as an accrediting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

Applicant Status

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

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

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



Candidate Status

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

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

The dean must 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 proposed COM through all steps of the candidate status process and beyond through pre-accreditation status and into accreditation. A change in the dean during this time period requires re-initiation of the candidate status application process.

The dean must hire qualified individuals at the associate/assistant dean level to assist in the development of the proposed COM through candidate status and into pre-accreditation status and ultimate progress to accreditation. A minimum of two associate deans must be under contract with the proposed COM before candidate status will be granted.

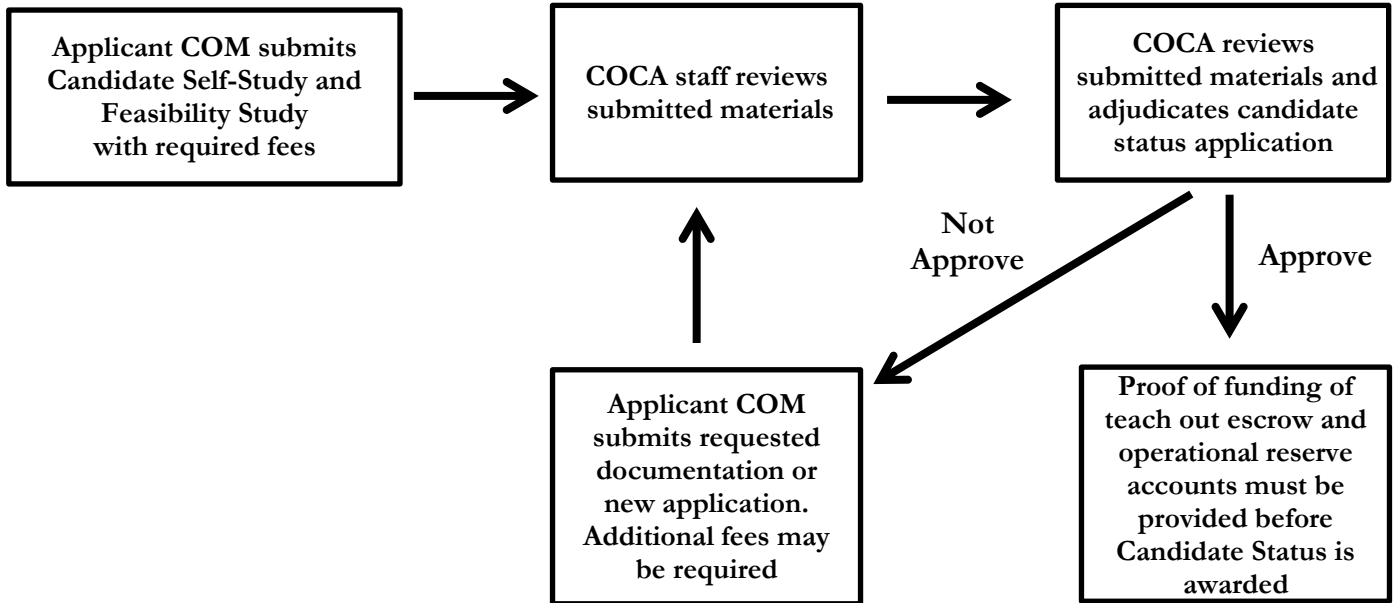
The proposed COM holding candidate status may not recruit, accept applications from, or admit prospective students. This means that a proposed COM holding this status may not do any of the following:

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

Candidate Status Process

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

Candidate Status Process



Review of Candidate Status

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

Candidate Status Self-Study

Introductory Materials

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

Candidate Standard 1: Mission and Governance

Candidate Element 1.1: Program Mission

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

Candidate Submission 1.1: Program Mission

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

Candidate Element 1.2: Licensing and Regional/ Institutional Accreditation

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

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

Candidate Submission 1.2: Licensing and Regional/ Institutional Accreditation

1. Provide a copy of the charter, license, or letter of approval from all states and agencies issuing such approvals.
2. If institutionally accredited, provide a link to the public webpage where the most recent institutional accreditation documents are published.

Candidate Element 1.3: Governance and Program Policies

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

Candidate Submission 1.3: Governance and Program Policies

1. [Submit an organizational chart documenting the ownership structure and the percent of institutional ownership for each party for the proposed COM.](#)

[2.](#) Provide the bylaws of the proposed COM's (or parent institution) governing body and a list of members, including titles, of the body.

~~2.~~ [3.](#) Provide a copy of the policies for:

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

Candidate Element 1.4a: Non-Discrimination

A proposed COM 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 proposed COM actions.

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

Candidate Submission 1.4a: Non-Discrimination

1. Provide a copy of the non-discrimination policy.
2. Describe and provide a flowchart of the process for reporting discrimination incidents and tracking their resolution.

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 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 proposed COM actions.

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

Candidate Submission 1.4b: Non-Discrimination

1. Provide the faith-based mission for the proposed COM.
2. Provide a copy of the non-discrimination policy.
3. Describe and provide a flowchart of the process for reporting discrimination incidents and tracking their resolution

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

Candidate Standard 2: Leadership and Administration

Candidate Element 2.1: Dean Qualifications

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

1. An earned DO degree from a COCA-accredited college of osteopathic medicine;
2. An unrestricted medical license at some time in their career, 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.~~ Experience as a dean of a college of osteopathic medicine for at least 5 years or demonstrated progressive leadership with undergraduate medical education (UME) experience in budget management authority, admissions, student disciplinary situations, graduate medical education (GME), accreditation, and scholarly activity over the past 5 years.

Candidate Submission 2.1: Dean Qualifications

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

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

Candidate Element 2.2: Full-Time Dean

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

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

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

Candidate Submission 2.2: Full-Time Dean

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

Candidate Element 2.3: Academic and Administrative Leadership

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

Candidate Submission 2.3: Academic and Administrative Leadership

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

Note: Reports from the American Osteopathic Information Association, the Federation of State Medical Boards, or the American Board of Medical Specialties may be used to demonstrate current licensure and board certification.

Candidate Element 2.4: Diversity, Equity, and Inclusion Leadership

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

Candidate Submission 2.4: DEI Leadership

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

Candidate Standard 3: Finances

Candidate Element 3.1: Financial Resources

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

Candidate Submission 3.1: Financial Resources

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

Candidate Element 3.2: Feasibility Study and Business Plan

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

Candidate Submission 3.2: Feasibility Study and Business Plan

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

Candidate Element 3.3: Escrowed Reserve Funds

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

Candidate Submission 3.3: Escrowed Reserve Funds

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

Candidate Element 3.4: Operating Reserve Fund

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

Candidate Submission 3.4: Operating Reserve Fund

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

Candidate Standard 4: Facilities

Candidate Element 4.1: Facilities

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

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

A proposed COM must have a mechanism to assess the adequacy of the core clinical rotation facilities that will involve students in the assessment.

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

Candidate Submission 4.1: Facilities

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

Candidate Element 4.2: Information Technology

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

Candidate Submission 4.2: Information Technology

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

Candidate Standard 5: Learning Environment

Candidate Element 5.1: Professionalism

A proposed COM must ensure that the learning environment of its osteopathic medical education program will be conducive to the ongoing development of professional behaviors in its osteopathic medical students, faculty, and staff at all locations and is one in which all individuals are treated with respect.

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

Candidate Submission 5.1: Professionalism

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

Candidate Element 5.2: Diversity

A proposed COM must publish policies on and engage in ongoing, systematic, and focused recruitment and retention activities to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.

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

Candidate Submission 5.2: Diversity

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

Candidate Element 5.3: Office of Diversity, Equity, and Inclusion

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

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

Candidate Submission 5.3: Office of Diversity, Equity, and Inclusion

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

Candidate Standard 6: Curriculum

Candidate Element 6.1: Programmatic Level Educational Objectives

A proposed COM must define all programmatic level educational objectives.

Candidate Submission 6.1: Programmatic Level Educational Objectives

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

Candidate Element 6.2: Osteopathic Core Competencies

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

Candidate Submission 6.2: Osteopathic Core Competencies

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

Candidate Element 6.3: Teaching Methods

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

Candidate Submission 6.3: Teaching Methods

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

Candidate Element 6.4: Clinical Education

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

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

Candidate Submission 6.4: Clinical Education

1. Describe how clinical skills will be taught and assessed throughout the curriculum of the proposed COM.
2. Provide the definition of an eligible OMS-II student and/or other student to enter clinical rotations.
3. Define the types of patients and clinical conditions that osteopathic medical students will be required to encounter, the skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student responsibilities.
4. Provide 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.
5. Complete Candidate Table 6.4a listing all clinical rotations, (indicating core and no-core rotations) including the length of each rotation, the proposed COM will require students to complete to fulfill the requirements for graduation.
6. Provide a copy of a COM-approved clinical education affiliation agreement.
7. Complete Candidate Table 6.4b and provide all documents (including executed affiliation agreements), that demonstrate the acceptance of the proposed COM's future students 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.

Candidate Standard 7: Faculty and Staff

Candidate Element 7.1: Faculty and Staff Resources and Qualifications

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

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

Candidate Submission 7.1: Faculty and Staff Resources and Qualifications

1. Provide an organizational chart with title and names (where available) demonstrating how the faculty will be organized.
2. Complete Candidate Tables 7.1a and 7.1b.

Candidate Element 7.2: Faculty Appointment and Advancement

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

A proposed COM must create a process to review pay and rank parity every three years.

Candidate Submission 7.2: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement for the proposed COM, including:
 - a. term of appointment,
 - b. responsibilities,
 - c. lines of communication,
 - d. privileges and benefits,
 - e. performance evaluation and remediation,
 - f. terms of dismissal,
 - g. due process, and
 - h. the policy on practice earnings (if relevant).
2. Provide a copy of the pay/rank equity review policy.

Candidate Standard 8: Scholarly Activity

Candidate Element 8.1: Research and Scholarly Activity Strategic Plan

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

Candidate Submission 8.1: Research and Scholarly Activity Strategic Plan

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

Candidate Element 8.2: Research and Scholarly Activity Budget

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

Candidate Submission 8.2: Research and Scholarly Activity Budget

1. Provide a description of the proposed COM's budgetary processes that will support research and scholarly activity by its faculty and students.
2. Provide a copy of the proposed COM's research and scholarly activity budget.

Candidate Element 8.3: OMM/OPP Research and Scholarly Activity

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

Candidate Submission 8.3: OMM/OPP Research and Scholarly Activity

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

Candidate Element 8.4: Student Participation in Research and Scholarly Activity

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

Candidate Submission 8.4: Student Participation in Research and Scholarly Activity

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

Candidate Standard 9: Students

Candidate Element 9.1: Admissions Policy

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

Candidate Submission 9.1: Admissions Policy

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

Candidate Element 9.2: Recruitment of Students

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

Candidate Submission 9.2: Recruitment of Students

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

Candidate Standard 10: Graduate Medical Education (GME)

Candidate Element 10.1: GME Feasibility

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

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

The proposed COM must submit a feasibility study outlining available GME capacity including development costs and a plan outlining how the COM will ensure sufficient residency positions (PGY-1) to equal the approved class size. Of these residency positions, 30% must be newly created PGY-1 ACGME positions.

The COCA will limit the class size to 50% of the originally approved class size if a COM cannot meet the GME requirement outlined in element 10.1.

Candidate Submission 10.1: GME Feasibility

1. Provide the proposed COM's policies that include its structure and procedures to support the continuum of osteopathic medical education.
2. Provide the proposed COM's pro forma that includes line items for the support of the continuum of osteopathic medical education.
3. Provide the anticipated a link to the public webpage where the proposed COM intends to publish the average match rates for all residency match programs.

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

Candidate Standard 11: Intentionally Omitted

Candidate Standard 12: Institutional Accreditation (if applicable)

A proposed COM that is developing as part of a larger institution must demonstrate that the institution has accreditation by an institutional accrediting agency that is recognized by the USDE. The parent institution must maintain in effect any charter, licenses, or approvals required for it to function as an institution of higher education, including the provision of degree programs beyond the secondary level. Otherwise, the proposed COM must demonstrate that the elements with candidate standard 12 are met.

Candidate Element 12.1: Incorporation of the Institution

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

Candidate Submission 12.1: Incorporation of the Institution

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

Candidate Element 12.2: Degree and Other Educational Offerings

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

Candidate Submission 12.2: Degree and Other Educational Offerings

1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the proposed COM.
2. 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 Element 12.3: Chief Executive Officer

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

Candidate Submission 12.3: Chief Executive Officer

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

Candidate Element 12.4: Chief Financial Officer

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

Candidate Submission 12.4: Chief Financial Officer

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

Candidate Element 12.5: Course Credit Hours

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

Candidate Submission 12.5: Course Credit Hours

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

Candidate Element 12.6: Public Information

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

Candidate Submission 12.6: Public Information

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

Candidate Element 12.7: Public Notification of Opportunity to Comment

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

Candidate Submission 12.7: Public Notification of Opportunity to Comment

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

Candidate Element 12.8: Academic Freedom

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

Candidate Submission 12.8: Academic Freedom

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

Candidate Element 12.9: Campus Security

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

Candidate Submission 12.9: Campus Security

1. Provide a copy of the proposed COM's policy to provide annual campus security information to the public.

Candidate Element 12.10: Title IV Responsibility

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

Candidate Submission 12.10: Title IV Responsibility

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

Pre-Accreditation Status

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

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

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

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

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

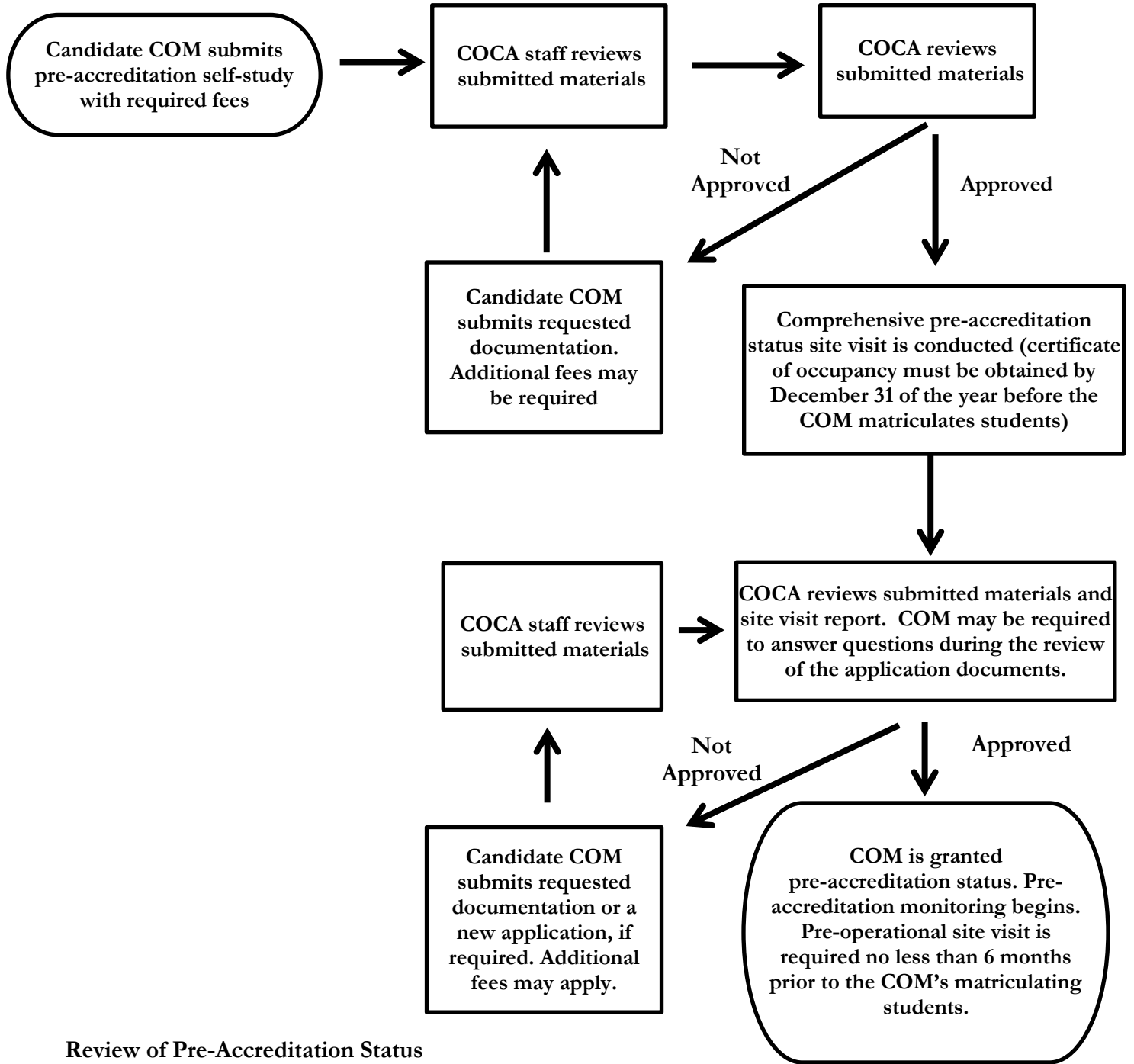
As required under 34 CFR § 602.16(a)(2), a COM may not hold the status of pre-accreditation for a period exceeding five years. During this five-year period, a pre-accredited COM must graduate its inaugural class in order to be eligible for consideration for accreditation status. Accordingly, the COCA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

Pre-Accreditation Status Process

1. Candidate COM submits pre-accreditation self-study.
2. Candidate COM remits non-refundable pre-accreditation application fee.
3. Staff review COCA staff reviews the self-study and all supporting documentation for accuracy and completeness.

4. COCA commissioners review the self-study and all supporting documentation.
5. At the time of COCA review, the proposed COM may be required answer questions about the self-study from COCA commissioners.
6. Following COCA's review of pre-accreditation self-study, the COCA may authorize a site visit. In the event a candidate COM's campus is not yet ready for a site visit, the site visit may occur at a location near the proposed campus, or the COCA may make a determination of the pre-accreditation self-study subject to a subsequent, satisfactory site visit.
7. Upon completion of the site visit, the COCA reviews the site visit report.
8. At the time of COCA review, the candidate COM may be required to answer questions regarding the site visit findings.
9. The COCA may receive third-party comments.
10. In order to achieve pre-accreditation status, a candidate COM must meet 100% of the pre-accreditation standards.
11. COCA approves or denies pre-accreditation status.
12. Notwithstanding procedure 11 above, in the event the COCA denies a pre-accreditation application, the COCA may direct that a new application for pre-accreditation status be submitted or that supplemental information be submitted. A new application will require the remittance of another non-refundable application fee.
13. The COCA's approval of pre-accreditation status authorizes the pre-accredited COM to begin soliciting, interviewing, and accepting students and fees
14. Matriculation of students and offering instruction is subject to approval of pre-operational site visit conducted no less than six months prior to the proposed matriculation date.
- [15. A change of dean during pre-accreditation status, until graduation of the first class of students, requires a comprehensive visit to be conducted no less than six months after notification after the change of dean has occurred.](#)

Pre-Accreditation Status Process



Review of Pre-Accreditation Status

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

Pre-Accreditation Self-Study

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

Pre-Accreditation Standards

Pre-Accreditation Standard 1: Mission and Governance

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

Pre-Accreditation Element 1.1: Program Mission

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

Pre-Accreditation Submission 1.1: Program Mission

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

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

Pre-Accreditation Element 1.2: Strategic Plan

A COM must produce and publish a current strategic plan addressing all core aspects of the COM's mission, including the advancement of DEI. Students, faculty and staff must be included in the strategic plan development, review, and revision.

Pre-Accreditation Submission 1.2: Strategic Plan

1. Provide a copy of the COM strategic plan.
2. Provide the list of individuals who participated in the plan creation/revision.
3. Provide a link to the public webpage where the documents are published.

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

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

The parent/sponsoring institution under which the COM operates (or the independent COM itself) must be recognized by an institutional accrediting agency that is recognized by the USDE.

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

A COM must report to the COCA any adverse actions that are taken against it or its parent institution by its institutional accreditor within five business days of notification of such action.

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 link to the public webpage where the most recent institutional accreditation information is published.
3. [Provide a link to the public webpage that describes the COM's relationship with a partner university \(if applicable\).](#)

Pre-Accreditation Element 1.4: Governance and Program Policies

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

Pre-Accreditation Submission 1.4: Governance and Program Policies

1. [Submit an organizational chart documenting the ownership structure and the percent of institutional ownership for each party for the proposed COM.](#)
- ~~2.~~ Provide the bylaws of the governing body and a list of members, including titles, of the body.
- ~~2.~~ [3.](#) Provide a copy of the policies for:
 - a. Conflict of interest for board members, employees, and institutionally employed faculty;
 - b. Due process for all employees, students, faculty, and credentialed instructional staff;
 - c. Confidentiality of employment, student, and medical records;
 - d. Fiscal management and accountability; and
 - e. Ethics, incorporating the AOA code of ethics.

Pre-Accreditation Element 1.5a: Non-Discrimination

A COM 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 or disabilities, and religion. This must apply to all COM actions.

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

Pre-Accreditation Submission 1.5a: Non-Discrimination

1. Provide a copy of the non-discrimination policy.
2. Provide a link to the public webpage to where the policy is published.
3. Describe and provide a flowchart of the process for reporting discrimination incidents and tracking their resolution.

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

The COCA respects the religious mission of faith-based schools. A COM having a religious affiliation or purpose must have a policy of non-discrimination with regard to students, administrative personnel, faculty, and staff but may apply a subset of the bases listed in Element 1.5a each omission of a listed basis that are 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.

A COM must develop a mechanism for reporting discrimination incidents and tracking their resolution, as appropriate for the COM's faith-based mission.

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

1. Provide a copy of the COM's the faith-based mission.
2. Provide a copy of the non-discrimination policy.
3. Provide a link to the public webpage where the policy is published.
4. Describe and provide a flowchart of the process for reporting discrimination incidents and tracking their resolution.

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

Pre-Accreditation Element 1.6: Degree-Granting Body

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

Pre-Accreditation Submission 1.6: Degree-Granting Body

1. Provide a copy of the bylaws or governing documents that demonstrate the conferral of degree.

2. Provide a copy of the COM policy demonstrating that the faculty association (or approved body) must recommend candidates for graduation.
3. Provide minutes from the faculty association meeting where this recommendation was made for the most recent graduates. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Standard 2: Leadership and Administration

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

Pre-Accreditation Element 2.1: Dean Qualifications

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

1. An earned DO degree from a COCA accredited college of osteopathic medicine;
2. An unrestricted medical license at some time in 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.

Pre-Accreditation Submission 2.1: Dean Qualifications

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

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

Pre-Accreditation Element 2.2: Full-Time Dean

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

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

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

Pre-Accreditation Submission 2.2: Full-Time Dean

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

Pre-Accreditation Element 2.3: Academic and Administrative Leadership

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

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

Pre-Accreditation Submission 2.3: Academic and Administrative Leadership

1. Provide an organizational chart that shows the COM's leadership positions (include names of individuals already hired) and reporting relationships. 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, and senior level administrators; do not include department chairs).
3. Provide a complete curriculum vitae for each member of the administrative leadership team (associate deans, assistant deans, and senior level administrators; do not include department chairs).
4. Provide a copy of the employee's medical license (if a DO or MD).

5. Provide a copy of the employee's AOA or ABMS board certification documents (if a DO or MD) that includes the certification expiration date [if in the medical environment](#).

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

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

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

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

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

COCA complaint policies can be found at <https://osteopathic.org/accreditation/accreditation-guidelines/>. The COCA contact is:

Commission on Osteopathic College Accreditation
142 E. Ontario Street
Chicago, IL 60611
predoc@osteopathic.org
Phone: (312) 202-8124
Fax: (312) 202-8424

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

A COM or its parent institution must designate an individual with responsibility for oversight of DEI initiatives of the COM.

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

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

Pre-Accreditation Standard 3: Finances

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

Pre-Accreditation Element 3.1: Financial Resources

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

Pre-Accreditation Submission 3.1: Financial Resources

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

Pre-Accreditation Element 3.2: Financial Planning and Budgeting

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

Pre-Accreditation Submission 3.2: Financial Planning and Budgeting

1. Provide a flowchart demonstrating the budget development process indicating where the final budget approval occurs and clearly reflecting the dean's role in the process.
2. ~~Provide information as to all persons with budgetary management and oversight at 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 Submission 3.3: Budgetary Authority

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

Pre-Accreditation Element 3.4: Financial Audit

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

Pre-Accreditation Submission 3.4: Financial Audit

1. Provide the annual audited financial statement and audit report for the COM or its parent institution for the latest complete fiscal year.
2. Provide evidence of resolution for any concerns cited in the audit's accompanying management letter.

Pre-Accreditation Standard 4: Facilities

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

Pre-Accreditation Element 4.1: Facilities

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

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

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

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

Pre-Accreditation Submission 4.1: Facilities

1. Complete and submit Pre-Accreditation Table 4.1 to describe the facilities the COM uses for instruction.
2. Provide a facility floor plan with designations of how the space will be utilized (full architectural drawings are not required).
3. Provide a description, and indicate on the floor plans provided, the facilities used for simulation and standardized patient encounters provided to students.
4. Describe how the COM will assess the adequacy of the core clinical rotation facilities, including how students will be involved in the assessment.
5. [Describe how the COM facilities will contribute to assessing student achievement of learning outcomes of the curriculum.](#)
6. Provide the construction plan and timeline for all COM buildings. (Applicable only for COMs applying for pre-accreditation status)
- ~~6.~~ [7.](#) Provide a contingency plan for COM facilities should the buildings not be completed on time. (Applicable only for COMs applying for pre-accreditation status)
- ~~7.~~ [8.](#) Provide the permanent Certificate of Occupancy for all COM buildings, as obtained, and by December 31 of the year prior to the anticipated start of classes. (Applicable only for COMs applying for pre-accreditation status)

Pre-Accreditation Element 4.2: Security and Public Safety

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

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

Pre-Accreditation Submission 4.2: Security and Public Safety

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

Pre-Accreditation Element 4.3: Information Technology

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

Pre-Accreditation Submission 4.3: Information Technology

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

Pre-Accreditation Element 4.4: Learning Resources

A COM must 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 COM's mission.

Pre-Accreditation Submission 4.4: Learning Resources

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

Pre-Accreditation Standard 5: Learning Environment

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

The school must promote students' attainment of the osteopathic core competencies required of future osteopathic physicians.

Pre-Accreditation Element 5.1: Professionalism

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

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

Pre-Accreditation Submission 5.1: Professionalism

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

Pre-Accreditation Element 5.2: Diversity

A COM must publish policies on and engage in ongoing, systematic, and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.

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

A COM must make publicly available on its website three years of student, faculty, and staff demographics, at a minimum including race/ethnicity and gender. When applicable, for any value on a table less than ten, the COM should indicate that value as "less than 10" in place of the value. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Submission 5.2: Diversity

1. Provide the COM's policies that demonstrate its current practice of systematic and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community.
2. Describe the COM's programs and partnerships with other institutions and organizations aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes.
3. Provide a link to the public webpage where admissions demographics will be/are published.

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

A COM must publish and follow policies and procedures that effectively mitigate student, faculty, and staff, 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 publish and follow policies related to student, faculty, and staff mental health and wellness and fatigue mitigation in the clinical learning environment.

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

1. Provide the policies and procedures addressing safety and health issues.
2. Provide a link to the public webpage where safety, health, and wellness information will be/is published.
3. Describe how this information is/will be provided to students, faculty, and staff.

Pre-Accreditation Element 5.4: Patient Care Supervision

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

Pre-Accreditation Submission 5.4: Patient Care Supervision

1. Provide the policies addressing student supervision during the provision of patient care, including policies on the use of telemedicine, if applicable.
2. Provide a link to the public webpage where the documents will be/are published.

3. Describe how this information is/will be provided to students, faculty, and staff.

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

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

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

Submission Pre-Accreditation Element 5.5: DEI Office

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

Pre-Accreditation Standard 6: Curriculum

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

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

Pre-Accreditation Element 6.1: Curriculum Design and Management

A COM must have in place a 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 COM.

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. (Proposed COM's applying for pre-accreditation status.)
3. Submit a list of meeting dates and meeting minutes for the past academic year. (Not applicable to proposed COM's applying for pre-accreditation status.)

Pre-Accreditation Element 6.2: Programmatic Level Educational Objectives

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

Pre-Accreditation Submission 6.2: Programmatic Level Educational Objectives

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

Pre-Accreditation Element 6.3: Maximum Length of Completion

A COM 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.

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 the public webpage where this policy is published.

Pre-Accreditation Element 6.4: Osteopathic Core Competencies

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

Pre-Accreditation Submission 6.4: Osteopathic Core Competencies

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

Pre-Accreditation Element 6.5: Scientific Method

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

Pre-Accreditation Submission 6.5: Scientific Method

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

Pre-Accreditation Element 6.6: Principles of Osteopathic Medicine

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

Pre-Accreditation Submission 6.6: Principles of Osteopathic Medicine

1. Provide a description of the COM's delivery of its OPP and OMM curriculums including instruction in OPP, including both observational and hands-on application of OMM. Not to exceed 250 words.
2. Provide a curriculum map demonstrating where this content will be/is delivered.

Pre-Accreditation Element 6.7: Self-Directed Learning

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

Pre-Accreditation Submission 6.7: Self-Directed Learning

1. Provide a description of the COM's delivery of its curriculum including self-directed learning experiences and time for independent study allowing students to develop skills for lifelong learning. Not to exceed 250 words.
2. Provide a curriculum map demonstrating where this content will be/is delivered.

Pre-Accreditation Element 6.8: Interprofessional Education for Collaborative Practice

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

Pre-Accreditation Submission 6.8: Interprofessional Education for Collaborative Practice

1. Provide a description of the COM's delivery of its curriculum which includes preparation of students to function collaboratively on health care teams, adhering to IPEC core competencies. Not to exceed 250 words.
2. Provide a curriculum map demonstrating where this content is delivered.

Note: A single curriculum map may be provided for Pre-Accreditation Elements 6.4 – 6.8.

Pre-Accreditation Element 6.9: Clinical Education

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

- a. Describe how clinical skills are taught and assessed throughout its curriculum;
- b. define eligibility requirements, including clinical skills, for a student to enter clinical rotations;
- c. define its core clinical rotations;
- d. 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;
- e. provide core clinical education rotations, including demonstration of adequate faculty, for 100% of the pre-accredited COM's students eligible to enter core clinical rotations for the first time, students repeating core rotations, and off-cycle students (COM's applying for pre-accreditation should use the requested approved class size);
- f. 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; and
- g. have executed affiliation agreements that ~~support the clinical education experience for its students.~~ identify the number of students in each specialty at the core site.

Pre-Accreditation Submission 6.9: Clinical Education

1. Provide a copy of a COM-approved affiliation agreement(s).
2. Provide all documents that demonstrate the acceptance of the COM's students to participate at the affiliate sites, including all executed affiliation agreements.
3. Provide the definition of a student eligible to enter clinical rotations.
4. Provide documentation (e.g., clinical education manual) listing core third- and fourth-year rotations.
5. Provide syllabi for all core clinical rotations.
6. Provide policies and procedures (protocols) demonstrating how clinical education is/will be delivered to all students through the COM.
7. Complete and submit Pre-Accreditation Tables 6.9a detailing student population. (Not applicable to COMs applying for pre-accreditation status).
8. Complete and submit Pre-Accreditation Table 6.9b(?) demonstrating adequacy of core clinical rotation capacity.
9. Provide a contingency plan for all core rotations indicating how students will be placed in clinical education in the event opportunities are no longer available.

Pre-Accreditation Element 6.10: Clinical Experience

A COM must ensure that each student’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.

Pre-Accreditation Submission 6.10: Clinical Experience

1. Provide 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 COM to track compliance with these requirements. (Not applicable for COMs applying for pre-accreditation status)
2. Describe the process the COM will use to ensure students will receive the required clinical rotation experiences prior to their fourth-year clinical clerkships. (Not required for COMs in pre-accreditation status).

Pre-Accreditation Element 6.11: Comparability across 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. This comparison of comparability must include a statistical analysis.

Pre-Accreditation Submission 6.11: Comparability across Clinical Education Sites

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

~~Pre-Accreditation Element 6.12: COMLEX-USA~~

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

~~The COM must 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).~~

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

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

Pre-Accreditation Element 6.123: Diversity, Equity, and Inclusion (DEI) Curriculum

A COM must incorporate diversity, equity, and inclusion into its curriculum.

Pre-Accreditation Submission 6.13: DEI Curriculum

1. Provide a description of the COM's curriculum that includes issues related to diversity, equity, and inclusion.
2. Provide a curriculum map demonstrating where the content of these courses is delivered.

Pre-Accreditation Standard 7: Faculty and Staff

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

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

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

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

A candidate COM applying for pre-accreditation must have a pro forma plan for 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, must hold current medical licensure and have had AOA or ABMS board certification/board eligibility in the specialty being taught at some time in their career. All non-physician faculty in the patient care environment must have demonstrated, appropriate qualifications in their disciplinary field.

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

1. Provide the organizational chart (titles and names, where available) demonstrating how the faculty are/will be organized. Indicate (highlight) any changes or updates since the initial submission.
2. Complete Pre-Accreditation Tables 7.1a and 7.1b.

In preparation of a site inspection and upon request by the COCA staff, the COM 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: For the submission requirements below reports from the American Osteopathic Information Association, Federation of State Medical Boards, or American Board of Medical Specialties may be submitted as primary source verification to demonstrate current licensure and board certification.

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

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

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

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

Pre-Accreditation Element 7.3: Department Chair Qualifications

A COM must employ (have under contract prior to the granting of Pre-accreditation Status) chairs 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.

Pre-Accreditation Submission 7.3: Department Chair Qualifications

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

Pre-Accreditation Element 7.4: Primary Care Leadership

A COM may organize its medical faculty under an organizational structure of its own design, but the leadership of the COM's clinical education must include one or more of actively licensed osteopathic physicians who are AOA or ABMS 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.

Pre-Accreditation Submission 7.4: Primary Care Leadership

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

Pre-Accreditation Element 7.5: OMM/OPP Leadership

Osteopathic philosophy and principles (OPP) that include osteopathic manipulative medicine (OMM) are defining characteristics of a COM in maintaining its osteopathic distinction. Accordingly, in a Department of OMM/OPP or equivalent, a COM must employ at least one full-time Doctor of Osteopathic Medicine with proven experience in developing and delivering OMM/OPP curriculum at a COM, an active medical license, and active board certification from the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM) or a Certificate of Special Proficiency in OMM (C-SPOMM) whose principal duties include developing the osteopathic content of the COM's curriculum.

Pre-Accreditation Submission 7.5: OMM/OPP Leadership

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

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

Pre-Accreditation Element 7.6: Faculty Development

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

Pre-Accreditation Submission 7.6: Faculty Development

1. Provide a report of the most recent annual faculty development needs assessment. (Not application to proposed COMs applying for pre-accreditation.)
2. Provide a roster of all faculty development activities for the past academic year, including documentation of the faculty participation at each activity. (Not applicable to proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 7.7: Faculty Association

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

Pre-Accreditation Submission 7.7: Faculty Association

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

Pre-Accreditation Element 7.8: Faculty Appointment and Advancement

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

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

Pre-Accreditation Submission 7.8: Faculty Appointment and Advancement

1. Provide the policies and procedures for faculty appointment and advancement, including:
 - a. term of appointment;
 - b. responsibilities;
 - c. lines of communication;
 - d. privileges and benefits;
 - e. performance evaluation and remediation;
 - f. terms of dismissal;
 - g. due process; and
 - h. the policy on practice earnings (if relevant).
2. Provide a link to the public webpage where the documents are published.
3. Provide a copy of the pay/rank equity review policy.
4. Provide a copy of the most recent pay/rank equity study. (Not applicable to COMs applying for pre-accreditation status).

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

A COM must offer DEI training to employed faculty and staff at least annually.

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

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

Pre-Accreditation Standard 8: Scholarly Activity

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

Pre-Accreditation Element 8.1 Research and Scholarly Activity Strategic Plan

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

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

1. Provide a copy of the research and scholarly strategic plan.
2. Provide a link to the public webpage where the research and scholarly activity strategic plan will be/is accessed.

Pre-Accreditation Element 8.2: Research and Scholarly Activity Budget

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

Pre-Accreditation Submission 8.2: Research and Scholarly Activity Budget

1. Provide a description of the COM's budgetary processes that support research and scholarly activity by its faculty and students.
2. Provide a copy of the COM's research and scholarly activity budget.

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

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

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

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

Pre-Accreditation Element 8.4: 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 Submission 8.4: Student Participation

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

Pre-Accreditation Standard 9: Students

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

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

Pre-Accreditation Element 9.1: Admissions Policy

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

Pre-Accreditation Submission 9.1: Admissions Policy

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

Pre-Accreditation Element 9.2: Academic Standards

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

Pre-Accreditation Submission 9.2: Academic Standards

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

Pre-Accreditation Element 9.3: Transfer Policies

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

Pre-Accreditation Submission 9.3: Transfer Policies

1. Provide copies of all transfer policies and procedures, including those made available to students pursuant to 34 CFR § 668.43(a)(11).
2. Provide the link to the public webpage where the policies are published.

Pre-Accreditation Element 9.4: Secure Student Recordkeeping

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

Pre-Accreditation Submission 9.4: Secure Student Recordkeeping

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

Pre-Accreditation Element 9.5: Academic Counseling

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

Pre-Accreditation Submission 9.5: Academic Counseling

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

Pre-Accreditation Element 9.6: Career Counseling

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

Pre-Accreditation Submission 9.6: Career Counseling

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

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

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

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

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

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

Pre-Accreditation Element 9.8: Mental Health Services

A COM must have policies and procedures to provide its students with confidential access to an effective system of counseling and mental 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 COM.

Pre-Accreditation Submission 9.8: Mental Health Services

1. Provide the policies and procedures for students seeking counseling and mental health services.
2. Provide a link to the public webpage where students access mental health care information.
3. Provide a list of the mental health services available to students at all teaching locations with service locations and hours.

Pre-Accreditation Element 9.9: Physical Health Services

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

Pre-Accreditation Submission 9.9: Physical Health Services

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

Pre-Accreditation Element 9.10: Non-Academic Health Professionals

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

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

Pre-Accreditation Submission 9.10: Non-Academic Health Professionals

1. Provide policies and procedures on recusal from student assessment and promotion for health professionals providing services to students.
2. Provide a link to the public webpages where these policies and procedures are published for faculty and students.
3. Describe how this information is provided to students and faculty. Not to exceed 250 words.

Pre-Accreditation Element 9.11: Health Insurance

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

Pre-Accreditation Submission 9.11: Health Insurance

1. Provide the policies and procedures regarding health insurance for students, [including the verification process. Describe the process to ensure student compliance with insurance requirements at least annually.](#)
2. Provide a link to the public webpage where the health insurance policies are published.

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

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

Pre-Accreditation Element 10.1: Osteopathic Educational Continuum

The COM must have policies, procedures, personnel and budgetary resources to support the continuum of osteopathic education, including graduate medical education.

Pre-Accreditation Submission 10.1: Osteopathic Educational Continuum

1. Provide the COM's policies that describe COM's procedures, personnel, and budgetary resources that support/will support the continuum of osteopathic medical education.

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

Pre-Accreditation Element 10.2: Accredited GME

A COM must provide a mechanism to assist new and existing GME programs in meeting the requirements for accreditation.

Pre-Accreditation Submission 10.2: Accredited GME

1. Provide the COM's policy and description of its mechanism for assist new existing GME in meeting the requirements for accreditation.

Pre-Accreditation Element 10.3: Osteopathic Recognition of GME

A COM must provide a mechanism to assist GME programs in meeting the requirements of osteopathic recognition.

Pre-Accreditation Submission 10.3: Osteopathic Recognition GME

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

~~**Pre-Accreditation Element 10.4: GME Placement Rates**~~

~~A COM must publish publicly the placement rates of its students in graduate medical education programs, including by race/ethnicity and gender.~~

~~The requirement to report race/ethnicity and gender data will begin with the graduating class of 2023 and beyond.~~

~~**Pre-Accreditation Submission 10.4: GME Placement Rates**~~

- ~~1. Provide a link to the public webpage where the COM's GME placement rates will be/are published, including placement rate by race/ethnicity and gender, for the last four academic years in all residency programs. The placement rate must be calculated by dividing the number of students who matched into a PGY1 position by the number of students were match eligible.~~
- ~~2. Submit Table 10.~~

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

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

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

Pre-Accreditation Element 11.1: Program Assessment

A COM must 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.

Pre-Accreditation Submission 11.1: Program Assessment

1. Provide the guiding documents which govern how the COM conducts learning outcome 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 core osteopathic competencies in the curriculum.
2. Provide a list of the learning outcome assessments performed over the past three academic years. (Not applicable for COMs applying for pre-accreditation status.)
3. Provide examples of changes in curriculum, pedagogy, counseling, or other aspects of the student experience that have been made as a result of recent program reviews in order to more fully support the student learning, including the core competencies. (Not applicable for COMs applying for pre-accreditation status.)

Pre-Accreditation Element 11.2: Student Evaluation of Instruction

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

Pre-Accreditation Submission 11.2: Student Evaluation of Instruction

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

Pre-Accreditation Element 11.3: COCA Annual and Mid-Cycle Reports

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

Pre-Accreditation Submission 11.3: COCA Annual and Mid-Cycle Reports

1. COCA staff will confirm that the COM has completed and submitted the required COCA annual reports by the established deadlines. (Not applicable for proposed COMs applying for pre-accreditation status.)

Pre-Accreditation Element 11.4 Student Outcomes

11.4a COMLEX-USA

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

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

Pre-Accreditation Submission 11.4a COMLEX-USA

1. Provide all COM policies and procedures related to the COMLEX-USA.

2. Provide a link to the public webpage where the last four years of COMLEX-USA Level 1, Level 2, and Level 3 first time pass rates are published.

11.4b GME Placement Rates

A COM must publish publicly the placement rates of its students in graduate medical education programs, including by race/ethnicity and gender.

The requirement to report race/ethnicity and gender data will begin with the graduating class of 2023 and beyond.

Pre-Accreditation Submission 11.4b GME Placement Rates

1. Provide a link to the public webpage where the COM's GME placement rates are published, including placement rate by race/ethnicity and gender, for the last four academic years in all residency programs. The placement rate must be calculated by dividing the number of students who matched into a PGY1 position by the number of students were match eligible.
2. Submit Table 11.4b.

11.4c Cohort Graduation Rates

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

Pre-Accreditation Submission 11.4c Cohort Graduation Rates

1. Provide a link to the public webpage where the COM's cohort graduation rates at years 4, 5, and 6 will be published.

11.4d Cohort Retention Rates

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

Pre-Accreditation Submission 11.4d Cohort Retention Rates

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

Pre-Accreditation Element 11.45: Student Survey

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

Pre-Accreditation Submission 11.45: Student Survey

1. Describe the methods the COM will use/used to support the completion of the COCA student survey.

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

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

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.
4. Provide evidence of an annual assessment of the governing body's conflicts of interest.

Pre-Accreditation Element 12.2: Degree and Other Educational Offerings

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

Pre-Accreditation Submission 12.2: Degree and Other Educational Offerings

1. Provide a list of all degrees and educational programs (certificates and courses) to be offered by the COM.
2. 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 Element 12.3: Chief Executive Officer

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 must have a minimum of five years' experience in senior administration in an institution of higher education or healthcare setting.

Pre-Accreditation Submission 12.3: Chief Executive Officer

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

Pre-Accreditation Element 12.4: Chief Financial Officer

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

Pre-Accreditation Submission 12.4: Chief Financial Officer

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

Pre-Accreditation Element 12.5: Course Credit Hours

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

Pre-Accreditation Submission 12.5: Course Credit Hours

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

Pre-Accreditation Element 12.6: Public Information

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

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

Pre-Accreditation Submission 12.6: Public Information

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

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

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

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

1. Provide evidence that a public notice inviting any third-party comments prior to an impending a comprehensive or focused site visit was posted on the institution's website no later than three months prior to the date the site visit is scheduled to commence, including information on how to contact the COCA directly.

Pre-Accreditation Element 12.8: Academic Freedom

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

Pre-Accreditation Submission 12.8: Academic Freedom

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

Pre-Accreditation Element 12.9: Title IV Responsibility

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

Pre-Accreditation Submission 12.10: Title IV Responsibility

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

END OF STANDARDS

Glossary

The glossary should be used for information and guidance purposes only. The glossary should not be used as a resource to interpret the Standards; only the Commission on Osteopathic College Accreditation may interpret the Standards according to the context presented. The following information serves only to define terms.

AACOM – American Association of Colleges of Osteopathic Medicine

Academic Credentialing – Approval of faculty members either for on-campus or off campus instruction, through a process of verification of education, licensure, insurance, and other requirements deemed necessary to meet COM policy.

Accreditation – The status of public recognition that an accrediting agency grants to an educational institution or program that meets the agency’s standards and requirements. This process ensures that educational programs provided by institutions of higher education meet acceptable levels of quality, as follows:

Accreditation with Exceptional Outcome: This indicates that the COM is in compliance with all standards and that all elements are met at the time of the review with no progress report or additional written information required. For schools with this status, accreditation will be granted for ten years. Monitoring is conducted through submission of the COCA annual report and the mid-cycle report that is due in year five. This accreditation status is not available to newly accredited COMs (progressing from pre-accreditation status) or following an accreditation status of Accreditation with Probation or Accreditation with Warning.

Accreditation: This indicates that a COM is compliant with all standards. However, there may be non-core elements that are not met and must be addressed via progress reporting. For schools with this status, accreditation will be granted for seven years. Monitoring is conducted through submission of the COCA annual report and the mid-cycle report that is due in year three. COMs achieving accreditation for the first time with all Elements met will be granted this status for six years with a mid-cycle report due in year three.

Accreditation with Finding: This indicates that a COM is not compliant with one standard (including non-compliance with a Core Element(s) within a standard) and ongoing monitoring will occur through progress reporting and annual reports. For schools with this status, accreditation will be granted for five years. Mid-cycle reporting is due in year three.

Accreditation with Monitoring: This indicates that a COM is not compliant with two standards (including non-compliance with a Core Element(s) within each standard) and ongoing monitoring will occur through progress reporting and annual reports. For schools with this status, accreditation will be granted for four years. Mid-cycle reporting is due in year two.

Accreditation with Warning: This indicates that a COM is not compliant with three to five standards and ongoing monitoring will occur through progress reporting, annual reports, and any other monitoring the COCA deems necessary (e.g., focused site visits, etc.). For schools with this status, accreditation will be granted for two years. The mid-cycle report will be submitted with the annual report.

Accreditation with Probation: This indicates that a COM is not compliant with more than five standards. For schools with this status, the accreditation will be granted for no more than one year. Monitoring will occur continuously as deemed necessary by the COCA, including progress reporting, an annual report, and focused site visits.

Withdrawal of Accreditation: This indicates that the quality of the educational program is compromised, and the school was unable to come into compliance with all standards within the allotted timeframe.

ACGME – Accreditation Council for Graduate Medical Education.

Additional Location – A location that is geographically apart from the main campus at which the institution offers at least 50 percent of an educational program. The Additional Location will not have separate administration, faculty, or budgetary independence. The additional location must have a common Chief Academic Officer, faculty, budget, and curriculum with the parent COM. Students may be admitted directly to the Additional Location as their primary place of enrollment (34 CFR §602.22).

Adverse Action – A decision by the COCA involving the status of probation, warning, denial, withdrawal, suspension, revocation of accreditation or pre-accreditation or any other negative effect on a COM's accreditation status. Upon the determination of the COCA, the decision is reported to the United States Department of Education, irrespective of the appeal status of a decision.

Affiliated Clinical Site – A clinical site in an accredited healthcare facility or clinic, not owned or operated by a COM, which agrees to provide specific and limited clinical instruction to a COM's students.

Annual Report – A required report from each COM addressing programmatic outcomes.

AOA – American Osteopathic Association

Approved Class Size – The maximum class size allowed by the COCA. All COMs with entering first-time matriculants in excess of the approved class size plus a permitted variance of eight percent (8%) will be determined to have an unplanned class size increase and will be required to submit a Substantive Change, Unplanned Class Size Increase application, including the required fees. For the purpose of an accurate accounting of class size, in those instances where a student matriculates in one year but takes a leave of absence or other decelerated program options, the COM will count that student towards the class in which they matriculated

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

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

The COCA may serve as the programmatic or institutional accreditor for COMs wishing to request a Branch Campus. (34 CFR §600.2).

CHEA – Council for Higher Education Accreditation

Clery Act – The *Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act* (Clery Act) is a federal statute which requires all colleges and universities that participate in federal financial aid programs to keep and disclose information about crime on and near their respective campuses.

COCA – Commission on Osteopathic College Accreditation

COM (SOM) – College (or school) of osteopathic medicine offering instruction leading to a Doctor of Osteopathic Medicine (DO) degree.

Comprehensive Osteopathic Medical Licensing Examination of the United States (COMLEX-USA) – A series of osteopathic medical licensing examinations administered by the National Board of Osteopathic Medical Examiners (NBOME).

CORE Element – An element considered fundamental to meeting the standard. A COM will be found out of compliance with the standard if the COM fails to meet any core element within that standard.

Core Rotation - A Clinical rotation required for all medical students in the OMS-III and sometimes the OMS-IV year that must be completed within hospitals or other sites affiliated with the COM. This could be an assigned hospital(s), hospital system, or the COM's network of training sites. These rotations must have a defined syllabus and written assessment in addition to the preceptor evaluation. This differs from an elective or selective rotation where the students can complete the rotation in any approved specialty at any approved training site.

At a minimum, core rotations should include, but are not limited to,: internal medicine, surgery, family medicine, women's health, pediatrics, behavioral health, . A minimum of 4 weeks is required for each core rotation.~~Clinical rotations that must be completed prior to graduation from the COM. Core rotations provide exposure to a wide range of medical topics and issues. They are generally completed in the OMS III year but may be completed in OMS IV. Core rotations are defined by each COM. Generally, they may include internal medicine, surgery, family medicine, obstetrics and gynecology, pediatrics, psychiatry, and/or emergency medicine.~~

Culturally-Sensitive – To be aware that differences and similarities exist between people without judging those differences as positive or negative.

Credit Hour – A credit hour is defined by the regulations of the U.S. Secretary of Education at 34 CFR 600.2 – Except as provided in 34 CFR 668.8(k) and (l), a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

1. One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
2. At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practicum, studio work, and other academic work leading to the award of credit hours.

Curriculum Changes – A substantive change in curriculum will be considered when a comprehensive change in the curriculum is occurring, which means a significant departure from the existing curriculum content or method of delivery. A substantive change is NOT merely a modification made as part of the routine curricular improvement process. A substantive change in curriculum may also be considered if there is a change from clock hours to credit hours or a substantial increase or decrease (more than 20%) in the number of clock or credit hours awarded for successful completion of a program. CFR 602.22 a-(2)iii.

Curriculum Vitae – A brief account of an individual’s education, qualifications, and professional experiences, updated within the last three years.

Direct Supervision of a Medical Student – Observation of a student in the clinical learning environment that can occur while the supervisor is physically present with the student and the patient, or when the supervisor allows the student to interact with the patient without being present but is immediately available. In both cases the supervisor must physically see the patient during the key portions of the interaction and is responsible for student and patient safety.

Distance Education – Education that uses one or more of the technologies listed below to deliver the entire course of instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and instructor, either synchronously or asynchronously. The technologies may include:

1. The internet;
2. One-way and two-way transmission through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
3. Audio conferencing; or
4. Video cassettes, DVD's and CD-ROMs, if the cassettes, DVDs or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3) of this definition. (34 CFR 600.2)

EPAs – Entrustable Professional Activities

Escrow Reserve Fund – A minimum segregated, unencumbered reserve fund escrowed until one year after graduation of the first class of students and equal to an amount approved by the COCA. 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.

Faculty Member – An individual who contributes in a full or part time manner to a COM in the areas of teaching, research/scholarly work, service, or administrative responsibilities.

Adjunct Faculty Member – Faculty serving in a temporary or auxiliary capacity with limited duties and benefits.

Full Time Faculty Member – A faculty member is determined to work full time for a COM or institution if he/she contributes at least thirty-two hours per week of work, including responsibilities in the area of teaching, research/scholarly work, service or administrative responsibilities. In the faculty adequacy model, a faculty member meeting this definition may be considered full-time or 1.0 full time equivalent (FTE).

Part Time Faculty Member – Faculty members working fewer hours or with contractual arrangements resulting in routine payments from sources other than the COM or institution are considered part-time and should be assigned the working percentage of a full time equivalent.

Feasibility Study – An assessment of the practicality of a proposed plan or method required as part of the Candidate Status Application. The submitted document will be verified at the time of the site visit.

4-year Graduation rate - Total number students awarded the DO degree in four years minus transfer students divided by the total number of students entering the OMS-I year.

5-year Graduation rate - (Total number students awarded the DO degree in four years plus total number students awarded the DO degree in year 5) minus transfer students divided by the total number of students entering the OMS 1 year.

Full-time Equivalent (FTE) – An FTE is the number of hours worked by one employee on a full-time basis.

Institutional Accrediting Agency – An agency that accredits institutions of higher education; such an agency grants accreditation decisions that enable its accredited institutions to establish eligibility to participate in Higher Education Act Programs.

Interprofessional Education (IPE) – When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes. (World Health Organization 2010)

NACIQI – National Advisory Committee on Institutional Quality and Integrity

NBOME – National Board of Osteopathic Medical Examiners, Inc

Observer – A site team member who is an official from a federal or state agency or a representative of any other organization, who is not assigned a specific role on the site visit team.

Operating Reserve Fund – A fund consisting of an amount approved by the COCA but no less than one-fourth of the escrow 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.

Osteopathic Core Competencies – The Seven Osteopathic Core Competencies were defined to meet the requirements of AOA-accredited postdoctoral training programs: Medical knowledge; osteopathic philosophy and osteopathic manipulative medicine; patient care; professionalism; interpersonal and communication skills; practice-based learning and improvement; and systems-based practice.

Planned Class Size Increase – A substantive change initiated by the COM and approved by its governing board to increase its COCA-approved class size.

Progress Report – A document submitted by a COM for compliance monitoring purposes to demonstrate the COM's compliance with accreditation standards the COCA has deemed not met.

Proposed College of Osteopathic Medicine – A COM that has not yet achieved pre-accreditation status. A proposed COM may not advertise, interview, or admit students or accept any money or other compensation from any applicant as a reservation fee or payment for any part of a future tuition. A proposed COM may not begin to offer any facts, ideas, or skills imparted through education, erudition, knowledge, learning, scholarship, science that will result in awarding partial or complete credit leading to the awarding of the DO degree until pre-accreditation status is awarded. The proposed COM must specifically and conspicuously note this status on its website or in communication to the target audience.

Public Document – A statement or document that is accessible to or shared with members of the public.

Public Website – An unencrypted webpage published by the COM that is accessible to all members of the public without need for a password or other specific permission.

Published Document – A document that is provided by the COM in hard copy or posted to the COM's website. Documents requiring public notice must be made available on request to the public or posted to the COM's website for access without a password.

[Retention Rate – Total number students entering the cohort on matriculation day minus \(students who withdraw for any reason plus students dismissed for any reason plus transfer students\) divided by the Total number students entering the cohort on matriculation day.](#)

Right to Recruit but not to Admit Students or to Offer Instruction – This phrase identifies a proposed COM (i.e., a COM that has not yet achieved pre-accreditation status) that has been approved by the COCA to advertise, interview, and otherwise seek applicants for a future class, but may not accept payments for fees or tuition, admit students, or offer instruction. A proposed COM with the right to recruit but not to admit students or to offer instruction must specifically and conspicuously note this status on its website and in all communications.

Self-Study – A self-assessment report submitted by a COM to the COCA to demonstrate the COM's compliance with all applicable COCA standards.

Show Cause – A directive by the COCA to a COM mandating the COM to produce information or evidence as to why the COCA should not take an adverse accreditation decision following information evidencing a COM's non-compliance with the accreditation standards, policies or procedures.

Site Visit – The process through which the COCA examines, through an on-site review, a COM's compliance with all accreditation standards. Site reviews may be conducted virtually as directed by the COCA.

Comprehensive Site Visit – A review that addresses all standards.

Focused Site Visit – A review that addresses a specific set of identified standards.

Site Visit Team – A group of individuals each classified under certain categories of on-site evaluators, as required by 34 CFR § 602.15. The categories of on-site evaluators are:

1. Administrator – An individual who is currently or recently, and directly, engaged in a significant manner in postsecondary program or institutional administration.
2. Educator – An individual who is currently or recently, and directly, engaged in a significant manner in osteopathic education in an academic capacity (e.g., professor, instructor, academic dean).
3. Academic – An individual who is currently or recently, and directly, engaged in a significant manner in postsecondary teaching and/or research.
4. Practitioner – An individual who is currently or recently, and directly, engaged in a significant manner in the practice of the osteopathic profession.

6-year Graduation rate - (Total number students awarded the DO degree in four years plus total number students awarded the DO degree in year 5 plus total number students awarded the DO degree in year 6) minus transfer students divided by the total number of students entering the OMS-I year.

Substantive Change – Any modification in a COM's operations, governance, or legal status that does not have a material adverse effect that could impact the COM's capacity to continue to meet the COCA's accreditation requirements for the delivery of the osteopathic medical education curriculum. See *COCA Substantive Changes Policies and Procedures*.

Teach-out Agreement – A written agreement an accredited COM provides for the equitable treatment of its students to complete their program of study, if the COM stops offering its educational program before all students enrolled in that program complete their program of study.

Teach-Out Plan – A written plan developed by a COM providing for the equitable treatment of its students if an institution, an additional location or a branch campus ceases to operate before all students enrolled in that program complete their program of study. This plan may include, if required by the COCA, a teach-out agreement between COMs.

Technical Assessment Report – The process of setting goals about technical facets of the institution, determining how well those goals are being met, and determining the best course of action to take to improve those results.

Title IV – Title IV of the Higher Education Act of 1965, as amended.

USDE – United States Department of Education and the Secretary of Education.

Withdrawal - The voluntary withdrawal of a COM from the accreditation process.