

**Accreditation of Colleges of Osteopathic  
Medicine:  
COM Continuing Accreditation Standards**

Effective July 1, 2017

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## Introduction

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

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

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

The *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards* is organized around twelve (12) accreditation standards, each with an accompanying set of elements. The first eleven (11) standards must be met by all COMs with full accreditation; standard 12 is applicable only when COCA serves as the institutional accreditor for the COM. Each of the standards 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.

Within each standard, there are multiple elements that are identified as “core elements.” A core element is critical to maintain the educational quality of the program. Therefore, a COM will be found out of compliance with the standard if the COM fails to meet any core element within that standard. The COCA will consider other non-core elements, which, while important, are considered in the context of the totality of a COM’s response to each of the elements associated with a specific standard in the determination of the compliance with that standard.

In the event a COM fails to meet any standard or element, the COCA will monitor the COM via progress reporting at specified intervals. The COM must come into compliance with each standard or element within twenty-four months of the initial determination. The United States Department of Education (USDE) requires all standards to be compliant and all elements met within this timeframe or the COCA must take an adverse accreditation action against the COM.

In addition to determining whether elements are met and standards are compliant, the COCA must

make an accreditation decision for a COM. The following are the possible accreditation actions:

**Accreditation with Exceptional Outcome:** This indicates that all standards are compliant and all elements are met. For schools with this status, accreditation will be granted for ten years.

**Accreditation:** This indicates that all standards are compliant. However, there may be unmet elements that must be addressed via progress reporting. For schools with this status, accreditation will be granted for seven years.

**Accreditation with Heightened Monitoring:** This indicates that fewer than three standards are non-compliant and ongoing monitoring will occur via progress reporting. For schools with this status, accreditation will be granted for four years.

**Accreditation with Warning:** This indicates that between three and five standards are non-compliant and ongoing monitoring will occur via progress reporting. For schools with this status, accreditation will be granted for two years.

**Accreditation with Probation:** This indicates that more than five standards are non-compliant. For schools with this status, the accreditation will be granted for no more than one year.

**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.

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

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## Standards

### **Standard 1: Mission and Governance**

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

#### **Element 1.1: Program Mission: (CORE)**

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

#### **Element 1.2: Strategic Plan:**

A COM must produce and publish a current strategic plan addressing all core aspects of the COM mission. The strategic plan review and revision must include faculty and students, at a minimum.

#### **Element 1.3: Licensing and Regional / Institutional Accreditation: (CORE)**

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

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

#### **Element 1.4: Governance & Program Policies: (CORE)**

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

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- 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.

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

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

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

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

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

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

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

**Element 1.7: Clinical Education Affiliation Agreements: (CORE)**

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

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**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.

**Element 2.1: Dean Qualifications: (CORE)**

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

**Element 2.2: Full Time Dean: (CORE)**

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

**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.

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

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



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**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.

**Element 3.1: Financial Resources: (CORE)**

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

**Element 3.2: Financial Planning and Budgeting:**

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

**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.

**Element 3.4: Financial Audit: (CORE)**

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

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**Standard 4: Facilities**

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

**Element 4.1: Facilities: (CORE)**

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

**Element 4.2: Security and Public Safety:**

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

**Element 4.3: Information Technology:**

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

**Element 4.4: Learning Resources:**

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

**Standard 5: Learning Environment**

A COM must ensure that its educational program occurs in professional, respectful, non-discriminatory, and intellectually stimulating academic and clinical environments. The school also promotes students' attainment of the osteopathic core competencies required of future osteopathic physicians.

**Element 5.1: Professionalism: (CORE)**

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

**Element 5.2: Diversity:**

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

**Element 5.3: Safety, Health, and Wellness:**

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

**Element 5.4: Patient Care Supervision: (CORE)**

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

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**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.

**Element 6.1: Curriculum Design and Management: (CORE)**

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

**Element 6.2: Programmatic Level Educational Objectives: (CORE)**

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

**Element 6.3: Maximum Length of Completion:**

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

**Element 6.4: Osteopathic Core Competencies: (CORE)**

A COM must apply best practices to teach, train, and assess students in order to ensure 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.

**Element 6.5: Scientific Method:**

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

**Element 6.6: Principles of Osteopathic Medicine: (CORE)**

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

**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.

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

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

**Element 6.9: Clinical Education: (CORE)**

A COM must define the types of patients and clinical conditions that osteopathic medical students are required to encounter, the skills to be performed by the students, the appropriate clinical setting for these experiences and the expected levels of student responsibilities. COMs must be able to provide clinical education rotations, including demonstration of adequate faculty, for at least 110% of the three-year rolling average of the number of first-year matriculates and repeat students. A COM must also have published policies and procedures (protocols) addressing methodologies by which students can complete the entire clinical education curriculum.

**Element 6.10: Clinical Experience:**

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

**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.

**Element 6.12: COMLEX-USA:**

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

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**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.

**Element 7.1: Faculty and Staff Resources and Qualifications: (CORE)**

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

**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.

**Element 7.3: Department Chair Qualifications:**

A COM must employ Department Chairs, or their equivalent, with proven experience in teaching and academic leadership in a medical education setting. For clinical department chairs, the chair must have an active medical license and active board certification in the discipline in which they serve as chair.

**Element 7.4: Primary Care Leadership:**

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

**Element 7.5: OMM/OPP Leadership: (CORE)**

A COM must employ a Doctor of Osteopathic Medicine with an active medical license and active board certification from the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM) or a Certificate of Special Proficiency in OMM (C-SPOMM) to serve as the Department Chair of OMM/OPP, or equivalent.

**Element 7.6: Faculty Development:**

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

**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.

**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.



**Standard 8: Scholarly Activity**

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

**Element 8.1: Research and Scholarly Activity: (CORE)**

A COM must have a strategic plan and scholarly activities that document how the COM will contribute to the advancement of knowledge through research and scholarly contributions.

**Element 8.2: Student Participation:**

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

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**Standard 9: Students**

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

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

**Element 9.1: Admissions Policy: (CORE)**

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

**Element 9.2: Academic Standards: (CORE)**

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

**Element 9.3: Transfer Policies:**

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

**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.

**Element 9.5: Academic Counseling: (CORE)**

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

**Element 9.6: Career Counseling: (CORE)**

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

**Element 9.7: Financial Aid and Debt Management Counseling:**

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

**Element 9.8: Mental Health Services: (CORE)**

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

**Element 9.9: Physical Health Services: (CORE)**

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

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

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

**Element 9.11: Health Insurance:**

A COM must require that all students have health insurance.

**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.

**Element 10.1: Osteopathic Educational Continuum:**

The COM must demonstrate policy, structure and procedures to support the continuum of osteopathic education - including predoctoral education, graduate medical education, and continuing medical education. The COM must provide a copy of its policies and procedures demonstrating its support of the continuum of osteopathic education.

**Element 10.2: ACGME Accredited GME:**

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

**Element 10.3: Osteopathic Recognition GME:**

A COM must provide a mechanism to assist graduate medical education programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) in meeting the requirements of osteopathic recognition.

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**Standard 11: Program and Student Assessment and Outcomes**

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

**Element 11.1: Program Assessment: (CORE)**

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

**Element 11.2: Student Evaluation of Instruction:**

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

**Element 11.3: Student Debt Outcomes:**

A COM and/or its parent institution must collect and publish data on the debt load and student loan default rates of its students in such a way that applicants can be aware of the information.

**Element 11.4: Student Survey:**

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

**Element 11.5: Program and Student Outcomes – Annual Data and Mid-Cycle Update Reports: (CORE)**

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

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**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.

**Element 12.1: Incorporation of the Institution: (CORE)**

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

**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 agencies.

**Element 12.3: Chief Executive Officer: (CORE)**

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

**Element 12.4: Chief Financial Officer:**

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

**Element 12.5: Title IV Responsibility: (CORE)**

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

**Element 12.6: Course Credit Hours:**

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

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**END OF STANDARDS**

**Accreditation of Colleges of Osteopathic  
Medicine:  
Evidentiary Submission for Addressing the  
COCA Continuing Accreditation Standards**  
Effective July 1, 2017



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## Evidentiary Submission for Addressing the COCA Continuing Accreditation Standards

### **Standard 1: Mission and Governance**

#### **Submission 1.1: Program Mission**

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

#### **Submission 1.2: Strategic Plan**

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

#### **Submission 1.3: Licensing and Regional / Institutional Accreditation**

1. *Provide a copy of the charter, license, or letter of approval from all agencies issuing such approvals.*
2. *Provide a public link to where the most recent institutional accreditation documents are published.*

#### **Submission 1.4: Governance and Program Policies**

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

**Submission 1.5a:** Non-Discrimination

1. *Provide a copy of the non-discrimination policy.*
2. *Provide a public link to where the document is published.*

**Submission 1.5b:** Non-Discrimination for Faith Based Institutions

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

**Submission 1.6:** Degree-Granting Body

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

**Submission 1.7:** Clinical Education Affiliation Agreements

1. *Provide a copy of the COM approved affiliation agreement*

**Standard 2: Leadership and Administration**

**Submission 2.1: Dean Qualifications**

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

**Submission 2.2: Full Time Dean**

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

**Submission 2.3: Academic and Administrative Leadership**

1. *Provide an organization chart that shows the leadership positions and reporting relationships.*
2. *Provide the current job description for each member of the administrative leadership team (Associate Deans, Assistant Deans, senior level administrators).*
3. *Provide a full CV for each member of the administrative leadership team (Associate Deans, Assistant Deans, senior level administrators).*

**Submission 2.4: Accreditation Standard Complaint Policies and Procedures**

1. *Provide documentation of policies and procedures regarding accreditation standard complaints and their adjudication.*
2. *Provide sample records of accreditation standard complaints that have been received, adjudicated, and resolved.*
3. *Provide a public link to where the accreditation standard complaint policies and procedures are published.*

**Standard 3: Finances**

**Submission 3.1: Financial Resources**

1. *Provide the operational budget (income, revenue sources, and expenses) for the COM including at least 3 years of data.*

**Submission 3.2: Financial Planning and Budgeting**

1. *Provide a copy of the flowchart demonstrating the budget development process.*
2. *Provide information as to all persons with budgetary management and oversight.*
3. *Demonstrate in the flowchart where final budget approval occurs.*

**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.*

**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.*

**Standard 4: Facilities**

**Submission 4.1: Facilities**

1. *Provide the floorplan diagrams of all buildings used by the COM on all campuses utilized by the COM.*
2. *Complete and submit Tables 4.1a and 4.1b to describe the facilities. (Tables are located within the electronic accreditation system)*

**Submission 4.2: Security and Public Safety**

1. *Provide a copy of all security and safety related policies and procedures.*
2. *Provide a link to where the policies are published.*
3. *As per 34 CFR 668.46, provide a copy of your most recent Clery Act Report.*

**Submission 4.3: Information Technology**

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

**Submission 4.4: Learning Resources**

1. *Complete and submit Table 4.4 to describe the learning resources. (Tables are located within the electronic accreditation system)*

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**Standard 5: Learning Environment****Submission 5.1: Professionalism**

1. *Provide a copy of all professionalism policies. The professionalism policies should extend to items including, but not limited to, patient safety, cultural competence, and interprofessional collaborative practice.*
2. *Provide a link to where the documents are published.*
3. *Provide a copy of the membership of any professionalism committee and a copy of the charge or purpose of the committee.*

**Submission 5.2: Diversity**

1. *Provide a copy of the policies addressing diversity for students, faculty, senior administrative staff, and other relevant members of the academic community*
2. *Provide a public link to where the documents are published.*

**Submission 5.3: Safety, Health, and Wellness**

1. *Provide the policies and procedures addressing safety and health issues.*
2. *Provide a link to where the documents are published.*
3. *Demonstrate how this information is provided to students.*

**Submission 5.4: Patient Care Supervision**

1. *Provide the policies addressing student supervision during the provision of patient care.*
2. *Provide a link to where the documents are published.*
3. *Demonstrate how this information is provided to students.*

**Standard 6: Curriculum**

**Submission 6.1: Curriculum Design and Management**

1. *Provide the charge and responsibility of the curriculum committee.*
2. *Provide a list of the members of the curriculum committee and their titles.*
3. *Submit a calendar of meeting dates for the past year.*

**Submission 6.2: Programmatic Level Educational Objectives**

1. *Publish the programmatic level educational objectives and a description of all courses within the educational program on the website and/or in the catalog.*
2. *Provide a public link to where the document is published.*

**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 public link to where the document is published.*

**Submission 6.4: Osteopathic Core Competencies**

1. *Complete and submit Table 6. (Tables are located within the electronic accreditation system)*

**Submission 6.5: Scientific Method**

1. *Complete and submit Table 6. (Tables are located within the electronic accreditation system)*

**Submission 6.6: Principles of Osteopathic Medicine**

1. *Complete and submit Table 6. (Tables are located within the electronic accreditation system)*

**Submission 6.7: Self-Directed Learning**

1. *Complete and submit Table 6. (Tables are located within the electronic accreditation system)*

**Submission 6.8: Interprofessional Education for Collaborative Practice**

1. *Complete and submit Table 6. (Tables are located within the electronic accreditation system)*

**Submission 6.9: Clinical Education**

1. *Provide a sample syllabus for a required clinical rotation.*
2. *Provide policies and procedures (protocols) demonstrating how students will obtain all clinical education through the COM.*
3. *Complete and submit Table 6.9 demonstrating adequacy of core clinical rotation capacity.*

**Submission 6.10:** Clinical Experience

1. *Complete and submit Table 6.9*

**Submission 6.11:** Comparability across Clinical Education Sites

1. *Provide the policies and procedures describing how student outcomes at clinical educational sites are 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.*

**Submission 6.12:** COMLEX-USA

1. *Provide all COMLEX-USA related school policies and procedures.*
2. *Provide a public link to the location where the last four years of COMLEX-USA Level 1, Level 2 CE, Level 2 PE, and Level 3 first time pass rates is published.*



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**Standard 7: Faculty and Staff**

**Submission 7.1:** Faculty and Staff Resources and Qualifications

1. *Complete and submit Tables 7a and 7b. (Tables are located within the electronic accreditation system)*

**Submission 7.2:** Faculty Approvals at All Teaching Sites

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

**Submission 7.3:** Department Chair Qualifications

1. *Provide the organizational chart demonstrating the reporting hierarchy for each department.*
2. *Provide the current job description and complete CV for each Department Chair or its equivalent.*
3. *Provide a complete CV for each Department Chair or its equivalent.*
4. *For each clinical department chair, provide a copy of the Chair's medical license.*
5. *For each clinical department chair, provide a copy of the Chair's board certification documents.*

**Submission 7.4:** Primary Care Leadership

1. *Provide a copy of the job description for the Chair of Primary Care (or equivalent).*
2. *Provide a complete CV for the Chair of Primary Care (or equivalent).*
3. *Provide a copy of the Chair's medical license.*
4. *Provide a copy of the Chair's board certification documents.*

**Submission 7.5:** OMM/OPP Leadership

1. *Provide a copy of the job description for the Chair of OMM/OPP (or equivalent).*
2. *Provide a complete CV for the Chair of OMM/OPP (or equivalent).*
3. *Provide a copy of the Chair's medical license.*
4. *Provide a copy of the Chair's board certification documents.*

**Submission 7.6:** Faculty Development

1. *Submit an annual faculty development needs assessment.*
2. *Provide a roster of all faculty development activities for the past year, including documentation of the faculty participation at each activity.*

**Submission 7.7:** Faculty Association

1. *Provide a copy of the bylaws for the faculty organization.*
2. *Submit a calendar of meeting dates for the past year.*

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**Submission 7.8:** Faculty Appointment and Advancement

1. *Provide the policies and procedures for faculty appointment and advancement.*
2. *Provide a link to where the documents are published.*

**Standard 8: Scholarly Activity**

**Submission 8.1: Research and Scholarly Activity**

1. *Provide a copy of the research and scholarly activity plan.*
2. *Provide a public link to where the research and scholarly activity plan may be accessed.*
3. *Complete and submit Table 8 to identify the activity of the COM's faculty (and staff, if applicable) over the past year. (Tables are located within the electronic accreditation system)*

**Submission 8.2: Student Participation**

1. *Provide a copy of all student research and scholarly activity policies.*
2. *Provide a link to where the policies are published.*
3. *Complete and submit Table 8 to document student research and scholarly activity. (Tables are located within the electronic accreditation system)*

**Standard 9: Students**

**Submission 9.1: Admissions Policy**

1. *Provide all admission requirements and policies and procedures for osteopathic medical student selection and enrollment.*
2. *Provide a public link to where the documents are published.*

**Submission 9.2: Academic Standards**

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

**Submission 9.3: Transfer Policies**

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

**Submission 9.4: Secure Student Recordkeeping**

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

**Submission 9.5: Academic Counseling**

1. *Describe the process for academic counseling provided to students.*
4. *Complete Table 9.5. (Tables are located within the electronic accreditation system)*

**Submission 9.6: Career Counseling**

1. *Describe the process for career counseling, including GME Readiness, provided to students.*
5. *Complete Table 9.6. (Tables are located within the electronic accreditation system)*

**Submission 9.7: Financial Aid and Debt Management Counseling**

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

**Submission 9.8: Mental Health Services**

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

**Submission 9.9:** Physical Health Services

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

**Submission 9.10:** Non-Academic Health Professionals

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

**Submission 9.11:** Health Insurance

1. *Provide the policies and procedures regarding health insurance for students.*
2. *Provide a link to where the documents are published.*

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**Standard 10: Graduate Medical Education (GME)**

**Submission 10.1: Osteopathic Educational Continuum**

1. *Complete and submit Table 10.1. (Tables are located within the electronic accreditation system)*
2. *Submit the COM's policy (policies) and describe the COM's structure and procedures to support the continuum of osteopathic education.*

**Submission 10.2: ACGME Accredited GME**

1. *Complete and submit Table 10.2. (Tables are located within the electronic accreditation system)*
2. *Submit the COM's policy (policies) and description of its mechanism to assist GME programs.*

**Submission 10.3: Osteopathic Recognition GME**

1. *Complete and submit Table 10.2. (Tables are located within the electronic accreditation system)*
2. *Submit the COM's policy (policies) and description of its mechanism to assist GME programs.*

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**Standard 11: Program and Student Assessment and Outcomes**

**Submission 11.1:** Program Assessment

1. *Submit a copy of the COM's assessment plan.*

**Submission 11.2:** Student Evaluation of Instruction

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

**Submission 11.3:** Student Debt Outcomes

1. *Provide the current average debt for the last four years of students.*
2. *Provide a public link to where the information is published.*
3. *Provide the default rates on funds provided under Title IV of the Higher Education Act of 1965 (HEA) from the COM students for the last four available years.*

**Submission 11.4:** Student Survey

1. *Describe the methods the COM used to support the completion of the COCA Student Accreditation Survey.*

**Submission 11.5:** Program and Student Outcomes-Annual Data and Mid-Cycle Update Reports

1. *Complete and submit the Annual COCA Data and Mid-Cycle Update Report by the established deadlines.*

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**Standard 12: Institutional Accreditation**

**Submission 12.1:** Incorporation of the Institution

1. *Provide the annual 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.*

**Submission 12.2:** Degree and Other Educational Offerings

1. *Provide a list of all degrees and educational programs (certificates and courses) 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.*

**Submission 12.3:** Chief Executive Officer

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

**Submission 12.4:** Chief Financial Officer

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

**Submission 12.5:** Title IV Responsibility

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

**Submission 12.6:** Course Credit Hours

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