Commission on Dental Accreditation of Canada (CDAC)

GUIDE TO ACCREDITATION

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I. THE COMMISSION ON DENTAL ACCREDITATION OF CANADA

History of the Commission on Dental Accreditation of Canada

The Canadian Dental Association (CDA) has provided requirements and guidelines pursuant to dental education since 1920. Through its committees and survey teams, CDA has been accrediting hospital dental services since 1947 and dental-related education programs since 1950.

In 1988, the Board of Governors of the Canadian Dental Association established an autonomous body, the Commission on Dental Accreditation of Canada (CDAC). CDAC is mandated to accredit the following:

- Undergraduate dental educational programs;
- Dental specialty educational programs;
- Dental Hygiene educational programs;
- Dental Assisting educational programs;
- Health facility dental services; and,
- Hospital and non-hospital dental residency educational programs.

Please note: This Guide to Accreditation has been prepared for educational institutions, health facilities and agencies, and persons interested in or involved with the accreditation process.

Mission

CDAC is dedicated to the evaluation and improvement of educational programs located in post-secondary institutions and health facilities that prepare oral health providers to serve the Canadian public.

Goals

CDAC:

a) Develops and maintains national accreditation requirements for oral health educational programs and health facility dental services, based on current theory and practice, and in consultation with stakeholders;
b) Evaluates post-secondary educational programs and health facility dental services that prepare oral health care providers to become safe and competent practitioners;
c) Identifies post-secondary educational programs and health facility dental services that are in compliance with the national accreditation requirements, using defined policies and processes;
d) Promotes the use of current educational theory and innovative instructional strategies; and

e) Promotes the inclusion of oral health services into the interdisciplinary partnerships for providing overall patient care in health facilities.
Guide to Accreditation

Structure

CDAC is comprised of 21 members representing the following constituencies:

- Association of Canadian Faculties of Dentistry (ACFD)
- Canadian Dental Assistants' Association (CDAA)
- Canadian Dental Association (CDA)
- Canadian Dental Hygienists Association (CDHA)
- Canadian Dental Regulatory Authorities Federation (CDRAF)
- Dental Assisting Regulatory Authorities (DARA)
- Dental Hygiene education
- Dental Assisting education
- Dental Internship programs
- Dental Specialties
- Federation of Dental Hygiene Regulatory Authorities (FDHRA)
- Hospital and/or Institutional Dentistry
- National Dental Examining Board of Canada (NDEB)
- National Dental Hygiene Certification Board (NDHCB)
- National Dental Assisting Examining Board (NDAEB)
- Royal College of Dentists of Canada (RCDC), and a Public member

There are four (4) CDAC sub-committees:

- Dental Education Programs Committee (DDS/DMD, specialties and qualifying programs)
- Dental Hygiene Education Programs Committee
- Dental Assisting Education Programs Committee
- Health Facilities Committee (hospital dental services and internship/residency education programs)

Each committee reviews the confidential accreditation survey reports and subsequent progress reports pertaining to its mandate. Each committee makes a recommendation on the program's accreditation status to CDAC (see Consideration of Report and Granting of Status).

In addition, there are also the following committees:

- Finance Committee
- Documentation Committee
- Nominating Committee
- Appeal Committee
II. WHAT IS ACCREDITATION?

Accreditation is the process by which CDAC recognizes that dental, Dental Hygiene, Dental Assisting, dental residency programs, and health facility dental services meet the nationally established requirements that are determined by CDAC.

Program or health facility accreditation is determined by CDAC at its annual meeting in November and the CDAC notifies the program/facility if accreditation has been granted. A list of the accredited educational programs and health facilities is posted on the website at www.cdac.cda-adc.ca

The accreditation process requires the program/facility to prepare a self-evaluation of the program’s educational activities which is referred to as the pre-survey documentation. That is why, prior to applying for accreditation and when planning a new program, it is strongly recommended to carefully review the accreditation requirements and to consult with CDAC and other established programs.

Should there be a change in program sponsorship or ownership, the accreditation status is not automatically transferred. Prior to a change in sponsorship/ownership, the accredited program must contact CDAC to discuss the possible implications on the accreditation status.

CDAC may carry out studies aimed at improving the accreditation process, updating the accreditation requirements, and pertaining to other related activities. These studies may require that the institutions surveyed provide additional information. CDAC expects the programs/health facilities full cooperation in this endeavour. Although these studies are not part of the minimum accreditation requirements, their results may prompt the introduction of future new accreditation requirements.

Application for a program survey

The deadline for new programs or facilities applying to CDAC for a program survey is August 1st.

A. Dentistry and Dental Specialty programs

Please contact CDAC.

B. Dental Assisting programs

Programs must apply to CDAC in writing, by August 1st, stating that the program meets the criteria to be eligible for an accreditation survey visit. Eligibility criteria require a program to be one academic year and to provide instruction in the skills identified in CDAC’s accreditation requirements for Dental Assisting programs. In November, CDAC determines if the program meets the eligibility criteria; then a survey visit is scheduled to assess the program.

C. Dental Hygiene programs

Initial accreditation for Dental Hygiene programs involves a two-step process: an application for a Program Survey and then an accreditation survey visit.
Dental Hygiene programs seeking accreditation are required to submit an *Application for Program Survey* along with the application fee to CDAC by August 1st. For more information on program-specific fees, please contact CDAC or consult the *Program Fee Schedule* available on CDAC website [www.cdac.cda-adc.ca](http://www.cdac.cda-adc.ca).

*Applications for Program Survey* must be provided in paper format. Educational programs, submitting an *Application for Program Survey*, must provide five (5) paper copies clearly responding to the Dental Hygiene Accreditation Requirements established by CDAC. For each accreditation requirement, educational programs must:

a) State in full the accreditation requirement and the related number that appears following each requirement, for example 2.1, 2.2, etc.

b) Following each requirement, provide the “documentation required” as indicated in the accreditation requirements. The program responses must be clear and concise and respond to each requirement, providing the appropriate information and a referenced appendix, if required. Appendices and index tabs should be clearly labelled and positioned to identify all responses and references.

c) Provide the required documentation addressing each of the accreditation requirements.

Incomplete *Applications for a Program Survey* will not be considered and will be returned to the program.

Annually, CDAC reviews *Applications for a Program Survey* during its meeting in November. At that time, CDAC will approve or deny the program’s *Application for Program Survey*. If the program’s application is approved, then CDAC schedules an accreditation survey visit and the program is listed as *Program Status under Review* on CDAC website. If the program’s application is denied, this is also indicated on the CDAC website. Programs may reapply CDAC; however, a new application and application fee must be submitted prior to the subsequent deadline for applications, which is August 1st.

Following CDAC approval for an accreditation survey, a peer review team visits the program, when senior students are in their final semester/term and are providing patient/client care. The survey team prepares a survey report based on the accreditation requirements and submits it to CDAC. CDAC reviews the report and programs meeting the accreditation requirements are granted accreditation. Programs not meeting the accreditation requirements are denied. The *Program Status under Review*, previously granted to the program, expires and the program web reference is deleted. Consequently, the program must resume the process by submitting a new *Application for Program Survey* to CDAC.

D. **Dental Residency programs and Health Facilities**

A program or a facility must apply to CDAC, by August 1st, requesting an accreditation survey visit. CDAC reviews the request in November; and if it is approved, CDAC schedules a survey visit to assess the program. Following CDAC site visit, CDAC grants or denies accreditation at its annual meeting.
Accreditation Classifications

The following screening classification may be granted to a Dental Hygiene program beginning the process of obtaining accreditation. *Note: this is a screening classification; therefore, a graduate of a program approved for a survey is considered a graduate of a non-accredited program.*

Application for Program Survey

CDAC approves the *Application for Program Survey* when the documentation submitted by the Dental Hygiene program meets the accreditation requirements. CDAC then schedules a survey visit.

**Program applications that are not approved will not be eligible for an accreditation survey.**

Accreditation Status

The following accreditation statuses may be granted to a program or facility. Graduates of the programs/facilities that hold these statuses are recognized for registration/licensure with the provincial regulatory authority. Denial of accreditation, following a program survey, indicates that there are program deficiencies in meeting the accreditation requirements.

*Preliminary Approval (for Dental Specialty educational programs)*

On the basis of a survey visit or comprehensive submission of documentation addressing the accreditation requirements, the educational program is granted year-by-year *Preliminary Approval* if it continues to appear to meet the minimum requirements as established by CDAC after initial enrollment of students and until such time as students are enrolled in the final year.

Length of term: One (1) year

*Approved (without specific reporting requirements)*

On the basis of a survey visit and an institutionally prepared comprehensive documentation addressing the accreditation requirements this classification, when granted to an educational program or dental service, indicates that the program achieves or exceeds the minimum requirements or standards for approval as established by CDAC. This accreditation classification indicates that the program has no serious deficiencies or weaknesses. However, recommendations or suggestions relating to enhancement of the program or dental service are generally included in the evaluation report.

Length of term: Based on the educational discipline

*Approved (with specific reporting requirements)*

On the basis of a survey visit and an institutionally prepared comprehensive documentation addressing the accreditation requirements, this classification is granted to an educational program or dental service, where specific deficiencies or weaknesses exist in one or more basic areas of the
education program or dental service. The deficiencies or weaknesses are considered to be of such a nature that they can be corrected in a reasonable length of time, which is ordinarily defined as a period not to exceed two years. This accreditation classification is considered adequate to meet the eligibility requirements for licensure and board examinations in the case of educational programs or to maintain adequate standards of patient/client care in dental services. An institution receiving the status of Approved (with specific reporting requirements) must provide a progress report at the end of the first year.

Length of term: Two (2) years

Provisionally Approved (with specific reporting requirements)

On the basis of a survey visit and an institutionally prepared comprehensive documentation addressing the accreditation requirements, this classification is granted to an educational program or dental service if it has been determined that the program or service has deficiencies or weaknesses in one or more specific areas. This accreditation classification signifies the seriousness of the deficiencies or weaknesses but is considered adequate to meet the eligibility requirements for licensure and board examinations in the case of educational programs, or to maintain adequate requirements of patient/client care in dental services. The deficiencies or weaknesses are considered to be of such magnitude that, if not corrected, withdrawal of the program's or dental programs accreditation status will result. Evidence of significant progress in order to maintain the status of Approval must be demonstrated within one year.

Length of term: One (1) year

Intent to Withdraw

On the basis of an institution's failure to submit a required progress report to address recommendations from the previous survey report, CDAC will inform the institution of its intent to withdraw accreditation status as of the next meeting of CDAC.

Denial

If a new program/service does not meet the accreditation requirements, initial program accreditation can be denied.
Duration of Accreditation

<table>
<thead>
<tr>
<th>Period of Program Accreditation</th>
<th>New Program (no. of years)</th>
<th>Established Program (no. of years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentistry/Specialty/ Qualifying Program</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Dental Hygiene/ Dental Assisting: (Publicly-funded)</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Dental Hygiene/ Dental Assisting: (Privately Funded)</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Health Facility</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Dental Residency</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

CDAC reserves the right to reduce or extend the term of approval granted to a program, in order to maintain the principle of an integrated survey, or as various conditions may warrant.

Accreditation Fees

The accreditation fee for an educational program is based on a fee per cycle, paid annually. Accreditation fees are reviewed annually. For a current fee schedule, please consult the Program fee Schedule on CDAC website www.cdac.cda-adc.ca. Programs are requested to contact CDAC directly for the current Application for Program Survey fee.

Please also note that, if a program or facility requires a re-survey visit in the middle of an accreditation term or cycle, a special survey visit fee may be charged to the program or facility.

New programs requesting accreditation are required to pay a fee for the initial accreditation visit. If a program is granted an accreditation status, it is eligible to participate in the annual payment plan upon payment of the second accreditation survey visit fee.

Annual Payment Fee

Each CDAC accredited educational program/facility is invoiced an accreditation fee annually in January.

Health Facility

All health facilities are charged the accreditation fee at the time of the survey visit.
Guide to Accreditation

Dental Residency Education Program

For those programs affiliated with a university, the university pays an accreditation fee annually for each program site affiliated with the program. For residency programs not associated with a university, the health facility is billed directly each year for the program.

III. THE ACCREDITATION PROCESS

Accreditation Survey

New Programs Seeking Accreditation

In preparation for the survey visit, the program/facility is required to submit documentation responding to the CDAC requirements outlined in the section “Pre-Survey Documentation”. The accreditation requirements are available on the website at www.cdac.cda-adc.ca. The program may wish to consult with CDAC for further information as required.

Once a new program has had its first accreditation survey, the accreditation process is complete. CDAC will review the accreditation survey report at its annual meeting in November and program accreditation status will either be granted or denied. This information is identified on the CDAC website.

Pre-Survey Documentation

The accreditation requirements established by CDAC constitute the basis that the accreditation survey team uses to review the pre-survey documentation provided by the program. The requirements are also the foundation on which the team drafts the accreditation survey report and the criteria by which CDAC determines program accreditation.

Getting Started

The accreditation requirements identify both the requirements, which must or should be met, and the documentation that must be submitted by the program. The program’s response serves as the pre-survey documentation submitted to CDAC prior to the survey visit. This documentation is reviewed by the accreditation survey team members before the accreditation survey visit and is the basis of the survey report.

Please follow the steps outlined below when preparing the pre-survey documentation

For each accreditation requirement, the program must:

a) State in full the accreditation requirement and the related number that appears following each requirement, for example 2.1, 2.2, etc.

b) Following each requirement, provide the “documentation required” as indicated in the accreditation requirements. Responses must be clear and concise and must respond to each requirement providing the appropriate information and a referenced appendix, if
necessary. The appendices and index tabs should be clearly labelled and placed to identify all responses and references.

Responses are prepared following the order of the requirements. If an appendix is required, it should be referenced to the corresponding requirement and appear in numeric sequence at the end of the submission.

If the program accepts students at various times in the academic year, this must be identified in the submission, identifying the number of student intakes per year, the number of students in each intake, and the projected graduation dates.

CDAC requests programs to provide their responses to the accreditation requirements and related appendices in electronic format using USB keys. Appendices can be provided either in Microsoft Word or in PDF format; however, it is important that the responses to the accreditation requirements be provided in Microsoft Word format. The information must be appropriately indexed to allow for easy access and navigation of the documentation provided. The sample index (Appendix A) illustrates indexing the accreditation requirements and the corresponding appendices.

CDAC requires:

- **DDS/DMD programs**: ten (10) USB keys
- **Dental specialty programs**: four (4) USB keys
- **Qualifying programs**: four (4) USB keys
- **Dental Hygiene programs**: five (5) USB keys
- **Dental Assisting programs**: five (5) USB keys
- **Health Facilities**: four (4) USB keys
- **Dental Residency educational programs**: four (4) USB keys

In addition, the program must submit one printed copy of the pre-survey documentation, including any appendices, with the USB keys.

One additional copy is required in the interview room for reference during the accreditation survey visit.

Copies of the completed package must be submitted to CDAC ten (10) weeks prior to the date of the survey visit so that the material can be submitted to the accreditation survey team members for their review prior to the survey visit.

Please do not hesitate to contact CDAC should any problems arise in preparing the documentation for submission.

**The Accreditation Survey Team**

The survey team reviews the pre-survey documentation provided by the program and is responsible for the preparation of a comprehensive written report for consideration by CDAC.
In consultation with the program, CDAC appoints the accreditation survey team. The composition of the survey team may be modified by CDAC to respond to the program’s needs and/or the availability of the appropriate expertise.

CDAC maintains a roster of qualified survey team members to select the required numbers for each survey team. Nominations to the roster are received from organizations and associations involved in the accreditation process, including the following:

- Association of Canadian Faculties of Dentistry (ACFD)
- Canadian Dental Association (CDA)
- Canadian Dental Hygienists Association (CDHA)
- Canadian Dental Assistants Association (CDAA)
- Dental Hygiene Educators of Canada (DHEC)
- Dental Assisting Educators of Canada (DAEC)
- Dental Specialty Organizations
- National Dental Examining Board of Canada (NDEB)
- National Dental Hygiene Certification Board (NDHCB)
- National Dental Assisting Examining Board (NDAEB)
- Royal College of Dentists of Canada (RCDC)
- Regulatory Authorities
- Other Interested Parties or Persons

Accreditation survey teams are structured as follows:

**DDS/DMD programs:** Basic membership of this survey team consists of two clinician/educators, a basic scientist, a representative from the National Dental Examining Board of Canada, a representative from the provincial regulatory authority and a representative of CDAC, with the Chair of the survey team being appointed by CDAC.

**Dental specialty programs:** Basic membership of this survey team consists of an appropriately qualified specialist and a representative from CDAC.

**Qualifying programs:** Basic membership of this survey team consists of one or two dental clinician/educators, a representative from the National Dental Examining Board of Canada, a representative from the provincial regulatory authority and a representative from CDAC, with the Chair of the survey team being appointed by CDAC.

**Dental Hygiene programs:** Basic membership of this survey team consists of two individuals who have experience in Dental Hygiene education, a representative from the provincial regulatory authority and a representative from CDAC.

**Dental Assisting programs:** Basic membership of this survey team consists of two individuals who have experience in Dental Assisting education, a representative from the provincial regulatory authority and a representative from CDAC.

**Health Facilities:** Basic membership of this survey team consists of one or two individuals who have experience with a dental service and a representative from CDAC.
Dental Residency educational programs: Basic membership of this survey team consists of one or two individuals with hospital/dental internship experience and a representative from CDAC.

The Survey Visit

Survey visits are usually conducted between January and August/September each year.

The director of the program is required to schedule meetings, conferences, and tours for the visiting survey team based on the suggested timetable provided by CDAC. The draft timetable is submitted to CDAC with the accompanying pre-survey documentation. The timetable must include the names and titles of the individuals scheduled for an interview, the course names, the titles and instructor names, as well as the room numbers where the interviews will be held. If a program requires further information or assistance with this section, the program is encouraged to contact CDAC.

Although the order and arrangement of the tours and conferences are at the discretion of the director, suggestions are provided that might be helpful in developing the survey schedule.

The first period of the first morning of the team's visit should include a conference with the director of the program, senior administration, and any other associates who are responsible for the administration or coordination of the program. The purpose of this session is to discuss the philosophy and mission of the institution, the overall program administration, and to review the implementation of recommendations from the previous survey report, if applicable.

It is necessary that a private meeting be scheduled with the institution's President or designate. During this meeting, the administration will have an opportunity to discuss policy and plans for the institution that may have an impact on the program.

A tour of the building should be scheduled so as to acquaint the survey team with the physical facilities, the major instructional resource areas, equipment, and the general institution layout.

The remainder of the visit is composed, almost entirely, of a series of private interviews or conferences. These interviews/conferences are scheduled in advance and held in a room where a conference table space is available to be used by both the accreditation survey team and the faculty members/students being interviewed. The survey team requests that interviews, with faculty members, students, dental personnel, etc., be scheduled without the attendance of members of program administration or department head.

The program director should inform faculty members that the survey team members have in advance received and studied the program curriculum. Faculty members should be aware that their interviews/conferences with the survey team will be to clarify points identified by the survey team members. There may be instances where several faculty members will meet with the survey team members at the same time, because of the integrated nature of their courses. In this case, it is important that the entire group not exceed four or five faculty members.
It is not required that every individual teaching within the program be scheduled for group interview. However, if a subject/area is omitted, the program director should be able to describe, in some detail, that particular course and answer any questions relating to it.

Course syllabi, textbooks, evaluation procedures, etc., for all courses in the curriculum should be available for the survey team members to review.

The survey team will meet privately with student representatives. The program should make provisions to schedule a room to accommodate this meeting.

On-Site Protocol

Unless otherwise indicated by the survey team, the program administrators are not required to attend the survey team meetings/conferences with faculty members.

Members of the administration, directly associated with a particular program component, are usually present for at least part of the discussion. The survey team retains the right to conduct private discussions with individual members of the faculty or administration.

The program must secure a conference room for the survey team for the duration of the survey. (For DDS/DMD program visits, a small office conveniently located, is required for the Coordinator of CDAC during the visit). Discussions with the survey team take place in the conference room assigned to the team.

In view of the heavy schedule of the survey team, members are unable to accept invitations to social events. However, the provision of refreshments and a working lunch by the institution is an appreciated courtesy.

Specific instruction for various programs:

A sample survey schedule template is provided by CDAC to assist the program in scheduling survey interviews. Survey visits may be lengthened or shortened as needed and for specific reasons, following consultation with the institution. Please refer to the instructions that apply to your program.

**DDS/DMD:** The duration of a survey visit to accredit a DDS or DMD program is usually four and one-half days; occurring from Monday through Thursday with an oral report from the survey team presented on the Friday morning. The program is asked to provide lab coats and eye protection for the clinical team members.

**Dental Specialties:** The duration of a survey visit to accredit a graduate/post-graduate program is usually two days.

**Qualifying Programs:** The duration of a survey visit to accredit a qualifying program is two to three days. The program is asked to provide lab coats and eye protection for the clinical team members.
**Dental Hygiene programs:** The duration of a survey visit to accredit a Dental Hygiene education program is usually two and one-half days. The schedule must provide sufficient time to visit the clinical setting; preferably on the morning of the second day of the site visit. The program is required to provide lab coats and eye protection for the team members. *The duration of a survey visit to accredit a new Dental Hygiene education program is three days.*

**Dental Assisting programs:** The duration of a survey visit to accredit a Dental Assisting education program is usually two days. The schedule must provide sufficient time for a visit in the clinical setting. This visit should be scheduled on the morning of the second day of the site visit. The program is required to provide lab coats and eye protection for the team members.

**Health Facilities:** The duration of a survey visit to accredit a health facility dental service is usually one day. The visit may be lengthened, if an internship/residency education program is to be surveyed as well.

**Dental Internship or Residency education programs:** The duration of a survey visit to an institution to accredit a dental internship or residency program is usually one day.

**The Survey Report**

The first survey report provided to the program is an oral report made by the accreditation survey team during the exit interview with the senior administrator(s) and the program director. In this first report, the team provides the program with the recommendations and suggestions that will appear in the final written report.

Recommendations made by the team are based upon the program responses to the accreditation requirements. In areas where a *must* statement in the requirement is not met, a ‘Recommendation’ is made. It is anticipated that the program will address the recommendation. Also, suggestions may appear in the final report, relating on points that have been identified by the team with a view to enhance the overall program. Suggestions are intended to be helpful and institutions are not required to address suggestions.

CDAC and the survey team are responsible for the compilation of the written survey report. It is then edited by all survey team members before forwarding a draft survey report to the institution. Then, the institution reviews the report for verification of factual data. Should the program have questions or clarifications, these are addressed by CDAC staff in consultation with the program and, if applicable, subsequent changes are made to the written report. Once approved by the program, the report and any other documentation is presented to CDAC at the annual meeting following the accreditation survey.

**Consideration of Report and Granting of Status**

Based upon review of the accreditation survey report, CDAC grants an appropriate accreditation status, which becomes effective as of the month of CDAC annual meeting (*For descriptions, see Accreditation Classifications*).
When the status granted to an institution is Provisionally Approved (with specific reporting requirements) or Approved (with specific reporting requirements), and if deemed necessary, CDAC may require that the institution provide an information or progress report on the program (See "Progress Reports").

As a requirement for continued accreditation, institutions are responsible for completing an Annual Program Review, informing CDAC yearly, of any significant changes related to administration, personnel, facilities, finance, and other matters that could affect the accreditation status of the program. Annual Program Reviews are completed by each program in June.

**Distribution of Reports**

Following CDAC annual meeting, the institution receives written confirmation of the accreditation status, a copy of the final survey report and an accreditation certificate.

For DDS/DMD, qualifying programs, and dental specialty programs, the final report is sent to the Dean or Director of the Faculty or School of Dentistry and to the director of the specialty program.

For Dental Assisting and Dental Hygiene programs, the final report is sent to the director of the program.

For Health Facilities and Residency programs, the final report is sent to the head of the program/dental service.

**Appeal Procedure**

Programs have the opportunity to appeal CADC’s decisions. A request for an appeal must be received by CDAC within thirty (30) days of receiving the decision from CDAC. The CDAC Appeal Board has the authority to hear program appeals and determine whether or not CDAC followed process in denying or withdrawing program accreditation. The CDAC Appeal Board has no authority to consider facts or information that was not previously presented to CDAC or to comment on the reasonableness or necessity of existing CDAC accreditation requirements.

For information regarding the Appeals Procedure, please contact CDAC.

**Progress Report**

**Purpose**

An institution that receives a status less than Approved (without specific reporting requirements) for its program is required to submit a progress report. The progress report is intended to respond to the specific Recommendations that CDAC identified as requiring additional reporting.

A well-written and effective progress report comprehensively addresses the identified Recommendations and clearly documents how the institution has addressed each Recommendation. CDAC requires evidence demonstrating the implementation of the specific Recommendation(s). Reports of action taken to rectify deficiencies accompanied by supporting documentation (evidence)
are more favourably considered in deciding to upgrade an institution's accreditation status than are reports of plans to implement changes.

Institutions with more than one education program must submit a separate progress report for each program that receives less than Approved (without specific reporting requirements) accreditation status.

Who reviews progress reports?

CDAC Committee members, who have not participated in the accreditation survey visit to that program, assess the progress report. The initial survey report is also available to the Commission members, when reviewing the progress report. They will not have copies of any previously submitted progress reports.

Content

1) Quote the Recommendation, in its entirety, by number, as contained in the accreditation survey report (the Recommendations are listed at the end of the survey report).

2) Follow the Recommendation with a description of the actions taken by the institution to implement the Recommendation. Descriptions should be succinct, but should include sufficient detail to clearly describe progress made.

3) Provide supporting documentation /evidence as appendices to the progress report and include an itemized list of the supporting documentation in the progress report. Label the appendices by Recommendation number. Examples of supporting documentation or evidence which might be included with the progress report include: course and/or clinic schedules, course outlines and/or objectives, sample evaluation forms, inter-departmental memos, statistical reports of the number/type of procedures/clinical experiences performed, patient/client charts, committee minutes, and evaluation tools.

Format

- Include a cover page with the name and address of the institution/program being reported on.
- Each page of the progress report should contain the name of the institution, the program, and the date of the report.
- Submit five (5) copies of the progress report (double-sided) for each program being considered. Please ensure that the report is not stapled, bound, or paper-clipped.
- Clearly reference the appendices in the updated responses to the recommendation.

SUBMISSION DEADLINE – August 1st.
APPENDIX A

HOW TO INDEX DOCUMENTS ON USB KEY

**Level 1**: On the USB key, the master folder will be named *Pre-survey Documentation*.

| USB Key | Pre-survey Documentation |

**Level 2**: The second level will contain two folders: one to hold all the appendices and one to hold the report with the program’s responses to the accreditation requirements.

<table>
<thead>
<tr>
<th>USB Key</th>
<th>Pre-survey Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendices</td>
<td></td>
</tr>
<tr>
<td>Response to Accreditation Requirements from Program</td>
<td></td>
</tr>
</tbody>
</table>

**Level 3**:

**Response to Accreditation Requirements from Program**:  
The report **must** be provided in a Microsoft Word format and saved in this folder.

<table>
<thead>
<tr>
<th>USB Key</th>
<th>Pre-survey Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response to Accreditation Requirements from Program</td>
<td></td>
</tr>
<tr>
<td>Accreditation Requirements Responses from Program</td>
<td></td>
</tr>
</tbody>
</table>

**Appendices folder**:  
The main Appendices folder will contain a folder for each **requirement** number.

<table>
<thead>
<tr>
<th>USB Key</th>
<th>Pre-survey Documentation</th>
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<tbody>
<tr>
<td>Appendices</td>
<td></td>
</tr>
<tr>
<td>1.0 Appendices</td>
<td></td>
</tr>
<tr>
<td>2.0 Appendices</td>
<td></td>
</tr>
<tr>
<td>Etc…. etc</td>
<td></td>
</tr>
</tbody>
</table>

Each **Requirement** folder will hold a document (Microsoft Word or PDF) for each appendix related to that specific requirement.