



# GUIDE TO ACCREDITATION

*The board and staff want to respectfully acknowledge that the Commission on Dental Accreditation of Canada offices are located on the traditional territories of the Algonquin Anishinaabeg nation; we appreciate their graciousness as we live, work, and play on these lands.*

**REVISED DECEMBER 2023**

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## I. The Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada (CDAC) accredits 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, Vision, and Values

#### **Mission:**

A Mission Statement identifies the purpose and focus of an organization. Every strategic and operational decision an organization undertakes should align with its Mission. If the organization is considering a decision that does not align with its Mission, it needs to ask why it would make such a decision or whether it is time to review its Mission.

CDAC's Mission is:

To develop and implement accreditation standards that monitor quality assurance and promote innovation in oral health education programs and health facilities in the interest of its partners, including the public.

#### **Vision:**

A Vision statement expresses the aspirations of an organization. It should reflect the organization's ability to innovate, adapt and respond to the changing environment in which it operates.

CDAC's Vision is:

To foster excellence in professional oral health education through accreditation.

#### **Values:**

Values articulate how the organization will interact with and values its members and articulates how it will be accountable. Values represent the lenses that support decision-making and overall operations.

CDAC's core values are:

**Quality:** Striving for excellence in all our activities.

**Collaboration:** Working together to support and promote our mission and vision.

**Respect:** Leading through words and actions grounded in ethics, integrity, commitment, transparency, and trust.

**Inclusion and Diversity:** Integrating equity, diversity, inclusion and accessibility within our vision, mission, culture, and actions.

**Accountability:** Upholding our obligations to stakeholders through clear and transparent communications.

**Impartiality and Independence:** Ensuring all decisions are fair, objective, and autonomous.

## Structure

The CDAC structure is comprised of three (3) areas. They are the Board of Directors, the Chief Executive Officer (CEO)/Staff, and the Accreditation Review Committees of which there are four.

### A. The CDAC Board of Directors

The CDAC Board of Directors is comprised of 11 members representing the following constituencies:

#### **Educational Organizations**

- Dental Hygiene education
- Dental Assisting education
- Dental education nominated by the Association of Canadian Faculties of Dentistry (ACFD)

#### **Health Facilities Dental Service and Internships**

- Health Facilities Dental Service / Internships

#### **Regulatory authorities**

- Canadian Dental Regulatory Authorities Federation (CDRAF)
- Canadian Dental Assisting Regulatory Authorities (CDARA)
- Federation of Dental Hygiene Regulatory Authorities of Canada (FDHRC)

#### **Certification/Examining Agencies**

- National Dental Assisting Examining Board (NDAEB)
- National Dental Examining Board of Canada (NDEB)
- National Dental Hygiene Certification Board (NDHCE) nominated by the FDHRC

#### **Public**

- Public member

**B. Chief Executive Officer (CEO) and Staff**

CDAC's operational structure includes:

- One (1) Chief Executive Officer (CEO)
- One (1) Director of Operations
- Two (2) Accreditation Specialists
- Two (2) Accreditation Coordinators
- One (1) Executive Assistant

**C. CDAC Accreditation Review Committees**

CDAC has four (4) Accreditation Review Committees. These Committees review confidential accreditation survey reports and subsequent progress reports pertaining to its mandate. Each Review Committee makes recommendations on the program's accreditation status to CDAC (see Consideration of Report and Granting of Status).

The four (4) Accreditation Review Committees are:

- Dentistry Accreditation Review Committee (DDS/DMD, specialties and qualifying programs)
- Dental Hygiene Accreditation Review Committee
- Dental Assisting Accreditation Review Committee
- Health Facilities and Internships Accreditation Review Committee  
(*Health facility dental services and internship/residency education programs*)

In addition, there are also the following Sub-Committees:

- Audit Committee
- Executive Committee
- Governance and Nominating Committee
- Standards Committee

## **II. What is Accreditation?**

Accreditation is the process by which CDAC recognizes that DDS/DMD, Dental Specialty, Dental Hygiene, Dental Assisting, Dental Residency programs, and Health Facilities meet the nationally established standards published by CDAC.

Program or health facility accreditation is determined by CDAC at its annual meeting in November, following scheduled survey visits; or, in the case of new programs, following evaluation of the pre-survey documentation. CDAC notifies the program/facility on accreditation status following this annual meeting. A list of accredited educational programs and health facilities is posted on the website at [www.cdac-cadc.ca](http://www.cdac-cadc.ca).

The accreditation process requires the program or facility to first prepare a self-evaluation of the program's educational activities, which is referred to as the *pre-survey documentation*. Pre-survey documentation is not required for accredited programs in years between

scheduled survey visits; however, programs and facilities are required to notify CDAC prior to implementing proposals that affect accreditation standards, such as enrollment or intake increases. Prior to applying for accreditation and when planning a new program, it is strongly recommended to carefully review the accreditation standards 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 standards, and pertaining to other related activities. These studies may require that the institutions surveyed provide additional information. CDAC expects the program or health facility's full cooperation in this endeavour, as the intent is to improve dental training standards in Canada. Although these studies are not part of the minimum accreditation standards, their results may prompt the introduction of new accreditation standards for subsequent years.

## **Application for a Program Survey**

For information on the deadline for new programs or facilities applying to CDAC for a program survey, please contact CDAC directly. For program fees, consult the *Program Fee Schedule* available on the CDAC website [www.cdac-cadc.ca](http://www.cdac-cadc.ca).

### **A. Dentistry and Dental Specialty programs**

Initial accreditation for a DDS/DMD program involves the Faculty of Dentistry submitting an application for *Preliminary Approval* and application fee to CDAC. For further information on the process, please contact CDAC.

For a Dental Specialty program offered by an accredited Faculty of Dentistry, initial accreditation involves submitting an application for *Preliminary Approval* and application fee to CDAC. For further information on the process, please contact CDAC.

In both cases, CDAC reviews the application to determine if the program is granted *Preliminary Approval* status and a survey visit is scheduled to assess the program(s).

The application must clearly respond to the Accreditation Standards established by CDAC. For each accreditation standard, educational programs must:

- a) state in full the accreditation standard and the related number that appears following each standard (e.g., 2.1, 2.2, etc.)
- b) following each standard, provide the “documentation required” as indicated in the accreditation standards. The program responses must be clear and concise and respond to each standard, 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 standards.

Following CDAC approval, 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 standards and submits it to CDAC. CDAC reviews the survey report, and programs that meet the accreditation standards are granted program accreditation, with or without reporting requirements. Programs that do not meet the accreditation standards are denied program accreditation.

If accreditation is granted, the name of the program is identified on the CDAC website.

## **B. Dental Assisting and Dental Hygiene Programs**

Initial accreditation for Dental Assisting and Dental Hygiene programs involves a two-step process: an *Application for a Program Survey* and an accreditation survey visit. Dental Assisting and Dental Hygiene programs seeking accreditation are required to submit an *Application for Program Survey* and application fee to CDAC.

Educational programs submitting an *Application for Program Survey* must clearly respond to the Dental Assisting or Dental Hygiene Accreditation Standards established by CDAC. For each accreditation standard, educational programs must:

- a) State in full the accreditation standard and the related number that appears following each standard. (e.g., 2.1, 2.2, etc.)
- b) Following each standard, provide the “documentation required” as indicated in the accreditation standards. The program responses must be clear and concise and respond to each standard, 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.

An incomplete *Application for a Program Survey* will not be considered and will be returned to the program.

CDAC reviews *Applications for a Program Survey* during its spring or fall meeting. 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.

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 standards and submits it to CDAC. CDAC reviews the report and programs meeting the accreditation standards are granted program accreditation. Programs not meeting the accreditation standards are denied program accreditation.

If accreditation is granted the name of the program is identified on the CDAC website.

### **C. Dental Residency Programs and Health Facilities**

Initial accreditation for a Residency Program or Health Facility involves submitting a letter to CDAC requesting an accreditation survey visit. CDAC reviews the request during its spring or fall meeting and if it is approved, CDAC schedules a survey visit to assess the program/facility. Note that unlike DDS/DMD and Dental Specialty programs, Residency Programs and Health Facilities are not granted *Preliminary Approval* status prior to a survey visit.

#### **Accreditation Status**

The following accreditation statuses may be granted to an educational program or health facility dental service. 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 standards.

##### ***Preliminary Approval (for DDS/DMD and Dental Specialty educational programs)***

On the basis of a survey visit or comprehensive submission of documentation addressing the accreditation standards, 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.

##### ***Approved (without reporting requirements)***

Based on a survey visit and institutionally prepared comprehensive documentation addressing the accreditation standards, 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 reporting requirements)***

On the basis of a survey visit and institutionally prepared comprehensive documentation addressing the accreditation standards, 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 educational 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. 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 reporting requirements)* must provide a progress report the following year.

Provisionally Approved (*with reporting requirements*)

On the basis of a survey visit and institutionally prepared comprehensive documentation addressing the accreditation standards, 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 service’s accreditation status will result. In order to maintain the status of *Approval*, evidence of significant progress must be demonstrated within one year.

Length of term: One (1) year

Intent to Withdraw

On the basis of an institution's failure to address recommendations from an accreditation survey report, CDAC may initiate its intent to withdraw accreditation status as of the next meeting of CDAC. Programs are notified by CDAC of an action to withdraw accreditation.

Denial

If a new program/service does not meet the accreditation standards, initial program accreditation can be denied.

**Duration of Accreditation**

	Period of Program Accreditation	
	New Program (no. of years)	Established Program (no. of years)
Dentistry / Specialty / Qualifying Program	3	7
Dental Hygiene / Dental Assisting: (Publicly funded)	3	7
Dental Hygiene / Dental Assisting: (Privately funded)	2	4
Health Facility	5	5
Dental Residency	5	5

CDAC reserves the right to reduce or extend the term of approval granted to a program 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 the CDAC website: [www.cdac-cadc.ca](http://www.cdac-cadc.ca).

Please note that, if a program or health facility dental service 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 health facility dental service.

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/ health facility dental service is invoiced an accreditation fee annually in January.

All *health facilities* are charged the accreditation fee at the time of the survey visit.

For *Dental Residency 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

New education programs/ health facility dental service submitting an application to CDAC are encouraged to carefully review CDAC accreditation standards to determine whether or not the program/ health facility dental service meets these standards. The accreditation standards are available on the website at [www.cdac-cadc.ca](http://www.cdac-cadc.ca). The program may wish to consult with CDAC for further information and help with the application process.

The program/health facility dental service is required to address the standards following the directions outlined in the section “Pre-Survey Documentation”. Please contact CDAC regarding the deadline for the submission.

Once a new program has had its first accreditation survey, the accreditation process is complete, and an accreditation status may be granted. If accreditation is granted students enrolled in the program at the time of the initial accreditation survey visit are considered to have graduated from an accredited program.

## Pre-Survey Documentation

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

All survey reports include a *Preface* which introduces and outlines the importance of the ‘must’ and ‘should’ statements throughout the document and is stated as the following:

### *Preface*

*Recommendations and Suggestions made in the survey report are based upon minimum national standards for **Dental** programs. In areas where a standard is not met and/or a deficiency exists, a recommendation will be made. Recommendations are mandatory and must be addressed by the institution. Suggestions may also appear in this report, and these are identified by the survey team to enhance the overall effectiveness of the program. Suggestions are meant to be helpful.*

### *Getting Started*

The accreditation standards identify both the standards, 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 standard, the program must:

- a) state in full the accreditation standard and the related number that appears following each standard (e.g., 2.1, 2.2, etc.)
- b) following each standard, provide the “documentation required” as indicated in the accreditation standards. Responses must be clear and concise and must respond to each standard 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 standards. If an appendix is required, it should be referenced to the corresponding standard and appear in numeric sequence.

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 requires programs to provide their responses to the accreditation standards in electronic format, using a secure file transfer method, in Microsoft Word format; appendices can be submitted in either Microsoft Word, Excel, or PDF formats. Please discuss delivery options with CDAC staff prior to sending confidential documentation.

The information must be appropriately indexed to allow for easy access and navigation of the documentation provided. The following sample index will facilitate identifying the accreditation standards and the corresponding appendices.

The information must be appropriately indexed to allow for easy access and navigation of the documentation provided. Please refer to the attached sample index. **DO NOT USE SYMBOLS OF ANY KIND IN NAMES OF FILES.** (This includes hyphens and ampersands) Please keep all file names under 20 characters long.

## How to Index Documents

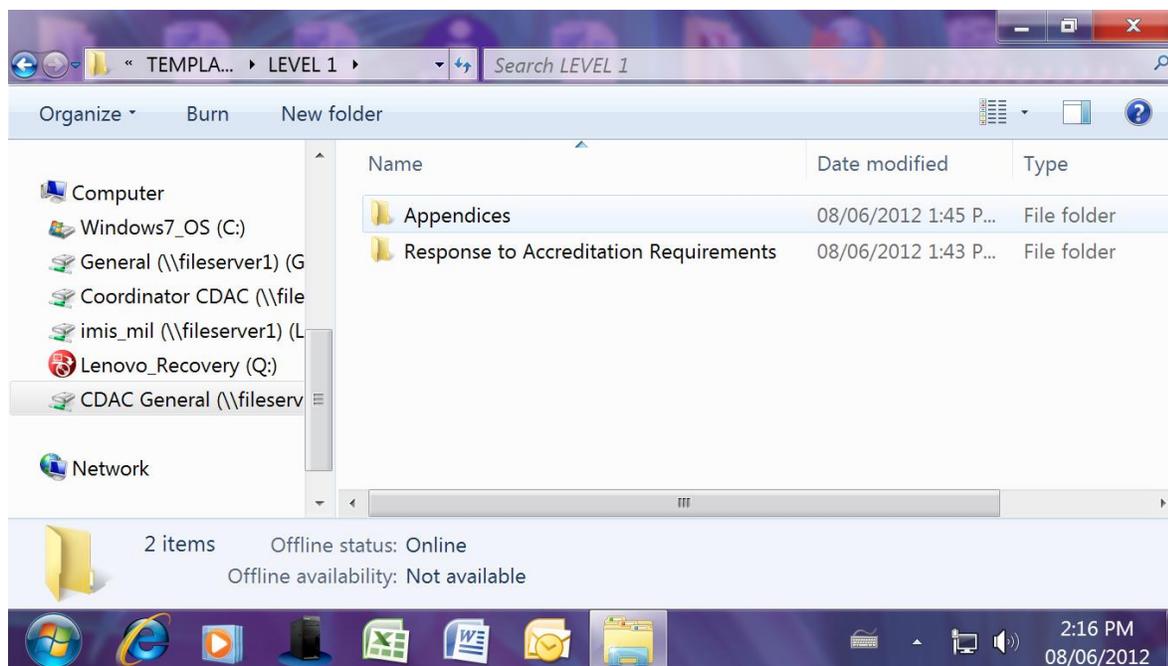
### LEVEL 1: Establishing Your Folders

#### About Level 1:

- The first level will contain two (2) folders: one to hold all the appendices and one to hold the report with the program's responses to the accreditation standards.

#### Response to Accreditation Standards from Program:

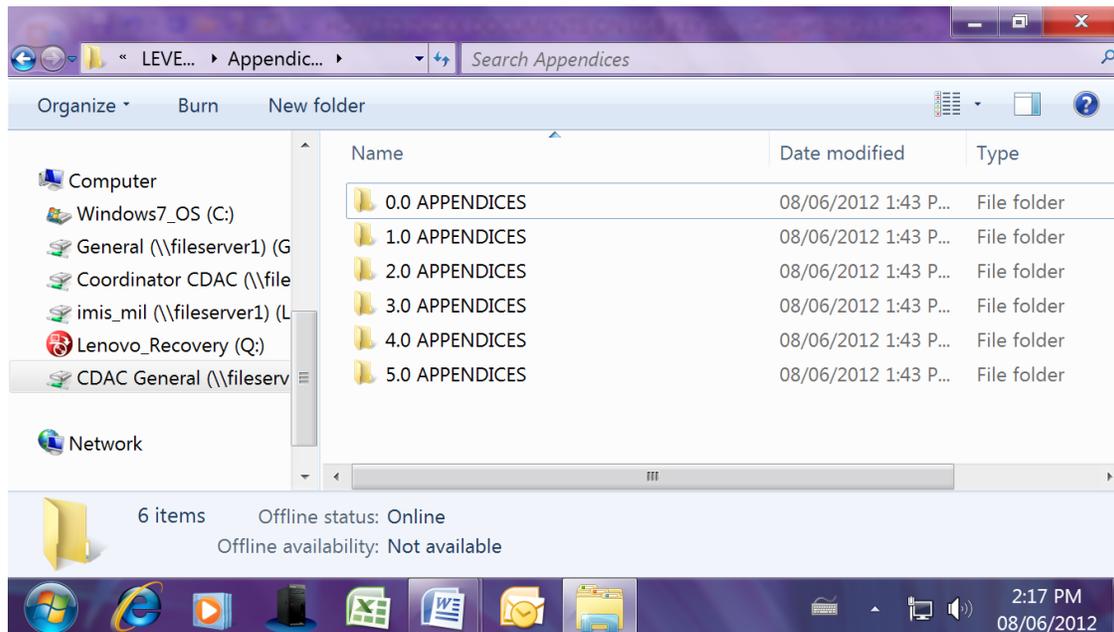
- The report **must** be provided in a Microsoft Word format and saved in this folder.
- Please include a **descriptive index** of the listed appendices.



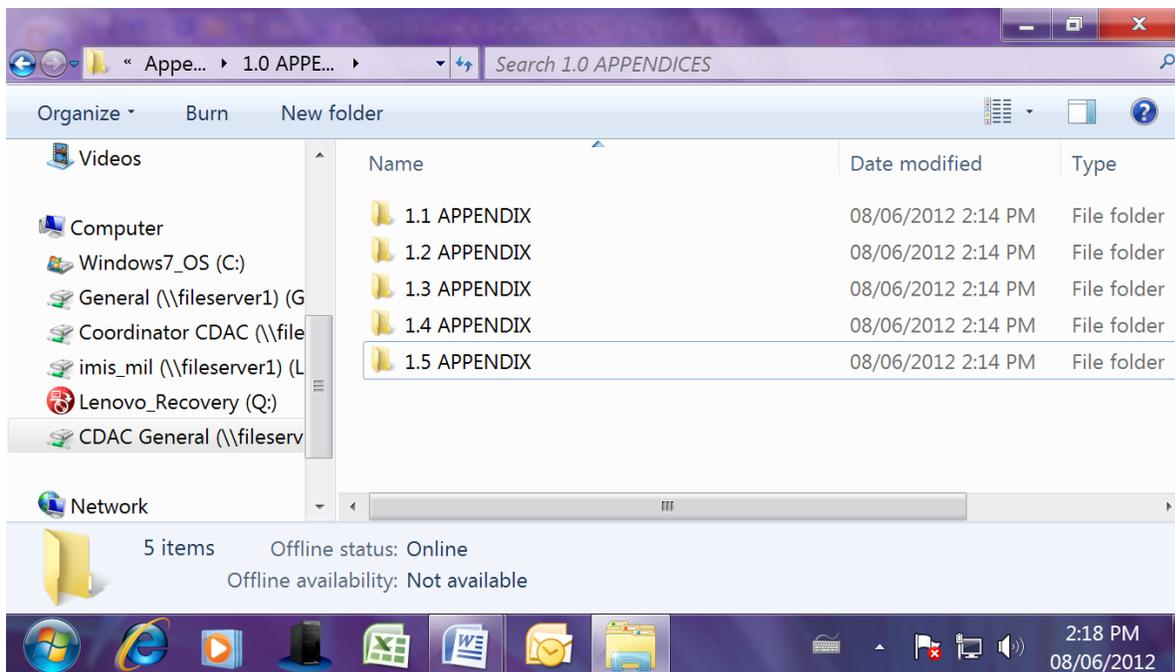
## LEVEL 2: Establishing Your Appendices

### About Level 2:

- The main Appendices folder will contain a folder for each **standard** number.
- Each **Standard** folder will hold a document (Microsoft Word, Excel, or PDF) for each appendix related to that specific standard.



## LEVEL 3: Establishing Name of Sub Folders



## LEVEL 4: Establishing Individual File Names Within Sub Folders

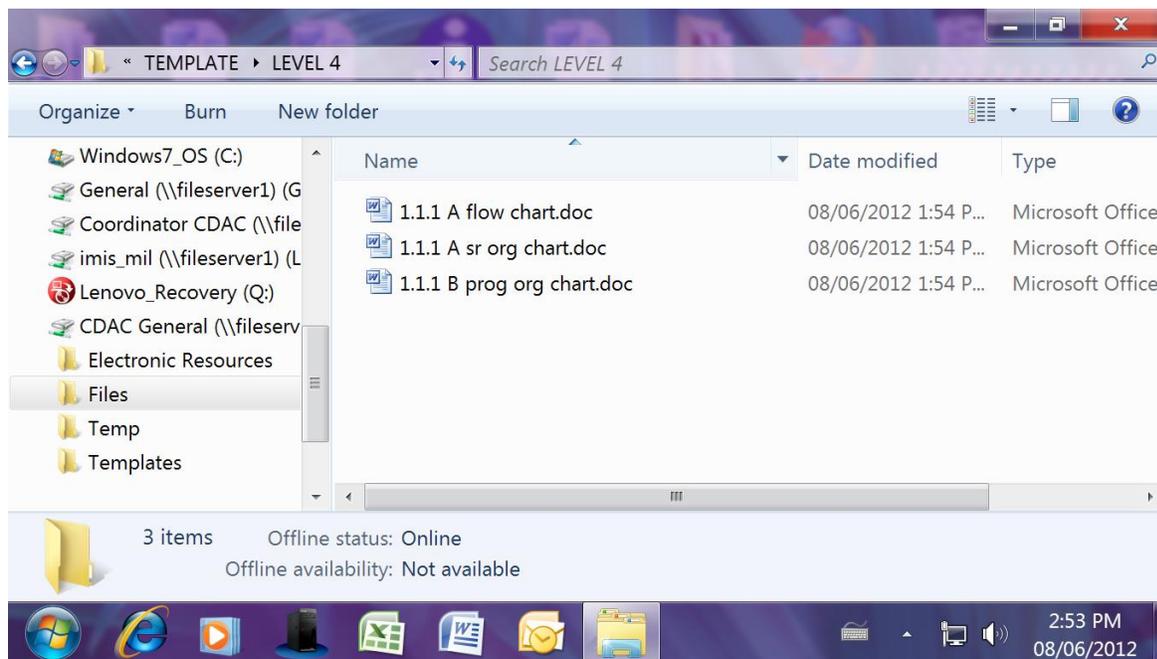
### About folder names

- File name cannot exceed a maximum of 20 characters in length including spaces.
- File name cannot include any symbols of any kind.  
(This includes “\_” and “&”)
- Folder names should reference the documentation required as requested in the Accreditation Standards

Ex: 1.1.1 A – senior org chart

2.1.3 – transfer students

**IMPORTANT:** Please ensure all course outlines are saved separately.



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 review and 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.

Accreditation survey teams are structured as follows:

**DDS/DMD programs and Qualifying programs:** Basic membership of this survey team consists of two clinicians/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.

**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 individual who has experience with a dental service and a representative from CDAC.

**Dental Residency educational programs:** Basic membership of this survey team consists of one individual with hospital/dental internship experience and a representative from CDAC.

## The Survey Visit

Survey visits are usually conducted between January and June each year.

The Program Director 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.

Although the order and arrangement of the tours and conferences are at the discretion of the Program Director, CDAC is available to provide suggestions that might be helpful in developing the survey schedule. CDAC will also provide a sample survey schedule template to assist the program in scheduling survey interviews.

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.

### *Schedule*

A sample survey schedule template is provided by CDAC to assist the program in scheduling survey interviews. The first period of Day 1 of the team's visit should include a conference with the Program Director, 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 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, followed by an oral report made by the accreditation survey team during the exit conference with the senior administrator(s) and the Program Director.

Please see *Specific Instruction for various programs* for further scheduling information.

### *Interviews*

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 interviewees. 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.

Survey team members will have received in advance the program curriculum. However, course syllabi, textbooks, evaluation procedures, etc., for all courses in the curriculum should be available for the survey team members to review.

Faculty member interviews/conferences provide an opportunity for survey team members to clarify any questions related to their respective courses. 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 these instances, the group must not exceed four or five faculty members.

It is not required that every individual teaching within the program be scheduled for a 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.

The survey team will meet privately with the students. The program should make provisions to schedule a room to accommodate this meeting. Student forums are an integral part of the CDAC survey process. Please ensure sure all students are present.

#### *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 who are 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. Discussions with the survey team take place in the conference room assigned to the team.

#### *Specific instruction for various programs*

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 and Qualifying programs:** The duration of a survey visit to accredit a DDS/DMD and Qualifying programs is usually four and one-half days; occurring from Monday through Thursday, with a verbal 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.

**Dental Hygiene programs:** The duration of a survey visit to accredit a Dental Hygiene education program is usually three days. The schedule must provide sufficient time to visit the clinical setting, preferably on the morning of the second day of the survey visit. The program is required to provide lab coats and eye protection for the team members.

**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 survey 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, particularly 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 conference 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 standards. In areas where a *must* statement in the standard is not met, a 'Recommendation' is made. It is expected that the program will address the recommendation. Also, suggestions may appear in the final report, relating on points 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 and reviewed by all survey team members before forwarding a draft survey report to the institution. At this stage, the institution is provided with an opportunity to review 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 is presented to CDAC at the annual meeting in November, 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. (*For descriptions, see Accreditation Classifications*).

When the status granted to an institution is *Provisionally Approved (with reporting requirements)* or *Approved (with reporting requirements)*, the institution is required to provide a progress report to CDAC the following year. (See "**Progress Reports**").

As a requirement for continued accreditation, institutions are responsible for completing an **Annual Program Review (APR)**, 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. This online reporting mechanism is due for completion by June 30<sup>th</sup> each year.

## Distribution of Reports

Following the 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 Program 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 Program Director.

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

## **Appeal Procedure**

Programs denied accreditation status or whose accreditation status has been withdrawn, can appeal the decision. **Please contact CDAC should you require additional information regarding the Appeal Procedure.**

## **Progress Reports**

### *Purpose*

Any program that receives a status less than *Approved (without reporting requirements)* is required to submit a progress report. The progress report is intended to respond to the specific Recommendations that CDAC identified in the survey report.

A well-written and effective progress report comprehensively addresses the identified Recommendations and clearly documents how the program 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 required in deciding to upgrade a program's accreditation status.

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

### *Who reviews progress reports?*

CDAC Accreditation Review Committee members, who have not participated in the accreditation survey visit to that program, assess the progress report.

CDAC will notify those programs that are required to submit progress reports. The submission deadline for progress reports is August 1<sup>st</sup>.

## **NEW: Mid-year agenda items for consideration**

Beginning in 2018, programs applying for intake/enrollment increases, and other time-sensitive requests, can submit agenda items for mid-year consideration before March 1<sup>st</sup>. CDAC staff will exercise discretion to determine whether submitted agenda items are to be considered immediately by Committee members, through a virtual meeting in the Spring, or whether to defer requests for consideration at the CDAC annual meeting in November. Institutions will be notified of CDAC's decision regarding the consideration of mid-year agenda items in a timely manner.