The COCA is the only accrediting agency for predoctoral osteopathic medical education, and is recognized by the United States Department of Education.
This document should be read in conjunction with the current revision of the Commission on Osteopathic College Accreditation’s (COCA) *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*. Evaluators are also encouraged to review the COM Accreditation Standards Crosswalk and Documentation Pad, which outlines documents to review and people to interview during the on-site accreditation evaluation. Both documents are available on the COCA’s Web site at [www.aoacoca.org](http://www.aoacoca.org). Finally, the Accreditation Council for Pharmacy Education, in collaboration with 15 programmatic accreditors, including COCA staff, offers an informative, easy-to-follow overview of the accreditation process via its online *Guide to Accreditation* at [www.acpe-accredit.org/edcenter/sitevisits/](http://www.acpe-accredit.org/edcenter/sitevisits/). The *Guide* is a great primer for evaluators who are new to the accreditation process.

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COCA Approved: January 1999; August 2004; September 2006; December 2009*
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The COM Evaluator Manual (Manual) has been developed for use by each member of the Commission on Osteopathic College Accreditation’s (COCA) Evaluators Registry in preparation for responsibilities as a site visit team member before, during, and after an on-site accreditation visit to a college of osteopathic medicine (COM). Team members are responsible for thoroughly reviewing and understanding the COCA’s Standards and Procedures in order to assess the COM’s compliance with them.

The Manual is intended to be a guide to new and experienced evaluators in the COM accreditation process. The Manual details the American Osteopathic Association’s (AOA) policies and procedures for traveling to and from an on-site visit, meals and accommodations, and reimbursement. The Manual also describes the different types of on-site visits and how COCA staff schedules and plans each visit. Team responsibilities before, during, and after the site visit are also included. Evaluator tools that are to be used, when appropriate, are also discussed in the Manual. These tools, including the COM Accreditation Standards Crosswalk and Documentation Pad (documentation pad) and the Telephone Interview and Questions for Affiliated Clinical Sites Form, are available on the COCA’s Web site at www.aoacoca.org.
**AUTHORITY AND PURPOSE**

The American Osteopathic Association (AOA) has a long history of accreditation of its colleges of osteopathic medicine. As stated in the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures, A Brief History*: “In 1952, the American Osteopathic Association was initially recognized by the United States Department of Education (USDE).” After 1960, the AOA Bureau of Professional Education (AOA Bureau) was organized as the accreditor for colleges of osteopathic medicine. In 2004, the former Council on Predoctoral Education was disbanded and the AOA Bureau of Professional Education was restructured as the present 17-member Commission on Osteopathic College Accreditation (COCA). The COCA continues to be recognized by the USDE as the accreditor of colleges of osteopathic medicine.

USDE recognition establishes the COCA as an agency qualified to evaluate the quality of osteopathic medical education institutions and programs. The COCA must meet a set of rigorous criteria established by the Secretary of the USDE in order to hold this recognition. The USDE criteria require that, for purposes of recognition by the Secretary of the USDE, the COCA must provide continual assurance that the institutions and programs it accredits offer quality osteopathic medical education. The current accreditation standards for the college of osteopathic medicine accreditation are a result of continuous review by osteopathic medicine’s communities of interest and the agency’s response to requirements for recognition by the USDE.

**ACCREDITATION AND HIGHER EDUCATION**

Accreditation action taken by the COCA means a college or school of osteopathic medicine has appropriately identified its mission, has secured the resources necessary to accomplish that mission, shows evidence of accomplishing its mission, and demonstrates that it may be expected to continue to accomplish its mission in the future. Accreditation of a COM means that the COM incorporates the science of medicine, the principles and practices of osteopathic manipulative medicine, the art of caring and the power of touch within a curriculum that recognizes the interrelationship of structure and function for diagnostic and therapeutic purposes; recognizes the importance of addressing the body as a whole in disease and health; and recognizes the importance of homeostasis and self-regulation in the maintenance of health.

Accreditation signifies that a COM has met or exceeded the COCA’s standards for educational quality with respect to mission, goals, and objectives; governance, administration, and finance; facilities, equipment, and resources; faculty; student admission, performance, and evaluation; preclinical and clinical curriculum; and research and scholarly activities. The standards are found in the document *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*, Chapter I: COM Accreditation Standards.

The process of accreditation is a cooperative activity calling for continuing self-assessment on the part of each COM through the annual report, supplemental annual report, mid-cycle report, and periodic peer evaluation through on-site visits and review directed by the COCA. The context and process used by the COCA in accrediting COMs is found in the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*, Chapters II through VIII.
Accreditation Overview

Types of Accreditation On-Site Visits

There are five types of on-site visits: pre-accreditation, provisional accreditation, comprehensive survey (also known as full survey), interim progress review and focused visits. Pre-accreditation is the second step in seeking full accreditation status by an applicant COM. The first step is receiving applicant status. The pre-accreditation on-site visit is initially conducted 60-90 days after the COCA accepts the COM’s feasibility study and thereafter annually for up to five years or until the COM achieves provisional accreditation, whichever is sooner. These visits are typically 1-1½ days in length and review a selected subset of the standards.

Provisional accreditation visits are conducted not more than 14-15 months prior to the COM’s opening date and annually thereafter. These visits typically last 2½-3 days in length and all standards of accreditation are reviewed.

Comprehensive or full survey on-site visits review all standards of accreditation and are scheduled for COMs with full accreditation status every seven years. These visits last 3 days in length and require a full team of evaluators.

Interim progress reviews and focused visitations review specific standards. These visits are more focused and are generally shorter in length and are scheduled at the discretion of the COCA. Interim progress reviews are directed from findings of standards that were not met on a previous comprehensive visit. Focused visitations are directed from monitoring considerations based upon granting substantive changes. Focused visitations may also be directed by the COCA when it has determined that there are reasons to question whether or not the COM remains in compliance with one or more standards.

Accreditation Cycles

Pre-accreditation surveys are conducted annually for those COMs with pre-accreditation status. Selected standards are reviewed for this on-site visit.

Provisional accreditation on-site visits are conducted for COMs that have already been granted provisional accreditation status or those seeking initial provisional accreditation. On-site reviews of provisional accreditation are conducted annually concurrent with the academic progress of the first-, second-, and third-year classes. All standards are reviewed for this on-site visit. COMs are required to submit a self-study report 60 days prior to the visit. This report is reviewed by each team member and the COCA.

Comprehensive (Full) accreditation on-site visits are conducted every seven years for those COMs with full accreditation status. All standards apply and are reviewed during this on-site visit. COMs submit a self-study report 60 days prior to the visit, which is reviewed by each team member and the COCA.

Interim Progress Review and Focused Visitation on-site visits are determined by the nature of the requirement(s) (from a comprehensive and/or provisional accreditation site visit), or through a substantive change request, or other actions as deemed appropriate by the COCA. These visits focus on specific standards and are shorter in length (usually 1-2 days), and can occur at any time.
within the full accreditation or provisional accreditation cycles. Refer to the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*, Chapter IV: On-Site Visit Procedures for a full explanation of the types of on-site visits.

### TYPES OF ON-SITE VISITS AT-A-GLANCE

<table>
<thead>
<tr>
<th>Pre-accreditation On-site Visit</th>
<th>Provisional Accreditation On-site Visit</th>
<th>Comprehensive (Full) Accreditation On-site Visit</th>
<th>Interim Progress Review/Focused On-site Visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conducted 60-90 days from acceptance of feasibility study</td>
<td>Conducted prior to a COM acceptance of student applications</td>
<td>7-year survey cycle, with self study; status retained until withdrawn by COCA</td>
<td>Conducted at direction of COCA</td>
</tr>
<tr>
<td>Annual review for up to 5 years</td>
<td>Annual review, with self study</td>
<td>All standards in domains 1-7 reviewed</td>
<td>Specific standards reviewed determined by nature of requirement(s); or resulting from substantive change request</td>
</tr>
<tr>
<td>Specific standards reviewed</td>
<td>All standards reviewed</td>
<td>On-site visit 3 days</td>
<td>On-site visit 1-2 days</td>
</tr>
<tr>
<td>On-site visit 1-1½ days</td>
<td>On-site visit 2½ - 3 days</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PREPARING FOR THE ON-SITE VISIT

**Self-Assessment Process and the Self Study Document**

The primary purpose of the self-assessment activity and culminating self-study report is to enable COMs to devise a system for self-appraisal and improvement consistent with both the COM’s mission and the COCA’s standards and procedures. Self-appraisal involves a collaborative process with all areas of the COM to identify the strengths and weaknesses within the COM. In turn, the COM can then use the self-assessment process and its results as tools for continuous, on-going assessment and improvement. This process is one that provides both summative and formative evaluation. Refer to the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*, Chapter III: The Self-Study Process for more detail and guidelines regarding the self-study process.

COMs must submit their self-study report at least 60 days before the scheduled comprehensive or provisional on-site visit. The self-study report is an integral part of the site visit process and is used throughout the site visit and review processes. Predoctoral Education staff will utilize the self-study report to develop the site visit agenda. The COCA conducts its own review of the COM’s self-study report and compares it to the team’s draft site visit report.

**Scheduling the On-Site Visit**

Comprehensive accreditation on-site visits are approved by the COCA at least two years prior to the scheduled site visit. Provisional accreditation visits are scheduled annually, and interim progress reviews and focused visitations are scheduled on an as needed basis. Following the COCA’s approval of the on-site visits, COMs are notified in writing of the upcoming visit.

Once the date of the visit has been established, Predoctoral Education staff will develop a proposed list of visiting team members, compiled from the Evaluators Registry. The proposed list of team members is forwarded to the COCA Chair or his/her designee for approval. Once approved by the Chair, the list of proposed team members is submitted to the COM for approval. Upon approval by the COM, Predoctoral Education staff will contact each team member, usually via e-mail, to determine their availability. When an evaluator accepts a visit, he/she must be available to attend the entire visit.
After the COM has confirmed the team, Predoctoral Education staff will send a confirmation letter that details the team members’ area of responsibility and initial travel guidelines. Depending on the type of site visit and upon confirmation, team members may also receive a copy of the COM’s self-study report, annual report, and other applicable material.

Predoctoral Education staff confers with the team chair to discuss the development of the agenda. When the draft agenda has been completed and receives approval from the team chair, it is forwarded to the COM for their review and approval.

**Pre-On-Site Visit Material**

Team members will receive pre-site visit material for COMs undergoing comprehensive or provisional accreditation on-site visits. This material may include the COM’s self-study report, annual report, and other relevant material. If necessary, teams may also receive pre-site visit material for COMs undergoing an interim progress review or focused visitation. This material may include previous site visit reports, progress reports associated with outstanding requirements and other material as deemed necessary.

**On-Site Visit Agenda Book**

At least two weeks prior to the scheduled on-site visit, each team member will receive the materials for review in preparation for the on-site visit. The materials will include, but are not limited to:

- Site visit agenda
- Conflict of interest policy
- Any previous site visit reports
- COM’s current annual report, if not supplied earlier
- Hardcopy of the documentation pad
- Expense voucher

**Team Member Preparation**

Each team member is expected to thoroughly review all materials provided by the Predoctoral Education staff prior to the site visit. All background information is provided to each team member via the pre-site visit material packet. The pre-site visit material will be mailed to each team member approximately two weeks prior to the visit or sooner, if appropriate. These materials, along with the COM’s self-study report (if appropriate), will be mailed to the team chair not later than one month prior to the site visit in preparation for developing the site visit agenda. If material deemed important to a team member(s) is not included in the pre-visit agenda packet that team member should contact the Predoctoral Education staff for assistance.

Prior to and after the site visit, staff will convey information about the visit to team members primarily by e-mail. Therefore, it is important that members of the team provide Predoctoral Education staff with correct e-mail addresses as well as regularly monitor their e-mail and respond to staff in a timely manner.
TEAM MEMBER SELECTION AND COMPOSITION

Team selection generally begins four to six months in advance of a scheduled site visit. Staff considers a number of criteria in selecting team members, including area of expertise, availability, geographical location, conflict of interest, and level of experience. Team members are multi-faceted individuals who have broad knowledge and experience in higher education, including COM administration, with expertise in one or more of the following areas: Administration/Finance; Student Services; Preclinical Education; and/or Clinical Education.

For provisional and comprehensive on-site visits, the team is usually comprised of a team chair, one administration/finance evaluator, one preclinical education evaluator, one student services evaluator, two clinical education evaluators (one will be an osteopathic practitioner), one evaluator trainee, and one COCA staff member, who serves as the team secretary. At least one of the team members will be an educator.

For focused or interim progress review on-site visits, the team is smaller, i.e., usually comprised of two to three evaluators, depending on the nature of the requirements or standards to be reviewed, and a team secretary.

TEAM COMPOSITION AT-A-GLANCE

<table>
<thead>
<tr>
<th>Comprehensive (Full) and Provisional On-site Visits</th>
<th>Interim Progress Review/Focused On-site Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Team Chair</td>
<td>• 2-3 evaluators, based on the nature of</td>
</tr>
<tr>
<td>• Administration/Finance Evaluator</td>
<td>requirements/standards to be reviewed</td>
</tr>
<tr>
<td>• Preclinical Education Evaluator</td>
<td>• Team Secretary</td>
</tr>
<tr>
<td>• Student Services Evaluator</td>
<td></td>
</tr>
<tr>
<td>• 2 Clinical Education Evaluator (one will be a practitioner)</td>
<td></td>
</tr>
<tr>
<td>• Evaluator Trainee</td>
<td></td>
</tr>
<tr>
<td>• Team Secretary</td>
<td></td>
</tr>
</tbody>
</table>

Note: At least one team member will be an educator

TEAM RESPONSIBILITIES

1. Exhibit professionalism at all times

♫ Accept the invitation to serve on the team readily and begin preparations
♫ Routinely monitor e-mail for communications from staff and other members of the team and respond to inquiries in a timely manner
♫ Review the agenda; prepare ahead for an effective and efficient visit
♫ Protect confidentiality of the COM, before, during, and after the visit; return documents, notes, etc., to team secretary or destroy them prior to departing the COM; delete any documents that were created on the COM’s computers
♫ Avoid discussing findings with COM personnel except for those communicated in the executive session and exit conference
♫ Review the accreditation standards in entirety and focus on the assigned standards for their respective area of review
Review all pertinent documents provided in the pre-visit packet (e.g., self-study report, prior site visit reports, progress reports, annual reports, etc.)

- Dress in business attire
- Begin and end meetings promptly
- Exhibit collegiality with team mates and representatives of the COM
- Promote and maintain peer review perspective
- Maintain objectivity, consider all perspectives, base conclusions on evidence
- Practice best judgment to build team consensus when making decisions on compliance

2. Practice effective interviewing techniques

- Formulate and review questions prior to the interview
- Identify ahead of time the specific individuals to whom the questions will be posed
- Allow the interviewee to talk for the majority of the time
- Be a good listener!
- Provide the opportunity for the interviewee to describe the goals of the COM and the strengths and weaknesses in meeting the goals
- Ask questions that will verify documentation reviewed
- Request clarification on issues of concern
- Practice objectivity at all times during the interview process
- Acknowledge the autonomy of the COM in developing policies and procedures required to meet its individual mission and comply with the accreditation standards
- Allow enough interview time to elicit responses that provide all information necessary to determine compliance with the standards under review

3. Participate willingly in team planning and discussions

- Participate in team discussions during the site visit
- Listen to all team members’ reports on information gathered
- Review preliminary conclusions of current findings
- Request additional interviews, if necessary
- Request additional documents for review and verification, if necessary
- Build consensus – work to develop agreement on current findings and standards compliance
- Stay objective; support the peer review process
- Alert the team chair of issues requiring attention

4. Apply skilled approaches to communication – writing the report

- Develop well-written sections for easy inclusion into the single team report
- Review and follow the documentation pad format and guidelines for report writing
- Consult with team secretary for questions on format

5. Self-disclose any potential conflict of interest as described in the COCA Conflict of Interest policy
Conflict of Interest

(The elements of conflict of interest as described in this section are excerpts from the COCA Handbook approved by the COCA at its April 2006 meeting.)

The policy statement governs treatment of actual, apparent and alleged conflicts of interest and appearances of impropriety that may arise during the deliberations and actions of the COCA. The policy is intended to facilitate the disclosure and resolution of conflicts of interest. These policies are applicable to members of the COCA, COCA staff, members of the Evaluators Registry participating as site visit team members, and consultants. Members of the Evaluators Registry, COCA, and COCA staff are required to sign a conflict of interest statement annually.

With respect to conflicts of interest, the policy of the COCA shall be to err on the side of precaution in order to safeguard the integrity of the COCA. Members of the COCA, the Evaluators Registry, COCA staff and consultants should be sensitive not only to the existence of a conflict of interest, but also to the possible appearance of improper conduct where no conflict of interest may exist. The following conflict of interest policy is consistent with a COCA member’s responsibilities under the Duty of Loyalty and Duty of Obedience.

Principles of Conflict of Interest

What is a Conflict of Interest?

A conflict of interest arises where an individual on the COCA, COCA staff, members of the Evaluators Registry participating as site visit team members, or consultants, due to a financial, personal or other relationship with an entity under consideration, or an expression of bias / prejudice, may be unable to act based solely on an objective analysis of the information presented. From a legal perspective, the presence, or even the perceived presence, of conflict of interest suggests that the conflicted individual may not have acted consistent with the legal duties of loyalty and/or obedience. Although courts typically grant considerable deference to the professional judgment used to reach substantive decisions made by private accrediting and certifying agencies, the presence of bias and/or prejudice or the failure to follow the defined procedures for handling conflicts of interest may provide the basis for overturning the decision of the accrediting or certifying body.

What Circumstances Create a Conflict of Interest?

In simplest terms, a conflict of interest arises where an individual member of a bureau, council or committee may be influenced in her or his decision-making process due to a

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1 The duty of loyalty requires that an individual acting in the name of a corporate body will act with that organization’s best interests in mind. For example, several members of a bureau, council or committee may also be officers or members of another organization or entity. In satisfying the duty of loyalty, those individuals would be expected to take actions based upon the best interest of the AOA’s COCA rather than what might be the best interest of the particular organization of which he is also a member.

2 The duty of obedience requires that an individual acting in the name of a corporate body will adhere to the standards, policies and procedures of that organization. Although individuals are expected to use good judgment when making decisions on behalf of a corporate body, they are expected to apply that judgment with respect to existing standards, policies and procedures of the corporate body. In making decisions that demonstrate duty of obedience, an individual will know, understand, consider, and follow the standards, policies and procedures appropriate to the matter to be decided.
relationship with an individual or entity under consideration. Some examples of situations that could create conflicts of interest:

1. A business or financial relationship with an individual or program under consideration

2. A direct familial relationship with an individual under consideration or with an officer of an entity under consideration

3. An employment or consulting (past or current) relationship with an entity under consideration

4. Employment or other relationship with a competitor of a program under consideration

Unfortunately, the list of potential conflicts may include some situations in which there is no conflict present and not identify situations in which there are actual conflicts. Although, we cannot provide an all-encompassing, perfectly accurate list of situations that constitute a conflict of interest, the principles of disclosure and resolution of conflict of interest are understood and can be clearly stated and explained. It is then incumbent upon the COCA members, COCA staff, members of the Evaluators Registry participating as site visit team members, and consultants to understand and comply with the disclosure and resolution process discussed in greater detail below.

What are the Elements of Disclosure of Conflicts?

Disclosure represents the first step in addressing conflicts of interest.

1. The primary responsibility for disclosure of what may or may not be a conflict of interest rests with the members of the COCA [including members of the Evaluators Registry]. Such disclosure may be made by the member directly or about another member. In the latter case, the member accused of a conflict of interest will have the opportunity to respond to that assertion.

2. A secondary responsibility rests with the COCA staff, to review the curricula vita and disclosure statements of the members and make potential conflicts known to the Chair prior to the meeting. COCA staff also has the responsibility to disclose stated conflicts of members of the Evaluators Registry to the Accreditation Coordinator when assembling teams conducting on-site evaluations.

3. Finally, the individuals and programs that have issues before the COCA will have the opportunity to present any concerns they may have with respect to conflicts of interest of the voting members either in advance of the meeting or at the meeting. With respect to composition of the on-site evaluators, the COM being visited will have the opportunity to reject a proposed evaluator whom it believes may have a conflict of interest with that COM.

4. Because these conflict of interest policies apply to staff of the COCA and its consultants, each of these groups will also fill out the conflict disclosure form annually. With respect to composition of staff for an on-site evaluation, or recommendation of a consultant to a COM, the affected COM will have the opportunity to reject a proposed staff member or consultant whom it believes may have a conflict of interest with that COM.
Team Chair Responsibilities

- Approves site visit agenda
- Reviews team assignments
- Conducts team pre-visit conference call, when necessary, to identify potential problems/challenges and develop strategies to address them
- Establishes clear guidelines for visit expectations
- Directs the on-site visit
- Reviews the philosophy of voluntary accreditation and peer review with the team
- Provides on-site leadership for application and interpretation of standards
- Serves as a spokesperson for the team
- Sets the tone of the visit as a peer review activity
- Directs team discussions to keep team focused
- Facilitates team discussions from individual team members’ analysis through team consensus
- Interviews senior administrative officers and students with a focus on administration and finance and facilities related to administration and finance
- Directs the writing of the report
- Leads the reporting process at the Executive Session and Exit Conference
- Approves the completed draft site visit report for presentation to the COM and COCA
- Presents site visit report to the COCA

Administration/Finance Team Member Responsibilities

- Reviews Standards One, Two, Three, and Eight, as necessary
- Interviews senior administrators, finance staff, and students
- Writes on assigned sections of the site visit report
- Presents the Administration/Finance section of the oral report to the COM
- Reviews final post-visit draft of the site visit report

Student Services Team Member Responsibilities

- Reviews Standards Three and Five
- Interviews student services and learning resources administrators, staff and students
- Writes on assigned sections of the report
- Presents the Student Services section of the oral report to the COM
- Reviews final post-visit draft of site visit report

Preclinical Education Team Member Responsibilities

- Reviews Standards Three, Four, Six, and Seven
- Interviews basic science administrators, department chairs, course coordinators, faculty and students
- Writes on assigned sections of the report
- Presents the Preclinical section of the oral report to the COM
- Reviews final post-visit draft of site visit report
Clinical Education Team Member Responsibilities

- Reviews Standards Three, Four, and Six
- Interviews clinical education administrators, department chairs, course coordinators, DMEs, faculty and students
- Visits clinical rotation sites
- Conducts telephone interviews with distant clinical sites
- Writes specific sections of the report
- Presents the Clinical Education section of the oral report to the COM
- Reviews final post-visit draft of site visit report

Trainee Member Responsibilities

*Note: Each of these activities are performed under the supervision of the team evaluator for that functional area and the team chair.*

- Read all agenda book materials
- Shadow the evaluator in his/her area of expertise on the site visit
- Reviews standards in his/her area of expertise in collaboration with experienced evaluator
- May write on assigned sections of the site visit report in collaboration with experienced evaluator
- Attends all relevant team meetings, interviews and tours
- Reviews final post-visit draft of the site visit report

Team Secretary Responsibilities

- Plan visit with COM, COCA Chair, or designee, and team chair
- Confer with Accreditation Manager, Predoctoral Education and COM to assemble team
- Research and analyze on-site needs, including space and technology requirements with the COM
- Coordinate agenda preparation
- Coordinate pre-visit conference call in collaboration with team chair, if needed (this may also be conducted via e-mail)
- Coordinate on-site hotel accommodations and transportation
- Monitor on-site agenda and review progress
- Confer with team chair on issues requiring additional attention
- Assist the team chair in maintaining focus of site visit
- Provide administrative assistance to the team, as needed
- Distribute respective documentation pads to team members
- Explain the site visit report review and approval processes to the COM and the team
- Collect site visit report findings on-site at the conclusion of the site visit
- Delete all information concerning the site visit from the COM’s computers and/or collect and destroy printed materials prior to leaving the campus
- Compile and edit draft report in AOA Predoctoral Education office
- Coordinate review of the report by the team and COM
The On-Site Visit Agenda

The on-site visit agenda is the schedule of each team members’ interviews that will be conducted during the on-site visit. The agenda is a fluid document subject to revisions before and during the on-site visit to accommodate changing circumstances, including unplanned interviews.

Day one of a comprehensive or provisional accreditation on-site visit generally begins with a team-planning and document review meeting. The Entrance Interview follows this planning session with the senior administrators of the COM. An open meeting with students (no faculty or administrators present) also is usually conducted on day 1. This is typically scheduled later in the afternoon to accommodate students’ schedule and generally lasts one hour. For interim progress reviews and focused visits, student interviews may be scheduled during the lunch hour and will be treated as a working lunch.

Day two begins with team planning and document review. This meeting and all subsequent team meetings provide the opportunity for team members to discuss initial findings, focus on establishing consensus, and to target objectives for the remainder of the visit. Day two provides for a full day of interviews as scheduled on the site visit agenda.

If the visit is a four-day visit, Day three will continue with interviews during the first half of the day. During the second half of the day, the team will begin writing the report after discussing the findings. The team chair will direct this discussion to focus on current findings and on new findings as they apply to outstanding requirements. Using the documentation pad, team members are responsible for writing on their specific standards of review. After each team member has completed the written portion of the review, the team will meet to read the report and clarify areas that need more review. The team’s goal at this point is to come to agreement on the findings of the report.

The last day of the visit (Day 3 or 4) begins with further discussion regarding the findings of the team. The team may decide to review the report in its entirety before presenting the findings to the COM. The team chair and team secretary will meet in Executive Session with the COM’s senior administrators to present a preview of the visiting team report. Following the Executive
Session, the Exit Conference is conducted with the team and representatives of the COM, selected by the chief executive officer or chief academic officer. The team will provide a brief overview of their current findings. The Exit Conference concludes the site visit. At the discretion of the team chair and COM president or dean, the Executive Session and Exit Conference may be combined.

Interim progress reviews and focused visits also include an Entrance Interview and Executive Session/Exit Conference.

**Reviewing Accreditation Standards**

Each visiting team member is responsible for thoroughly reviewing and understanding COCA standards and procedures. Team members should always review the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures* prior to participating on a site visit. It is essential that each team member understand the standards of accreditation concomitant with the particular area(s) that he/she will be reviewing in order to accurately and consistently assess the COM’s compliance with them. A copy of the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures* is available on the COCA’s Web site at [www.aoacoca.org](http://www.aoacoca.org). The standards are also included on the Crosswalk and Documentation Pad, which is distributed to each team member on-site and/or prior to the site visit either electronically or in hard copy.

During a comprehensive survey, it is the responsibility of the visiting team to review all standards for compliance. During an interim progress review or focused visit, the visiting team reviews the specific standards that are the focus of the site visit as directed by the COCA.

**Team Planning Session**

The Team Planning Session is an opportunity for team members to formally review the agenda and make any last minute changes. The team chair will lead the standards review sessions. During these sessions, the team chair will discuss the purpose of the visit based on the documents reviewed in the agenda materials and if there are continuing requirements from a previous site visit. The team will also begin to determine what questions and issues they will discuss during the interview phase of the site visit.

Additionally, the Team Planning Session provides time for the team to identify and discuss issues that may need further attention. This process serves to provide an opportunity for the team to develop consensus, review the COM’s compliance with requirements and/or standards and to plan for the further review of issues while on site.

**Document Review**

The documentation pad lists the suggested documents that the team should review and individuals the team should interview in order to verify compliance with each standard. When reviewing these documents, team members should find specific elements in place that confirm compliance with the standards. Evidence that adequate procedures are not in place may be noted by the team and can serve as the basis for interview questions.
For comprehensive and provisional accreditation on-site visits, all documents should be reviewed. Examples of documents that should be reviewed are:

1. Annual report and/or self study report
2. Mission and vision statements
3. Bylaws
4. Committee minutes
5. List of faculty
6. Faculty appointment letters
7. Curriculum vitae of senior administration and faculty
8. Evaluations: course, students, faculty, and outcomes from evaluation process
9. Assessments and outcomes of students’ pass rates for courses, standardized exams, COMLEX-USA
10. Student documents: handbook, college catalog
11. Course schedules, objectives, and syllabi
12. Affiliation agreements
13. Charters, licenses, regional accreditation reports/actions
14. Update reports during visit based on team discussions, verification of questions, interviews, and documentation

Documents directly related to the cited standards and outstanding requirements are reviewed at the more focused site visits (e.g., interim progress reviews and focused visitations).

Examples of questions that team members may have during the document review process are:

*Administration/Finance*

1. How does the governing body ensure that the mission statement, goals and objectives are being met?
2. Are all appropriate licenses, charters and approvals provided?
3. Standard 1.3.1 requires that formative and summative reviews be incorporated into the planning process. How are the results reported? How are the results utilized?
4. What type of community services does the COM offer?
5. Describe the responsibilities of senior administrative staff (president, dean, chief financial officer, and assistant/associate deans)
6. What is the conflict of interest policy and how is it implemented?
7. How does the COM assess whether or not it has sufficient facilities to meet its mission?
Student Services

1. How often are the college catalog, student handbook, and other related student policies and procedures updated?
2. Are student grievance and appeal procedures clearly defined, publicized, and utilized when necessary?
3. Does the catalog/handbook describe the methods of evaluation and other required procedures as defined in the standards?
4. What are the policies and procedures regarding student complaints relating to the accreditation standards?
5. How does the COM maintain records of student complaints related to the accreditation standards?
6. How does the COM ensure that students have access to its learning resources?

Preclinical and Clinical Education

1. How does the curriculum meet the COM’s mission and objectives?
2. Does the faculty handbook clearly define faculty rights and responsibilities?
3. How is the curriculum review process implemented?
4. How does the COM determine they have sufficient faculty resources at its main campus and at affiliated clinical training sites?
5. How were the clinical competencies developed? What methodology was developed to measure student compliance?
6. Has the COM developed and implemented an assessment process that reviews student achievements in clinical education programs at the affiliated sites to ensure these programs meet the COM’s mission and objectives?
7. How does the COM track COMLEX-USA scores to determine how well students are accomplishing the COM’s educational goals?
8. How does the COM use its student assessment program to make changes in the curriculum, when needed?
9. Describe how the planning and implementation of instruction at affiliated sites is a cooperative activity between the COM and affiliated site?
10. How does the COM contribute to the advancement of knowledge and development of osteopathic medicine?

The Entrance Interview

The Entrance Interview will occur during the first day of the on-site visit. The Entrance Interview will orient the team to particular areas of concern and the chief academic officer to the methods and procedures of the team. Listed below is an example of how an entrance conference should be conducted:
1. The team chair will lead and facilitate the Entrance Interview at the COM.
2. The team members introduce themselves or are introduced by the team chair.
3. The institution’s president or dean will introduce COM personnel.
4. The team chair will describe the nature of the visit and the areas the team will review.
5. The COM will generally present the following:
   a. The chief academic officer’s perceptions of the strengths, challenges, and areas of concern of the program;
   b. New developments at the COM, such as changes in leadership, new construction, and completion or delays of projects;
   c. Address the team's perceptions of areas which may require exploration and clarification during the on-site visit;
   d. Explanation of the relationship of the COM to the parent institution, when appropriate; and
   e. Other subjects selected by the chief academic officer and the team chair

Team Meetings - Review of the COM’s Progress

Daily Review

The visiting team has several opportunities throughout each day of the site visit to discuss the team findings as they develop throughout the interview process, and to identify areas requiring additional review. This step in the site visit process also provides the team the opportunity to utilize individual team members’ findings in order to develop the consensus required when reporting the entire team’s findings.

Interviews

Current findings on the COM’s compliance with the standards is verified through team member interviews with individuals at the COM who are directly involved in the areas under review. The documentation pad suggests individuals from the COM who may be interviewed for each standard that is reviewed; however, additional individuals may be interviewed, if needed. If team members have time between their interviews, they may begin to write their sections of the site visit report.

Team Discussions - Building Consensus

Team discussion time is scheduled each afternoon to provide the team the opportunity to discuss issues that may need to be addressed as a result of that day’s interviews. Team members may confer with other members and the team chair to share their perspective and gain other team members’ perspectives on an issue and to determine if further review is required.

Once all interviews have concluded, team members discuss their current findings in each of the areas reviewed based on documents reviewed and interviews. Throughout this discussion, the current findings are compared to the requirements and/or standards that are the focus of the site visit. The team’s responsibility at this point in the site visit schedule is to determine the COM’s status of compliance to current standards of review and to determine how the current findings will be presented in the site visit report.
Through discussion, the team’s goal is to develop consensus in determining the COM’s compliance with the standards. Once the team has reached its conclusions, each team member writes the specific section of the report that addresses the current findings in the areas reviewed by that team member. The documentation pad describes the standards to be reviewed by each team member.

**Team Dinner (optional)**

The team dinner provides an opportunity for team members to interact in a social setting and build cohesion among members. Team dinners are private and are conducted at the discretion of the team chair and the other members of the team. Because team dinners will usually be held in a public setting, the team should refrain from discussing its findings. Time for team discussion at the COM campus is provided in the schedule.

**Writing the Report**

*Guidelines for Writing the Report*

- Use a polite, professional, and positive tone
- Write in a direct/straightforward style
- Write in complete sentences
- Use present tense and an active voice whenever possible
- Use consistent language
- Be logical and concise
- Avoid acronyms and jargon, except when previously defined
- Consider the purpose of the report and the needs of the audience (the COCA)
- Do not base statements on subjective feelings, but on objective observations and sound rationale
- Avoid citing personal opinions without documentation
- Support statements with evidence
- Statements should be consistent with findings
- Avoid going beyond the scope of the standard

*From Individual to Team Report*

Each team member is expected to keep a set of notes on interviews and documents reviewed during the on-site visit. This information may be recorded on the documentation pad and is the basis for writing each section of the site visit report. Each team member should write on all of the standards listed on his or her documentation pad as well as the introduction. The introduction should summarize the overall findings of that domain, including any requirements, commendations, or recommendations. The current findings section should detail the evaluator’s analysis, observations, and rationale for finding the respective standard “met” or “not met.” Through discussion by the entire team and additional interviews, if necessary, a consensus on the entire team’s findings is determined.

Before writing the report, all team members should have a clear understanding of the COM’s status of compliance with the standards that have been reviewed as well as the requirements, commendations, and recommendations that will be written as a result of current findings, which are based on interviews conducted, documentation reviewed, and in consultation with other
members of the evaluating team. The consensus of the team is very important at this point in the process. Although team members prepare individual sections of the site visit report, the findings of the report represent the findings of the team as a whole. By the time the report is written, the team should have resolved all conflicting perspectives between team members in order to present a unified report. It is the responsibility of the team chair to manage this process.

At the conclusion of the report-writing segment of the schedule, all team members will convene to review each section of the report together. The team chair conducts this activity. It is important at this point in the process that the team has the opportunity to hear the draft report in its entirety to ensure that the focus of the report is appropriate for the visit conducted; that all necessary accreditation standards have been reviewed, and the report is clear in its purpose in reporting factual information and the status of the COM’s compliance with the standards. The documentation pad was developed to assist the team in documenting their report findings.

**Presenting the Site Visit Report to the COM**

*Executive Session*

The draft report is ready to be presented when the team, under the leadership of the team chair, comes to a consensus on the current findings. The team chair and team secretary meets with the COM senior administrators to present an oral report of any requirements, commendations, and/or recommendations cited on the visit. During the Executive Session, the team chair will address comments from the COM senior administrators and indicate that an overview of the draft report will be presented during the Exit Conference. At the discretion of the team chair and COM president or dean, the Executive Session and Exit Conference may be combined.

*Exit Conference*

The Exit Conference is the final meeting of the on-site visit. This meeting provides an opportunity for the team to present an overview of the draft report and the team’s findings to the COM’s senior administrators and invited guests.

The team chair will lead the Exit Conference and will introduce the members of the visiting team and state the order in which they will present their summary of the current findings. The team chair or the team secretary will explain the process of preparing the draft site visit report and submitting it in written form to the COM and the COCA for review.

During the Exit Conference, the team does not address questions or comments from the COM regarding the draft site visit report. Questions or comments about the draft report should be submitted to COCA staff as part of the COM’s formal written response to the draft report.

**POST ON-SITE VISIT PROCESS**

**Evaluating the Process**

Following the on-site visit, several forms of evaluation are completed. The COM is asked to comment on the conduct of the team and the process of the visit. Each member of the team is required to complete an evaluation form regarding the on-site visit process and conduct of the visit.
Team Report Format Guidelines

The team secretary has the task of collecting the findings of each team member at the conclusion of the on-site visit and creating a formal, written site visit report. All comprehensive survey site visit reports will consist of the components as described below. Reports of interim progress reviews and focused visitations will contain only those components as appropriate. These guidelines are taken from the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*, Chapter IV: On-Site Visit Procedures.

1. **Site Visit Cover:** The cover page will denote the type of on-site visit, the COM being evaluated, the date of the on-site visit, and includes the following statement: This report has been reviewed by all members of the on-site visit team, and by the (name of COM).

2. **Summary of Due Dates for Continuing and New Requirements:** The summary page is designed to provide an overview of the standard sections that the on-site visit team found to be out of compliance and need further review. Each requirement must be submitted to the COCA in the form of a progress report by the due date cited.

3. **Purpose of the On-Site Visit:** The purpose of the on-site visit includes a brief paragraph of the reason for the on-site visit; the name and location of the COM; and the date of the on-site visit. This narrative will also include whether any previous requirements were reviewed. This section is written by the team secretary.

4. **History of Accreditation:** This section will be prepared by COCA staff. It will contain, among other information, a chronological history of the COM’s accreditation activities and resulting COCA actions; a brief description of the geographical location of the institution; its public or private status; its relationship with the parent institution, if appropriate; and regional accreditation status, if applicable.

5. **Review of Compliance with the Standards:** Each standard section begins with an Introduction. Each assigned team member will provide a brief, but concise overview of the COM’s standards compliance related to the standards in that particular section. A student achievement summary will also be included in Appendix C for comprehensive visits and in the current findings on Standard 6.8.

   In addition, each evaluator will write a comprehensive current finding on all standards in their assigned domain that are the subject of the site visit review. All requirements must specify the standard or procedure that is being cited and refer to accreditation standards as described in Chapter I of the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*.

   The visiting team may include recommendations in the team report as a mechanism to provide consultative advice to a COM. Because recommendations are consultative in nature, no further response will be required from the COM. Recommendations from previous site visit reports are reviewed by the COCA and subsequent visiting teams for informational purposes only. All recommendations...
must specify the standard or procedure that is being cited and refer to accreditation standards as described in Chapter I of the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*.

The visiting team may also write commendations. All commendations must specify the standard that is being exceeded and provide the rationale for the finding. Commendations can only refer to standards of accreditation as described in Chapter I of the *Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards and Procedures*.

6. **Student Achievement Data Sheet:** This must include, among other information relevant to: COMLEX-USA Levels 1 and 2 passage rates (if not included in the body of the site visit report); graduation rates; licensure; board passage, when available. This data will be prepared by COCA staff in conjunction with the COM. This information will be used in the on-site visit process to assess student achievement.

7. **Summary of Requirements:** This summary will contain all new requirements written by the visiting team in the order cited.

8. **Summary of Recommendations:** This summary will contain all recommendations made by the team in the order cited.

9. **Summary of Commendations:** This summary will contain all commendations made by the team in the order cited.

10. **On-Site Visit Team Roster:** The on-site visit team roster lists (on a separate page) each team members’ name, title, COM affiliation, area of expertise and team assignment.

11. **Individuals Interviewed and Documents Reviewed:** This section includes a list of individuals interviewed and materials reviewed by the team as Appendix A. Any clinical sites visited or teleconferences conducted by the team will also be included.

12. **Background Information:** This information includes historical accreditation information, on-site visits, class size, and number of faculty. This will be prepared by COCA staff and verified by the COM at, or prior to, the time of the on-site visit, and included as Appendix B.

**Post On-Site Visit Review**

The team report proceeds through several steps of review and approval before it is approved in its final form by the COCA.

Once the AOA Predoctoral Education staff compiles the full draft report, it is submitted to the team chair and members of the team for review. Following the team review of the draft report, it is then sent to the COM for review of the accuracy of the factual information contained in the report. The COM is given 30 days to comment on the draft report. Following receipt of the COM’s comments, the draft report is forwarded to the next regularly scheduled COCA meeting.
Review by the COCA and the Role of the Team Chair

The draft report and the COM’s comments are forwarded to the COCA for review and action at its next regularly scheduled meeting. It is the responsibility of the team chair to present the report to the COCA and to answer any questions the COCA may have in order to clarify the information presented in the report. In the event that the team chair is unavailable to present the report to the COCA, another team member may be asked to do so. Representatives from the COM are also asked to present at the meeting to comment on the on-site visit and the findings of the team, although such a presentation is not required.

Following deliberation by the COCA on the content of the draft report and the team chair’s and COM’s comments, the COCA will vote on the draft visiting team report and will determine the accreditation status at that time. The COM is notified in writing of the COCA’s decision following its review.

TRAVEL ARRANGEMENTS AND REIMBURSEMENT

Travel Planning

All team members are responsible for making their own travel arrangements to the on-site visit location. The AOA requests that team members use the new AOA travel agency, Egencia to make all flight reservations. To make online travel arrangements through Egencia, visit www.Egencia.com. Once there, team members will be asked to log in. The user name is the first letter of the team member’s first name combined with their full last name (i.e., jsmith). The default password is osteopathic and it should be changed after the initial log in. When making reservations, team members will be prompted for the Reason for Travel; enter the appropriate COM abbreviation followed by the words “site visit”. Select the Cost Center in the pull-down menu: 1113101030200-ACC COCA Inspections. At the option Purchase Flight with Credit Card, select UTAP Corporate UTAP. Egencia may also be contacted at 800-678-0486. Any travel arrangements made on Egencia, other than flights, will be charged to the team member’s personal credit card. Egencia will not allow team members to split personal and COCA itineraries via the Web site.

Team members should book their reservations at least 30 days in advance of the site visit. Evaluators may, consult their own travel agency for further information. Once the evaluator completes his/her reservation, a copy of it should be forwarded to staff for their reference and for the site visit agenda.

When making travel arrangements, it is important to note that for comprehensive and provisional on-site visits, the team generally arrives at the location of the COM on the afternoon or evening before day one of the site visit, unless otherwise noted in the confirmation letter. Team travel arrangements for interim progress reviews and focused visitations may be different; team members should read their confirmation letter carefully before making their travel arrangements.

Team members should allow adequate time upon arrival on-site in order to check into the hotel and travel to the COM campus. The last team meeting, the Exit Conference, usually concludes by 10:00 - 10:30 AM on the final day of the visit. Departures from the COM campus at the end of the visit should allow adequate time to travel from the COM to the airport. The team secretary manages this process.
Transportation Arrangements

Once the team is on-site, the team secretary is responsible for providing transportation and/or scheduling accommodations for the team when traveling to and from the airport, the COM campus, and the hotel. The team secretary may have a rental vehicle available to accommodate the team’s transportation needs while on-site or the COM may provide transportation. In the event of a large team, additional transportation may be necessary and a team member may be requested to rent a car.

Hotel Accommodations

The Predoctoral Education staff in coordination with the COM arranges accommodations. To the degree possible, hotel costs, excluding incidentals, will be direct billed to the COM. Team members will receive information on the hotel accommodations via e-mail.

Meal Arrangements

Depending on whether or not the host hotel provides breakfast, the COM may provide breakfast and lunch for the team in a private setting during the on-site visit. The COM will provide lunch for those team members who are on-site. Team members should inform the team secretary of any special dietary requirements. The team secretary will make dinner arrangements for the team, if necessary.

Reimbursement Policies

AOA reimbursement policies provide for reimbursement for each day of the on-site visit and any travel days to and from the on-site visit. A per diem allowance is provided to each team member to cover the costs of accommodations and meals. An honorarium is also provided for each team member for each day of the on-site visit. Airline tickets may be charged directly through the AOA travel agency, Egencia. Other reimbursable expenses include costs for ground transportation, parking, tolls, etc. AOA reimbursement policies prohibit reimbursement of expenses over $25.00 without a receipt. An expense voucher will be included in the Agenda material.

Evaluators should submit their expense voucher, along with any relevant receipts, to the Division of Predoctoral Education within 30 days of the on-site visit.