### Commission on Dental Accreditation

**Self-Study Guide for the Evaluation of a Dental**

**Assisting Education Program**

**Self-Study Guide for**

**The Evaluation of a**

**Dental Assisting Education Program**

**Commission on Dental Accreditation**

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**Chicago, Illinois 60611**

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Commission on Dental Accreditation

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**Self-Study Guide for the Evaluation of a**

**Dental Assisting Education Program**

**Document Revision History**

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| --- | --- | --- |
| **Date**  August 2, 2019 | **Item**  Accreditation Standards for Dental Assisting Education Programs | **Action**  Adopted |
| January 30, 2020 | Definition of Terms (Should and Dental Emergencies) and Standards 2-11 and 3-7 | Adopted |
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August 11, 2023 Revision to Standard 2-7 (Instruction) and Adopted and

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Implemented

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# INTRODUCTION TO THE SELF-STUDY GUIDE

The self-study is the principal component of the process by which the Commission on Dental Accreditation carries out its program of accrediting dental and dental-related education programs. It is suggested that the institution initiate the self-study process approximately 12 months prior to completion of the Self-Study Report. The primary focus of the self-study process should be to assess the effectiveness of the educational program in meeting (1) the program’s stated goals and objectives and (2) the Commission’s Accreditation Standards. The United States Department of Education (USDE) requires the use of an institutional or programmatic self-study as a part of the accreditation process.

The Self-Study Report should be a concise, yet thorough, summary of the findings of the self-study process. The Commission hopes that the self-study will be a catalyst for program improvement that continues long after the accreditation process has been completed. In its opinion, this is a more likely outcome if there is thorough planning, as well as involvement of students/residents and administrators in the self-study process. Most programs will concentrate upon questions germane to the Commission’s Accreditation Standards. Nevertheless, the benefits of self-study are directly related to the extent to which programs evaluate their efforts, not simply in light of minimal standards for accreditation, but also in reference to the program’s stated goals and objectives as well as standards for educational excellence. Assessment of the effectiveness of the institution’s procedures should be reviewed as the means to achieve the intended outcomes. That is to say that the procedures are not ends in themselves, but are means for reaching the chosen goals. Conclusions of the self-study may include qualitative evaluation of any aspect of the program whether it is covered in the Self-Study Guide or not. Programs must respond to all questions included in the Self-Study Guide. The responses should be succinct, but must in every case provide or cite evidence demonstrating achievement of objectives in compliance with each of the Accreditation Standards.

**The self-study process:** The following outline[[1]](#footnote-2) summarizes the philosophy, purposes and expected benefits of the self-study process. For the educational program, the self-study provides an opportunity to:

1. Clarify its objectives as they relate to the:
   1. Preparation of dental assistants;
   2. Expectations of the profession and the public in relation to education of dental assistants; and
   3. general educational objectives of the institution.
2. Assess its own strengths and weaknesses in light of its own stated objectives and the Accreditation Standards of the Commission.
3. Relate its own activities to cognate areas and to assess the degree to which the resources are effectively utilized.
4. Internalize the process and engage in the kind of self-analysis essential to effective planning and change.
5. Provide the basis for a more informed and helpful site visit related to the real issues including the strengths and weaknesses of the program.
6. Improve internal communication and mutual reinforcement in achieving programmatic objectives.
7. Consider, place in perspective and deal with external environmental factors influencing educational directions.
8. Translate the insights gained into recommendations for program improvement.

For the Commission and visiting committee, the self-study process should:

1. Ensure that the program has seriously and analytically reviewed its objectives, strengths and weaknesses, and its success in meeting its goals and objectives.
2. Provide the visiting committee the basic information about the program and the program’s best judgment of its own adequacy and performance, thus providing a frame of reference to make the visit effective and helpful to the program and the Commission.
3. Ensure that the accrediting process is perceived not simply as an external review but as an essential component of program improvement.
4. Ensure that the Commission, in reaching its accreditation decisions, can benefit from the insights of both the program and the visiting committee.

The Self-Study process and report are **not** the following:

A self-study is not just a compilation of quantitative data. While quantitative data may be a prerequisite for developing an effective self-study, these data in and of themselves are not evaluative and must not be confused with a self-study.

A self-study is not or should not be answers to a questionnaire or on a check-off sheet. While a questionnaire may be probing, it is essentially an external form and does not relieve the responder of the critical review essential to self-study. A check-off list based on the Commission’s Accreditation Standards can be helpful in developing the self-study but does not reveal the conditions or rationale leading to the answers -- again both the organizing activity and the critical analysis are missing.

A self-study is not or should not be a simple narrative description of the program. While some description is necessary to help the visiting committee better understand the program, the self-study is expected to go considerably beyond a description to an analysis of strengths and weaknesses in light of the program’s objectives and the Commission’s Standards. It must further develop a plan for achieving those objectives that have not been fully realized. It should be emphasized that, while the self-study is essential to the accrediting process, the major value of an effective self-study should be to the program itself. The report is a document, which summarizes the methods and findings of the self-study process. Thus, a self-study report written exclusively by a consultant or an assigned administrator or faculty member, as opposed to being developed by the entire faculty, is not a self-study.

**ORGANIZING THE SELF-STUDY**

This Self-Study Guide is a suggested approach to completing a self-study and subsequent report. The self-study should be comprehensive and should involve appropriate faculty and staff throughout the institution. When feasible, it is suggested that a committee, with appropriate faculty representation, be selected to assist the program director with the self-study process. This committee should be responsible for developing and implementing the process of self-study and coordinating the sections into a coherent self-study report. It may be desirable to establish early in the process some format or pattern to be used in preparing the sections in the report in order to provide consistency.

The committee should have assistance with preparing and editing the final self-study report. Appropriate faculty and other institutional representatives (e.g., learning resources staff, financial/budget officers, counselors, admissions officers, instructional design staff) should be involved in the process to ensure that the Self-Study Report reflects the input of all individuals who have responsibility for the program.

Suggested Timetable for Self-Study:

Months Prior to Visit

12 Appoint committee and resource persons; Assign sections of self-study to appropriate faculty-resource persons; Develop action plan and report format

10 Sections of report are analyzed and developed by assigned individuals

7 Faculty and program director review tentative reports

6 Committee prepares rough draft of self-study document

5 Draft document is reviewed institution-wide

4 Self-study document finalized and duplicated

3 Solicit comments in accordance with the “Policy on Third Party Comments” found in the Commission’s Evaluation and Operational Policies and Procedures manual.

2 Final self-study document uploaded to the Commission’s Electronic Submissions Portal 60 days prior to date of the scheduled visit.

Staff Assistance/Consultation: The staff of the Commission on Dental Accreditation is available for consultation to all educational programs which fall within the Commission’s accreditation purview. Educational institutions conducting programs oriented to dentistry are encouraged to obtain such staff counsel and guidance by written or telephone request. Consultation is provided on request prior to, as well as subsequent to, the Commission’s granting of accreditation to specific programs. Consultation shall be limited to providing information on CODA’s policies and procedures. The Commission expects to be reimbursed if substantial costs are incurred.

Policies and Procedures for Site Visits: These policies and procedures are included at the end of this Self-Study Guide.

Self-Study Format: As noted in the instructions with this Self-Study Guide, this is a suggested approach to completing a self-study report. All institutions should be aware that the Commission respects their right to organize their data differently and will allow programs to develop their own format for the Self-Study Guide. However, if the program’s proposed format differs from that suggested in this Self-Study Guide, the program should contact Commission staff for review prior to initiating the self-study process. This procedure will provide assurance to the program that its proposed format will include the elements considered essential by the Commission and its visiting committees.

**INSTRUCTIONS FOR COMPLETING THE SELF-STUDY**

Background: The Self-Study for allied dental education programs was designed to mirror the “Site Visitor Evaluation Report Form” and provide a listing of documentary evidence that supports the program’s answers to each question. All questions are based on a specific “must statement” of the Accreditation Standards. The number of the standard upon which the question is based is noted in parenthesis after each question.

Before answering each question, the program should read the corresponding standard in order to determine the *intent* of the standard. Then, after answering the question, the program is required to identify the “*documentary evidence*” on which it supports its answer. In this manner, the self-study process becomes evidence-based in demonstrating compliance with each accreditation standard. Intent statements are presented to provide clarification to the program in the application of and in connection with compliance with the Accreditation Standards. The statements of intent set forth some of the reasons and purposes for the particular Standards. As such, these statements are not exclusive or exhaustive. Other purposes may apply.

Additionally, the program is required to attach appendix information. This appendix information is identified after the questions. Exhibits containing charts are provided to assist the program in presenting important program information data. It should be noted that “documentary evidence” may include required appendix information where appropriate. The exhibits included are intended as samples, and some may not be applicable to the program.

With this self-study process, the interviews and on-site observations during the site visit take on a more important role in that this is the place within the process that the program provides additional *description* of its compliance with accreditation standards, that is not evident from the answers to the Self-Study questions and required appendix information. A final summary containing assessment of selected issues that are related to the institution, patient care, and the program completes the self-study process.

Instructions: The following general instructions apply to the development of the allied dental education program’s self-study report:

1. It is expected that information collected during the self-study will be presented in the order that the sections and questions occur in the Guide. The sections of the report should culminate in a qualitative analysis of the program’s strengths and weaknesses. Keep in mind that the program’s written responses must provide the Commission and its visiting committee with enough information to understand the operation of the program.
2. The suggested format for preparing the report is to state the question and then provide the narrative response. **The section preceding the questions, including the “must” statement and intent statement, if applicable, must be included in the narrative response.**
3. All questions posed in the Guide should be addressed. In the event that a program has chosen to meet a particular standard in a manner other than that suggested by the questions, please so indicate and explain how the program complies with the Standards. There is no need to repeat at length information that can be found elsewhere in the documentation. Simply refer the reader to that section of the report or appended documentation, which contains the pertinent information.
4. The completed self-study document should include appropriately indexed and tabbed sections; pages should be numbered. (The page numbers in the completed document are not expected to correspond to the page numbers in this Guide).
5. The completed document should include:
6. Title Page: The title page must include the name of the program and sponsoring institution; street address, city and state, telephone number and area code; and date of accreditation visit.
7. Administrator Verification Page: The Commission requires that the institution’s chief executive officer, chief administrator of the academic unit that sponsors the program (dean), program director and other appropriate administrators of the institution verify that the contents of the completed self-study document are factually correct. The verification page must include the names, titles, and signatures of individuals who have reviewed the self-study report. Self-studies without the proper signatures will be returned to the program.

c. General Information/Summary of Factual Information Page.

d. Table of Contents: The table of contents must include the verification page, general information/summary of factual information page, previous site visit recommendations, compliance with Commissions policies, sections on each of the Standards, summary of the Self-Study Report, and any exhibits and/or appendices; page numbers for each section should be identified.

e. Self-Study Report: The Commission encourages programs to develop a self-study report that reflects a balance between outcomes and process and that is appropriately brief and cost-effective. The supportive documentation substantiating the narrative should not exceed what is required to demonstrate compliance with the Standards. Take note where documentation is designated to be available on-site rather than attached to the report. Appendices and exhibits should be numbered sequentially. The appendix and exhibit numbers in the completed document are not expected to correspond with the example exhibits provided in the Self-Study Guide.

f. Summary: At the completion of the report, a qualitative assessment is required. Actions planned to correct any identified weaknesses should be described. It is suggested that the summary be completed by the program director with assistance from other faculty and appropriate administrators.

6. **Keeping costs in mind, the Commission requests one (1) comprehensive electronic copy of the completed Self-Study Guide to the Commission through the Commission’s Electronic Submission Portal. Please contact the Commission office to obtain access to the portal prior to submission. Please be advised that the Commission requires that all accreditation correspondence/documents/reports and related materials submitted to the Commission for a program’s permanent file be done so electronically. The Electronic Submission Guidelines will assist you in preparing your report and are found at** [**https://coda.ada.org/en/policies-and-guidelines/electronic-submission-guidelines**](https://coda.ada.org/en/policies-and-guidelines/electronic-submission-guidelines)**.**

**Web-based Information:** The Commission must retain a snapshot of the information presented at the time of the submission of the report. For this reason, the electronic report must not link to information on the Internet. To ensure that the Commission retains the correct information, please insert or “embed” all web-based information into the report.

1. ***Institutions/Programs are expected to follow Commission policy and procedure on privacy and data security related to compliance with the Health Insurance Portability and Accountability Act (HIPAA).*** *The Commission’s statement on HIPAA, as well as the Privacy and Data Security Summary for Institutions/Programs (PDF), are found in the Policies/Guidelines section of the Commission’s website at* <https://coda.ada.org/policies-and-guidelines/hipaa-compliance>. *Programs that fail to comply with CODA’s policy will be assessed an administrative fee of $4000.*
2. Programs/Institutions must meet established deadlines to allow scheduling of regular or special site visits and for submission of requested information.  Program information (i.e., self-studies, progress reports, annual surveys or other kinds of accreditation-related information requested by the Commission) is considered an integral part of the accreditation process.  If an institution fails to comply with the Commission's request, or a prescribed deadline, it will be assumed that the institution no longer wishes to participate in the accreditation program.  In this event, the Commission will immediately notify the chief executive officer of the institution of its intent to withdraw the accreditation of the program(s) at its next scheduled meeting.

**POLICIES AND PROCEDURES RELATED TO THE EVALUATION OF ALLIED DENTAL EDUCATION PROGRAMS**

**Program to be Reviewed:** A program which has not enrolled and graduated at least one class of students/residents and does not have students/residents enrolled in each year of the program is defined by the Commission as not fully operational. The developing program must not enroll students/residents until initial accreditation status has been obtained. Once a program is granted “initial accreditation” status, a site visit will be conducted in the second year of programs that are four or more years in duration and again prior to the first class of students/residents graduating.

Those programs that have graduated at least one class of students/residents and are enrolling students/residents in every year of the program are considered fully operational. These programs will complete the self-study document and will be considered for the accreditation status of “approval with reporting requirements” or “approval without reporting requirements” following a comprehensive site visit. The Commission on Dental Accreditation formally evaluates accredited programs at regular intervals.

The Commission has established a seven-year site visit cycle for accreditation review for all disciplines except oral and maxillofacial surgery, which has a five-year cycle. Every effort is made to review all existing dental and dental-related programs in an institution at the same time. However, adherence to this policy of institutional review may be influenced by a number of factors, e.g., graduation date established for new programs, recommendations in previous Commission reports, and/or current accreditation status.

The purpose of the site evaluation is to obtain in-depth information concerning all administrative and educational aspects of the program. The site visit verifies and supplements the information contained in the comprehensive self-study document completed by the institution prior to the site evaluation. The factual material is used by the visiting committee as a basic reference source.

The Commission requests **one (1) comprehensive electronic copy** of the completed Self-Study Guide to the Commission and to each member of the site visit team through the Commission’s Electronic Submission Portal. Please contact the Commission office to obtain access to the portal prior to submission. Please be advised that the Commission requires that all accreditation correspondence/documents/reports and related materials submitted to the Commission for a program’s permanent file be done so electronically. The Electronic Submission Guidelines will assist you in preparing your report. Electronic reports that fail to adhere to the stated guidelines may be returned to the program for re-formatting and may not be reviewed at the assigned time.

When a State Board Representative or Observer will attend the site visit, the program will provide an electronic copy of the self-study to the individual(s) directly; instructions to do so will be provided by the Commission office.

**Program Changes:** Changes have a direct and significant impact on the program’s potential ability to comply with the accreditation standards. These changes tend to occur in the areas of finances, program administration, enrollment, curriculum and clinical/laboratory facilities, but may also occur in other areas. All program changes that could affect the ability of the program to comply with the Accreditation Standards must be reported to the Commission. Failure to report and receive approval in advance of implementing the change, using the Guidelines for Reporting Program Change, may result in review by the Commission, a special site visit, and may jeopardize the program’s accreditation status. For additional information, please review the entire policy on Program Changes in the Commission’s “Evaluation and Operational Policies and Procedures”(EOPP) manual. The EOPP is available online at <https://coda.ada.org/policies-and-guidelines>.

**Third Party Comment Policy:** The program scheduled for review must solicit third-party comments through appropriate notification of communities of interest and the public such as faculty, students, program administrators, dental-related organizations, patients, and consumers at least ninety (90) days prior to the site visit. The notice should indicate the deadline of sixty (60) days for receipt of third-party comments in the Commission office and should stipulate that signed or unsigned comments will be accepted, that names and/or signatures will be removed from comments prior to forwarding them to the program, and that comments must pertain only to the standards for the particular program or policies and procedures used in the Commission’s accreditation process. For additional information, please review the entire policy on Third Party Comments in the Commission’s “Evaluation and Operational Policies and Procedures”(EOPP) manual.

**Complaints Policy:** The program is responsible for developing and implementing a procedure demonstrating that students/residents are notified, at least annually, of the opportunity and the procedures to file complaints with the Commission. The accredited program must retain in its files information to document compliance with this policy so that it is available for review during the Commission's on-site reviews of the program. Students, faculty, constituent dental societies, state boards of dentistry, and other interested parties may submit an appropriate, signed complaint to the Commission on Dental Accreditation (CODA) regarding any CODA-accredited dental, allied dental or advanced dental education program, or a program which has an application for initial accreditation pending.

Additionally, the program must maintain a record of student/resident complaints received since the Commission’s last comprehensive review of the program. At the time of a program’s regularly scheduled on-site evaluation, visiting committees evaluate the program’s compliance with the Commission’s policy on the Required Record of Complaints. The team reviews the areas identified in the program’s record of complaints during the site visit and includes findings in the draft site visit report and note at the final conference. Please review the entire policy on Complaints in the Commission’s EOPP.

**Distance Education Policy:** Distance education uses one or more technologies to deliver instruction to students/residents/fellows who are separated from the instructor and to support regular and substantive interaction between the students/residents/fellows and the instructor, either synchronously or asynchronously.

Programs that offer distance education must ensure regular and substantive interaction between a student/resident/fellow and an instructor or instructors prior to the student’s/resident’s/fellow’s completion of a course or competency. For purposes of this definition, substantive interaction is engaging students/residents/fellows in teaching, learning, and assessment, consistent with the content under discussion, and also includes at least two of the following: providing direct instruction; assessing or providing feedback on a student’s/resident’s/fellow’s coursework; providing information or responding to questions about the content of a course or competency; facilitating a group discussion regarding the content of a course or competency; or other instructional activities approved by the institution’s or program’s accrediting agency.

Programs that offer distance education must also have processes in place through which the program establishes that the student/resident/fellow who registers in a distance education course or program is the same student/resident/fellow who participates in and completes the course or program and receives the academic credit.  Programs must verify the identity of a student/resident/fellow who participates in class or coursework by using, at the option of the program, methods such as a secure login and pass code; proctored examinations; and/or new or other technologies and practices that are effective in verifying student/resident/fellow identity. The program must make clear in writing that processes are used that protect student/resident/fellow privacy and programs must notify students/residents/fellows of any projected additional student/resident/fellow charges associated with the verification of student/resident/fellow identity at the time of registration or enrollment. Please read the entire policy on “Distance Education” in the Commission’s EOPP.

**Materials Sent from the Commission office:** The following information on all programs being visited is provided to the program and to each member of the visiting committee from the Commission on Dental Accreditation office. The information is provided electronically approximately 60 days prior to the scheduled site visit:

* Five year data profile and standard reports generated from the *Survey of Allied Dental Educational Programs*
* The previous accreditation site visit report

**Site Visitor Requests for Additional Information:** Visiting committee members are expected to carefully review the completed self-study reports and note any questions or concerns they may have about the information provided. These questions are forwarded to Commission staff, or the designated chair of the visiting committee, compiled and submitted to the program director prior to the visit. The requested information is provided to the team members either prior to the visit or upon their arrival to the program. The response serves as an addendum to the self-study report.

**Site Visit Procedures and Committee Composition:** The accreditation program of the Commission on Dental Accreditation is accomplished through mechanisms of annual surveys, site visits and Commission reviews. Site visitors are appointed by the Commission Chair and approved by the institution’s administration, i.e. dental school dean or program director. The visiting committee conducts the site visit and prepares the report of the site visit findings for Commission action. The size and composition of a visiting committee varies with the number and kinds of educational programs offered by the institution. All visiting committees will include at least one person who is not a member of a Review Committee of the Commission or a Commission staff member.

At the request of the program, the Commission will invite a representative from the dental licensing board of the state in which the program is located to participate with the committee as the State Board representative. State Board representatives participate fully in site visit committee activities as non-voting members of the committee. State Board representatives are required to sign the Commission’s “Agreement of Confidentiality.” This representation is only at the request of the institution/program being evaluated and is not required by the Commission.

**After the Site Visit:** The written site visit report embodies a review of the quality of the program. It serves as the basis for accreditation decisions. It also guides officials and administrators of educational institutions in determining the degree of the compliance with the Accreditation Standards and established policies. The report clearly delineates any observed deficiencies in compliance with Standards on which the Commission will take action.

The Commission is sensitive to the problems confronting institutions of higher learning. In the report, the Commission evaluates educational programs based on accreditation standards and provides constructive recommendations which relate to the Accreditation Standards and suggestions which relate to program enhancement.

The preliminary draft site visit report generated from the site visit is the basis for action on the accreditation status of the proposed program. A preliminary draft site visit report is prepared by the site visitors, consolidated by Commission staff into a single document and approved by the visiting committee. The approved draft report is then transmitted to the institutional administrators for factual review and comment prior to its review by the Commission. The institution has a maximum of 30 days in which to respond with regard to factual inaccuracies, comments on differences in perception and report of corrective actions taken in response to recommendations cited. Additionally, consistent with Commission policy, the institution is provided a minimum of 30 days to respond to the preliminary draft of the site visit report with regard to any noted recommendations. The Commission reviews both the preliminary report and the institution’s response as it considers its action on the initial accreditation status of the developing program. The action of the Commission is transmitted to the institution, along with the formal site visit report, to the institution within thirty (30) days of its meeting.

The site visit report reflects the program as it exists at the time of the site visit. Any improvements or changes made subsequent to a site visit may be described and documented in the program’s response to the preliminary draft report, which becomes part of the Commission’s formal record of the program’s evaluation. Such improvements or changes represent progress made by the institution and are considered by the Commission in determining an accreditation status, although the site visit report is not revised to reflect these changes. Following granting of an accreditation status, the final site visit report is prepared and transmitted to the institution. The Commission expects the chief administrators of educational institutions to make the Commission site visit reports available to program directors, faculty members and others directly concerned with program quality so that they may work toward meeting the recommendations contained in the report.

Commission members and visiting committee members are not authorized, under any circumstances, to disclose any information obtained during site visits or Commission meetings. Oral comments made by site visit team members during the course of the site visit are not to be construed as official site visit findings unless documented within the site visit report and may not be publicized.  Further, publication of site visit team members’ names and/or contact information is prohibited. The preliminary draft of a site visit report is an unofficial document and remains confidential between the Commission and the institution’s executive officers and may not, under any circumstances, be released. Site visit reports approved during a Commission meeting are transmitted to officials of parent institutions and program administrators or directors.

Public release of the final draft of the site visit report that is approved by the Commission is at the sole discretion of the institution. If there is a point of contention about a specific section of the final site visit report and the institution elects to release the pertinent section to the public, the Commission reserves the right to make the entire site visit report public.

**Commission Review of Site Visit Reports:** The Commission and its review committees meet twice each year to consider site visit reports, progress reports, and policies related to accreditation. These meetings are usually in the Winter (January/February) and Summer (July/August). Reports from site visits conducted less than ninety (90) days prior to a Commission meeting are usually deferred and considered at the next Commission meeting.

**Notification of Accreditation Action:** An institution will receive the formal site visit report, including the accreditation status, within thirty (30) days following the official meeting of the Commission. The Commission’s definitions of accreditation classifications are published in its Accreditation Standards documents.

**Additional Information:** Additional information regarding the procedures followed during the site visit is contained in the Commission’s publication, Evaluation and Operational Policies and Procedures. The Commission uses the Accreditation Standards as the basis for its evaluation of allied dental education programs; therefore, it is essential that institutions be thoroughly familiar with this document.

###### Administrator Verification

###### Self-Study Guide for the Evaluation of a

###### Dental Assisting Education Program

**I have reviewed this document and verify that the information in it is accurate and complete, and that it complies with the *Commission on Dental Accreditation’s Privacy and Data Security Requirements for Institutions* found at** [**https://coda.ada.org/policies-and-guidelines/hipaa-compliance**](https://coda.ada.org/policies-and-guidelines/hipaa-compliance) **(the “Requirements”) and that this document contains no prohibited Sensitive Personally Identifiable Information (PII) or Protected Health Information (PHI) as defined in the Requirements.**

|  |
| --- |
| SPONSORING INSTITUTION |
| Name:  Street Address (do not list P.O. Boxes)  City, State, Zip: |
| Chief Executive Officer (Univ. Pres., Chancellor, Hospital President)  Name:  Title:  Phone:  Email:  Signature:  Date: |
| Chief Administrative Officer (Dean/Chief of Dental Service)  Name:  Title:  Phone:  Fax:  Email:  Signature:  Date: |
| Program director/administrator or Co-Program director/administrator  Name:  Title:  Phone:  Fax:  Email:  Signature:  Date: |

\*If the program is co-sponsored by more than one institution, the appropriate administrators of both institutions must verify the contents of the application. This page may be expanded to include all verifications.

|  |  |
| --- | --- |
| **INSTITUTION:** |  |

**SUMMARY OF FACTUAL INFORMATION**

**ON THE DENTAL ASSISTING PROGRAM**

The purpose of providing the following information is to give the reader of the completed self-study document a brief summary of critical factual information about the dental assisting program.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Admissions | | | | | | |
| a. Number of classes admitted annually: | | | |  | |  |
|  | | | | | | |
| b. enrollment pattern (month and number of students):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
|  | | |  | | | |
| c. Current total enrollment: | | |  | | | |
|  | 1st year students |  |  | |  | |
|  | 2nd year students\* |  |  | |  | |
| (\*To be completed by two-year programs only) | | | | | | |

|  |  |
| --- | --- |
| Facilities | |
| a. Identify program(s) that share dental assisting facilities, e.g., dental hygiene, dental laboratory technology, nursing: | |
|  | |
| b. Number of treatment areas used for preclinical/clinical instruction: |  |
| c. Number of laboratory stations: |  |
| d. Number of radiography units: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Program Faculty Numbers: | | | | | | | | |
| a. Dental assistants- | | | | | | | | |
| Full-time: | | |  | Part-time: |  | | | |
|  | | | |  | | | | |
| b. Dentists- | | | | | | | | |
| Full-time: | |  | | Part-time: | |  | | |
| Supervising: | |  | |  | | | | |
|  | | | |  | | | | |
| c. Dental hygienists- | | | | | | | | |
| Full-time: |  | | | Part-time: | | | |  |
|  | | | |  | | | | |
| d. Non-Program faculty- | | | | | | | | |
| Full-time: |  | | | Part-time: | | |  | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Curriculum | | | | | | | | | | | | |
| a. Name of term (semester, module, quarter): | | | | | | | | | |  | | |
| b. Number of terms: | | | |  | | | | | | | | |
| c. Number of weeks per term: | | | | | |  | | | | | | |
| d. Total number of weeks: | | | | |  | | | | | | | |
| e. Award granted at completion: | | | | | | |  | | | | | |
| f. Total number of credits: | | | | | | | |  | | | | |
| g. Total program hours: | | | | | | | |  | | | | |
|  | lecture: |  | ; laboratory: | | | | | |  | | ; clinic: |  |

|  |
| --- |
| Setting/Curriculum Delivery |
| 1. Site(s) where dental assisting instruction occurs (See definitions within EOPP):   Off-Campus (major and minor activity sites):  On-Site:  Supplemental: |
|  |
| b. Describe any curriculum delivered via distance education technologies and/or non-traditional methods as defined by Commission policy (list fully on-line and hybrid courses): |
|  |

|  |
| --- |
| Financial Support |
| a. Total direct cost budgeted for current fiscal year: |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Sites Where Educational Activity Occurs (Off-Campus Sites For Didactic and Clinical**  **Activity):** List the names and addresses of the established off-campus sites, purposes of the site,  and amount of time each student is assigned to the site.  **The Commission recognizes that dental assisting programs utilize numerous extramural private dental offices to provide students with clinical/laboratory work experience. Please do not list extramural sites in the below chart. Additionally, please do not list sites used for community service and service learning, these are exempt from the policy.**   |  |  |  |  | | --- | --- | --- | --- | | Name and Address | Owned by Institution  (√) | Purpose (state the reason for site usage) | Duration (state the year and number of days a student visits the site) | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | |

**PREVIOUS SITE VISIT RECOMMENDATIONS**

Using the program’s previous site visit report, please demonstrate how all recommendations cited in the report continue to be in compliance.

The suggested format for demonstrating compliance is to state the recommendation and then provide a narrative response and/or reference documentation within the remainder of the self-study document.

Please note that if the last site visit was conducted prior to the implementation of the revised Accreditation Standards for Dental Assisting Education Programs (January 1, 2014), some recommendations may no longer apply. Should further guidance be required, please contact Commission staff.

**COMPLIANCE WITH COMMISSION POLICIES**

**PROGRAM CHANGES**

Depending on the specific program change, reports **must** be submitted to the Commission by **May 1 or November 1** or at least thirty (30) days prior to a regularly scheduled semi-annual Review Committee meeting. The Commission recognizes that unexpected changes may occur. Unexpected changes may be the result of sudden changes in institutional commitment, affiliated agreements between institutions, faculty support, or facility compromise resulting from natural disaster. Failure to proactively plan for change will not be considered unexpected change. Depending upon the timing and nature of the change, appropriate investigative procedures including a site visit may be warranted.

Other types of Program Changes are enrollment increase and the addition of off-campus sites.

For the addition of off-campus sites, the program must adhere to the Policy on Reporting and Approval of Sites Where Educational Activity Occurs.

For the full policy statements on enrollment increase and off-campus sites, see the Commission’s “Evaluation and Operational Policies and Procedures” (EOPP) manual.

1. Identify all changes which have occurred within the program since the program’s previous site visit, in accordance with the Commission’s policy on Reporting Program Changes in Accredited Programs.

**Compliance with Commission Policies (cont.)**

Please provide documentation demonstrating the program’s compliance with the Commission’s policies on Third Party Comments, Complaints and Distance Education

**Third Party Comments:** The program is responsible for soliciting third-party comments from communities of interest such as students and patients that pertain to the standards or policies and procedures used in the Commission’s accreditation process. An announcement for soliciting third-party comments is to be published at least 90 days prior to the site visit. The notice should indicate that third-party comments are due in the Commission’s office no later than 60 days prior to the site visit. Please review the entire policy on Third Party Comments in the Commission’s “Evaluation and Operational Policies and Procedures”(EOPP)manual.

1. Please provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission’s policy on Third Party Comments.

**Complaints:** The program is responsible for developing and implementing a procedure demonstrating that students are notified, at least annually, of the opportunity and the procedures to file complaints with the Commission. Additionally, the program must maintain a record of student complaints received since the Commission’s last comprehensive review of the program. Please review the entire policy on Complaints in the Commission’s “Evaluation and Operational Policies and Procedures” (EOPP) manual.

1. Please provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission’s policy on Complaints.

**Distance Education:** Programs that offer distance education must ensure regular and substantive interaction between a student/resident/fellow and an instructor or instructors prior to the student’s/resident’s/fellow’s completion of a course or competency. For purposes of this definition, substantive interaction is engaging students/residents/fellows in teaching, learning, and assessment, consistent with the content under discussion, and also includes at least two of the following:

* Providing direct instruction;
* Assessing or providing feedback on a student’s/resident’s/fellow’s coursework;
* Providing information or responding to questions about the content of a course or competency;
* Facilitating a group discussion regarding the content of a course or competency; or
* Other instructional activities approved by the institution’s or program’s accrediting agency.

Programs that offer distance education must also have processes in place through which the program establishes that the student/resident/fellow who registers in a distance education course or program is the same student/resident/fellow who participates in and completes the course or program and receives the academic credit. Methods may include, but are not limited to:

* a secure login and pass code;
* proctored examinations; and/or
* new or other technologies and practices that are effective in verifying student/resident/fellow identity.

Please review the entire policy on Distance Education in the Commission’s “Evaluation and Operational Policies and Procedures” (EOPP) manual.

1. If applicable, please provide documentation and/or indicate what evidence will be available during the site visit to demonstrate compliance with the Commission’s policy on Distance Education. If the program does not utilize distance education methods, please state “Not Applicable.”

**PROGRAM EFFECTIVENESS**

**Program Performance with Respect to Student Achievement:**

Provide a detailed analysis explaining how the program uses student achievement measures, such as national assessment scores, results of licensure or certification examinations and/or employment rates to assess the program’s overall performance. In your analysis, provide examples of program changes made based on student achievement data collected and analyzed.

**STANDARD 1 – INSTITUTIONAL EFFECTIVENESS**

**Planning and Assessment**

**1-1 The program must demonstrate its effectiveness through a formal and ongoing planning and outcomes assessment process that is systematically documented and annually evaluated. This process must include the following:**

1. **Dental assisting program goals that include, but are not limited to student outcomes that are consistent with the goals of the sponsoring institution and appropriate to dental assisting education;**
2. **Time-table for implementation that indicates roles and responsibilities of all participants;**
3. **Methods to assess goals and provide outcomes that include, but are not limited to, measures of student achievement;**
4. **Review and analysis of compiled data obtained from assessment methods, and related conclusions;**
5. **Findings and conclusions are used for program improvement, and for revisions to the overall planning and outcomes assessment process.**

**Intent:**

*Outcomes assessment planning is broad-based, systematic, and designed to promote achievement of the program’s stated goals and objectives. Through this process, evaluation and improvement of the educational quality of the program is monitored.*

Narrative Response and Documentation:

1. **List the program’s goals that include, but are not limited to, student learning outcomes.**
2. **Explain how these goals are consistent with the goals of the sponsoring institution and appropriate to dental assisting education.**
3. **How, when and by whom are the program goals reviewed and evaluated?**
4. **On what basis are goal revisions made? Using the sample format illustrated in Example Exhibit 1 develop an assessment schedule, timetable or plan.**
5. **Describe the outcomes measures that are utilized to determine the degree to which these stated goals and objectives are being met.**
6. **Document the assessment methods utilized. If appropriate, include examples of completed surveys. Provide the compiled data summary used. Provide an analysis of the data. Relate the findings and conclusions to the program goals.**
7. **Describe how conclusions are review/used for program improvement.**
8. **Document the results of the assessment process. Include examples, i.e., course completion rates, job placement rates, certification examination results, etc.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 1-1 in the Accreditation Standards for Dental Assisting Education Programs.

**Financial Support**

**1-2 The institution must demonstrate stable financial resources to ensure support of the dental assisting program’s stated mission, goals and objectives on a continuing basis. Resources must be sufficient to ensure adequate and qualified faculty and staff, clinical and laboratory facilities, equipment, supplies, reference materials and teaching aids that reflect technological advances and current professional standards.**

Narrative Response and Documentation:

**1.** **Describe/explain the process utilized to develop the program’s budget. Include the timeframe, individuals involved, and final decision making body/individual(s).**

**2. Using the Example Exhibit 2 format, identify the sources of fiscal support for the dental assisting program and the percentage of the total budget that each source constitutes.**

**3. If financial resources include grant monies, specify the type, amount and termination date of the grant. What is the primary use of these funds? Upon termination of the grant(s), how will these funds be replaced?**

**4. Using the Example Exhibit 3 format, provide information on the program’s budget for the previous, current and ensuing fiscal years.**

**5. Using the Example Exhibit 4 format, provide the actual expenditures for the previous academic year.**

**6. Using the format shown in Example Exhibit 5, provide information on the salary schedules for full- and part-time faculty for the current academic year, include the program administrator.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 1-2 in the Accreditation Standards for Dental Assisting Education Programs.

**1-3 The sponsoring institution must ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.**

The sponsoring institution **must** ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.

Narrative Response:

1. **Describe structure of relationship between any entity outside the sponsoring institution (see definition of ‘institution’ in Dental Assisting Standards) and the sponsoring institution itself. How are decisions made within the sponsoring institution?**

**1-4 The authority and final responsibility for curriculum development and approval, student selection, faculty selection and administrative matters must rest within the sponsoring institution.**

Documentation:

Please refer to “Examples of evidence to demonstrate compliance” following Standard 1-4 in the Accreditation Standards for Dental Assisting Education Programs.

**Institutional Accreditation**

**1-5 Programs must be sponsored by institutions of post-secondary education which are accredited by an agency recognized by the United States Department of Education.**

**Intent:**

*Dental schools, four-year colleges and universities, community colleges, technical institutes, vocational schools, private schools and recognized federal service training centers which offer appropriate fiscal, facility, faculty and curriculum resources are considered appropriate settings for the program.*

Narrative Response and Documentation:

* + - 1. **Which of the following best describes the program’s educational setting: dental school, four-year college/university, community/junior college, technical college/institute, vocational school or federal service training center? Indicate whether the institution is public, private (not-for-profit) or private (for profit).**

1. **By what agency recognized by the United States Department of Education is the institution accredited? Briefly describe the institution’s accreditation history, including its current status and date of last evaluation.**
2. **Include an exhibit indicating the most current accreditation report status**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 1-5 in the Accreditation Standards for Dental Assisting Education Programs.

**1-6 All arrangements with co-sponsoring or affiliated institutions must be formalized by means of written agreements which clearly define the roles and responsibilities of each institution involved.**

**Intent:**

*This standard is not applicable to designated extended campus facilities.\* Co-sponsoring or affiliated institutions allow dental assisting program students to utilize all resources available to their regularly enrolled students, e.g., bookstore, library, health center fitness facility, etc. as defined in an affiliation agreement.*

Narrative Response and Documentation:

\* Please note externship sites, off-campus sites, and enrichment sites will be addressed in Standard 4-10.

1. **Does the program have an arrangement with another institution for sharing resources as described above?**
2. **Is the additional institution considered to be a co-sponsor of the program?**
3. **If yes, describe the arrangement, including a brief history and date of the initial agreement. Include a copy of co-sponsor/affiliation written agreement.**
4. **What percentage of the program is conducted within the co-sponsoring or affiliated institution? Describe.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 1-6 in the Accreditation Standards for Dental Assisting Education Programs.

**Community Resources**

**1-7 There must be an active advisory committee to serve as a liaison between the program, local dental and allied dental professionals and the community. Dentists and dental assistants must be equally represented.**

**Intent:**

*The purpose of the advisory committee is to provide a mutual exchange of information for program enhancement, meeting program and community needs, standards of patient care, and scope of practice. Membership should include representation from a variety of practice settings. The program administrator, faculty,* *students, and appropriate institutional personnel are non-voting participants.*

Narrative Response and Documentation:

* + - 1. **Describe the structure, functioning, and responsibilities of the advisory committee.**
      2. **Describe the membership process, terms and length of service, and membership recruitment process.**
      3. **Describe recent advisory activities.**

* + - 1. **List the names, affiliation, role/title, committee term, disciplines and appointment dates of individuals currently involved in the program’s advisory committee.**
      2. **Provide a copy of by-laws and/or description of duties and responsibilities of individuals involved in the advisory committee.**
      3. **Provide copies of minutes from the last two meetings.**
      4. **If committee meeting meets in technology based forum, describe mechanism used to ensure participation.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 1-7 in the Accreditation Standards for Dental Assisting Education Programs.

**STANDARD 2 – EDUCATIONAL PROGRAMS**

**Admissions**

* 1. **Admission of students must be based on specific published criteria, procedures and policies that include a high-school diploma or its equivalent, or post- secondary degree. Previous academic performance or other predictors of scholastic aptitude and ability must be utilized as criteria in selecting students with the potential to complete the program. Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability, scope of practice and employment opportunities for dental assistants.**

**Intent:**

*The dental assisting program is based on a science-oriented program of study and skill development offered at the post-secondary level that requires critical thinking, psychomotor skills, and ethical reasoning.*

*The program administrator and faculty, in cooperation with appropriate institutional personnel establish admissions criteria and procedures which are non-discriminatory, contribute to the quality of the program, and allow selection of post-secondary students with the potential to be successful. Because enrollment is limited by facility, capacity, and special program admissions criteria and procedures are necessary to ensure that students are selected based on a demonstrated potential for completing the program. Published promotional materials and website information related to student recruitment and admissions comply with the Commission’s “Policy on Principles of Ethics in Programmatic Advertising and Student Recruitment.”*

Narrative Response and Documentation:

**Describe the admission criteria for the dental assisting program. What are the prerequisites? Are the criteria weighted? If so, explain.**

**As an Exhibit, please provide examples of any entrance examinations.**

**Describe the process for student selection. List names and titles of individuals participating in the process.**

**How are applicants informed of the program’s criteria and procedures for admission, program goals, functions performed by dental assistants and employment opportunities?**

1. **If students who do not meet the program’s admission criteria are admitted, what academic strengthening is suggested in the area(s) of deficiency(s)?**
2. **How are applicants informed of the programs policies on infectious diseases?**
3. **As Exhibits please provide the following: Admissions packet information; promotional materials, website information (screen shots).**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-1 in the Accreditation Standards for Dental Assisting Education Programs.

* 1. **Admission of students with advanced standing must be based on the same criteria required of all applicants admitted to the program. The program must ensure that advanced standing credit awarded is based on equivalent didactic, laboratory and preclinical content and student achievement.**

**Intent:**

*Policies ensure that advanced standing credit is awarded based on equivalent coursework, knowledge, and/ or experience that meets or exceeds content required in the curriculum and results in equivalent student competence. The curriculum may be structured to allow individual students to meet performance standards specified for graduation in less that the required length as well as to provide the opportunity for students who require more time to extend the length of their instructional program. The curriculum design may provide maximum opportunity for students to continue their formal education with minimum duplication of learning experiences.*

*Advanced standing refers to applicants that may be considered for admission to a training program whose curriculum has been modified after taking into account the applicant’s past experience. Examples include transfer from a similar program at another institution, completion of training at a non-CODA accredited program, or documented practice experience in the given discipline. Acceptance of advanced standing students/residents will not result in an increase of the program’s approved number of enrollees. Applicants for advanced standing are expected to fulfill all of the admission requirements mandated for students/residents in the conventional program and be held to the same academic standards. Advanced standing students/residents, to be certified for completion, are expected to demonstrate the same standards of competence as those in the conventional program.*

Narrative Response and Documentation:

**Does the dental assisting program admit students with advanced standing? If yes, describe the policies and methods for awarding advanced standing credit.**

**Indicate the type of courses for which advanced standing is granted and the maximum number of credits that can be awarded.**

**Who reviews transcripts and determines course equivalency? Describe the process for evaluating courses taken at another institution and used as a basis of credit award?**

**If a formal policy has been developed, please provide.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-2 in the Accreditation Standards for Dental Assisting Education Programs.

* 1. **The program must demonstrate that student enrollment numbers are proportionate to the number of faculty, availability of appropriate classroom, laboratory, and clinical facilities, equipment, instruments, and supplies.**

**Intent:**

*In determining the maximum number of dental assisting students enrolled in a program, including off-campus sites, hybrid, or on-line courses, careful consideration is given to ensure that the number of students does not exceed the program resources including, as appropriate, financial support, scheduling options, facilities, equipment, and faculty.*

Narrative Response and Documentation:

**1. How many classes does the dental assisting program admit each year? In what month(s) of the year do students begin their course of study?**

**2. How many applicants, i.e., individuals who have submitted required documentation, were there for the most recently admitted class? Of this number, how many met the minimum admission criteria? were offered admission? were enrolled? were enrolled with advanced standing?**

**3. Using the format illustrated in Example Exhibit 6, provide enrollment and attrition data for the program during the current and six preceding years. Note: Programs with multiple enrollment starts each calendar year, please complete Example Exhibit 7.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-3 in the Accreditation Standards for Dental Assisting Education Programs.

**Curriculum Management**

**2-4 The curriculum must be structured on the basis of, a minimum of, 900 instructional hours at the postsecondary level that includes 300 clinical practice hours.  
  
Intent:**

*Instructional hours should include didactic, laboratory, preclinical, and clinical content required in the standards. Curriculum content not required by the standards accordingly increases the length of the program. Clinical practice hours assisting a dentist are obtained in a facility that provides comprehensive dental treatment.*

Narrative Response and Documentation:

**1. Describe the structure and sequence of the dental assisting curriculum for each term and all enrollment cycles.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-4 in the Accreditation Standards for Dental Assisting Education Programs.

* 1. **The curriculum must be designed to reflect the interrelationship of its biomedical sciences, dental sciences, clinical and behavioral sciences, preclinical and clinical practice. Curriculum must be sequenced to allow assimilation of foundational content in oral anatomy; basic chairside skills, medical emergencies, confidentiality and privacy regulations, infection control, sterilization, and occupational safety precautions, procedures and protocols prior to any patient contact or clinical experiences. Content must be integrated with continued elevation throughout the program. Curriculum must demonstrate sufficient depth, scope, sequence of instruction, quality and emphasis to ensure achievement of the curriculum’s defined competencies and program’s goals and objectives.**

**Intent:**

*Curriculum content should be sequenced to allow assimilation of foundational knowledge and critical thinking skills necessary to ensure patient safety, and opportunity for students to develop the knowledge and skills necessary to ensure patient, student, faculty, and staff safety when performing or assisting in clinical procedures involving patients, including student partners.*

*Programs that admit students in phases, including modular or open-entry shall provide content in tooth anatomy, tooth numbering, general program guidelines, basic chairside skills, emergency and safety precautions, infection control and sterilization protocols associated with, and required for patient treatment, prior to any other program content and/ or performances of activities involving preclinical/clinical activities.*

Documentation:

1. **For each term of the current year’s dental assisting curriculum, provide a class schedule as illustrated in Example Exhibit 9. Include course number and name; faculty, setting (clinic, lab, classroom number); and number of students. Modify the exhibit as needed to account for multiple sections. Note: Programs with multiple enrollment starts must modify the exhibit to provide the requested information.**
2. **Outline the sequence of the dental assisting curriculum as illustrated in Example Exhibit 8.**
3. **Provide the mechanism used to measure students’ performance elevation as they progress through the curriculum and include an increase in percentages of passing a course, competency, or time elevation throughout the program.**
4. **Describe the mechanism for reviewing academic performance academic performance and the action(s) taken when a student’s performance is below minimum standards? How frequently is the student made aware of her/his performance?**
5. **Describe procedures for assisting students who are having academic difficulties.**
   1. **The dental assisting program must have a formal, written curriculum management plan, which includes:**
      1. **at minimum, an annual curriculum review and evaluation process with input from faculty, students, administration and other appropriate sources;**
      2. **evaluation of the effectiveness of all courses as they support the program’s goals and competencies;**
      3. **a defined mechanism for coordinating instruction among dental assisting program faculty.**

**Intent:**

*Curriculum management should assure the incorporation of emerging information and sequencing, the elimination of unwarranted repetition, and the attainment of student competence. Periodic workshops and in-service sessions should be held for the dissemination of curriculum information and modifications.*

Narrative Response and Documentation:

1. **Please provide a copy of the program’s curriculum management plan (CMP) and provide a description of how the CMP is utilized for curriculum review and evaluation.**
2. **In what ways do full-time and part-time faculty members participate in the decision-making process in matters relating to the continuous evaluation and development of the dental assisting program? Include the frequency and purpose of program faculty meetings.**
3. **Describe how students, administrators and others are included in the CMP.**
4. **Describe how courses are evaluated in relation to goals and competencies.**

1. **Describe the mechanism(s) utilized for evaluating and revising the dental assisting curriculum, including distance site(s), if applicable.**
2. **Describe the mechanism for coordinating instruction between dental assisting faculty members and other faculty who teach dental assisting students and describe how information from faculty meetings is disseminated to all dental assisting and related faculty, including faculty at distance sites, if applicable.**
3. **If the program has faculty and students at distance sites, explain how they are incorporated into the CMP.**
4. **As an exhibit, include examples of minutes of meetings held during the past academic year where curriculum was reviewed. The meeting minutes should include names and titles of all present; agenda items covered; outcomes and assignments based on meeting with timelines.**
5. **Describe the mechanism(s) to ensure calibration of dental assisting faculty for student clinical evaluation.**
6. **As an exhibit, provide a list of clinical faculty calibration sessions, including the session dates, faculty in attendance, topics and improvements made to the student clinical evaluation process.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-24 in the Accreditation Standards for Dental Assisting Education Programs.

**Instruction**

**2-7 Written documentation of each course in the curriculum must be provided to students at the start of each course and include:  
  
a. The course title, number, description, faculty presenting course and contact**

**information**

1. **Course objectives**
2. **Course competencies**
3. **Content outline including topics to be presented**
4. **Course schedule including learning and evaluation mechanisms for didactic, laboratory, and clinical learning experiences**
5. **Specific criteria for course grade calculation**

Narrative Response and Documentation:

1. **Describe how and when course documentation is provided to students.**
2. **Explain the grading process for each course. How is the final course grade determined? What factors are included? (e.g., exams, homework, skill evaluations, projects, participation?) Include the specifics for each category (number or type, weight, etc.) and explain how points are awarded, a grade is determined, and then combined to arrive at final course grade.**
3. **In a separate curriculum document, provide documentation/syllabus provided to students, for each course in the dental assisting curriculum. Materials for each course should be grouped together, in sequence, and include the following:**
4. **course title, number, description, faculty and contact information;**
5. **course objectives;**
6. **course competencies;**
7. **content outline including topics to be presented;**
8. **course schedule including learning and evaluation mechanisms for didactic, laboratory, and clinical learning experiences**
9. **Specific criteria for course grade calculation;**
10. **date of syllabus preparation/update**

Please refer to the curriculum document check-list at the end of the Site Visitor Evaluation Form (SVER), to assist you in ensuring all components are included.

For applicable courses, include all skill/competency evaluation forms for skills listed in the standards. For each course, submit the final exam and an example of a quiz or other evaluative tool. Submit appropriate rubrics used to evaluate assignments and projects.

The curriculum document must include a table of contents with corresponding and continuous page numbers. The document should begin with page 1 and is sequentially and continuously paginated to the end of the document. Present course documentation in sequence of presentation.

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-7 in the Accreditation Standards for Dental Assisting Education Programs.

**Student Evaluation**

**2-8 Objective student evaluation methods must be utilized to measure all defined course objectives to include:**

**a. Didactic, laboratory, preclinical and clinical content**

**b. Specific criteria for measuring levels of competence for each component of a given procedure**

Narrative Response and Documentation:

**1.** **Describe how the students’ laboratory, preclinical skills and clinical performance/competence are evaluated. Include the mechanisms utilized to evaluate students’ skills in the separate curriculum document within the appropriate course.**

**2. What standards of achievement/competence level are required for dental assisting students to continue in the curriculum? What is considered a minimum passing grade/score? How and when are these standards assessed and explained to the students?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-8 in the Accreditation Standards for Dental Assisting Education Programs.

**Preclinical Instruction**

**Essential Dental Assisting Skills**

**2-9 Curriculum content must include didactic and laboratory/preclinical objectives in the following dental assisting skills and functions. Prior to performing these skills/functions in a clinical setting, students must demonstrate knowledge of, and laboratory/preclinical competence in the program facility.**

1. **Take/review and record medical and dental histories**
2. **Take and record vital signs**
3. **Assist with and/or perform soft tissue extra/intra oral examinations**
4. **Assist with and/or perform dental charting**
5. **Manage infection and hazard control protocol consistent with published professional guidelines**
6. **Prepare tray set-ups for a variety of procedures and specialty areas.**
7. **Seat and dismiss patients**
8. **Operate oral evacuation devices and air/water syringe**
9. **Maintain clear field of vision including isolation techniques**
10. **Perform a variety of instrument transfers**
11. **Utilize appropriate chairside assistant ergonomics**
12. **Provide patient preventive education and oral hygiene instruction**
13. **Provide pre-and post-operative instructions prescribed by a dentist**
14. **Maintain accurate patient treatment records**
15. **Identify and respond to medical and dental emergencies**

**Chairside Dental Assisting Functions**

**2-10 Curriculum content must include didactic and laboratory/preclinical objectives in the following dental assisting skills and functions. Prior to performing these skills/functions in a clinical setting, students must demonstrate knowledge of, and laboratory/preclinical competence in the program facility.**

1. **Assist with and/or apply topical anesthetic and desensitizing agents**
2. **Assist with and/or place and remove rubber dam**
3. **Assist with and/or apply fluoride agents**
4. **Assist with and/or apply bases, liners, and bonding agents**
5. **Assist with and/or place, fabricate, and remove provisional restorations**
6. **Assist with and/or place and remove matrix retainers, matrix bands, and wedges**
7. **Assist with and/or remove excess cement or bonding agents**
8. **Assist with a direct permanent restoration**
9. **Fabricate trays, e.g., bleaching, mouthguard, custom**
10. **Preliminary impressions**
11. **Clean removable dental appliances**

Narrative Response and Documentation (for Standards 2-9 and 2-10):

1. **Using the format illustrated in Example Exhibit 10, list the courses that provide major instruction (didactic, preclinical and clinical) in each category of functions specified in Standards 2-9 and 2-10.**
2. **If any function(s) specified in Standards 2-9 and 2-10 is not included in the curriculum, what is the rationale for its omission?**

**Advanced/Expanded Dental Assisting Functions**

**2-11 Where graduates of a CODA-accredited program are authorized to perform additional functions defined by the program’s state-specific dental board or regulatory agency, and the program has chosen to include those functions in the program curriculum, the program must include content at the level, depth, and scope required by the state. Further, curriculum content must include didactic and laboratory/preclinical objectives for the additional dental assisting skills and functions. Students must demonstrate laboratory/preclinical competence in performing these skills in the program facility prior to clinical practice. Students must be informed of the duties for which they are trained in the educational program.**

**Intent:**

*Functions allowed by the state dental board or regulatory agency for dental assistants are taught and evaluated at the depth and scope required by the state. The inclusion of additional functions does not compromise the length and scope of the educational program or content required in the Accreditation Standards.*

Narrative Response and Documentation:

1. **Describe each additional state-allowed skill not listed in the Standards and the instructional level required. Include number of patient experiences and/or number of didactic, preclinical/laboratory, and clinical experience hours required by the state.**
2. **Provide as an exhibit the appropriate pages of the state dental practice act or regulatory code and corresponding administrative code related to dental assisting.**
3. **Using the format illustrated in Example Exhibit 11, list ANY additional functions included in the curriculum and presented within the program, not specified in Standards 2-9 and 2-10.**
4. **Using the format illustrated in Example Exhibit 12, indicate which extra oral and intra oral functions are allowed within the State Dental Practice Act for Dental Assistants. (Do not include additional hours in advanced training (EF) taught outside the program curriculum)**
5. **Describe how students are informed of the duties for which they are trained in the educational program.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-11 in the Accreditation Standards for Dental Assisting Education Programs.

**2-12 Students must demonstrate competence in the knowledge at the familiarity level in dental practice management:**

1. **Computer and dental software**
2. **Business ethics and jurisprudence**
3. **Business oral and written communications**
4. **Inventory systems and supply** **ordering**
5. **Maintenance and retention of business records**
6. **Management of patient information**
7. **Recall systems**

**Biomedical Sciences**

**2-13 The biomedical science aspect of the curriculum must include content at the in-depth level in bloodborne pathogens and hazard communications standards and content must be integrated throughout the didactic, preclinical, laboratory and clinical components of the curriculum.**

**Intent:**

*The biomedical sciences provide a basic understanding of body structure and function; disease concepts; and dietary considerations of the dental patient.*

Narrative Response:

1. **The program’s curriculum is to be provided in a separate curriculum document. List the relevant exhibits or pages within the curriculum document that identify instructional content in, and student evaluation of activities related to, bloodborne and infectious diseases.**

**Dental Sciences**

**Intent:**

*Dental science content provides the student with an understanding of materials used in intra-oral and laboratory procedures, including experience in their manipulation;* an *understanding of the development, form and function of the structures of the oral cavity and of oral disease; pharmacology as they relate to dental assisting procedures; and scientific principles of dental radiography.*

**2-14 The dental science aspect of the curriculum must include content at the familiarity level in:**

1. **Oral pathology**
2. **General anatomy and physiology**
3. **Microbiology**
4. **Nutrition**
5. **Pharmacology to include:**

**i. Drug requirements, agencies, and regulations**

**ii. Drug prescriptions**

**iii. Drug actions, side effects, indications and contraindications**

**iv. Common drugs used in dentistry**

**v. Properties of anesthetics**

**vi. Drugs and agents used to treat dental-related infection**

**vii. Drug addiction including opioids and other substances**

1. **Patients with special needs including patients whose medical, physical, psychological, or social conditions make it necessary to modify normal dental routines.** 
   1. **The dental science aspect of the curriculum must include content at the in-depth level in oral anatomy.**

**Intent:**

*Content in oral anatomy should include oral histology and oral embryology*

**2-16 The curriculum must include content at the in-depth level in dental materials.** **Students must demonstrate knowledge of the properties, and competence in the uses and manipulation of, dental materials to include:**

1. **Gypsum**
2. **Restorative materials**
3. **Dental cements**
4. **Impression materials**
5. **Acrylics and or thermoplastics**
6. **Waxes**
7. **Fabrication of casts, temporary crown and/or bridge**
8. **Abrasive agents used to polish coronal surfaces and appliance**
9. **Study casts/occlusal registrations**

**2-17 The curriculum must include content at the in-depth level in dental radiology. Students must demonstrate knowledge and skills to produce diagnostic dental image surveys on manikins. Prior to exposing dental images on patients, students must demonstrate competence in:**

1. **Radiation health protection techniques,**
2. **Processing procedures,**
3. **Anatomical landmarks and pathologies,**
4. **Mounting survey of dental images, and**
5. **Placing and exposing dental images on manikins**

**2-18 Prior to exposing dental images during extramural clinical assignments, students must demonstrate competence, under faculty supervision, in exposing diagnostically acceptable full-mouth dental image surveys on a minimum of two patients in the program, or contracted facility.**

**Intent:**

*Full-mouth dental image surveys are comprised of periapical and bitewing images.*

**Clinical and Behavioral Sciences**

**2-19 The curriculum must include didactic content at the in-depth level to include:**

1. **General dentistry**
2. **Dental specialties**
3. **Chairside assisting**
4. **Dental-related environmental hazards**
5. **Preventive dentistry**
6. **Management of dental and medical emergencies**

**Intent:**

*Content provides background for preclinical and clinical experiences.*

Narrative Response and Documentation (for Standards 2-12, 2-14, 2-15, 2-16, 2-17, 2-18 and 2-19):

1. **Using the format illustrated in Example Exhibit 13, list the courses that provide the major instruction in each content area specified in Standards 2-12, 2-14, 2-15, 2-16, 2-17, 2-18 and 2-19.**

1. **If any content area(s) specified in Standards 2-12, 2-14, 2-15, 2-16, 2-17, 2-18, and 2-19 are not included in the curriculum, what is the rationale for its omission?**

Narrative Response and Documentation (for Standards 2-17 and 2-18):

1. **Describe how students acquire an understanding of radiation safety prior to exposing radiographs on patients.**
2. **Using the format illustrated in Example Exhibit 14, summarize the type and minimum number of acceptable radiographic surveys that each student is required to expose, process and mount during the dental assisting program.**
3. **Describe how faculty instruction and evaluation are provided to students throughout all of their radiographic experiences.**

**2-20 The program must demonstrate effectiveness in creating an academic environment that supports ethical and professional responsibility to include:**

1. **Psychology of patient management and interpersonal communication**
2. **Legal and ethical aspects of dentistry**

**Intent:**

*Faculty, staff and students should know how to draw on a range of resources such as professional codes, regulatory law and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive or of public concern.*

Narrative Response and Documentation:

**Describe how the program supports ethics and professionalism.**

**Assess the degree to which students assume responsibility for professional judgment and ethical conduct.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-20 in the Accreditation Standards for Dental Assisting Education Programs.

**2-21 The dental assisting program must provide opportunities and encourage students to engage in service and/or community-based learning experiences.**

**Intent:**

*Community-based experiences are essential to develop dental assistants who are* *responsive to the needs of a culturally diverse population.*

Narrative Response and Documentation:

**What opportunities are students provided for service and/or community-based learning experiences?**

**Describe the ways in which students are encouraged to engage in service and/or community-based learning experiences.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-21 in the Accreditation Standards for Dental Assisting Education Programs.

**Clinical Externship Experience**

**2-22 Clinical experience assisting a dentist must be an integral part of the educational program designed to perfect students’ competence in performing chairside assisting functions, rather than to provide basic instruction. Students must have a minimum of 300 hours of clinical experience.  
  
Intent:** *More than fifty percent (50%) of the clinical assignments should be accomplished through assignment to general dentistry offices, and may include a pediatric dental office.*

**2-23 Each student must be assigned to two or more offices or clinics for clinical experience and assisting in general dentistry situations is emphasized.  
  
Intent:** *More than fifty percent (50%) of the clinical assignments should be accomplished through assignment to general dentistry offices, and may include a pediatric dental office. Clinical experiences should be at different locations with different dentists.*

**2-24 The major portion of the students’ time in clinical assignments must be spent assisting with, or participating in, patient care.**

**2-25 The dental assisting faculty must plan, approve, supervise, and evaluate the student’s clinical experience, and the following conditions must be met:**

1. **A formal agreement exists between the educational institution and the facility providing the experience**
2. **The program administrator retains authority and responsibility for the student**
3. **Policies and procedures for operation of the facility are consistent with the philosophy and objectives of the dental assisting program.**
4. **The facility accommodates the scheduling needs of the program**
5. **Notification for termination of the agreement ensures that instruction will not be interrupted for currently assigned students**
6. **Expectations and orientation are provided to all parties prior to student assignment**

**2-26 Students must maintain a record of their activities in each clinical assignment.**

**2-27 During the clinical phase of the program, program faculty must conduct seminars periodically with students for discussion of clinical experiences.**

**Intent:**

*Seminar discussions provide students with opportunities to share clinical experiences with other students and faculty.*

**2-28 When clinical experience is provided in extramural facilities, dental assisting faculty must visit each facility to assess student progress. Budgetary provisions must be made to support faculty travel.**

**2-29 Objective evaluation criteria must be utilized by faculty and office or clinical personnel to evaluate students’ competence in performing specified procedures during clinical experience.**

Narrative Response and Documentation (for Standards 2-22 through 2-29):

1. **Provide a typical clinical rotation schedule for a dental assisting student as an Exhibit. Indicate the type of practice and approximate length of each rotational assignment.**
2. **Describe the manner in which the students’ clinical experiences are planned, supervised and evaluated by dental assisting faculty in conjunction with personnel in the facilities. Identify the individuals who participate in supervision and evaluation of dental assisting students. How often are the facilities visited by dental assisting faculty?**
3. **Specify students’ expected levels of performance in the specified skills at the beginning and the end of the clinical practice phase of the program.**
4. **How do students share clinical experiences? As an Exhibit, provide example seminar schedules or agendas.**
5. **Please provide to the visiting committee, examples of student-maintained records of activities.**
6. **As an exhibit, provide a listing of externship/clinical facilities for which a current formal agreement exists. For each facility, indicate the number of students it will accommodate and the type of practice.**
7. **Describe the program’s communications with personnel in the clinical facility for familiarization with the program’s goals, curricular content, policies, methods of instruction and evaluation and roles and responsibilities of all parties. If students’ clinical practice experiences are scheduled in off-campus facilities, specify the criteria used for facility selection.**
8. **As an exhibit, please provide an example completed clinical facility agreement.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-22 in the Accreditation Standards for Dental Assisting Education Programs.

**STANDARD 3 – ADMINISTRATION, FACULTY AND STAFF**

**3-1 The program must be a recognized entity within the institution’s administrative structure which supports the attainment of program goals.**

**Intent:**

*The position of the program in the institutions administrative structure should permit direct communication between the program administrator and institutional administrators who are responsible for decisions that directly affect the program The administration of the program should include formal provisions for program planning, staffing, management, coordination and evaluation.*

Narrative Response and Documentation:

**1. As an exhibit, provide the most recent organizational chart for the institution indicating the position of the dental assisting program in the administrative structure.**

**2. Describe the opportunities for direct communication between the dental assisting program director and the institutional administrators who are responsible for decisions that directly affect the program.**

**3. Are there opportunities for the dental assisting program administrator and faculty to participate in decisions which directly affect the program? Please give examples.**

**4. If an institution-wide committee which has significant impact on the dental assisting program does not include a member of the program faculty, explain the procedure whereby faculty provide consultation when matters directly related to the dental assisting program are considered.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-1 in the Accreditation Standards for Dental Assisting Education Programs.

**Program Administrator**

**3-2 The program administrator must have a full-time commitment to the institution and an appointment which provides time for program operation, evaluation and revision. The program administrator must have the authority and** **responsibilities to perform the following for:**

**a. Budget preparation**

**b. Fiscal administration**

**c. Curriculum development and coordination**

**d. Selection and recommendation of individuals for faculty appointment and promotion**

**e. Supervision and evaluation of faculty**

**f. Determining faculty teaching assignments and schedules**

**g. Determining admissions criteria and procedures**

**h. Scheduling use of program facilities**

**i. Development and responsibilities to maintain CODA accreditation compliance and documentation**

**Intent:**

*The program administrator’s teaching contact hours and course responsibilities are less than a full-time instructor who does not have administrative responsibilities or as defined by the collective bargaining agreement of the institution or state teachers association. The program administrator’s teaching contact hours and course responsibilities allow sufficient time to fulfill assigned administrative responsibilities.*

**3-3 The program administrator must be a Dental Assisting National Board “Certified Dental Assistant” or dentist licensed to practice in the state of the program location\*, with occupational experience in the application of fourhanded dentistry principles, either as a dental assistant or working with a chairside assistant.**

**Intent:**

*A dental hygienist appointed after January 1, 2000, would be eligible for such an appointment after acquiring the “Certified Dental Assistant” credential offered by the Dental Assisting National Board and obtaining occupational experience in the application of clinical chairside dental assisting involving fourhanded dentistry. \*A dentist currently licensed in the United States who has obtained a teaching dispensation from the state that grants him/her the ability to practice dentistry as defined by the state’s dental practice act within a teaching institution, is exempt from this requirement. Honorary emeritus status issued by the Dental Assisting National Board is not recognized by the Commission on Dental Accreditation.*

**3-4 The program administrator must have a baccalaureate degree or** **higher. The program administrator must have had instruction in educational theory and methodology, e.g., curriculum development, educational psychology, test construction, measurement and evaluation.**

Narrative Response and Documentation (for Standards 3-2 through 3-4):

**1. Provide the name, title, type and length of appointment, professional training and occupational experience of the dental assisting program administrator. (Note: More detailed information concerning the program administrator is requested in the Faculty section of this self-study guide).**

**2. Delineate the administrative duties and authority of the program administrator. Specify any additional commitments the program administrator has each term, e.g., teaching, administration of other programs, recruitment, committee activity. Include the time devoted to each.**

**3. Is there a formal arrangement for sharing administrative responsibility? If yes, what is the rationale for this arrangement? Specify the duties and authority of each individual involved.**

**4. Does the institution have specific policy that governs the amount of teaching responsibility assigned to the program administrator? If so, please state the policy.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-4 in the Accreditation Standards for Dental Assisting Education Programs.

**Faculty**

**3-5 Dental assisting faculty must have background in and current knowledge of dental assisting, the specific subjects they are teaching and educational theory and methodology consistent with teaching assignment, e.g., curriculum development, educational psychology, test construction, measurement and evaluation,**

**Intent:**

*Dental assisting faculty have current knowledge at an appropriate level for the subject they teach, educational theory and methodology, and if applicable, in distance education techniques and delivery. Licensed dentists who provide supervision in the facility as required by the state dental practice act, who are not evaluating students, should have qualifications that comply with the state’s dental practice act, and are calibrated with program policies and protocols, goals and objectives.*

**3-6 Faculty providing didactic instruction must have earned at least a baccalaureate degree within three years of the date of initial hire as a didactic faculty.**

**Intent:**

*\*Military program faculty with a rank of staff sergeant, E5, or non-commissioned officer are exempt.*

**3-7 Laboratory, preclinical and clinical faculty must hold any current dental assisting credential required by the state in addition to a Dental Assisting National Board “Certified Dental Assistant” credential\*.**

**Intent:**

*Faculty members teaching additional or expanded dental assisting functions should be credentialed appropriately in those functions as required by the state. Faculty who are state-licensed dentists are not required to obtain additional certification. Licensed dental hygiene faculty who teach dental radiography, coronal polishing, and the placement of pit and fissure sealants would be eligible to teach these functions to dental assisting students without obtaining additional certification. Honorary emeritus status issued by the Dental Assisting National Board is not recognized by the Commission on Dental Accreditation.*

**3-8 The number of faculty positions must be sufficient to implement the program’s goals and objectives. The faculty/student ratio during clinical and radiography (clinical and laboratory) sessions must not exceed one instructor to six students. During laboratory and preclinical instruction in dental materials and chairside assisting procedures, the faculty/student ratio must not exceed one instructor for each twelve students*.***

**Intent:**

*Student contact hour loads allow sufficient time for class preparation, student evaluation and counseling, development of subject content and appropriate evaluation criteria and methods, and professional development. Student partner-patients are not counted as students when calculating the ratio.*

**3-9 Opportunities must be provided for program faculty to continue their professional development.**

**Intent:**

*Time is provided for professional association activities, research, publishing and/or practical experience.*

Narrative Response and Documentation (for Standards 3-5 through 3-9)

1. **Using the format illustrated in Example Exhibit 16 (Biosketch), provide information requested for all full- and part-time dental assisting faculty members, supervising dentists, and adjuncts (excluding guest lecturers) for the current academic year, including any summer sessions.**
2. **For on-site review at the time of the site visit only, please provide a binder with documentation of all current faculty qualifications to include as applicable: current teaching assignments, credentials, licenses, certificates of completion, evidence of current enrollment, and CPR card.**
3. **Using the format illustrated in Example Exhibit 15, provide information requested for each dental assisting faculty member for each term of the academic year. (Note: If two or more classes are enrolled concurrently, each table should reflect the faculty member’s total time commitment per term).**
4. **Specify the number of full-time equivalent positions allocated to the dental assisting program. Are any faculty positions presently vacant? If so, please explain.**
5. **What percentage of full-time equivalent positions assigned to the program are filled by part-time faculty?**
6. **Describe how teaching assignments are determined.**
7. **State the institution’s policy on teaching load and how it is calculated, e.g., number of credit hours taught, number of contact hours, type and level of instruction, number of different preparations and the number of students. If the teaching policy for the dental assisting program is different from the institution’s general policy, please explain.**
8. **Describe the institution’s policy for release time for activities such as administrative duties, advising and counseling students, supervision of extramural clinical experiences and committee assignments.**
9. **What are the current faculty/student ratios during laboratory, preclinical and clinical content sessions?**
10. **Describe the mechanism for coordinating instruction between dental assisting faculty members and other faculty who teach dental assisting students.**
11. **Does the institution offer a faculty professional development program? If so, describe the program including the procedures faculty must follow to participate. Is the plan financially supported by the institution?**
12. **Give examples of how dental assisting faculty have participated in the faculty development plan. (Include in-service programs available and meetings of professional organizations).**
13. **Describe how program faculty participate in program decision-making processes. Describe the frequency and purpose of program faculty and departmental meetings. As an exhibit, provide copies of faculty/departmental meeting minutes held during the past academic year.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-5 through 3-9 in the Accreditation Standards for Dental Assisting Education Programs.

**3-10 Faculty must be ensured a form of governance that allows participation in the program and institution’s decision-making process.**

**Intent:**

*There are opportunities for program faculty representation on institution-wide committees and the program administrator is consulted when matters directly related to* *the program are considered by committees that do not include program faculty.*

Narrative Response and Documentation:

1. **Describe how the program’s faculty are represented and involved in the institution’s governance processes.**
2. **As an exhibit, list current faculty participation in the governance process (e.g. faculty senate, administrative review committee, curriculum review committee, leadership positions, collective bargaining participation, etc.)**

**3-11 A defined evaluation process must exist that ensures objective measurement of the performance of each faculty member.**

**Intent:**

*An objective evaluation system including student, administration and peer evaluation can identify strengths and weaknesses for each faculty member (to include those at distance sites) including the program administrator. The results of evaluations should be communicated to faculty members on a regular basis to ensure continued improvement.*

Narrative Response and Documentation:

1. **Describe the criteria used to evaluate program faculty. How are evaluation criteria developed?**
2. **Describe the schedule related to program administrator and faculty evaluation. How is data obtained utilized? If the criteria used to evaluate the program administrator is different from that used to evaluate faculty, please explain.**
3. **How are evaluation results communicated to faculty?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-11 in the Accreditation Standards for Dental Assisting Education Programs.

**Support Staff**

**3-12 Institutional support personnel must be assigned to facilitate program operation.**

Narrative Response and Documentation:

**Specify the secretarial and clerical support services provided for the dental assisting program. How many full-time positions are designated solely for the program?**

**Describe any support provided by a centralized clerical/duplicating service? If centralized service is available, describe procedures necessary for faculty to utilize the service?**

**List the support services provided by the institution to the dental assisting program, e.g., custodial, maintenance, instructional, audiovisual.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-12 in the Accreditation Standards for Dental Assisting Education Programs.

**STANDARD 4 – EDUCATIONAL SUPPORT SERVICES**

**4-1 The program must provide adequate and appropriately maintained facilities to support the purpose/mission of the program and which are in conformance with applicable regulations.**

**Intent:**

*The physical facilities and equipment effectively accommodate the schedule, the number of students, faculty and staff, and include appropriate provisions to ensure health and* *safety for patients, students, faculty and staff. The facilities permit attainment of program goals. This Standard applies to all sites where students receive instruction.*

Narrative Response:

**1. In what year was the program facility constructed and/or last remodeled?**

**2. What procedures have been established for assessing program facilities and equipment in relation to current concepts of dental assistant utilization? Who is responsible for the assessment and how frequently is it made? What is the program’s long-range plan for maintaining, replacing and adding equipment?**

**Clinical Facilities**

**4-2 A clinical facility must be available for students to obtain required experience with faculty supervision.**

**4-3 Each treatment area must contain functional equipment including:**

**a. Power-operated chair(s) for treating patients in a supine position**

**b. Dental units and mobile stools for the operator and the assistant which are designed for the application of current principles of dental assistant utilization.**

**c. Air and water syringe**

**d. Adjustable dental light**

**e. High and low speed handpieces**

**f. Oral evacuating equipment**

**g. Work surface for the chairside assistant**

**4-4 Each treatment area must accommodate an operator and a patient as well as the student and faculty.**

**4-5 The sterilizing area must include sufficient space for preparing, sterilizing and storing instruments.**

**4-6 Instruments and appropriate models and armamentaria must be provided to accommodate students’ needs in learning to identify, exchange, prepare procedural trays and assist in procedures including:**

1. **Diagnostic**
2. **Operative**
3. **Surgical**

**d. Periodontal**

**e. Orthodontic**

**f. Removable and fixed prosthodontics**

**g. Endodontic**

Narrative Response and Documentation (for Standards 4-2 through 4-6):

1. **How many complete, functional treatment areas are used for preclinical and clinical instruction and practice?**
2. **If the capacity of the facility does not allow all students to be in laboratory, pre-clinical and/or clinic courses at the same time, please provide documentation of how students spend laboratory, pre-clinical and/or clinical sessions.**

**3. List the type and quantity of major equipment provided in each treatment area.**

**4. If the clinic is shared with other program(s), how many hours per week is it used by each program? How many treatment areas are used each session? What procedures have been established for scheduling utilization of the clinic?**

**5. Describe the size and design of the space provided as the sterilizing area. Identify the type, quantity and capacity of equipment utilized to sterilize and disinfect instruments, small equipment and supplies.**

**6. As an Exhibit, list the types and quantity of instruments and small equipment provided by the program and purchased by students.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-3 and 4-6 in the Accreditation Standards for Dental Assisting Education Programs.

**Radiography Facilities**

**4-7 A radiography facility must accommodate initial instruction and practice required for students to develop competence in exposing and processing dental images with faculty supervision.**

**4-8 Each radiography area must provide equipment for faculty supervision and effective instruction to accommodate several students simultaneously that include:**

1. **Dental radiography units which meet applicable regulations**
2. **Radiographic teaching manikins**
3. **Radiographic view boxes and/or monitors**
4. **Processing units with darkroom capacity or digital equipment**
5. **Multiple sets of image receptor holding devices**
6. **Radiation-monitoring devices are provided for students and faculty (according to state regulations)**
7. **Lead aprons and cervical collars for each unit**
8. **Counter with sink**
9. **Dental chair or unit**

**Intent:**

*The radiography facilities should allow the attainment of program goals and objectives. Radiography facilities and equipment should effectively accommodate the clinic and/or laboratory schedules, the number of students, faculty and staff, and comply with applicable regulations to ensure effective instruction in a safe environment.*

Narrative Response and Documentation (for Standards 4-7 and 4-8):

1. **Describe the radiographic facility, e.g. rooms, location of sinks, view-boxes and/or monitors and darkroom, if applicable.**
2. **How many radiography units are there for taking intraoral radiographic surveys? Of this number, how many are separate from the general treatment area(s)?**
3. **With respect to equipment used for radiography instruction and practice:**

**Identify the type(s) and date of manufacture of the radiography units.**

**Describe the applicable inspection/certification schedule for radiographic exposure equipment.**

**Identify the type(s) and quantity of radiographic teaching manikins provided.**

**Identify the type(s) and quantity of mechanical devices utilized as aids in exposing acceptable radiographs.**

**Specify the type(s) and quantity of devices which provide protection from ionizing radiation.**

**Identify the type(s) and quantity of devices utilized to monitor the emission of ionizing radiation.**

**4. Identify the type(s) and quantity of processing equipment provided.**

**5. What area is designated for mounting and viewing radiographs? How many students can be accommodated simultaneously? How many viewboxes/monitors are provided and where are they located in proximity to exposure units?**

**Laboratory Facilities**

**~~4~~-9 A sufficient multipurpose laboratory facility must be provided for effective instruction which allows for required laboratory activities and can accommodate all scheduled students simultaneously. There must be an appropriate number of student stations, equipment, supplies, instruments and space for individual student performance of laboratory procedures with faculty supervision.**

**Intent**:

*The location and number of general use equipment such as lathes, model trimmers, dremmels, handpieces, vibrators, and other devices as well as dental materials, instruments, trays, mixing bowls, spatulas, etc. allows each student the access needed to develop proficiency in performing procedures.*

Narrative Response and Documentation:

1. **Describe the laboratory facility. Please refer to Examples of evidence listed under DA Standard 4-9.**
2. **How many work areas (student stations) are there in the laboratory(s) used for instruction in dental science courses such as dental materials?**
3. **List the type(s) and quantity of equipment provided for each work area.**
4. **List the type(s), number and location of general use equipment and instruments such as lathes, model trimmers and vibrators.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-9 in the Accreditation Standards for Dental Assisting Education Programs.

**Extended Campus Laboratory/Clinical Facilities**

**4-10 It is preferable and, therefore recommended, that the educational institution provide physical facilities and equipment which are adequate to permit achievement of the program’s objectives. If the institution finds it necessary to contract for use of an existing facility for laboratory, preclinical and/or clinical education, then the following conditions must be met in addition to all existing standards.**

1. **There is a formal agreement between the educational institution and agency or institution providing the facility.**
2. **The program administrator retains authority and responsibility for instruction.**
3. **All students receive instruction and practice experience in the facility.**
4. **Policies and procedures for operation of the facility are consistent with the philosophy and objectives of the educational program.**
5. **Availability of the facility accommodates the scheduling needs of the program.**
6. **Notification for termination of the contract ensures that instruction will not be** **interrupted for currently enrolled students.**
7. **Instruction is provided and evaluated by calibrated dental assisting program faculty.**

**Intent:**

*This standard applies to sites off-campus used for laboratory, preclinical and/or clinical education. All students assigned to a particular facility are expected to receive instruction in that facility.* ***This standard is not applicable to dental offices/clinic sites used for clinical/externship practice experience.***

Narrative Response and Documentation:

***Note: Clinical externship dental offices/clinics are addressed in DA Standard 2-24***.

**1. If the program depends on an “Extended Campus Laboratory/Clinical Facility” for the provision of laboratory, preclinical and/or clinical education:**

**a. Identify the facility and its distance from the institution**

**b. State the extent to which the program is dependent upon the extended campus facility.**

**c. As an Exhibit, provide a signed copy of the formal agreement between the educational institution and the agency or institution providing the facility.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-10 in the Accreditation Standards for Dental Assisting Education Programs.

**Classroom Space**

**~~4~~-11 Classroom space must be provided for, and be readily accessible to, the program.**

Narrative Response and Documentation:

**1.** **Is there a classroom assigned exclusively to the dental assisting program? If not, what arrangements have been made to ensure the availability of a classroom for the program?**

**2. Indicate the capacity of the classroom(s) utilized by the program. What equipment is available in each classroom?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-11 in the Accreditation Standards for Dental Assisting Education Programs.

**Office Space**

**4-12 Office space must be provided for the program administrator and faculty.**

Narrative Response and Documentation:

**1. Specify the number, capacity and location of the program administrator and faculty offices.**

**2. Describe the space available for securing student and program records.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-12 in the Accreditation Standards for Dental Assisting Education Programs.

**Learning Resources**

**4-13 The program must provide adequate and appropriately maintained learning resources to support the goals and objectives of the program.**

**Intent:**

*Instructional aids and equipment, and institutional learning resources are provided and include access to a diversified collection of current dental, dental assisting and*

*multidisciplinary literature and references necessary to support teaching, student learning needs, services, and research. All students, including those receiving education at a distance site, are provided access to learning resources.*

Narrative Response and Documentation:

1. **Where is the major collection of books and periodicals related to dental assisting retained? If the major collection is housed in the central library or database, is a separate collection of books and periodicals related to dental assisting retained in the program’s facilities?**
2. **Do students and faculty have access to additional libraries and on-line/electronic sources?**
3. **As an Exhibit, provide a list of periodicals/periodical databases related to dental assisting, and general and specialty dentistry that are available for student and faculty reference.**
4. **As an Exhibit, provide a comprehensive listing of the specialized reference texts and the collection of books related to dental assisting and general and specialty dentistry which are available for student and faculty reference.**
5. **Describe the procedure for updating and expanding library holdings.**
6. **Briefly describe the instructional aids used in the program, i.e., skeletal and anatomical models and replicas, slides and videos which depict current techniques.**
7. **Describe the computer lab facility, if applicable.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-13 in the Accreditation Standards for Dental Assisting Education Programs.

**Student Services**

**~~4~~-14 There must be specific written due process policies and procedures for adjudication of academic and disciplinary complaints, which parallel those established by the sponsoring institution.**

**Intent:**

*These policies and procedures protect the students as consumers; provide avenues for appeal and due process; ensure that student records accurately reflect work*

*accomplished, and are maintained in a secure manner; ensure confidentiality of and access to student records is followed; ensure student participation when appropriate. The institution provides services to the allied dental students equal to those available to other students.*

Narrative Response and Documentation:

**1. Provide information concerning the institution’s ethical standards and policies which protect students as consumers. What avenues for appeal and due process have been established?**

**2. Describe the manner in which confidentiality and access to student records and work are maintained.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-14 in the Accreditation Standards for Dental Assisting Education Programs.

**4-15 The program must provide a mechanism to facilitate student remediation when indicated.**

**Intent:**

*Students are provided with opportunities to successfully complete the program without*

*compromising the integrity of the program.*

Narrative Response

1. **Describe the process used to facilitate student remediation.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-15 in the Accreditation Standards for Dental Assisting Education Programs.

**STANDARD 5 – HEALTH AND SAFETY PROVISIONS**

**5-1 The program must document its compliance with institutional policy and applicable local, state and federal regulations and/or guidelines related to health and safety.**

1. **Policies must include:**
2. **radiation hygiene and protection,**
3. **ionizing radiation,**
4. **hazardous materials, and**
5. **bloodborne and infectious diseases.**
6. **Policies must be provided to all students, faculty and appropriate support staff and continuously monitored for compliance.**
7. **Policies on bloodborne and infectious disease(s) must be made available to applicants for admission and patients.**

**Intent:**

*The dental assisting program should establish and enforce a mechanism to ensure adequate preclinical/clinical/laboratory asepsis, infection and biohazard control and disposal of hazardous waste.*

*Policies and procedures on the use of ionizing radiation should include criteria for patient selection, frequency of exposing and retaking radiographs on patients, consistent with current, accepted dental practice.*

*Policies and procedures should be in place to provide for a safe environment for patients, students, faculty and staff. The confidentiality of information pertaining to the health status of each individual is strictly maintained.*

*This Standard applies to all program sites where laboratory and clinical education is provided.*

Narrative Response and Documentation

**1. As an exhibit, provide policies and procedures related to radiation hygiene and protection and ionizing radiation.**

**2. As an exhibit, provide policies and procedures related to infection and hazardous control.**

**3. As an exhibit, provide policies and procedures related to bloodborne and infectious disease(s). How are policies made available to applicants for admission and patients?**

**4. How does the program monitor policies for continuous compliance?**

**5. How are these policies provided to students, faculty and appropriate staff?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 5-1 in the Accreditation Standards for Dental Assisting Education Programs.

**5-2 Students, faculty and appropriate support staff must be encouraged to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella, hepatitis B and tuberculosis prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk to patients and dental personnel.**

Narrative Response

*Note: Do not include Patient Protected Health Information (including any student, faculty, or support staff). Please refer to the EOPP for additional clarification and penalty fee information.*

1. **Describe how students, faculty and appropriate support staff are encouraged to be immunized against and/or tested for infectious disease(s)?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 5-2 in the Accreditation Standards for Dental Assisting Education Programs.

**Emergency Management**

**5-3 The program must establish and enforce preclinical/clinical/laboratory protocols and mechanisms to ensure the management of emergencies; these protocols must be provided to all students, faculty and appropriate staff.**

**5-4 All students, faculty and support staff must be currently certified in basic life support procedures, including cardiopulmonary resuscitation with an Automated External Defibrillator (AED), prior to the direct provision of patient care.**

Narrative Response and Documentation (for Standards 5-3 and 5-4):

1. **As an Exhibit, provide preclinical/clinical/laboratory protocols that have been developed related to the management of emergencies.**
2. **How and when are these protocols provided to all students, faculty and appropriate staff?**
3. **Demonstrate how the program ensures continuous recognition/certification in CPR with AED for all students, faculty and support staff is maintained**
4. **For review on-site, please provide copies of all current student, faculty and staff CPR cards.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 5-3 and 5-4 in the Accreditation Standards for Dental Assisting Education Programs.

**STANDARD 6 – PATIENT CARE SERVICES**

**THIS STANDARD APPLIES WHEN A PROGRAM HAS AN ON-SITE CLINIC AND PROVIDES DENTAL CARE.**

**Intent:**

*These standards apply to any dental assisting program operating an on-site or distance site clinic which provides comprehensive dental care to patients (e.g., diagnosis and treatment planning, operative and/or surgical procedures).*

Note: This standard does not apply to on-site clinics owned and operated by an outside entity or organization.

**6-1 The program must conduct a formal system of quality assurance for the patient care program that demonstrates evidence of:**

1. **Standards of care that are patient-centered, focused on comprehensive care and written in a format that facilitates assessment with measurable criteria**
2. **An ongoing review of a representative sample of patients and patient records to assess the appropriateness, necessity and quality of the care provided**

**6-2 The program must develop and distribute to appropriate students, faculty, staff and each patient a written statement of patients’ rights.**

**6-3 Patients accepted for dental care must be advised of the scope of dental care available at the dental assisting program facilities. Patients must also be advised of their treatment needs and appropriately referred for the procedures that cannot be provided by the program.**

Narrative Response and Documentation (for Standards 6-1 through 6-3):

**1. Describe the program’s quality assurance process and procedures for the patient care program.**

**2. As an Exhibit, provide a copy of the written statement of patients’ rights. Describe how the statement is distributed to students, faculty, staff and patients.**

**3. Describe how the patients are informed of the scope of dental care available at the program facilities, advised of their treatment needs and referred for further treatment.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 6-2 in the Accreditation Standards for Dental Assisting Education Programs.

**CONCLUSIONS AND SUMMARY OF THE SELF-STUDY REPORT**

**Note: This summary culminates the self-study report in a qualitative appraisal and analysis of the program’s strengths and weakness.**

**STANDARD 1 - INSTITUTIONAL EFFECTIVENESS**

1. Provide an evaluation of the assessment process and how it correlates with program goals.
2. Discuss the effectiveness of the program relative to student achievement.
3. Assess the stability of the program’s fiscal support as anticipated over the next several years.
4. Assess the financial allocations for faculty salaries for its ability to recruit and retain qualified faculty.
5. Assess how financial support affects achievement of program goals.
6. Evaluate the overall effectiveness of the advisory committee and its interactions with the dental assisting program in providing information on dental and dental assisting practice and employment needs. Explain how it helps the program meet its objectives.

**STANDARD 2 - EDUCATIONAL PROGRAM**

1. Evaluate the admissions criteria relative to student achievement and program completion rates.
2. Assess the effectiveness of policies and methods used for the award of advanced standing credit. Do they effectively result in equivalent student competence?
3. Describe any concerns related to enrollment trends and student achievement..
4. Evaluate the extent to which the program goals and objectives provide for the ongoing inclusion of scientific advancement and innovations in dental assisting practice and health care systems.
5. Explain the rationale for the overall curriculum structure and sequence. Include an analysis of how foundational content prepares students to assimilate more advanced concepts.
6. Evaluate the effectiveness of the curriculum modification process.
7. Appraise students’ ability to evaluate the outcome of dental assisting care through experience with maintenance or continuing care appointments for clinic patients.

**STANDARD 3 - ADMINISTRATION, FACULTY AND STAFF**

1. To what extent does the program administrator have authority commensurate with his/her responsibilities to support the goals and objectives of the dental assisting program?
2. Summarize and provide examples of the program director’s authority to make decisions regarding continuous coordination, evaluation and development of the dental assisting program. Include an assessment of the effectiveness of communication between the program administrator and institutional administrators.
3. Evaluate the adequacy of the number of program faculty, and scheduling flexibility to achieve program goals.
4. Assess the extent to which provisions for faculty appointments ensure that faculty will have non-teaching time to evaluate the program and institute changes on a continuing basis.
5. To what extent do laboratory, preclinical and clinical faculty/student ratios enable the program to achieve its objectives?
6. To what degree do faculty workloads allow for effective supervision of exceptional and/or slow students?
7. Assess the effectiveness of the current arrangements for any dentist(s) who provide(s) supervisory, diagnostic, consultative and referral services for the dental assisting program.
8. Assess the effectiveness of the faculty evaluation system.
9. Explain the extent to which the institution/program support the endeavors of faculty to meet and maintain qualifications listed within the standards.
10. Evaluate the adequacy of support services available to the program.

**STANDARD 4 - EDUCATIONAL SUPPORT SERVICES**

1. Assess the advantages and disadvantages of the capacity, design, and scheduling of clinical, laboratory and classroom facilities and equipment.

1. Evaluate the adequacy of the facilities and scheduling flexibility to achieve program goals and objectives.
2. Assess the advantages and disadvantages of the capacity, design and scheduling of the clinical facility and equipment in relation to the attainment of program goals and provision of adequate clinical practice experiences for all dental assisting students.
3. Evaluate the comprehensiveness, diversity, currency and quality of the texts and periodicals pertaining to dentistry and dental assisting that are available for use.
4. Assess the budget available to purchase instructional aids and equipment.
5. Summarize and evaluate the effectiveness of all program support services.

**STANDARD 5 - HEALTH AND SAFETY PROVISIONS**

* + - 1. Assess the effectiveness of the institution’s policies and procedures in ensuring a safe environment for patients, students, faculty and staff: a) infectious diseases; b) ionizing radiation; and, c) sterilizing and disinfecting equipment and procedures in relation to practicing current infection and hazard control.
      2. Evaluate the adequacy of the emergency equipment and materials in relation to instruction in managing dental emergencies. Assess the effectiveness of the program’s policies and resources relative to emergencies.
      3. Assess the program’s effectiveness in ensuring the continuous basic life support recognition of all students, faculty and staff who are involved in the direct provision of patient care.

**STANDARD 6 - PATIENT CARE SERVICES**

1. If applicable (See Standard 6), evaluate the extent to which the program provides quality patient care.

**EXAMPLES OF SELECTED EXHIBITS**

All Exhibits included in the completed Self-Study Report should be **numbered** sequentially. Exhibit numbers in the completed document will not correspond to the example exhibit numbers provided in this Self-Study Guide.

**Standard 1 – Institutional Effectiveness**

**Example Exhibit 1**

**Example Exhibit 2**

**Example Exhibit 3**

**Example Exhibit 4**

**Example Exhibit 5**

**Standard 2 – Educational Program**

**Example Exhibit 6**

**Example Exhibit 7**

**Example Exhibit 8**

**Example Exhibit 9**

**Example Exhibit 10**

**Example Exhibit 11**

**Example Exhibit 12**

**Example Exhibit 13**

**Example Exhibit 14**

**Standard 3 – Administration, Faculty and Staff**

**Example Exhibit 15**

**Example Exhibit 16**

**EXAMPLE EXHIBIT 1**

Using the following sample format, list the program’s goals and/or objectives and describe the assessment methods utilized.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Program Goal \_\_\_\_\_** | **Program Goal \_\_\_\_\_** | **Program Goal\_\_\_\_\_** | **Program Goal\_\_\_\_\_** |
| **Time-table for process implementation** |  |  |  |  |
| **Participant(s)** |  |  |  |  |
| **Participant(s)**  **roles and responsibilities** |  |  |  |  |
| **Method of goal assessment** |  |  |  |  |
| **Appropriate benchmark?** |  |  |  |  |
| **Analysis timeframe for obtained data** |  |  |  |  |
| **Related findings and conclusions** |  |  |  |  |
| **Program changes made as a result of findings** |  |  |  |  |
| **Changes made within outcomes planning and assessment process** |  |  |  |  |
| **Follow-up** |  |  |  |  |

**EXAMPLE EXHIBIT 2**

Using the following format, identify the sources of fiscal support for the program and the percentage of the program’s total budget that each source constitutes:

Current fiscal year: \_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| A. State support | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| B. Local support | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| C. Grant |  |  |  |
| federal | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| state | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| local | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| private | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| D. Student tuition | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| E. Outside Entities  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (specify) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| F. Other  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (specify) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% |
| TOTAL | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_100% |

**EXAMPLE EXHIBIT 3**

Using the following form, provide information on the dental assisting program’s budget for the previous, current and ensuing fiscal years.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Previous Year  20\_\_ to 20\_\_ | Current Year  20\_\_ to 20\_\_ | Ensuing Year  20\_\_ to 20\_\_ |
| I. | Capital Expenditures  A. Construction  B. Equipment  1. Clinic (dental unit, chair, etc.)  2. Radiography (including darkroom)  3. Laboratory  4. Locker Room  5. Reception Room  6. Faculty & Staff offices  7. Instructional equipment  8. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
| II. | Non-capital expenditures  A. Instructional materials, e.g., slides, films  B. Clinic supplies  C. Laboratory supplies  D. Office supplies  E. Program library collection  1. Institutional  2. Departmental  F. Equipment maintenance and replacement  G. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
| III. | Faculty  A. Salaries  B. Benefits  C. Professional Development  D. Travel for Student Supervision  E. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_   \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
| IV. | Staff  A. Secretarial Support  B. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
| V. | Other Categories, if any (specify)\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
|  | GRAND TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ |

**EXAMPLE EXHIBIT 4**

Provide the actual dental assisting expenditures for the previous year using the following form.

|  |  |  |
| --- | --- | --- |
|  |  | Previous Year  20\_\_ to 20\_\_ |
| I. | Capital Expenditures  A. Construction  B. Equipment  1. Clinic (dental unit, chair, etc.)  2. Radiography (including darkroom)  3. Laboratory  4. Locker Room  5. Reception Room  6. Faculty & staff offices  7. Instructional equipment  8. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_\_ |
| II. | Non-capital Expenditures  A. Instructional materials, e.g., slides, films  B. Clinic Supplies  C. Laboratory supplies  D. Office supplies  E. Program library collection  1. Institutional  2. Departmental  F. Equipment maintenance and replacement  G. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_ |
| III. | Faculty  A. Salaries  B. Benefits  C. Professional Development  D. Travel for Student Supervision  E. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_ |
| IV. | Staff  A. Secretarial Support  B. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_ |
| V. | Other Categories, if any (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TOTAL | $\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_ |
|  | GRAND TOTAL | $\_\_\_\_\_\_\_\_\_\_ |

**EXAMPLE EXHIBIT 5**

Provide information in the salary schedule for full-time and part-time faculty for the current year. If appropriate, use the following format.

FULL-TIME FACULTY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | INSTITUTION | | | DENTAL ASSISTING PROGRAM | | |
| Categories of Faculty Rank | Minimum | Average | Maximum | Minimum | Average | Maximum |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

PART-TIME FACULTY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | INSTITUTION | | | DENTAL ASSISTING PROGRAM | | |
| Categories of Faculty Rank | Minimum | Average | Maximum | Minimum | Average | Maximum |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**EXAMPLE EXHIBIT 6**

Using the table below, provide enrollment data for the program during the current and six (6) preceding years. If classes are admitted more than once a year, indicate admissions by each admission interval. The purpose of this exhibit is to track retention progression for **each cohort entering** the program. Completion dates are in parentheses and used for the example. Modify accordingly.

**Note:** Programs with multiple enrollment starts per year must provide enrollment and attrition data for each group of students enrolled. Please modify the below chart to reflect this information.

Example for Two-Year Program:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 2012 (2014) | 2013 (2015) | 2014 (2016) | 2015 (2017) | 2016 (2018) | 2017  (2019) | 2018  (2020) |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Preceding Years-Each Column Represents One Cohort of Students | | | | | | Current Year (recently admitted class) |
| Admission Year  (Graduation Year) | 20XX (20XX) | 20XX (20XX) | 20XX (20XX) | 20XX (20XX) | 20XX (20XX) | 20XX  (20XX) | 20XX  (20XX) |
| Number of Applicants (submitted required credentials) |  |  |  |  |  |  |  |
| Number Meeting the Minimum Admission Criteria |  |  |  |  |  |  |  |
| Number Offered Admission |  |  |  |  |  |  |  |
| **Total Number Enrolled** |  |  |  |  |  |  |  |
| Of the total Number Enrolled, Number from a Previous Cohort |  |  |  |  |  |  |  |
| Number Enrolled with Advanced Standing |  |  |  |  |  |  |  |
| Number Completed Program |  |  |  |  |  |  | X |
| Percentage Completed  (Number completed program/Total Number Enrolled) | % | % | % | % | % | % | X% |

Based on the information above, indicate the number of students who withdrew or were dismissed from the program during the current and six (6) preceding years.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | REASON FOR WITHDRAWAL OR DISMISSAL | | | |
| Program Non-Completion Reasons | ACADEMIC ISSUES | LACK OF INTEREST | PERSONAL/  FINANCIAL ISSUES | OTHER  (SPECIFY) | |
| Academic Year Enrollment Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment  Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment  Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment  Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment  Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| Academic Year Enrollment Admission year 20XX  Graduation Year (20XX) |  |  |  |  | |
| TOTAL |  |  |  |  | |

**Example Exhibit 7**

For programs that have multiple enrollment starts **only:** Please complete Example Exhibit 7 for each requested calendar year. Identify the class, number of students and the start and end dates. This is an example. Modify the Exhibit as appropriate.

**As an example:**

Previous Year: 2012\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| January | February | March | April | May | June | July | August | September | October | November | December |
|  | Class 1 (20 students): start February 2, 2012 and graduates November 31, 2012 | | | | | | | | | |  |
|  |  |  |  |  | Class 2 (22 students): start June 2, 2012 and graduate April 30, 2013 | | | | | | |
|  |  |  |  |  |  |  |  |  | Class 3 (15 students): starts October 31, 2012 and graduates September 1, 2013 | | |

Current Year: 2013

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| January | February | March | | April | | May | June | | July | August | | September | | October | | November | December |
| Class 2 (22 students): start June 2, 2012 and graduate April 30, 2013 | | | | | |  |  | |  |  | |  | |  | |  |  |
| Class 3 (15 students): starts October 31, 2012 and graduates September 1, 2013 | | | | | | | | | | | | | |  | |  |  |
|  | Class 4 (20 students): start February 2, 2013 and graduates December 1, 2013 | | | | | | | | | | | | | | | | |
|  |  | |  | |  | | Class 5 (22 students): start June 2, 2013 and graduate April 30, 2014 | | | | | | | | | | |
|  |  | |  | |  | |  |  | | |  | |  | | Class 6 (15 students): starts October 31, 2013 and graduates September 1, 2014 | | |

Following Year: 2014

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| January | February | | March | | | April | | May | June | | July | | August | | September | | October | November | December |
| Class 5 (22 students): start June 2, 2013 and graduate April 30, 2014 | | | | | | | |  |  | |  | |  | |  | |  |  |  |
| Class 6 (15 students): starts October 31, 2013 and graduates September 1, 2014 | | | | | | | | | | | | | | | | |  |  |  |
|  | |  | |  |  | |  | | | Class 7 (22 students): start June 2, 2014 and graduate April 30, 2015 | | | | | | | | | |
|  | |  | |  |  | |  | | |  | |  | |  | |  |  |  |  |

**EXAMPLE EXHIBIT 8**

Outline the sequence of the dental assisting curriculum as illustrated below. This is an EXAMPLE. If the program delivery structure is different, please modify to demonstrate the same information.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Course  Number  Term 1: | Course Title | Credits\* Awarded | Clock Hours/Week  Lec. Lab. Clinical | | | Number of Faculty/Number of Students  Lec. Lab. Clinic | | | Faculty  Person Responsible |
| DA 122  DA 123  \*\*Eng 101  DA 120  DA 121 | Dental Materials  Preclinical science  Composition  Intro. To Dentistry  Dental Anatomy | 5  4  3  2  3  17 | 2  3  3  2  3  13 | 9  3  0  0  3  15 |  | 1/20  1/20  1/20  1/20  1/20 | 2/20  1/10  2/20 |  | Miss Smith  Dr. Gray  Miss Jones  Mrs. Brown  Mrs. Brown |
| Term 2: | |  |  |  |  |  |  |  |  |
| DA 127  DA 124  \*\*Spch113  DA 125 | Den. Radiography  Office Management  Oral Communications  Clinical Procedures | 4  3  3  5  16 | 3  2  3  3  10 | 6  3  0  3  12 | 3  3 | 1/20  1/20  1/20  1/10 | 4/20  1/20  1/10 | 1/10 | Miss Smith  Mrs. Brown  Mrs. Black  Mrs. Brown |
| Third Term:  Fourth Term:  Total Number of Credit Hours  Transferable Credit Hours | | \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ | |  |  |  |  |  |  |

\*If the institution does not assign credit hours, do not complete this column.

**EXAMPLE EXHIBIT 9**

For each term provide a schedule of the dental assisting courses as illustrated below. Include course number and name; faculty, setting (clinic, lab, classroom number); and number of students. Modify the exhibit as needed to account for multiple sections.

This is an **EXAMPLE.** Programs with multiple enrollment starts must modify the exhibit to provide the requested information. If there are multiple classes running concurrently, please modify the exhibit to clearly demonstrate the requested information below.

TERM: \_\_\_\_\_\_\_\_\_\_ 20\_\_

(specify)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Hour | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| 8:00 | DA 122 Lec.  Miss Smith  Room 200  20 Students | DA 121 Lec.  Mrs. Brown  Room 200  20 Students |  | DA 122 Lec.  Miss Smith  Room 200  20 Students | DA 121 Lec.  Mrs. Brown  Room 200  20 Students |
| 9:00 | DA 122 Lec.  Miss Smith  Mrs. Brown  Room 200  20 Students | DA 120 Lec.  Mrs. Brown  Room 200  20 Students |  | DA 122 Lec.  Miss Smith  Mrs. Brown  Room 200  20 Students | DA 120 Lec.  Mrs. Brown  Room 200  20 Students |
| 10:00 |  | Eng. 101 Lec.  Miss Jones  Room 200  20 Students | Eng. 101 Lec.  Miss Jones  Room 200  20 Students |  | Eng. 101 Lec.  Miss Jones  Room 200  20 Students |
| 11:00 |  |  |  |  |  |
| 12:00 |  |  |  |  |  |
| 1:00 | DA 123 Lec.  Dr. Grey  Room 200  20 Students | DA 122 Lec.  Miss Smith  Mrs. Brown  Room 200  20 Students | DA 123 Lec.  Dr. Grey  Room 200  20 Students | DA 121 Lab.  Miss Smith  Mrs. Brown  Clinic  20 Students |  |
| 2:00 | DA 123 Lec.  Dr. Grey Room 200  20 Students |  | DA 123 Lec.  Dr. Grey  Room 200  20 Students |  |  |
| 3:00 |  |  |  |  |  |
| 4:00 |  |  |  |  |  |

**EXAMPLE EXHIBIT 10**

Using the format illustrated below, list the preclinical and clinical courses which provide the major instruction in each category of function specified in Standards 2-9 and 210.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Functions | Content is presented | Preclinical competence is demonstrated | Clinical practice is performed | Clinical competence is demonstrated |
| **Essential Dental Assisting Skills:** |  |  |  |  |
| 1. Take/review and record medical and dental histories |  |  |  |  |
| 1. Take and record vital signs |  |  |  |  |
| 1. Assist with and/or perform soft tissue extra/intra oral examinations |  |  |  |  |
| 1. Assist with and/or perform dental charting |  |  |  |  |
| 1. Manage infection and hazard control protocol consistent with published professional guidelines |  |  |  |  |
| 1. Prepare tray set-ups for a variety of procedures and specialty areas |  |  |  |  |
| 1. Seat and dismiss patients |  |  |  |  |
| 1. Operate oral evacuation devices and air/water syringe |  |  |  |  |
| 1. Maintain clear field of vision including isolation techniques |  |  |  |  |
| 1. Perform a variety of instrument transfers |  |  |  |  |
| 1. Utilize appropriate chairside assistant ergonomics |  |  |  |  |
| 1. Provide patient preventive education and oral hygiene instruction |  |  |  |  |
| 1. Provide pre-and post-operative instructions prescribed by a dentist |  |  |  |  |
| 1. Maintain accurate patient treatment records |  |  |  |  |
| 1. Identify and respond to medical and dental emergencies |  |  |  |  |
| **Chairside Dental Assisting Functions:** |  |  |  |  |
| 1. Assist with and/or apply topical anesthetic and desensitizing agents |  |  |  |  |
| 1. Assist with and/or place and remove rubber dam |  |  |  |  |
| 1. Assist with and/or apply fluoride agents |  |  |  |  |
| 1. Assist with and/or apply bases, liners, and bonding agents |  |  |  |  |
| 1. Assist with and/or place, fabricate, and remove provisional restorations |  |  |  |  |
| 1. Assist with and/or place and remove matrix retainers, matrix bands, and wedges |  |  |  |  |
| 1. Assist with and/or remove excess cement or bonding agents |  |  |  |  |
| 1. Assist with a direct permanent restoration |  |  |  |  |
| 1. Fabricate trays, e.g., bleaching, mouthguard, custom |  |  |  |  |
| 1. Preliminary impressions |  |  |  |  |
| 1. Clean removable dental appliances |  |  |  |  |

**EXAMPLE EXHIBIT 11**

Using the format illustrated below, list the **additional functions** included in the curriculum which are not specified in Standards 2-9 and 2-10. Specify for each function whether it is taught to the level of laboratory competence (on manikins) or clinical competence (on patients).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| STATE ADVANCED/EXPANDED FUNCTIONS | Preclinical course where content is presented | Course where preclinical competence is demonstrated | Course where clinical practice is performed | Course where clinical competence is demonstrated |
| Polishing coronal surfaces |  |  |  |  |
| Removal of sutures |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**EXAMPLE EXHIBIT 12**

Extra Oral and Intra Oral Function(s) must be taught didactically and to laboratory/preclinical and clinical competence level under program/faculty supervision, if allowed within the State Dental Practice Act for Dental Assistants. (Do not include additional hours in advanced training (EF) taught outside the program curriculum)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Extra Oral Function(s) | Allowed by DPA? (Yes/No) | Time allocated: | | | |
| Didactic | Lab | Preclinical | Clinical |
| Carious risk assessment, perform |  |  |  |  |  |
| Extra-oral photography, apply various techniques for use |  |  |  |  |  |
| Head and neck exam |  |  |  |  |  |
| Medical/dental health history, assess and record |  |  |  |  |  |
| Nutrition counseling/dietary analysis |  |  |  |  |  |
| Oral Hygiene Instruction |  |  |  |  |  |
| Radiographs, expose and process |  |  |  |  |  |
| Vital signs, take and record |  |  |  |  |  |
|  |  |  |  |  |  |
| Other: (Please specify) |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Intra Oral Function(s) | Allowed by DPA? (Yes/No) | Time allocated in: | | | |
| Didactic | Lab | Preclinical | Clinical |
| Acid etch, apply |  |  |  |  |  |
| Alginate impression for study cast, take |  |  |  |  |  |
| Amalgam restoration for condensation, place |  |  |  |  |  |
| Condensing amalgam restoration, place |  |  |  |  |  |
| Amalgam restoration, polish |  |  |  |  |  |
| Antimicrobial agents, place |  |  |  |  |  |
| Arch wire, place and remove |  |  |  |  |  |
| Bands/brackets, size, fit and position |  |  |  |  |  |
| Bands/bonding brackets, cement |  |  |  |  |  |
| Loose bands, check |  |  |  |  |  |
| Bleaching agents in-office, application |  |  |  |  |  |
| Bonding agent, place and/or apply |  |  |  |  |  |
| Cavity liners and bases, apply |  |  |  |  |  |
| Observe and chart obvious lesions, existing restorations and missing teeth |  |  |  |  |  |
| Remove excess cement from coronal surface of tooth, |  |  |  |  |  |
| Coronal polish |  |  |  |  |  |
| Scale Coronal surface of tooth |  |  |  |  |  |
| Dental dam, place |  |  |  |  |  |
| Dental dam, remove |  |  |  |  |  |
| Denture adjustment, perform |  |  |  |  |  |
| Dry endo canals |  |  |  |  |  |
| Fabricate trays for in-office bleaching/night guards |  |  |  |  |  |
| Final impression with CAD/CAM unit, take |  |  |  |  |  |
| Final impression, take |  |  |  |  |  |
| Intra oral photography, apply various techniques for use |  |  |  |  |  |
| Matrix band, place |  |  |  |  |  |
| Matrix band, remove |  |  |  |  |  |
| Moderately sedated patients, monitor |  |  |  |  |  |
| Nitrous-oxide/oxygen analgesia, monitor |  |  |  |  |  |
| Oral cancer screening exam, perform |  |  |  |  |  |
| Orthodontic bands and brackets, remove |  |  |  |  |  |
| Periodontal dressings, , place |  |  |  |  |  |
| Periodontal dressings, remove |  |  |  |  |  |
| Pit and fissure sealant, apply |  |  |  |  |  |
| Plaque assessment (OHI) |  |  |  |  |  |
| Pulp vitality testing, perform |  |  |  |  |  |
| Radiographs, expose |  |  |  |  |  |
| Restorations, carve |  |  |  |  |  |
| Temporary/interim restorations, cementing |  |  |  |  |  |
| Temporary/interim restorations, fabricate |  |  |  |  |  |
| Temporary/interim restorations, place |  |  |  |  |  |
| Temporary/interim restorations, remove |  |  |  |  |  |
| Composite resin restoration, place and finish |  |  |  |  |  |
| Retraction cord, place and pack |  |  |  |  |  |
| Retraction cord, remove |  |  |  |  |  |
| Supragingival scaling, perform |  |  |  |  |  |
| Sutures, place |  |  |  |  |  |
| Sutures, remove |  |  |  |  |  |
| Topical anesthetic agents, apply |  |  |  |  |  |
| Topical fluoride, apply |  |  |  |  |  |
| Topical varnishes, apply |  |  |  |  |  |
|  |  |  |  |  |  |
| Other: (please specify) |  |  |  |  |  |

**EXAMPLE EXHIBIT 13**

Using the format illustrated below, list the courses which provide the major instruction in each required content area and specify the number of clock hours devoted to instruction in that area (Standards 2-12, 2-14, 2-15, 2-16, 2-17, 2-18 and 2-19).

|  |  |  |
| --- | --- | --- |
| CONTENT AREA | COURSE NO.  & TITLE | CLOCK HRS. FOR CONTENT AREA |
| **Dental Practice Management:** |  |  |
| 1. Computer and dental software |  |  |
| 1. Business ethics and jurisprudence |  |  |
| 1. Business oral and written communications |  |  |
| 1. Inventory systems and supply ordering |  |  |
| 1. Maintenance and retention of business records |  |  |
| 1. Management of patient information |  |  |
| 1. Recall systems |  |  |
| **Dental Sciences:** |  |  |
| Oral pathology |  |  |
| General anatomy and physiology |  |  |
| Microbiology |  |  |
| Nutrition |  |  |
| Oral anatomy |  |  |
| Patients with special needs |  |  |
| **Pharmacology:** |  |  |
| Drug requirements, agencies and regulations |  |  |
| Drug prescriptions |  |  |
| Drug actions, side effects, indication’s and contraindications |  |  |
| Common drugs used in dentistry |  |  |
| Properties of anesthetics |  |  |
| Drug and agents used to treat dental-related infection |  |  |
| Drug addiction including opioids and other substances |  |  |
| **Dental materials:** |  |  |
| Use and manipulation of gypsum |  |  |
| Use and manipulation of restorative materials |  |  |
| Use and manipulation of dental cements |  |  |
| Use and manipulation of impression materials |  |  |
| Use and manipulation of acrylics and/or thermoplastics |  |  |
| Use and manipulation of waxes |  |  |
| Use and manipulation of fabrication of casts, temporary and/or bridge |  |  |
| Use and manipulation of abrasive agents used to polish coronal surfaces and appliance |  |  |
| Use and manipulation of study casts/occlusal registrations |  |  |
| **Dental Radiology:** |  |  |
| Dental radiology |  |  |
| Radiation health protection techniques |  |  |
| Processing procedures |  |  |
| Anatomical landmarks and pathologies |  |  |
| Mounting survey of dental images |  |  |
| Placing and exposing dental images on manikins |  |  |
| Expose full-mouth dental image survey on patients |  |  |
| **Clinical and Behavioral Sciences:** |  |  |
| General dentistry |  |  |
| Specialty procedures |  |  |
| Practice management |  |  |
| Chairside assisting |  |  |
| Dental-related environmental hazards |  |  |
| Preventative dentistry |  |  |
| Management of dental and medical emergencies |  |  |
| TOTAL CLOCK HOURS IN CURRICULUM: | | |
|  | | |

**EXAMPLE EXHIBIT 14**

Using the format illustrated below, summarize the type and minimum number of acceptable radiographic surveys that each student is required to expose, process and mount in conjunction with the radiographs technique course(s).

|  |  |  |
| --- | --- | --- |
|  | Number of Surveys | |
| Type of Survey | Manikin | Patients |
| FULL MOUTH  Permanent dentition |  |  |
| Mixed dentition |  |  |
| Primary dentition |  |  |
| Edentulous |  |  |
| TOTAL: |  |  |
| BITE-WING (not included in FM series)  Permanent dentition |  |  |
| Mixed dentition |  |  |
| Primary dentition |  |  |
| TOTAL: |  |  |
| OCCLUSAL RADIOGRAPHS |  |  |
| EXTRAORAL RADIOGRAPHS (specify): |  |  |
|  |  |  |

**EXAMPLE EXHIBIT 15**

Using the following format, provide information requested for each dental assisting faculty member for each term of the academic year. (Note: If two or more classes are enrolled concurrently, each table should reflect the faculty member’s total time commitment per term.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Faculty:** *Insert Name Here* | | | | | | **Term:** *For example Spring/Fall/YEAR* | |
| **Full-Time Appointment:** | *Check here (X)* | | | **Part-Time Appointment:** | | | *Check here (X)* |
| **A. Current Teaching Contact Hours** | **Provide Number of Clock Hours Per Week**  *(Insert hours here)* | | | **B. Current Supplemental Responsibilities** | | | **Provide Number of Clock Hours Per Week**  *(Insert hours here)* |
| **Course No and Title** | ***Lecture*** | ***Lab*** | ***Pre-Clinic/***  ***Clinic*** |
|  |  |  |  | **Program Administration** | | |  |
|  |  |  |  | **Class Preparation** | | |  |
|  |  |  |  | **Student Counseling** | | |  |
|  |  |  |  | **Committee Activity** | | |  |
|  |  |  |  | **Other (Specify, and to include other programs or responsibilities assigned)** | | |  |
| **A. Total Clock Hours Per Week:** |  |  |  | **B. Total Clock Hours Per Week:** | | |  |
| **Hours Per Week Devoted to Total Effort (A+B)** | | | | | *Insert total contact hours (A+B) per week here* | | |

**EXAMPLE EXHIBIT 16**

**Commission on Dental Accreditation**

**Allied BioSketch**

**Do not attach Curriculum Vitae**

**Type Only**

**Note: The submitted biosketch must reflect current and complete information for the role held at the time of submission. The biosketch must demonstrate compliance with all program director and faculty Accreditation Standards, as applicable. An Incomplete biosketch will not be accepted; the biosketch must address all information requested below.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Current Institution:** |  | | |
| **Institutional Address:** |  | | |
| **Direct Office Phone:** |  | **Institutional Email:** |  |

**EDUCATIONAL BACKGROUND (Begin with the most recent college level and list all degrees and certificates including those currently pursuing. If pursuing a degree, indicate “in-progress” and expected date of graduation.)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of School, City and State | Month and Year of Grad. or  Expected Grad. | Certificate or Degree | Area of Study |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**LICENSURE & CREDENTIALING (Do not include license number) If licensure/credential will expire within six (6) weeks of date noted below, provide evidence of re-certification in progress.**

|  |  |  |
| --- | --- | --- |
| State License (if applicable)  **Indicate all credentials required for the subjects you teach in accordance with the CODA Accreditation Standards.** | From (Month/Year) | To (Month/Year) |
| CPR (if in laboratory, preclinical or clinical setting, must include) |  |  |
| DDS/DMD |  |  |
| CDA |  |  |
| EFDA |  |  |
| RDH |  |  |
| CDT |  |  |
| Dental Therapist |  |  |

**TEACHING APPOINTMENTS (Provide current teaching appointments)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Institution, City and State | Appointment Title | Specify  Full-Time or Part-Time | From  (Year) | To (Year) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**FOR THE SECTION BELOW, PLEASE INDICATE THE FOLLOWING** *(CURRENT TEACHING ASSIGNMENTS ONLY FOR ALL PROGRAMS WITH WHICH YOU ARE AFFILIATED)***:**

* **CONTINUING EDUCATION (CE)** COURSES TO REFLECT CURRENT KNOWLEDGE OF THE AREAS IN WHICH TEACHING RESPONSIBILITY IS ASSIGNED (All recent CE taken related to all subjects you currently teach. Must align with Teaching Responsibilities Table below)
* **EDUCATION METHODOLOGY (ED METH)** COURSES RELATED TO THE METHODS OF INSTRUCTION (All recent educational methodology taken related to all modalities used by you when teaching: didactic, laboratory/pre-clinic/clinic, and/or distance education/hybrid courses, including curriculum development, educational psychology, test construction, measurement and evaluation)

**Name of Institution and Program:** *[Insert name and allied program to which this biosketch applies. Copy as needed]*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **All Course(s) Assigned:**  Course Title and Number, and Term Offered | **Teaching Setting:**  Didactic, Laboratory,  Pre-clinic,  Clinic | **Teaching Modality:**  In-Person,  Hybrid,  Online, etc. | **CE Taken:**  Course Title and  Month and Year Taken | **ED METH Taken:**  Course Title and  Month and Year Taken |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**PRACTICE EXPERIENCE (All current practice experience)**

|  |  |  |  |
| --- | --- | --- | --- |
| Practice Location and Type (City and State) | Position Title | From (Year) | To  (Year) |
|  |  |  |  |
|  |  |  |  |

**For all semesters/trimesters/quarters in the academic year (copy/paste table for subsequent semesters/trimesters/quarters) submit a current teaching schedule for which you have assigned teaching and/or supplemental responsibilities. The teaching schedule must reflect current and complete information for the role held at the time of submission.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Faculty:** *Insert Name Here* | | | | | | **Term:** *For example Spring/Fall/YEAR* | |
| **Full-Time Appointment:** | *Check here (X)* | | | **Part-Time Appointment:** | | | *Check here (X)* |
| **A. Current Teaching Contact Hours** | **Provide Number of Clock Hours Per Week**  *(Insert hours here)* | | | **B. Current Supplemental Responsibilities** | | | **Provide Number of Clock Hours Per Week**  *(Insert hours here)* |
| **Course No and Title** | ***Lecture*** | ***Lab*** | ***Pre-Clinic/***  ***Clinic*** |
|  |  |  |  | **Program Administration** | | |  |
|  |  |  |  | **Class Preparation** | | |  |
|  |  |  |  | **Student Counseling** | | |  |
|  |  |  |  | **Committee Activity** | | |  |
|  |  |  |  | **Other (Specify, and to include other programs or responsibilities assigned)** | | |  |
| **A. Total Clock Hours Per Week:** |  |  |  | **B. Total Clock Hours Per Week:** | | |  |
| **Hours Per Week Devoted to Total Effort (A+B)** | | | | | *Insert total contact hours (A+B) per week here* | | |

# 

# PROTOCOL FOR CONDUCTING A SITE VISIT

Introduction: The Commission recognizes that there may be considerable latitude in determining procedures and methodology for site visits. Experience has shown that the conference method for conducting a site visit is widely favored and has been found most satisfactory.

Conferences with administrators and faculty should be scheduled in an adequately-sized and well-ventilated meeting room with a conference table, which is large enough to accommodate the visiting committee and faculty member participants. It is suggested that all conferences be scheduled for the same room. If more than one program is to be evaluated, an additional conference room for each program (within close proximity) will be required.

Briefing Faculty, Administrators and Students on the Site Visit: It is presumed that the program’s faculty, student body and advisory committee will be apprised of the Commission’s visit. The program director should inform the faculty that they will be expected to explain course objectives, teaching methods, particular skills and abilities expected of students upon completion of the course and the measures used to evaluate student achievement of those outcomes.

Focus of the Accreditation Review: Commission action on accreditation status is based upon the program in operation at the time of the site visit. It is not based upon any proposed changes in the program. The visiting committee will, however, expect to be apprised of any facility, faculty or curricular changes that are contemplated but not yet implemented.

Resources/Materials Available On-Site: It is expected that additional sources of information will be made available to the visiting committee on-site. Materials include, but are not limited to: the institution’s infection and hazard control protocol; logs of equipment certification; appropriate information pertaining to patient care and student advancement; student files; student and teaching staff evaluation records; current school catalog; admissions materials provided to students (e.g., handbooks, manuals, guides); promotional materials; samples of instructional aids; samples of students’ projects, text books, and assignments; record of student complaints; copy of State Practice Act; affiliation agreements; and minutes of advisory, curriculum, and faculty meetings.

Visiting Committee Schedule: While it is expected that all arrangements will be determined by the program director/administrator, experience indicates that administrators welcome suggestions by the Commission for the conduct of site visits. Although a more detailed suggested schedule of conferences will be forwarded to the program director/administrator prior to the scheduled visit, the Commission expects that an evaluation visit will include the following components:

1. An opening conference with the appropriate institutional administrators and program director the morning of the first day of the visit to include an overview and description of the institution and its programs. The purpose of this initial conference is to orient visiting committee members to a school’s particular strengths and weaknesses. This session is also intended to orient the administrators and program director to the methods and procedures of the visiting committee. Topics frequently covered in this session include: program goals, administration, faculty recruitment and evaluation, finances, facilities, curriculum development, assessment of outcomes, long-term planning and program development.
2. Tours of the program facilities and related learning resources facilities.
3. Conferences with faculty with teaching or administrative responsibilities for the program.
4. A student conference session in which all students from each class of the current program are invited to meet with the visiting committee. The purpose of these student interviews is to provide the site visitors an additional source with which to verify the program’s compliance with Accreditation Standards and Commission policies in addition to review of documentation and observation. Unless on an off-site rotation, ALL students must be available for interviews. Faculty and/or administrators must not be included in these sessions.
5. Meeting of the program advisory committee with the visiting committee. It is suggested that a luncheon or breakfast meeting on the first day of the visit be planned. Following the meal function, the visiting committee will wish to meet privately with the advisory committee to learn about the community’s involvement with the program. Faculty members should not be included.
6. If the program utilizes off-campus sites for clinical experiences or didactic instruction, please review the Commission’s **Policy Statement on Reporting and Approval of Sites Where Educational Activity Occurs** found in the Evaluation and Operational Policies and Procedures manual (EOPP). Please be aware that the visiting committee may visit any and all off-campus sites. In preparation for the site visit, the program will be asked to complete the “Sites Where Educational Activity Occurs” form.  Completed forms will be provided to the visiting committee who will determine if a visit to any off-campus sites is warranted and will inform the program director of the final determination in advance of the visit.
7. A final conference with the program director will be conducted at the end of the visit. The visiting committee will, at that time, summarize its recommendations relating to the educational program. The program director may choose to include other individuals, such as the dental school dean and/or faculty members, in the final conference.
8. Following the final conference with the program director, another conference, with the institution’s chief executive officer and the dental school dean/chief of dental service/chief administrative officer will be conducted. The visiting committee will report briefly on the findings and recommendations related to the evaluation. Such a meeting also affords the chief executive officer an opportunity to relate plans for the entire institution that will involve the allied dental education program. The program director is usually present during the conference with the institution’s administrators.

Guidelines and Protocol for the Site Visit: The Commission has approved the following guidelines for visiting committee members describing their responsibilities during site visits.

* Committee members cannot accept social invitations from individuals affiliated with the host program/institution. The Commission believes firmly that the primary function of a visiting committee is program evaluation and review.
* Self-study documents are accessible to committee members at least 60 days prior to a site visit. Committee members are expected to review all materials and to be familiar with academic and administrative aspects of the program and the information contained in the self-study report prior to the site visit.
* Committee members meet in executive sessions to review, evaluate and discuss all aspects of the program. An executive session is generally held in the evening preceding the first day of the site visit and at scheduled intervals during the site visit. In this manner, the committee chair is expected to obtain a consensus that serves as a basis for drafting the evaluation report. Institutional/Program personnel must not be present during executive sessions.
* Although committee members discuss general findings and recommendations with the administration during the final conference, decisions regarding the accreditation status of education programs are made only by the Commission at its regularly scheduled meetings following discussion and in-depth review of site visit reports and institutional responses.
* Committee members are expected to participate actively in conference discussions. They are expected to refrain from expressing personal observations regarding teaching methodology or practice technique. The Commission reminds visiting committees that department chairs and faculty members participating in accrediting conferences have given considerable time and thought to prepare for the visit. It is, therefore, assumed that visiting committees will allow chairs and faculty members to explain their teaching methodology, course content, evaluation procedures and department philosophy.
* After the site visit, Commission staff forwards a draft of the site visit report to committee members for review, study and comment. Prompt response to the preliminary draft by visiting committee members is essential to the preparation of evaluation reports for Commission review and action during regularly scheduled meetings.
* When site visit reports are presented to the Commission or its review committees for consideration and action, review committee members who were also visiting committee members are expected to recuse from the discussion of the programs evaluated.

Committee members are expected to regard all information and data obtained before and during site visits as confidential. All evaluation reports and accreditation actions of the Commission are regarded as confidential and privileged information. Therefore, disclosure of personal or committee views at any time before, during or after site visits and Commission review is not authorized. The preliminary draft of a site visit report is an unofficial document and remains confidential between the Commission and the institution’s executive officers and may not, under any circumstances, be released. Site visit reports approved during a Commission meeting are transmitted to officials of parent institutions and program administrators or directors.

Public release of the final draft of the site visit report that is approved by the Commission is at the sole discretion of the institution. If there is a point of contention about a specific section of the final site visit report and the institution elects to release the pertinent section to the public, the Commission reserves the right to make the entire site visit report public.

* At the conclusion of the site visit and prior to leaving the site, committee members are requested to return their on-site copies of the data profile information and other confidential site visit documents pertaining to the visit to the Commission staff. The data profile information may be left with the program.

Additional Information: Additional information regarding the procedures followed during the site visit and following the visit are contained in the Commission’s Evaluation and Operational Policies and Procedures manual (EOPP).

Staff Assistance/Consultation: The staff of the Commission on Dental Accreditation is available for consultation to all educational programs which fall within the Commission’s accreditation purview. Educational institutions conducting programs oriented to dentistry are encouraged to obtain such staff counsel and guidance by written or telephone request. Consultation is provided on request prior to, as well as subsequent to, the Commission’s granting of accreditation to specific programs. Consultation shall be limited to providing information on CODA’s policies and procedures. The Commission expects to be reimbursed if substantial costs are incurred. Contact Commission on Dental Accreditation's Manager of Allied Dental Education at the Commission’s number: 312-440-4660. CODA staff e-mails can be found on the CODA website at the following link: <https://coda.ada.org/about-coda/coda-staff>.

1. Adapted and summarized from “Role and Importance of the Self-Study Process in Accreditation”, Richard M. Millard, President, Council on Postsecondary Accreditation (July 25-26, 1984). [↑](#footnote-ref-2)