### Commission on Dental Accreditation

**Self-Study Guide for the Evaluation of a Dental Laboratory Technology Education Program**

Self-Study Guide for the Evaluation of a

**Dental Laboratory Technology Education Program**

# Commission on Dental Accreditation

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Commission on Dental Accreditation

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## Self-Study Guide for the Evaluation of a

## Dental Laboratory Technology Education Program

## Document Revision History

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| --- | --- | --- |
| **Date** | **Item** | **Action** |
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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-1) 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 laboratory technicians;
	2. Expectations of the profession and the public in relation to education of dental laboratory technicians 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 and 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 and are found at <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/residents’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/residents’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 Laboratory Technology Education Program

**I have reviewed this document and verify that the information it is accurate and complete, and that it complies with the Commission on Dental Accreditation’s Privacy and Data Security Requirements for Institutions.**

|  |
| --- |
| 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/administratorName: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 LABORATORY TECHNOLOGY 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 laboratory technology program.

|  |
| --- |
| Admissions |
| a. Number of classes admitted annually:  |  |  |
|  |
| b. Enrollment pattern (month and number): |  |  |
|  |  |
| c. Current total enrollment: |  |
|  | 1st year students |  |  |  |
|  | 2nd year students |  |  |  |
|  | 3rd year students\* |  |  |  |
|  | 4th year students\* |  |  |  |
|  (\*To be completed if applicable) |

|  |
| --- |
| Facilities |
| a. Identify program(s) that share dental hygiene facilities, e.g., dental assisting, 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 hygienists- |
|  Full-time:  |  | Part-time: |  |
|  |  |
| b. Dentists- |
|  Full-time:  |  | Part-time: |  |
| Supervising: |  |  |
|  |  |
| c. Dental assistants- |
|  Full-time:  |  | Part-time: |  |
|  |  |
| d. Non-Program faculty- |
|  Full-time:  |  | Part-time: |  |

|  |
| --- |
| Curriculum |
| a. Name of term (semester, module, quarter, etc.): |  |
| 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 laboratory technology instruction occurs (See definitions within EOPP):

Off-Campus (major and minor activity sites):On-Site:Enrichment: |
|  |
| b. Describe any curriculum delivered via distance education technologies and/or non-traditional methods (list on-line, hybrid, and blackboard courses): |
|  |

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

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **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 laboratory technology programs utilize numerous extramural dental laboratories to provide students with 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) |
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**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 Laboratory Technology Education Programs (January 1, 2013), 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/residents’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/residents’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 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**

**Program Planning and Assessment**

* 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. **Program goals that include, but are not limited to a purpose, mission statement, and student learning outcomes that are consistent with the goals of the sponsoring institution and appropriate to dental technology education**
		2. **An implementation plan**
		3. **An assessment process which includes measures of student achievement**
		4. **Use of results for program improvement**

***Intent:***

*Planning for evaluation of and improvement of the educational quality of the program is broad-based, systematic, continuous and designed to promote achievement of program goals.*

Narrative Response and Documentation:

 **1. List the program’s goals. If a philosophy has been developed for the program, quote the philosophy.**

 **2. How, when and by whom are the program goals reviewed, evaluated and revised? Using the sample format illustrated in Example Exhibit 1 develop an assessment schedule, timetable or plan.**

 **3. Describe the outcomes measures that are utilized to determine the degree to which these stated goals and objectives are being met.**

 **4. Document the assessment methods utilized. Include examples, i.e. graduate surveys, employer surveys, examination results, etc.**

1. **Document the results of the assessment process. Include examples, i.e., course completion rates, job placement rates, certification examination results, etc..**

**6. Describe how the results of the assessment process are reviewed/used for program improvement.**

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

**Financial Support**

**1-2 The program must have a strategic plan which identifies stable institutional financial resources sufficient to support the program’s stated mission, goals and objectives.**

 **Intent:**

 *The institution has the financial resources required to develop and sustain the program on a continuing basis. The ability to employ an adequate number of full-time faculty, replace and add equipment, procure supplies, reference material, and teaching aids is reflected in annual budget appropriations for the program. Financial allocations ensure that the program will be in a competitive position to recruit and retain qualified faculty. Annual appropriations provide for innovations and changes necessary to reflect current concepts of education in the discipline. The Commission assesses the adequacy of financial support on the basis of current appropriations. The financial resources identify stable sources of funding for the program and the degree of dependence upon a given funding source is based upon the stability of that source.*

**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.**

**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.**

 Narrative Response and Documentation for 1-2 to 1-4:

 **1. Describe/explain the process utilized to develop the program’s budget. Include the timeframe, individuals involved, and final decision making body/individual(s). As an exhibit, include a copy of the budget approval process for the program/institution.**

 **2. Using the Example Exhibit 2 format, identify the sources of fiscal support for the dental laboratory technology 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 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 and 1-3 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Institutional Accreditation**

**1-5 Programs must be sponsored by educational institutions that are responsible for postsecondary education and accredited by an agency recognized by the United States Department of Education or an officially recognized state accrediting agency.**

**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 sponsors 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).**
2. **By what agency recognized by the United States Department of Education or officially recognized state accrediting agency is the institution accredited? Briefly describe the institution’s accreditation history, including its current status and date of last evaluation.**
3. **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 Laboratory Technology 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.**

Narrative Response and Documentation:

 **1. Is there an arrangement to co-sponsor the program or is/are there affiliated institutions? If yes, describe the arrangement, including a brief history and date of the initial agreement.**

 **2. As an Exhibit, please provide a copy of the written agreement.**

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

**Community Resources**

**1-7 There must be an active liaison mechanism between the program and dental professionals in the community.**

 **Intent:**

 *The purpose of the active liaison mechanism is to provide a mutual exchange of information for improving the program and meeting employment needs of the community.*

*Meetings, either in-person or virtual, should be held at least once per year.*

Narrative Response and Documentation:

**1. Describe the mechanism(s) used to maintain liaison between the program, dental technicians, dental laboratory owners and dentists in the community. Provide a listing of individuals who are currently involved in the liaison activity as an Exhibit.**

**2. In what document are the duties and responsibilities of the individuals involved in liaison activities defined? Please provide the document as an Exhibit.**

**3. Describe recent liaison activities with the dental laboratory technology community.**

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

**STANDARD 2 – EDUCATIONAL PROGRAMS**

**Admissions**

* 1. **Admission of students must be based on specific written criteria, procedures and policies. Minimum admissions requirements must include high school diploma or its equivalent. Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability, and employment opportunities for dental laboratory technicians.**

**Intent:**

*Because the curriculum is science and technology-oriented and enrollment is limited by facility capacity, special program admissions criteria and procedures may be necessary. The program administrator and faculty, in cooperation with appropriate institutional personnel establish admissions procedures which are non-discriminatory, contribute to the quality of the program, and allow selection of students with potential for successfully completing the program.*

Narrative Response and Documentation:

 **1. List the admission criteria for the dental laboratory technology program. Are the criteria weighted? If so, explain.**

 **2. Describe the process for selecting dental laboratory technology students. Indicate names and titles of individuals participating in the process.**

 **3. How are applicants informed about the program’s criteria and procedures for admission, program goals, functions performed by dental laboratory technicians and employment opportunities?**

 **4. If students who do not meet the program’s admission criteria are admitted, what academic strengthening is provided in the area(s) of deficiency(s)? When and by whom, will the remediation be provided?**

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

* 1. **Admission of students with advanced standing must be based on the same criteria required of all applicants admitted to the program. If a program considers students for advanced standing, credit must be awarded based on equivalent didactic, laboratory 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. 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:

 **1. Does the dental laboratory technology 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.**

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

**2-3 The number of students enrolled in the program must be proportionate to the resources available.**

 **Intent:**

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

Narrative Response and Documentation:

 **1. How many classes does the dental laboratory technology 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 credentials, 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 four preceding years.**

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

**Curriculum Management**

* 1. **The curriculum must include at least two academic years of full-time instruction or its equivalent at the postsecondary level. The scope and depth of the curriculum must reflect the objectives and philosophy of higher education. The college catalog must list the degree awarded and course titles and descriptions. In a two-year college setting, the graduates of the program must be awarded an associate degree or certificate of completion. In a four-year college or university, graduates of the program must be awarded an associate degree, post-degree certificate, or baccalaureate degree.**

**Intent:**

*Minimum of at least two academic years or equivalent of full-time study are required to provide both didactic and laboratory experiences sufficient to ensure that students will acquire appropriate knowledge and skill. The curriculum may be structured to allow individual students to meet performance standards specified for graduation in less than 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 provides maximum opportunity for students to continue their formal education with minimum duplication of learning experiences.*

**2-5 The curriculum must be designed to reflect the interrelationship of general studies, physical sciences, dental sciences and dental laboratory techniques to promote maximum application of basic concepts in the performance of dental laboratory techniques.**

 **Intent:**

 *Although there is not a prescribed sequence of instruction, the order of content presentation and learning experience is based on a reasonable relationship between the basic and applied aspects of the curriculum.*

 Narrative Response and Documentation for 2-4 and 2-5:

1. **Outline the sequence of the dental laboratory technology curriculum as illustrated in example Exhibit 7.**
2. **For each term of the current year’s dental laboratory technology curriculum, provide a class schedule as illustrated in example Exhibit 8. (If a schedule does not extend the entire term, provide supplemental schedules.) Include course number; indicate whether the session is lecture, laboratory or clinic; and provide the name(s) of the faculty member(s) responsible.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-4 and 2-5 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Instruction**

* 1. **Written documentation for each course in the curriculum must be provided to students and include:**
1. **Course title, number, and description**
2. **Instructor(s) of record and contact information**
3. **Course content outline including topics to be presented**
4. **Specific instructional objectives, student learning outcomes and assessment mechanisms**
5. **Course schedule including time allocated for didactic and laboratory learning experiences**
6. **Specific criteria and evaluation procedures for course grade calculation**

 **Intent:**

 *Curriculum documentation is current, reviewed periodically and revised, and should include:*

1. *Topics related to course content*
2. *Instructional objectives and learning experiences are related to topics*
3. *Evaluation procedures measure instructional objectives*
4. *Course or weekly schedule*

Documentation:

1. **In a separate curriculum document, for each course provided by the dental laboratory technology program, include the course documentation/syllabus that is provided to students. Documentation for each course should be grouped together, in term sequence, and include the following:**
2. **course title, number and description**
3. **instructor(s) of record and contact information**
4. **course content outline including topics to be presented**
5. **specific instructional objectives, student learning outcomes and assessment mechanisms**
6. **learning experiences including time allocated for each experience;**
7. **specific criteria and evaluation procedures for course grade calculation**
8. **example of exam, quiz, and/or rubric as appropriate; and**
9. **all skill evaluations**

**Note:** For courses required by the dental laboratory technology program to meet accreditation standards (including pre-requisite courses, or courses presented within other academic departments), please include example syllabi. The site visit team will review the level and scope of content and will determine if faculty interview is necessary)

 Complete checklist in Example Exhibit 9 to ensure all components are included (Optional).

The curriculum document must include a table of contents with course number and title, and corresponding continuous page numbers. The document should begin with page 1 and be sequentially and continuously paginated to the end of the document. Present course documentation in sequence of presentation and bookmark each course in the electronic document for ease of reference. See the Electronic Submission Guidelines for more information.

**Curriculum Content**

**2-7 The basic curriculum must include content in the subject areas: general studies; physical sciences; dental sciences; legal, ethical and historical aspects of dentistry and dental laboratory technology; infectious disease and hazard control management and basic laboratory techniques.**

 **Intent:**

 *To ensure that foundational knowledge is established early in the program and that subsequent information is provided which is comprehensive and prepares the student to achieve competence in all components of dental laboratory practice. Content identified in each subject need not constitute a separate course, but the subject areas are included within the curriculum.*

**General Studies**

**2-8 The curriculum must include content at the in-depth level in communication skills, mathematics and business principles relative to dental laboratory technology.**

**Intent:**

*Content in general studies prepares the student to work and communicate effectively with dental professionals and patients, and provides a foundation of knowledge for professional success*

**Physical Sciences**

**2-9 The curriculum must include content in chemistry and physics relative to dental laboratory technology.**

**Intent:**

*Content in physical sciences should prepare the student with an understanding of physical and chemical characteristics related to dental materials and processes, and utilized in proper fabrication of dental restorations, prostheses and appliances.*

**Dental Sciences**

**2-10 The curriculum must include content in dental materials, tooth morphology, oral anatomy and occlusion.**

**Intent:**

*Dental science content should provide the student with an understanding of physical properties, uses and manipulation of dental materials; tooth form and function; and structures of the oral cavity as related to proper application for use in fabricating dental restorations. Content should include principles of occlusion, determinants of occlusal morphology and physiology of mandibular movements.*

**Legal, Ethical and Historical Aspects**

**2-11** **The curriculum must include content in the legal, ethical and historical aspects of dentistry and dental laboratory technology to include:**

1. **Organizations that advance certification and continuing education for dental technicians and certification of laboratories.**
2. **Work authorization/prescription of the dentist in accordance with the state dental practice act, consistent with current procedures in dental laboratory technology in the geographic area served by the program.**
3. **Federal and state laws and regulations related to operating a dental laboratory and/or working as a dental laboratory technician.**
4. **HIPAA laws related to health care professionals**
5. **Ethics for health care professionals**

**Intent:**

*The dental laboratory technology curriculum prepares students to assume a professional and ethical standard to understand the basic foundation in which the fundamentals of dental laboratory technology were established.*

**Infectious Disease and Hazard Control Management**

**2-12 The program must present appropriate, ethical, legal and regulatory content related to bloodborne infectious diseases throughout the didactic and preclinical/clinical/laboratory components of the curriculum. Content in bloodborne infectious diseases must be presented at least once during each academic term.**

**General Laboratory Techniques**

* 1. **The curriculum must include didactic as well as laboratory instruction in the following areas: general laboratory techniques, complete dentures, removable partial dentures, fixed prosthodontics, and orthodontics.**

**Intent:**

*Dental technology curriculum content includes theoretical aspects as well as practical application of the subjects. The theoretical aspect of the curriculum provides content necessary for the student to make appropriate judgments regarding the procedures an entry-level technician is expected to perform and access available resources. Time devoted to, and learning experience in, laboratory techniques ensures that each student has adequate opportunity to develop competency in performing all laboratory procedures and techniques in the curriculum. Students perform routine procedures that lead to the completion of clinically acceptable dental prostheses.*

Documentation (Standards 2-8 to 2-13):

* + - 1. **Using the format illustrated in Example Exhibit 10, list the courses that provide the major instruction in each content area specified in Standards 2-8 to 2-13.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 2-7, 2-8, 2-9 and 2-10 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**2-14** **Students** **must demonstrate competence in general laboratory techniques, including:**

1. **Evaluating impressions**
2. **Preparing and evaluating casts**
3. **Fabricating custom impression trays**
4. **Articulating casts, using non-adjustable and semi-adjustable articulators**
5. **Developing functional occlusion on articulated casts**
6. **Recognizing variables that affect materials**
7. **Utilizing various methods of fabrication (i.e., analog and/or digital)**
8. **Demonstrating safe handling of equipment and materials**
9. **Digital workflow (i.e., didactic and/or laboratory procedures)**

**Intent:**

*Dental technology curriculum content includes various methods of fabrication; students should be exposed to new technologies and processes.*

**Complete Dentures**

**2-15 Students must demonstrate competence in the knowledge and skill required to fabricate complete denture prostheses, including:**

1. **Identifying various methods of fabrication**
2. **Constructing base plates and occlusion rims**
3. **Arranging a balanced denture set-up using anatomical teeth**
4. **Contouring trial dentures prior to try-in and processing**
5. **Equilibrating occlusal discrepancies**
6. **Finishing and polishing**
7. **Using a semi-adjustable articulator during fabrication**
8. **Relining and denture repairs**
9. **Fabricating surgical templates**

**Intent:**

*Dental laboratory technology curriculum content includes various methods of fabrication; students should be exposed to new technologies and processes.*

**Removable Partial Dentures**

* 1. **Students must demonstrate competence in the knowledge and skill required to fabricate removable partial dentures prostheses, including:**
1. **Identification of the components of a removable partial denture, including various clasp designs**
2. **Principles of surveying and design**
3. **Performing blockout procedures**
4. **Fabricating patterns**
5. **Processing frameworks**
6. **Finishing and polishing frameworks**
7. **Evaluating the fit of the framework to the master cast**
8. **Arranging teeth on the frameworks**
9. **Processing and finishing removable partial denture bases**
10. **Various repair procedures**

**Intent:**

*Dental laboratory technology curriculum content includes various methods of fabrication; students should be exposed to new technologies and processes.*

### Fixed Prosthodontics

* 1. **Students must demonstrate competence in the knowledge and skill required to fabricate fixed prostheses, including inlays, onlays, full crowns and fixed partial dentures:**
1. **Preparing and evaluating casts with removable dies**
2. **Recognizing variables that affect materials**
3. **Identifying various methods of fabrication**
4. **Preparing margins utilizing magnification**
5. **Identifying various margin and preparation designs and their applications**
6. **Designing and fabricating full contour restorations**
7. **Designing and fabricating substructures**
8. **Seating fixed restoration utilizing magnification**
9. **Preparing substructure to receive porcelain**
10. **Applying and processing porcelain to substructure(s)**
11. **Contouring ceramic materials**
12. **Developing functional occlusion on full arch articulated casts**
13. **Adjusting occlusal and interproximal contacts**
14. **Performing optical external characterization**
15. **Finishing and polishing restorations**
16. **Fabricating single and multi-unit restorations**
17. **Demonstrating safe handling of all equipment associated with ceramic**

**Intent:**

*Dental technology curriculum content includes various methods of fabrication, the program should introduce students to new technologies and processes wherever possible, including but not limited to: pressing fabrication processes.*

### Orthodontics

* 1. **Students must demonstrate competence in the knowledge and skill necessary to fabricate orthodontic appliances, including:**
1. **Recognizing variables that affect materials**
2. **Preparing and evaluating orthognathic study casts**
3. **Identifying the components of orthodontic appliances**
4. **Identifying and categorizing types of appliances**
5. **Fabricating retainers, space maintainers and tooth moving appliances**
6. **Contouring various types of arch wires, clasps and springs**
7. **Fabricating, finishing and polishing appliances**
8. **Soldering and band placement**
9. **Appliance repairs**

**Intent:**

*Dental laboratory technology curriculum content includes various methods of fabrication; students should be exposed to new technologies and processes.*

Documentation (Standards 2-14 to 2-19):

1. **Using the format illustrated in Example Exhibit 11, list the courses that provide major instruction (didactic, preclinical and clinical) in each category of functions specified in Standards 2-14 to 2-19.**
2. **If any content area specified in Standards 2-14 to 2-19 is not included in the curriculum, what is the rationale for its omission?**

**Discipline Specific Content**

* 1. **The discipline specific portion of the curriculum must prepare students to competence in additional techniques in at least one or more of the following discipline specific areas: complete dentures, removable partial dentures, fixed prosthodontics, orthodontics, and implants.**

**Intent:**

*While it is desirable that instruction in all discipline specific areas**be offered, students need the opportunity to select from at least two discipline specific areas.*

*Curriculum content in the discipline specific areas includes reinforcement of techniques and procedures which were taught in the basic curriculum. A balanced emphasis is placed on incorporating productivity, flow time and quality requirements into the educational program. Dependent upon its objectives, resources and community needs, the institution may elect to extend the scope of the dental laboratory technology curriculum to include content and instruction in additional discipline specific areas. Institutions with the resources are encouraged to provide instruction in more than one discipline specific area, thus providing the opportunity for students to elect areas of specialization on the basis of their interests. Techniques and procedures are consistent with current procedures used in dental laboratory technology and the geographic area served by the program.*

 Narrative Response and Documentation:

**List the courses that provide specialized training content in at least one or more of the areas listed.**

**Indicate the average number of clock hours of instruction in each discipline specific area.**

**Practical Experience**

**2-20 Practical experiences to support the development of competency in performing laboratory procedures must be provided either in the program facilities or off-site facilities.**

 Narrative Response and Documentation:

1. **Describe the practical experiences students receive, either on or off-campus.**
2. **Identify any off-campus facilities utilized for practical experience. Provide a rotation schedule that indicates the number of clock hours students spend in each facility.**
3. **Describe how personnel in off-campus sites are made aware of program objectives.**
4. **Describe the manner in which the students’ extramural experience is planned, monitored, supervised and evaluated by members of the faculty. Identify all individuals who participate in supervision and evaluation of students’ practical experience. Include this information as an Exhibit.**
5. **Describe the manner in which students have an opportunity to evaluate their extramural experiences. How is this information used?**
6. **How is the staff at extramural sites used to evaluate the program? How is this information used?**

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

**Student Evaluation**

**2-21 Student evaluation methods must include defined objective criteria that measure all defined course objectives and/or student learning outcomes.**

**Intent:**

*Specific criteria and procedures for measuring student progress toward attainment of course objectives and/or student learning outcomes are developed and utilized as feedback to the student.*

 Narrative Response and Documentation:

1. **Describe how the students’ laboratory performance/competency is evaluated. Include all performance/skill evaluation mechanisms with documentation for each course in separate curriculum document.**
2. **What standards of achievement/competency are required for dental laboratory technology students to continue in the curriculum? How and when are these standards explained to the students?**
3. **Who reviews dental laboratory technology students’ academic performances and what action is taken when a student’s performance is below minimum standards? How frequently is the student made aware of his/her performance?**
4. **Describe procedures for dental laboratory technology students who are having academic difficulties.**
5. **Provide information about student performance on the Recognized Graduate Examination for each of the last three years. Include pass/fail rates and areas of strength and weakness. Explain how this information has been utilized for program improvement.**

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

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

* 1. **The administrative structure must ensure the attainment of program goals.**

 **Intent:**

 *The administration includes formal provisions for program planning, staffing, direction, coordination and evaluation.*

**3-2 The program must be a recognized entity within the institution’s administrative structure.**

 **Intent:**

 *The position of the program in the institution’s administrative structure permits direct communication between the program administrator and institutional administrators who are responsible for decisions that directly affect the program*.

 Narrative Response and Documentation for Standard 3-1 and 3-2:

 **1. Provide the most recent organizational chart for the institution indicating the position of the dental laboratory technology program in the administrative structure, as an Exhibit.**

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

 **3. Are there opportunities for the dental laboratory technology 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 laboratory technology program does not include a member of the program faculty, explain the procedure whereby faculty provide consultation when matters directly related to the dental laboratory technology program are considered.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-1 and 3-2 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Program Administrator**

**3-3 A program administrator who is employed full-time (as defined by the institution) and who is responsible for the day-to-day implementation of the program and must have the authority, responsibility and privileges necessary to manage the program.**

**3-4 The program administrator must:**

1. **have the educational background and occupational experience necessary to understand and fulfill the program goals**
2. **have attained a higher level of education than that presented in the program or be enrolled in a program progressing toward that degree**
3. **current background in educational theory and methodology**
4. **have practical experience as a dental technician**
5. **be certified by the National Board for Certification in Dental Laboratory Technology**

**3-5 Duties: The program administrator must have authority and responsibility necessary to fulfill program goals.**

 Narrative Response and Documentation (Standard 3-3, 3-4 and 3-5):

1. **Provide the name, title, type and length of appointment, professional training and experience of the dental laboratory technology 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 that the program administrator has each term, e.g., teaching, administration of other programs. 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, state the policy.**
5. **In what ways do full-time, part-time and volunteer program faculty participate in the decision-making process in matters relating to the continuous evaluation and development of the dental laboratory technology program? Include the frequency and purpose of program faculty meetings.**
6. **Describe the mechanism for coordinating instruction between dental laboratory technology faculty members and other faculty who teach dental laboratory technology students.**

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

**Faculty**

**3-6 Dental laboratory technology faculty must have background in and current knowledge of dental laboratory technology and the specific subjects they are teaching.**

 **Intent:**

 *Dental laboratory technology faculty members have current knowledge at an appropriate level for the subject they teach.*

**3-7 Faculty providing instruction must have current educational theory and, e.g., curriculum development, educational psychology, test construction, measurement and evaluation. Faculty providing instruction via distance education technology must have instruction in distance education techniques and delivery.**

**3-8 Faculty providing didactic instruction must hold a degree higher than the degree being granted to their students or an equivalent degree to the degree being granted to their students plus five years of documented experience in the dental laboratory technology discipline area they would be teaching.**

**3-9 A dental laboratory technician who is appointed as a dental laboratory technology program faculty member, must be certified by the National Board for Certification in Dental Laboratory Technology or achieve certification within two years of appointment to the program or be a licensed dentist.**

**3-10 The number of faculty positions must be sufficient to implement the program’s goals and objectives. The faculty to student ratio, during laboratory instruction, must not exceed one instructor for every 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.*

**3-11 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 (Standards 3-6 through 3-11):

* + - 1. **Using the format illustrated in Example Exhibit 12 (Biosketch), provide information requested for all full- and part-time dental laboratory technology faculty members (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 13, provide information requested for each dental laboratory technology 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 laboratory technology program. Are any faculty positions presently vacant? If so, please explain.**
			5. **What percentage of the full-time equivalent positions assigned to the program is filled by part-time faculty? What is the rationale for using 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.**
			8. **What release time is given for activities such as administrative duties, advising and counseling students, supervision of extramural experiences and committee assignments.**
			9. **What are the current faculty/student ratios during laboratory sessions?**
			10. **Describe the mechanism for coordinating instruction between dental laboratory technology faculty members and other faculty who teach dental laboratory technology students.**
			11. **Does the institution offer a planned faculty 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 laboratory technology faculty have participated in the faculty development program.**
			13. **Describe the in-service programs that have been presented to full- and part-time dental laboratory technology faculty during the past two years.**
			14. **Describe the availability of continuing education courses for faculty in the community.**
			15. **How do faculty maintain and improve their laboratory skills?**
			16. **In what ways are members of the faculty encouraged to attend meetings of professional organization? Give examples of meetings that dental laboratory technology faculty attended during the last calendar year.**
			17. **In what way do full-time, part-time and volunteer program faculty participate in the decision-making process in matters relating to the continuous evaluation and development of the dental laboratory technology program? Include the frequency and purpose of program faculty meetings.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-9, 3-10 and 3-11 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**3-12 Faculty must be ensured a form of governance that allows participation in the program and institution’s decision-making processes.**

 **Intent:**

 *There are opportunities for the 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.)**

**3-13 A defined evaluation process must exist that ensures objective measurement of the performance of each faculty member.**

Narrative Response:

1. **Describe the criteria used in evaluating full- and part-time faculty. Who determines the criteria and what input does faculty have in the process?**
2. **How often and by whom are the program administrator and faculty evaluated and how are the evaluative data used? If the criteria used to evaluate the program administrator is different from that used to evaluate faculty, please explain.**
3. **How are results of one’s evaluation communicated to that faculty member?**
4. **How many dental laboratory technology faculty have terminated employment at the institution in each of the past three years? What was the reason for each termination?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-13 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Support Staff**

**3-14 Services of institutional support personnel must be adequate to facilitate program operation.**

Narrative Response and Documentation:

1. **Specify the amount of secretarial and clerical support provided for the dental laboratory technology program. How many full-time positions are designated solely for the programs? How much of this support, if any, is provided by a centralized clerical/duplicating service? If centralized service is available, describe procedures necessary for faculty to utilize the service?**

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

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 3-14 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**STANDARD 4 - EDUCATIONAL SUPPORT SERVICES**

**Facilities**

* 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 scheduled number of students, faculty and staff, and include appropriate safety provisions for students, faculty, and staff. The facilities permit the attainment of program goals.*

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 laboratory technology? 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?**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-1 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Laboratory Facilities**

* 1. **An adequate multipurpose laboratory facility must be provided for effective instruction and include:**
1. **Sufficient and secure storage space for instructional equipment, supplies, and materials, including hazardous materials.**
2. **Policies and procedure for safe operation and maintenance of laboratory equipment**
3. **An appropriate number of work stations with necessary dental equipment for students**

Narrative Response and Documentation:

1. **How many student stations are there in the laboratory(s) used for instruction in dental laboratory technology courses?**
2. **If a laboratory is shared by any other program(s), how many hours per week is it used by other program(s)? What is the process for scheduling utilization of the laboratory?**
3. **What unique factors, if any, must be considered in scheduling laboratory sessions for dental laboratory technology students, e.g., schedule for science or general education courses, use by other departments, availability of instructors?**
4. **List the type and quantity of equipment provided for each station or group of stations. Are student stations equipped with adjustable comfortable chairs, adequate lighting, compressed air, utility outlets for electrical and gas equipment, dust collection equipment and storage space?**
5. **Identify the type, number and location of general use equipment and instruments such as sinks with plaster control devices, lathes, model trimmers, articulators, vibrators, ovens, wax elimination tanks and casting devises as an Exhibit.**

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

**Off-Campus Campus Facilities**

* 1. **It is preferable and therefore recommended that the educational institution provide physical facilities and equipment which are adequate to permit achievement of program goals and objectives. If the institution finds it necessary to contract for use of an existing laboratory facility for laboratory instruction, 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 and student assignments.**
3. **All students receive instruction and practical experience in the facility.**
4. **Policies and procedures for operation of the facility are consistent with the philosophy and goals of the educational program.**
5. **Laboratory instruction is provided and evaluated by program faculty.**
6. **All students receive comparable instruction in the facility.**
7. **Availability of the facility accommodates the scheduling needs of the program.**
8. **Notification for termination of the contract ensures that instruction will not be interrupted for currently enrolled students.**

**Intent:**

*This standard applies to sites off-campus used for dental laboratory technology education. All students assigned to a particular facility are expected to receive instruction in that facility. This standard does not apply to individual dental laboratory and dental office sites used for externship/practical experience.*

Narrative Response and Documentation:

1. **If the program depends on an EXTENDED CAMPUS LABORATORY facility for the provision of basic dental laboratory technique instruction:**
2. **Identify the facility and its distance from the program.**
3. **State the extent to which the program is dependent upon the extended campus facility.**
4. **Provide a signed copy of the formal agreement between the educational institution and the agency or institution providing the facility as an Exhibit.**

**Classroom Space**

* 1. **Classroom space for didactic instruction must be provided for, and be readily accessible to, the program.**

 Narrative Response:

**1. Is there a classroom assigned exclusively to the dental laboratory technology program? If not, what arrangements have been made to assure 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 4-4 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Office Space**

* 1. **An office must be provided for the program administrator and full-time faculty.**

**Intent:**

*The program administrator often meets with students which requires privacy. Sensitive and confidential student and program records are also safely stored in locked cabinets and drawers. Full-time faculty are also required to hold regular office hours and require a designated office space in which they may consult students.*

 Narrative Response:

**1. Specify the number capacity and location of faculty and staff 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 4-5 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Learning Resources**

**4-6 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 or provide access to a diversified collection of current dental, dental laboratory technology and multidisciplinary literature and references necessary to support teaching, student learning needs, services, and research. All students, including those receiving education at an off campus facility or through distance education, are provided access to learning resources.*

Narrative Response and Documentation:

* + - 1. **Where is the major collection of books and periodicals related to dental laboratory technology retained? If the major collection is housed in the central library, is a separate collection of books and periodicals related to dental laboratory technology retained in the program’s facilities?**
			2. **Specify the hours that the library is available to students and faculty.**
			3. **Do students and faculty have access to additional libraries? If so, describe the mechanism or agreement.**
			4. **List the specialized reference materials available for the dental laboratory technology program’s utilization, e.g., medical and dental dictionaries and indices.**
			5. **As an Exhibit, provide a list of periodicals/periodical databases related to dental laboratory technology and general and specialty dentistry that are available for student and faculty reference.**
			6. **As an Exhibit, provide a comprehensive listing of the collection of books classified by subject areas specified in Standard 4-6.**
			7. **Describe the procedure for updating and expanding library holdings. Identify the individuals involved by name and title.**
			8. **List the instructional aids used in the program, e.g., skeletal and anatomical models and replicas, slides and films that depict current techniques.**
			9. **Discuss how and to what extent self-instructional materials are utilized in the dental laboratory technology program.**
			10. **Describe the accessibility of instructional resources to dental laboratory technology students, including the hours of availability.**

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

**Student Services**

**4-7 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 dental students equal to those available to other students.*

 Narrative Response and Documentation:

1. **Provide information concerning the institution’s ethical standards and policies that protect students as consumers. What avenues for appeal and due process have been established?**
2. **Describe the manner in which records of student work in the program are maintained.**
3. **Describe the way in which confidentiality of and access to student records is provided.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 4-7 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Distance Education**

**4-8 Distance education programs must meet the parent program’s stated mission, goals, objectives, and standards.**

 **Intent:**

*While some differences between the parent program and distance learning are inherent, the distance program is expected to comply with the spirit as well as the letter of accreditation standards.*

Narrative Response and Documentation:

* + 1. **Describe how the program administrator coordinates the distance education program with the parent program, including technological equipment maintenance, backup programs, and contingency plans for equipment failure.**
		2. **Describe how faculty coordinates classroom activity, handouts, exam proctoring and evaluation, laboratory project evaluations, and delivering didactic and clinical courses to the distance education students.**
		3. **Describe the faculty training for delivering distance learning programs.**
		4. **Describe the fee structure for distance education students, including how clinical equipment and supplies are handled.**
		5. **Please provide as an exhibit all policies and procedures pertaining to distance education.**

**STANDARD 5 - HEALTH AND SAFETY PROVISIONS**

**Infectious Disease Management**

* 1. **The program must document its compliance with institutional policy and applicable regulations of local, state and federal agencies, including, but not limited to: hazardous materials, and bloodborne and infectious diseases. Policies must be provided to all students, faculty and appropriate support staff and continuously monitored for compliance. Additionally, policies on bloodborne infectious diseases must be available to applicants for admission.**

 **Intent:**

*Policies provide for a safe environment for students, faculty and staff. The program should establish and enforce a mechanism to ensure laboratory asepsis, infection and biohazard control, and disposal of hazardous waste. Policies and procedures should be in place to provide for a safe environment for 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 education is provided.*

* 1. **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’ impressions and/or infectious objects or materials, in an effort to minimize the risk to students, faculty, and appropriate staff.**

**Intent:**

*Students, faculty and/or staff many enter a live laboratory setting where they may be exposed to infectious pathogens during their practical experience course, field trips, and community service.*

Narrative Response and Documentation (Standards 5-1 and 5-2):

 **1. Provide policies and procedures that have been developed related to the program’s asepsis, infection and hazardous control protocol as an Exhibit.**

 **2. Provide policies and procedures that have been developed related to bloodborne and infectious disease(s) as an Exhibit. How is this policy made available to applicants for admission?**

 **3. How are these policies and procedures monitored within the program and affiliated sites to ensure compliance?**

 **4. How are these policies made available to students, faculty and appropriate staff?**

 **5. How are students 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 5-1 and 5-2 in the Accreditation Standards for Dental Laboratory Technology Education Programs.

**Emergency Management**

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

Narrative Response and Documentation:

1. **Provide laboratory protocols that have been developed related to the management of emergencies as an Exhibit. How are these protocols provided to all students, faculty and appropriate staff.**
2. **Describe how the program ensures that faculty, staff and students are prepared to assist with the management of emergencies.**
3. **List the safety devices and equipment provided in the laboratory(s), e.g., environmental control units and exhaust.**

For additional guidance you may refer to “Examples of evidence to demonstrate compliance” following Standard 5-3 in the Accreditation Standards for Dental Laboratory Technology 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. Assess the extent to which the assessment process is consistent with the stated program goals.

2. How are the results of the assessment process utilized to evaluate the effectiveness of the program in meeting its goals?

3. Assess the stability of the program’s fiscal support as anticipated over the next several years.

4. Assess the degree to which current financial support permits or inhibits achievement of program goals.

5. Assess the financial allocations for faculty salaries and professional development to ensure the program is in a competitive position to recruit and retain qualified faculty.

6. Evaluate the effectiveness of the liaison mechanism between the program and the dental, dental laboratory and allied dental community.

**STANDARD 2 – EDUCATIONAL PROGRAMS**

1. Evaluate the admission criteria in terms of its ability to identify students with the potential for completing the curriculum and performing dental laboratory technology techniques with competence and efficiency.

2. Do enrollment statistics reveal any trend which the institution is concerned? If so, describe those concerns.

3. Assess the extent to which course descriptions and objectives reflect the content delineated in the respective topical outlines.

4. Explain the rationale for the overall curriculum sequence.

5. Assess the degree to which curriculum objectives for general laboratory techniques are being met.

6. To what extent have results of the student evaluation process been used to modify the curriculum?

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

1. Assess the effectiveness of communication between the program administrator and institutional administrators.

2. What activities during the past year demonstrate that the program administrator has assumed responsibility for continuous coordination, evaluation and development of the dental laboratory technology program?

3. If any faculty member(s) lack(s) a higher degree, background in educational theory and practice and/or work experience as a dental laboratory technician, in what ways are these deficiencies being corrected? Is the institution able to provide financial assistance and/or release time to support this endeavor?

4. To what extent do faculty/student ratios during laboratory sessions provide individualized instruction and allow evaluation of the process as well as the end result?

5. Compare the program faculty’s opportunities to continue professional development with those of other faculty in terms of release time and financial support.

6. Assess the effectiveness of the faculty evaluation system.

**STANDARD 4 – EDUCATIONAL SUPPORT SERVICES**

1. Assess the advantages and disadvantages of the capacity, design and scheduling of the laboratory and classroom facilities and equipment in relation to the attainment of program goals.

2. Evaluate the comprehensiveness, diversity, currency and quality of the texts and periodicals pertaining to dentistry and dental laboratory technology that are available for use.

3. Assess the budget available to purchase instructional aids and equipment.

4. Evaluate the support services available to the program.

**STANDARD 5 – HEALTH AND SAFETY PROVISIONS**

1. To what degree does the institution comply with state and federal laws related to radiation?

2. Assess the effectiveness of the program’s infectious disease(s) and hazardous materials policy(s) and procedures in ensuring a safe environment for patients, students, faculty and staff.

3. Assess the effectiveness of the program’s policy to manage emergencies which might occur in the dental laboratory technology facilities.

**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**

Standard 3 – Administration, Faculty and Staff

**Example Exhibit 12**

**Example Exhibit 13**

**Example Exhibit 1**

Using the following format or another format that describes similar information, list the program’s specific goals and objectives and outline the outcomes assessment process that the program utilizes.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|   | **Objective** | **Action Step** | **Monitoring Mechanism** | **Evaluating Mechanisms** | **When Evaluated** | **Who Collects Data** | **Who Assesses Data** | **Results** | **Resulting Action** | **Program Improvement as a result of data analysis** |
| Goal #1 |  |  |  |  |  |  |  |  |  |  |
| Goal #2 |  |  |  |  |  |  |  |  |  |  |
| Goal #3 |  |  |  |  |  |  |  |  |  |  |
| Goal #4 |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

**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 laboratory technology program’s budget for the previous, current and ensuing fiscal years.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Previous Year20\_\_ to 20\_\_ | Current Year20\_\_ to 20\_\_ | Ensuing Year20\_\_ to 20\_\_ |
| I. | Capital ExpendituresA. ConstructionB. 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 expendituresA. Instructional materials, e.g., slides, filmsB. Clinic suppliesC. Laboratory suppliesD. Office suppliesE. Program library collection 1. Institutional 2. DepartmentalF. Equipment maintenance and replacementG. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ |
| III. | FacultyA. SalariesB. BenefitsC. Professional DevelopmentD. Travel for Student SupervisionE. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ |
| IV. | StaffA. Secretarial SupportB. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ |
| V. | Other Categories, if any (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ |
|  | GRAND TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ | $\_\_\_\_\_\_\_\_\_\_\_ |

**EXAMPLE EXHIBIT 4**

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

|  |  |  |
| --- | --- | --- |
|  |  | Previous Year20\_\_ to 20\_\_ |
| I. | Capital ExpendituresA. ConstructionB. Equipment 1. Laboratory 2. Locker Room 5. Reception Room 6. Faculty & staff offices 7. Instructional equipment 8. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_ |
| II. | Non-capital ExpendituresA. Instructional materials, e.g., slides, filmsB. Laboratory suppliesC. Office suppliesD. Program library collection 1. Institutional 2. DepartmentalE. Equipment maintenance and replacementF. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_ |
| III. | FacultyA. SalariesB. BenefitsC. Professional DevelopmentD. Travel for Student SupervisionE. Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL | $\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_ |
| IV. | StaffA. Secretarial SupportB. 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 LABORATORY TECHNOLOGY PROGRAM |
| Categories of Faculty Rank | Minimum | Average | Maximum | Minimum | Average | Maximum |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

PART-TIME FACULTY

|  |  |  |
| --- | --- | --- |
|  | INSTITUTION | DENTAL LABORATORY TECHNOLOGY PROGRAM |
| Categories of Faculty Rank | Minimum | Average | Maximum | Minimum | Average | Maximum |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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**EXAMPLE EXHIBIT 6**

Using the format illustrated below, provide enrollment data for the program during the current and four preceding years. If classes are admitted more than once a year, indicate admissions by each admission interval.

**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.

|  |  |  |
| --- | --- | --- |
|  | Preceding Years | Current Year(recently admitted class) |
|  | 20\_\_ | 20\_\_ | 20\_\_ | 20\_\_ | 20\_\_ |
| Number of Applicants (submitted required credentials) |  |  |  |  |  |
| Met the Minimum Admission Criteria |  |  |  |  |  |
| Number Offered Admission |  |  |  |  |  |
| Total Number Enrolled |  |  |  |  |  |
| Number Enrolled with Advanced Standing |  |  |  |  |  |
| Number Completed |  |  |  |  |  |
| Percentage Completed | % | % | % | % | % |

Using the format illustrated below, indicate the number of students who withdrew or were dismissed from the program during the current and four preceding years.

|  |  |
| --- | --- |
|  | REASON FOR WITHDRAWAL |
| Program Non-Completion Reasons  | ACADEMIC PROBLEMS | LACK OF INTEREST | PERSONAL/FINANCIAL ISSUES | OTHER(SPECIFY) |
| 1. Academic Year Enrollment (20\_\_)  |  |  |  |  |
| ( |  |  |  |  |
|  |  |  |  |  |
| 2. Academic Year Enrollment (20\_\_) |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| TOTAL  |  |  |  |  |

**EXAMPLE EXHIBIT 7**

Outline the sequence of the dental laboratory technology curriculum as illustrated below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CourseNumberFirst Term: | Course Title | Credit\* Hours | Clock Hours/Week**Lec. Lab.** | Faculty/Student Ratio**Lec. Lab**.  | Faculty Person Responsible |
| \*\*CHEM 110\*\*Eng 101 123Den 120Den 130Den 140 | General ChemistryEnglish CompositionTooth MorphologyDental MaterialsOcclusion | 4342316 | 2332313 | 9000315 | 1:201:201:301:201:20 | 1:101:151:101:10 | Ms. GoldMs. WhiteMr. DoeMr. BlackDr. Grey |
| Second Term: |  |  |  |  |  |
| \*\*Eng 102\*\*Phys 110Den 150Den 131Den 140 | English CompositionIntro to PhysicsComplete DenturesMetallurgyRemovable Par Dent | 3443418 | 3323213 | 0260614 | 1:201:201:251:201:20 | 1:201:121:10 | Ms. WhiteMs. SilverDr. GreenMr. JadeDr. Grey |
| Third Term:Fourth Term:Total Number of Credit HoursTransferable Credit Hours | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |

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

\*\*Denotes college transfer

**EXAMPLE EXHIBIT 8**

For each term provide a class schedule of the current year’s dental laboratory technology curriculum as illustrated below. (If a schedule does not extend the entire term, include supplementary schedules.) Include course number; indicate whether the session is lecture or laboratory; and provide the name(s) of the faculty member(s) responsible.

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

 (specify)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Hour | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| 8:00 | DLT 120 Lec.Mr. Doe | DLT 140 Lec.Dr. Grey | DLT120 Lec.Mr. Doe | DLT 140 Lec.Dr. Grey | DLT120 Lec.Mr. Doe |
| 9:00 | DLT120 Lec.Mr. Doe | DLT 140 Lec.Dr. Grey |  | DLT 140 LabDr. Grey |  |
| 10:00 | Eng. 101 Lec.Miss Jones | DLT 140 LabDr. Grey | Eng. 101 Lec.Miss Jones | DLT 140 LabDr. Grey | Eng. 101 Lec.Miss Jones |
| 11:00 |  |  |  |  |  |
| 12:00 |  |  |  |  |  |
| 1:00 | CHEM 110 Lec.Ms. Gold | DEN 130 Lec.Mr. Black | CHEM 110 Lec.Ms. Gold | DEN 130 Lec.Mr. Black |  |
| 2:00 | CHEM 110 LabMs. Gold |  | CHEM 110 LabMs. Gold | CHEM 110 LabMs. Gold |  |
| 3:00 | CHEM 110 LabMs. Gold |  | CHEM 110 LabMs. Gold | CHEM 110 LabMs. Gold |  |
| 4:00 | CHEM 110 LabMs. Gold |  | CHEM 110 LabMs. Gold | CHEM 110 LabMs. Gold |  |

**EXAMPLE EXHIBIT 9**

**(Optional)** Complete checklist in the Example Exhibit to ensure all components from DLT Standard 2-6 are included. Please include this exhibit in the self-study document.

|  |
| --- |
| **Course Documentation Checklist (DLT Standard 2-6)****An aid to be used as needed** |
| **Course Number and Name** | **Course Descriptions** | **Primary faculty & contact information** | **Content Outlines, with Topics to be Presented** | **Specific Instructional Objectives** | **Learning Experiences** | **Example of Exam, Quiz, and/or Rubric** | **All Skill Evaluations** |
|  DLT 101 Intro to DLT | x | x | x | x | x | x | x |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
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|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |

**EXAMPLE EXHIBIT 10**

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 2-8, 2-9, 2-10, 2-11, 2-12, and 2-13).

|  |  |  |  |
| --- | --- | --- | --- |
| CONTENT AREA | Course No. and Title | Clock Hours for Content Area | % of Total Curriculum |
| **General Studies:** |  |  |  |
| Communication Skills |  |  |  |
| Mathematics |  |  |  |
| Business Principles |  |  |  |
| **Physical Sciences:** |  |  |  |
| Chemistry |  |  |  |
| Physics |  |  |  |
| **Dental Sciences:** |  |  |  |
| Dental Materials |  |  |  |
| Tooth Morphology |  |  |  |
| Oral Anatomy |  |  |  |
| Occlusion |  |  |  |
| **Legal, Ethical And Historical Aspects that include:** |  |  |  |
| Organizations that advance certification and continuing education for dental technicians and certification of laboratories |  |  |  |
| Work authorization/prescription of dentist in accordance with state dental practice act |  |  |  |
| Federal regulations related to operating a dental laboratory and/or working as a dental laboratory technician |  |  |  |
| HIPAA laws related to health care professionals |  |  |  |
| Ethics for health care professionals |  |  |  |
| **Infectious Disease And Hazard Control Management:** |  |  |  |
| Bloodborne infectious diseases |  |  |  |
| Ethical, legal and regulatory considerations related to blooodborne diseases |  |  |  |
| **General Laboratory Techniques:** |  |  |  |
| General Laboratory Techniques |  |  |  |
| Complete Denture Prosthodontics |  |  |  |
| Removable Partial Dentures  |  |  |  |
| Fixed Prosthodontics |  |  |  |
| Orthodontics  |  |  |  |
|  TOTAL CLOCK HOURS IN CURRICULUM: 100% |

**EXAMPLE EXHIBIT 11**

Using the format illustrated below, list the preclinical and clinical courses which provide the major instruction in each category of function specified in Standards 2-13 to 2-18.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Functions | Content is presented | Preclinical competence is demonstrated | Clinical practice is performed | Clinical competence is demonstrated |
| **General Laboratory Techniques (2-13):** |  |  |  |  |
| Evaluating impressions |  |  |  |  |
| Preparing and evaluating casts |  |  |  |  |
| Fabricating custom impression trays |  |  |  |  |
| Articulating casts, using non-adjustable and semi-adjustable articulators |  |  |  |  |
| Developing functional occlusion on articulated casts |  |  |  |  |
| Recognizing variables that affect materials |  |  |  |  |
| Utilizing various methods of fabrication (i.e., analog and/or digital) |  |  |  |  |
| Demonstrating safe handling of equipment and materials |  |  |  |  |
| Digital workflow (i.e., didactic and/or laboratory procedures) |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Complete Dentures (2-15):** |  |  |  |  |
| Identifying various methods of fabrication |  |  |  |  |
| Constructing base plates and occlusion rims |  |  |  |  |
| Arranging a balanced set-up using anatomical teeth |  |  |  |  |
| Contouring trial dentures prior to try-in and processing |  |  |  |  |
| Equilibrating occlusal discrepancies |  |  |  |  |
| Finishing and polishing |  |  |  |  |
| Using a semi-adjustable articulator during fabrication |  |  |  |  |
| Finishing and polishing  |  |  |  |  |
| Using a semi-adjustable articulator during fabrication  |  |  |  |  |
| Relining and denture repairs |  |  |  |  |
| Fabricating surgical templates |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Removable Partial Dentures (2-16):** |  |  |  |  |
| Identification of the components of a removable partial denture, including various clasp designs |  |  |  |  |
| Principles of surveying and design  |  |  |  |  |
| Performing blockout procedures |  |  |  |  |
| Fabricating patterns |  |  |  |  |
| Processing frameworks |  |  |  |  |
| Finishing and polishing frameworks |  |  |  |  |
| Evaluating the fit of the framework to the master cast |  |  |  |  |
| Arranging teeth on the frameworks |  |  |  |  |
| Processing and finishing removable partial denture bases |  |  |  |  |
| Various repair procedures |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Fixed Prosthodontics (2-17):** |  |  |  |  |
| Preparing and evaluating casts with removable dies |  |  |  |  |
| Recognizing variables that affect materials |  |  |  |  |
| Identifying various methods of fabrication |  |  |  |  |
| Preparing margins utilizing magnification |  |  |  |  |
| Identifying various margin and preparation designs and their applications |  |  |  |  |
| Designing and fabricating full contour restorations |  |  |  |  |
| Designing and fabricating substructures |  |  |  |  |
| Seating castings to dies utilizing magnification |  |  |  |  |
| Preparing substructure to receive porcelain |  |  |  |  |
| Applying and processing porcelain to substructure(s) |  |  |  |  |
| Contouring ceramic materials |  |  |  |  |
| Developing functional occlusion on full arch articulated casts |  |  |  |  |
| Adjusting occlusal and interproximal contacts |  |  |  |  |
| Performing optical external characterization |  |  |  |  |
| Finishing and polishing restorations |  |  |  |  |
| Fabricating single and multi-unit restorations |  |  |  |  |
| Demonstrating safe handling of all equipment associated with ceramic |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Orthodontics (2-18):** |  |  |  |  |
| Recognizing variables that affect materials |  |  |  |  |
| Preparing and evaluating orthognathic study casts |  |  |  |  |
| Identifying the components of orthodontic appliances  |  |  |  |  |
| Identifying and categorizing types of appliances |  |  |  |  |
| Fabricating retainers, space maintainers and tooth moving appliances |  |  |  |  |
| Contouring various types of arch wires, clasps and springs |  |  |  |  |
| Fabricating, finishing and polishing resin appliances |  |  |  |  |
| Soldering and band placement |  |  |  |  |
| Appliance repairs |  |  |  |  |

**EXAMPLE EXHIBIT 12**

**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. orExpected 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 andMonth 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* |

**EXAMPLE EXHIBIT 13**

Using the following format, provide information requested for each dental laboratory technology 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* |

**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-1)