

**ACCREDITATION STANDARDS FOR DENTAL HYGIENE
EDUCATION PROGRAMS
(January 2009 Standards)**

Frequency of Citings Based on Required Areas of Compliance

Total Number of Programs Evaluated: 611
January 1, 2009 through June 30, 2022

STANDARD 1- INSTITUTIONAL EFFECTIVENESS – 13 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance	
	1-1	The program must demonstrate its effectiveness using a formal and ongoing planning and assessment process that is systematically documented by:	
20		a.	Developing a plan addressing teaching, patient care, research and service which are consistent with the goals of the sponsoring institution and appropriate to dental hygiene education
27		b.	Implementing the plan
37		c.	Assessing the outcomes, including measures of student achievement
53		d.	Using the results for program improvement
6	1-2	The institution must have a strategic plan which identifies stable financial resources sufficient to support the program's stated mission, goals and objectives.	
3		A financial statement document must be submitted providing revenue and expense data for the dental hygiene program.	
4	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.	
8	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.	

1	1-5	Programs must be sponsored by institutions of higher education that are accredited by an institutional accrediting agency recognized by the United States Department of Education for offering college-level programs.
8	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.
16	1-7	There must be an active liaison mechanism between the program and the dental professions in the community.

STANDARD 2- EDUCATIONAL PROGRAMS – 94 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance
1	2-1	The curriculum must include at least two academic years of full-time instruction or its equivalent at the postsecondary college-level.
1		The scope and depth of the curriculum must reflect the objectives and philosophy of higher education.
2		The college catalog must list the degree awarded and course titles and descriptions.
1		In a two-year college setting, the graduates of the program must be awarded an associate degree.
		In a four-year college or university, the graduates of the program must be awarded an associate or comparable degree, post-degree certificate, or baccalaureate degree.
5	2-2	A process must be established to assure students meet the academic, professional and/or clinical criteria as published and distributed.
2		Academic standards and institutional due process policies must be followed for remediation or dismissal.
1		A college document must include institutional due process policies and procedures.
2	2-3	Admission of students must be based on specific written

		criteria, procedures and policies. Applicants must be informed of the:
1		Previous academic performance and/or performance on standardized national tests of scholastic aptitude or other predictors of scholastic aptitude and ability must be utilized as criteria in selecting students who have the potential for successfully completing the program. Applicants must be informed of:
12		criteria and procedures for selection
4		goals of the program
1		curricular content
1		course transferability
3		scope of practice
		employment opportunities for dental hygienists
5	2-4	Admission of students with advanced standing must be based on the same standards of achievement required by students regularly enrolled in the program.
2		Students with advanced standing must receive an appropriate curriculum that results in the same standards of competence required by students regularly enrolled in the program.
20	2-5	The number of students enrolled in the program must be proportionate to the resources available.
24	2-6	The dental hygiene program must define and list the competencies needed for graduation.
37		The dental hygiene program must employ student evaluation methods that measure all defined program competencies.
29		These competencies and evaluation methods must be written and communicated to the enrolled students.
4	2-7	Written documentation of the curriculum must be provided at the initiation of course instruction and include:
22		a. Course descriptions
23		b. Content outlines, including:
24		c. Topics to be presented,
49		d. Specific instructional objectives;
24		e. Learning experiences;
47		f. Evaluation procedures.

5	2-8	The curriculum must include content in the following four areas: general education, biomedical sciences, dental sciences and dental hygiene science.
16		This content must be integrated and of sufficient depth, scope, sequence of instruction, quality and emphasis to ensure achievement of the curriculums defined competencies.
		A curriculum document must be submitted for each course included in the dental hygiene program for all four content areas.
	2-8a	General education content must include:
6		Oral communication
		Written communication
3		Psychology
6		Sociology
9	2-8b	Biomedical science content must include content in
		Anatomy
		Physiology
6		Chemistry
5		Biochemistry
1		Microbiology
		Immunology
1		General and maxillofacial pathology and/or pathophysiology
		Nutrition
		Pharmacology
3	2-8c	Dental sciences content must include:
		Tooth morphology
1		Head, neck and oral anatomy
		Oral embryology and histology
		Oral pathology
1		Radiography
		Periodontology
1		Pain management
		Dental materials
6	2-8d	Dental hygiene science content must include:
2		Oral health education and preventive counseling

		Health promotion
		Patient management
		Clinical dental hygiene
2		Provision of services for and management of patients with special needs
		Community dental/oral health
1		Medical and dental emergencies including basic life support
1		Legal and ethical aspects of dental hygiene practice
1		Infection and hazard control management
		The provision of oral health care services to patients with bloodborne infectious diseases.
7	2-9	The basic clinical education aspect of the curriculum must include a formal course sequence in scientific principles of dental hygiene practice, which extends throughout the curriculum and is coordinated and integrated with clinical experience in providing dental hygiene services.
29	2-10	The number of hours of clinical practice scheduled must ensure that students attain clinical competence and develop appropriate judgment.
4		Clinical practice must be distributed throughout the curriculum.
38	2-11	The dental hygiene program must have established mechanisms to ensure a sufficient number of patient experiences that afford all students the opportunity to achieve stated competencies.
	2-12	Graduates must be competent in providing dental hygiene care for:
60		Child
73		Adolescent
43		Adult
64		Geriatric
64		Special needs patient populations.
	2-13	Graduates must be competent in providing the dental hygiene process of care which includes:
10		a. comprehensive collection of patient data to identify the physical and oral health status

15		b.	analysis of assessment findings and use of critical thinking in order to address the patient's dental hygiene treatment needs
20		c.	establishment of a dental hygiene care plan that reflects the realistic goals and treatment strategies to facilitate optimal oral health
13		d.	provision of patient-centered treatment and evidence-based care in a manner minimizing risk and optimizing oral health
19		e.	measurement of the extent to which goals identified in the dental hygiene care plan are achieved
8		f.	complete and accurate recording of all documentation relevant to patient care
63	2-14	Graduates must be competent in providing dental hygiene care for all types of classifications of periodontal disease including patients who exhibit moderate to severe periodontal disease.	
9	2-15	Graduates must be competent in communicating and collaborating with other members of the health care team to support comprehensive patient care.	
	2-16	Graduates must be competent in:	
17		a.	assessing the oral health needs of community-based programs
11		b.	planning an oral health program to include health promotion and disease prevention activities
12		c.	implementing the planned program
20		d.	evaluating the effectiveness of the implemented program
	2-17	Graduates must be competent in providing appropriate life support measures for medical emergencies that may be encountered in dental hygiene practice.	
5	2-18	Where graduates of a CODA accredited dental hygiene program are authorized to perform additional functions required for initial dental hygiene licensure as defined by the program's state specific dental board or regulatory agency, program curriculum must include content at the level, depth, and scope required by the state.	

4		Further, curriculum content must include didactic and laboratory/preclinical/clinical objectives for the additional dental hygiene skills and functions.	
4		Students must demonstrate laboratory/preclinical/clinical competence in performing these skills.	
	2-19	Graduates must be competent in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care and practice management.	
	2-20	Graduates must be competent in applying legal and regulatory concepts to the provision and/or support of oral health care services.	
1	2-21	Graduates must be competent in the application of self-assessment skills to prepare them for life-long learning.	
2	2-22	Graduates must be competent in the evaluation of current scientific literature.	
2	2-23	Graduates must be competent in problem solving strategies related to comprehensive patient care and management of patients.	
	2-24	The dental hygiene program must have a formal, written curriculum management plan, which includes:	
54		a.	an ongoing curriculum review and evaluation process with input from faculty, students, administration and other appropriate sources;
60		b.	evaluation of the effectiveness of all courses as they support the program's goals and competencies;
57		c.	a defined mechanism for coordinating instruction among dental hygiene program faculty.
5		d.	a defined mechanism to calibrate dental hygiene faculty for student clinical evaluation.

STANDARD 3- FACULTY AND STAFF – 24 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance	
	3-1	The program must be a recognized entity within the institution’s administrative structure which supports the attainment of program goals.	
58	3-2	The dental hygiene program administrator must have a full-time appointment as defined by the institution, which provides time for operation, supervision, evaluation and revision of the program.	
8	3-3	The program administrator must be a dental hygienist who is a graduate of a program accredited by the Commission on Dental Accreditation and possesses a masters or higher degree or is currently enrolled in a masters or higher degree program or a dentist who has background in education and the professional experience necessary to understand and fulfill the program goals.	
	3-4	The program administrator must have the authority and responsibility necessary to fulfill program goals including:	
8		a.	curriculum development, evaluation and revision;
9		b.	faculty recruitment, assignments, supervision and evaluation;
7		c.	input into faculty evaluation;
1		d.	initiation of program or department in-service and faculty development;
1		e.	assessing, planning and operating program facilities;
2		f.	input into budget preparation and fiscal administration;
4		g.	coordination, evaluation and participation in determining admission criteria and procedures as well as student promotion and retention criteria.
31	3-5	The number and distribution of faculty and staff must be sufficient to meet the dental hygiene program’s stated purpose, goals and objectives.	

56	3-6	The faculty to student ratios must be sufficient to ensure the development of competence and ensure the health and safety of the public. In preclinical, clinical and radiographic clinical laboratory sessions, there must not be less than one faculty for every five students.	
19		In laboratory sessions for dental materials courses, there must not be less than one faculty for every ten students to ensure the development of clinical competence and maximum protection of the patient, faculty and students.	
24	3-7	The full time faculty of a dental hygiene program must possess a baccalaureate or higher degree.	
		Part-time faculty providing didactic instruction must have earned at least a baccalaureate degree or be currently enrolled in a baccalaureate degree program.	
		All dental hygiene program faculty members must have:	
63		a.	current knowledge of the specific subjects they are teaching
79		b.	documented background in current educational methodology concepts consistent with teaching assignments.
		c.	Faculty who are dental hygienists must be graduates of dental hygiene programs accredited by the Commission on Dental Accreditation.
2	3-8	Opportunities must be provided for full-time faculty to continue their professional development.	
4	3-9	A defined faculty evaluation process must exist that ensures objective measurement of the performance of each faculty member.	
1	3-10	Opportunities for promotion, tenure, and development must be the same for dental hygiene faculty as for other institutional faculty.	
32	3-11	Qualified institutional support personnel must be assigned to the program to support both the instructional program and the clinical facilities providing a safe environment for the provision of instruction and patient care.	

22	3-12	Student assignments to clerical and dental assisting responsibilities during clinic sessions must be minimal and must not be used to compensate for limitations of the clinical capacity or to replace clerical or clinical staff.
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STANDARD 4- EDUCATIONAL SUPPORT SERVICES – 42 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance	
9	4-1	The program must provide adequate and appropriately maintained facilities to support the academic and clinical purposes of the program that are in conformance with applicable regulations.	
		The dental hygiene facilities must contain the following:	
9		a.	sufficient clinical facility with clinical stations for students including conveniently located hand washing sinks and view boxes and/or computer monitors; a working space for the patient's record adjacent to units; functional, modern equipment; an area that accommodates a full range of operator movement and opportunity for proper instructor supervision;
4		b.	a number of clinical stations based on the number of students admitted to a class (If the number of stations is less than the number of students in the class, one clinical station is available for every student scheduled for each clinical session.);
7		c.	a capacity of the clinic that accommodates individual student practice on a regularly scheduled basis throughout all phases of preclinical technique and clinical instruction;
10		d.	a sterilizing area that includes sufficient space for preparing, sterilizing and storing instruments;
11		e.	sterilizing equipment and personal protective equipment/supplies that follow current infection and hazard control protocol;
20		f.	facilities and materials for students, faculty and staff that provide compliance with accepted infection and hazard control protocols;
3		g.	space and furnishings for patient reception and waiting

			provided adjacent to the clinic;
3		h.	patient records kept in an area assuring safety and confidentiality.
5	4-2		Radiography facilities must be sufficient for student practice and the development of clinical competence.
			The radiography facilities must contain the following:
10		a.	an appropriate number of radiography exposure rooms which include: modern dental radiography units; teaching manikin(s); and conveniently located hand-washing sinks;
4		b.	modern processing and/or scanning equipment;
2		c.	an area for mounting and viewing radiographs;
4		d.	documentation of compliance with applicable local, state and federal regulations.
1			Regardless of the number of machines provided, it must be demonstrated that time is available for all students to obtain required experience with faculty supervision and that acceptable faculty teaching loads are maintained.
8	4-3		A multipurpose laboratory facility must be provided for effective instruction and allow for required laboratory activities.
1			If the laboratory capacity requires that two or more sections be scheduled, time for all students to obtain required laboratory experience must be provided.
			Laboratory facilities must contain the following:
13		a.	placement and location of equipment that is conducive to efficient and safe utilization;
9		b.	student stations that are designed and equipped for students to work while seated including:
5			sufficient ventilation
1			lighting
1			necessary utilities
2			Storage space
3			An adjustable, comfortable chair
6		c.	Documentation of compliance with applicable local, state and federal regulations.
15	4-4		The educational institution must provide physical facilities and equipment which are sufficient to permit achievement of program objectives.

		If the institution finds it necessary to contract for use of an existing facility for basic clinical education and/or distance education, then the following conditions must be met in addition to all existing Standards:	
		a.	a formal contract between the educational institution and the facility;
6		b.	a two-year notice for termination of the contract stipulated to ensure that instruction will not be interrupted; or
4		c.	a contingency plan developed by the institution should the contract be terminated;
1		d.	a location and time available for use of the facility compatible with the instructional needs of the dental hygiene program;
1		e.	the dental hygiene program administrator retains authority and responsibility for instruction and scheduling of student assignments;
3		f.	clinical instruction is provided and evaluated by dental hygiene program faculty;
2		g.	all dental hygiene students receive comparable instruction in the facility;
		h.	the policies and procedures of the facility are compatible with the philosophy and goals of the educational program.
5	4-5	Classroom space which is designed and equipped for effective instruction must be provided for and readily accessible to the program.	
9	4-6	Office space which allows for privacy must be provided for the program administrator and faculty.	
		Student and program records must be stored to ensure confidentiality and safety.	
2	4-7	Instructional aids and equipment must be provided for student learning.	
2		Institutional library holdings must include or provide access to a diversified collection of current dental, dental hygiene and multidisciplinary literature and references necessary to support teaching, student learning needs, service, research and development.	

		There must be a mechanism for program faculty to periodically review, acquire and select current titles and instructional aids.
4	4-8	There must be specific written due process policies and procedures for adjudication of academic and disciplinary complaints that parallel those established by the sponsoring institution.

STANDARD 5- HEALTH AND SAFETY PROVISIONS – 6 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance
35	5-1	The program must document its compliance with institutional policy and applicable regulations of local, state and federal agencies including, but not limited to, radiation hygiene and protection, ionizing radiation, hazardous materials, and bloodborne and infectious diseases.
22		Policies must be provided to all students, faculty, and appropriate support staff, and continuously monitored for compliance.
16		Policies on bloodborne and infectious diseases must be made available to applicants for admission and patients.
3	5-2	Students, faculty and appropriate support staff must be encouraged to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella, tuberculosis and hepatitis B prior to contact with patients and/or infectious objects or materials in an effort to minimize the risk to patients and dental personnel.
14	5-3	The program must establish, enforce, and instruct students in preclinical/ clinical/laboratory protocols and mechanisms to ensure the management of emergencies.
12		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.

STANDARD 6- PATIENT CARE SERVICES – 11 Required Areas of Compliance

<u>Non-Compliance Citings</u>	<u>Accreditation Standard</u>	Required Areas of Compliance	
5	6-1	The program must have policies and mechanisms in place that inform patients, verbally and in writing, about their comprehensive treatment needs.	
1		Patients accepted for dental hygiene care must be advised of the scope of dental hygiene care available at the dental hygiene facilities.	
2	6-2	The program must have a formal written system of patient care quality assurance with a plan that includes:	
28		a.	standards of care that are patient-centered, focused on comprehensive care, and written in a format that facilitates assessment with measurable criteria;
39		b.	an ongoing review of a representative sample of patients and patient records to assess the appropriateness, necessity and quality of care provided;
56		c.	mechanisms to determine the cause of treatment deficiencies;
57		d.	patient review policies, procedure, outcomes and corrective measures.
4	6-3	The use of quantitative criteria for student advancement and graduation must not compromise the delivery of comprehensive dental hygiene patient care.	
	6-4	The program must develop and distribute a written statement of patients' rights to all patients, appropriate students, faculty, and staff.	
31	6-5	All students, faculty and support staff involved with the direct provision of patient care must be continuously recognized/certified in basic life support procedures, including healthcare provider cardiopulmonary resuscitation with an Automated External Defibrillator (AED).	
8	6-6	The program's policies must ensure that the confidentiality of information pertaining to the health status of each individual patient is strictly maintained.	