

Guidance Document: Temporary Flexibility in Accreditation Standards to Address Interruption of Education Reporting Requirements Resulting From COVID-19 for the Class of 2020

Below is the *temporary flexibility* guidance on select Accreditation Standards. Only those Accreditation Standards which include *temporary flexibility* are included, all others have been retained as written in the current published Accreditation Standards document.

Additional Guidance Issued by CODA on July 9, 2020: At its July 9, 2020 Special Closed meeting, the Commission on Dental Accreditation directed that the *temporary flexibility* for Dental Assisting Standard 2-17 be adopted and applied retroactively to all dental assisting programs under review for interruption of education in June/July 2020. Effective July 1, 2020 Dental Assisting Standard 2-17 has been renumbered to Standard 2-18. See additional information under Modification/Reduction of Curriculum Content or Curriculum Requirements and Accreditation Standard for Dental Assisting Education Programs found at the end of this document.

Dental Assisting Education

Alternative Assessment Methods (for example, patient vs simulation)

Programs may use alternative instructional and assessment methods including distance education, virtual simulations, case studies, role playing with dentists/faculty, and other appropriate methods determined by the program, which have enabled programs to continue to provide curricular content and evaluation of student competence including clinical practice experiences.

Modification/Reduction of Curriculum Content or Curriculum Requirements (for example, modification/reduction of program-dictated requirements, CODA competency requirements, and/or CODA quantitative numbers-based requirements)

Dental assisting education programs have temporary flexibility such that up to 100 of the required 300 clinical practice hours may be completed using alternative methods, as long as the program can assure its graduates are competent. Programs that exceed 300 clinical practice hours as a program-dictated requirement have temporary flexibility to reduce to 300 hours with up to 100 hours completed using alternative methods; however, the total educational program must be a minimum of 900 instructional hours.

Dental assisting education programs have temporary flexibility such that students may be permitted, under faculty supervision, to expose diagnostically acceptable full-mouth dental image surveys on two (2) patients during extramural clinical assignments. (*CODA Directive, July 9, 2020*)

Program Length or Program Component Length (for example, rotations, services, etc.)

There is no modification to program length; programs must be a minimum of 900 instructional hours that include 300 clinical practice hours. However, dental assisting education programs have temporary flexibility related to the clinical practice hours such that up to 100 of the required 300 clinical practice hours may be completed using alternative methods.

Additional Areas of Consideration

Changes to grading systems (course grade versus pass/fail) are outside the purview of the Commission and should be considered in regard to institutional regulations.

Dental assisting education programs should consider their state-specific Practice Acts and the impact of curricular changes on the students' eligibility for obtaining state registration/certification as well as the Dental Assisting National Board "Certified Dental Assistant" credential, as these are also outside of the Commission's purview.

Accreditation Standards for Dental Assisting Education Programs

Dental Assisting Standard 2-4

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

Temporary Guidance: For the Class of 2020, temporary flexibility is permitted such that up to 100 of the required 300 clinical practice hours may be completed using alternative methods, as long as the program can assure its graduates are competent. Programs that exceed 300 clinical practice hours as a program-dictated requirement have temporary flexibility to reduce to 300 hours with up to 100 hours completed using alternative methods; however, the total educational program must be a minimum of 900 instructional hours that include 300 clinical practice hours. Alternative methods may include virtual simulations, case studies, role playing with dentists/faculty, and other appropriate methods determined by the program.

Dental Assisting Standard 2-21

Clinical experience assisting a dentist must be an integral part of the educational program designed to perfect students' competence in performing chairside assisting functions, rather than to provide basic instruction. Students must have a minimum of 300 hours of clinical experience.

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Additional Guidance Issued by CODA on July 9, 2020

Dental Assisting Standard 2-18 (formerly Standard 2-17)

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

Temporary Guidance: For the Class of 2020, temporary flexibility is permitted such that students may be permitted, under faculty supervision, to expose diagnostically acceptable full-mouth dental image surveys on two (2) patients during extramural clinical assignments.