		Assurance of Student Learning Report		
C 11 CYY 1	111	2022-2023		
	and Human Services	School of Nursing and Allied Health		
	al Hygiene-AS Degree (226)			
	r-Dr. Joseph W. Evans		1:	. 1
Is this an onlin	e program?  Yes No	Please make sure the Program Learning Outcomes listed match those in CourseLeaf . In Yes, they match! (If they don't match, explain on this page under <b>Assessment Cycle</b> )		ation here
Use this page to more Outcomes		ements, and summarize results for your program. Detailed information must be completed in the	e subsequent p	oages. Add
	nt Learning Outcome 1: The contemporary of the process of care.	lental hygiene graduate will be competent in utilizing critical thinking, problem solving, and evide	nce-based deci	ision making in
Instrument 1	Direct: Patient case study prese	ntation		
Instrument 2	Direct: National Board Dental l	Hygiene Examination (NBDHE)		
Instrument 3				
Based on your r	esults, check whether the prog	ram met the goal Student Learning Outcome 1.	⊠ Met	☐ Not Met
Program Studen classifications.	nt Learning Outcome 2: The d	ental hygiene graduate will be competent in providing oral health care to individuals at all stages of	f life and for a	ll periodontal
Instrument 1	Direct: Clinic Evaluation Form			
Instrument 2	Indirect: Student Exit Surveys			
Instrument 3				
Based on your r	esults, check whether the prog	ram met the goal Student Learning Outcome 2.	⊠ Met	☐ Not Met
Program Studen learning.	nt Learning Outcome 3: The d	ental hygiene graduate will be able to perform self-assessment to maintain professional standards a	and encourage	life-long
Instrument 1	Direct: Process Evaluations			
Instrument 2	Indirect: Student Exit Surveys			
Instrument 3				
Based on your r	esults, check whether the prog	ram met the goal Student Learning Outcome 3.	⊠ Met	☐ Not Met
Assessment Cyc	le Plan:		<b>_</b>	-
Nothing will cha	nge in terms of the timeline as	everything will be the same next cycle. Since program continues to meet the goals, the criteria	for success fo	or measurement
		to 80%. The program may also consider a different measurement instrument for a SLO.		

	Program Student Learning Outcome 1														
Program Student Learning Outcome		iene graduate will be competent in utilizing criti ene process of care.	ical thinking, problem solvi	ng, and evidence-based decision making in											
Measurement Instrument 1	patient treated d study patient inc and dental philo patient to determ narrative describ presentation inc periodontal reev Point. Students a the clinical prace	street measure of student learning: Students in Dental Hygiene 371 Clinical Dental Hygiene III provide a presentation of a case study attent treated during the previous semester in Dental Hygiene 370 Clinical Dental Hygiene II. Material considered when selecting the case rudy patient include: reason for choosing the patient, background of the patient, personal social history relevant to the patient's dental health and dental philosophy needs, summary of dietary analysis and recommendations made to the patient, and a periodontal reevaluation of the attent to determine if the patient benefited from the therapy provided by the student. The oral presentation is provided in the form of a carrative describing the patient's chief complaint, results of the examination, treatment plan, therapy, and results of therapy. The resentation includes radiographic images and clinical intraoral photographs. Postoperative photos are taken at the beginning of the eriodontal reevaluation appointment. The case study patient information is presented in an oral format in class using Microsoft Power oint. Students are evaluated on the ability to analyze these factors and link the concepts to approaches that will be used on a routine basis in the clinical practice setting.													
Criteria for Student Success		Students should be able to satisfy the completion of the case presentation by meeting evaluation values pertaining to different aspects within he scope of patient treatment. Students must earn an average a 74% or greater to achieve competency for the presentation.													
Program Success Target for this		100%	Percent of Program Achieving Target	100%											
Methods	performance wir and evidence-ba calculus class/sp evaluation), Rac patient needs), A incorporation of schedule), Analy	ere completed by all AS students (6) participating in the total value calculated to determine overall consed decision making in the dental hygiene process special needs), Patient's Medical/Dental Findings (noting the propriate Therapy/Patient Education (oral hygiene trisk factors/periodontal disease), Reevaluation (assysis of Dietary Findings (potential acid production) lity to answer questions, preparedness, grammar, etc.	ompetence of the student in re- of care. Criteria evaluated in nedical history, dental history ion), Treatment Planning (se- ne aids, antimicrobials, charts sessment, patient progress/pro, Charts (clarity, accuracy, co	elation to critical thinking, problem solving, cluded: Patient Selection (perio, risk factors, periodontal evaluation, restorative quencing, appointment scheduling, address pamphlets, recommendations/referrals, ognosis, specialist referrals, maintenance											
Measurement Instrument 2		of student learning: A minimum of 85% of student		on their first attempt.											
Criteria for Student Success	test which cover student to earn t	and of the program should achieve a score of 75 or is the various components of the dental hygiene cur heir dental hygiene license after graduation. Critical process of care are criteria examined.	rriculum. Passing this exam i al thinking, problem solving,	s a component that must be completed for the											
Program Success Target for this	Measurement	85%	Percent of Program Achieving Target	100%											
Methods	Results for each student are provided from the NBDHE to the program director. A collective student breakdown of the average score of the entire exam as well as the average score for each subject section of the exam is provided to the program director. The average overall exam score and individual average subject scores for the students who attempted the exam (BS and AS) for this cycle (28) were at or above the national average. All six AS students passed the NBDHE on their first attempt. These values suggest the program is meeting the goal of providing an academic atmosphere conducive to the development of a high degree of dental hygiene knowledge and clinical skill.														
Measurement Instrument 3															

Criteria for Student Success				
<b>Program Success Target for this N</b>	<b>Ieasurement</b>	Percent of Program		
		Achieving Target		
Methods				
Based on your results, highlight w	hether the program met the goal Stud	ent Learning Outcome 1.	⊠ Met	☐ Not Met
Results, Conclusion, and Plans for	Next Assessment Cycle (Describe wha	at worked, what didn't, and plan going forward)		

Results: The results for this cycle are expected each year. Expectations are high within the program to meet this goal as utilmately students must achieve this Student Learning Outcome to pass the NBDHE in order to earn a dental hygiene license.

Conclusions: Continued to stress to all students the importance of studying ahead of time for the NBDHE. Discussed that each student should seek instructor help if struggling with a concept or understanding material. Recommended the opportunity to attend national board review courses, provided information to the American Dental Hygienists' Association online board review course, and suggested study materials outside of course material provided by instructors. Discussed that WKU Student Services provided test taking approaches for those students who struggle with exams. These items were encouraged throughout matriculation through the program. Students were allowed to take the NBDHE beginning May 1, 2023. It also appears there was no issue with the delivery of course material due to the hiring of a new faculty member to replace a recent retiree. Results from the case study presentations as well as the NBDHE indicate students gained the knowledge needed to be successful with these items and matriculate through the completion of the program.

Plans for Next Assessment Cycle: We will continue to monitor progression of our students through results with these items in the future. The program will continue to be proactive with providing various avenues and resources to students that will be beneficial for the success needed on the NBDHE exam. Subject scores are provided yearly to faculty depicting strengths and weakness for each testing cycle. Faculty will continue to use resources available to provide the most up to date information within the profession while guiding our students throughout the process. Introducing students to new techniques, approaches, and technology is important as the field of dental hygiene is constantly evolving. Since program continues to meet the goals, the criteria for success for measurement instrument 1 will be raised from 74% to 80%.

	Program Student Learning Outcome 2
<b>Program Student Learning</b>	The dental hygiene graduate will be competent in providing oral health care to individuals at all stages of life and for all periodontal
Outcome	classifications.
Measurement Instrument 1	Direct measure of student learning: Student expectations are indicated on the Clinical Evaluation Form. A formal course sequence in scientific principles of dental hygiene practice is integrated throughout the curriculum including DH 271 Clinical Dental Hygiene I, DH 370 Clinical Dental Hygiene II, and DH 371 Clinical Dental Hygiene III. These courses are integrated with corresponding clinical sessions to develop skills in the dental hygiene sciences and patient treatment. As each student matriculates through the Program, the performance level expectations from the beginning to the end of students' clinical experiences increases. The Western Kentucky University Program of Dental Hygiene has a tracking system to ensure that graduates are competent in providing dental hygiene care for all types of classifications of periodontal disease, different age groups of patients, and patients with special needs. These patient characteristics are included in the requirements and a minimum number of each must be completed at a competent level for graduation.
Criteria for Student Success	Students should achieve a minimum number of "mastery" level interactions for various procedures and patient types. Upon meeting these parameters, students will achieve a level of competency in relation to providing health care to a conglomerate of various patient needs.

Program Success Target for this	Measurement	100%	Percent of Program Achieving	100%							
			Target								
National and	A 1 1	and in later than all the December the sections of	1 1	and the said of the day 2.1° 1.1							
Methods	As each student matriculates through the Program, the performance level expectations from the beginning to the end of students' clinic experiences increases. These expectations are indicated on the Clinic Evaluation Form. A Clinic Evaluation From must be competed each patient treatment interaction. Each clinical procedure evaluated is represented by a value indicating the maximum amount of error student can obtain for that particular procedure while still achieving a "Mastery." As a student progresses to the next higher clinical course the value of each error decreases meaning less errors can occur for each procedure for each subsequent clinical course. As an example patient classified as SRP II, a student in Clinic I is allowed to leave three pieces of calculus and still receive a mastery for that procedus student in Clinic II can leave no more than two pieces of calculus and a student in Clinic III can leave only one piece of calculus. This also seen with radiographs exposed clinically as each semester a passing grade to earn credit for a series of images increases for each subsequent clinical course. The performance level is expected to be higher for each clinical course in the curriculum as these courses taken in order. Meeting these criteria give an indication that clinical competence is being achieved for the student's level of experience relation to that particular clinical course within the curriculum. Students treat a variety of patients including pedodontic, adolescent, and adult in Clinical Dental Hygiene I with calculus classifications required being Class I and II. This provides the opportunity for student take these newly learned skills into the clinical setting and become acclimated to the environment while treating patients that correlate their current skill level. By Clinical Dental Hygiene II DH 370, completed services are fully integrated and program requirements inc successive order of clinical skill competence, resulting in continued comprehensive dental hygiene treatment. Students are intr										
<b>Measurement Instrument 2</b>	Indirect measure program outcon	e of student learning: Data from student exit survey	vs will demonstrate at least 90% agre	ement that future graduates meet							
Criteria for Student Success	Student exit sur	veys should indicate that the upcoming dental hygils likely stage of life and for all periodontal classifications		pared in providing oral health care to							
Program Success Target for this		90%	Percent of Program Achieving Target	100%							
Methods	Student exit surveys are provided the last week of classes before graduation. The goals of the program are listed with descriptions under each asking the student if they feel well prepared, prepared, not prepared, or do not know in relation to various components of these goals. Surveys were provided with all BS and AS students (28) earning degrees responding. One goal listed that correlated with the student learning outcome was does the program prepare dental hygienists who possess the reasoning, judgment and leadership skills necessary to identify problems, develop solutions to problems, implement these solutions, and evaluate the effectiveness of these solutions through formulating a dental hygiene assessment and developing a treatment plan. Twenty-six of the respondents felt well prepared with two indicating they felt prepared. Another goal related to this student learning outcome was does the program prepare dental hygienists who can function in the increasingly complex, interdisciplinary healthcare system and who are able to meet the dental hygiene care needs of the elderly, culturally diverse, disadvantaged, and physically challenged. Twenty-seven respondents stated they felt well prepared and one responent stated they felt prepared to effectively communicate with, educate, and treat all patients from a wide variety of backgrounds ment Instrument 3										

Criteria for Student Success				
<b>Program Success Target for this Meas</b>	surement	Percent of Program Achieving		
		Target		
Methods				
Based on your results, circle or highlig	ght whether the prog	ram met the goal Student Learning Outcome 2.	⊠ Met	☐ Not Met
D 14 C 1 2 1 D1 C N1	A accomment C ala	(Describe rubed morbed rubed didn't and plan seine formend)		

Results, Conclusion, and Plans for Next Assessment Cycle (Describe what worked, what didn't, and plan going forward)

**Results**: These results were expected. It is important that students must be competent in providing oral health care to individuals at all stages of life and for all periodontal classifications. Working with patients in our clinical setting allows students to learn these components while building confidence and gaining knowledge thoughout this process. Students indicated on their exit surveys this aspect was satisfied upon graduation.

Conclusions: Each student's progress is tracked by monitoring process evaluations, assignments, competencies, and clinical patient requirements. Students are expected to demonstrate steady competency progression throughout each semester while also completing all requirements within a timely manner. The faculty may require any student who is not demonstrating adequate progression at a competency level or struggling with certain material or clinical aspect to seek remediation during the open clinical lab sessions or work with an individual instructor pertaining to clinical issues. Faculty also relay information to the program director when a student is having difficulty meeting parameters and a meeting with the student could be provided to discuss possible approaches to help the student be successful. Faculty continue to emphasize outside of class assistance via instructor or remediation sessions as well as encourage students to recruit patients to satisfy specific requirements if needed. All lecture, seminar, clinical, and laboratory sessions were presented in a routine face to face delivery during the 2022-2023 period. All students within the Class of 2023 completed all requirements and successfully achieved competency upon evaluated assignments. Graduate surveys are evaluated and compared to previous classes when completed in May. When comparing feedback of graduate survey information between 2022 and 2023 in relation to goals of the program associated with this learning outcome, it appears students continue to feel well prepared/prepared. One goal listed that correlated with the student learning outcome was does the program prepare dental hygienists who possess the reasoning, judgment and leadership skills necessary to identify problems, develop solutions to problems, implement these solutions, and evaluate the effectiveness of these solutions through formulating a dental hygiene assessment and developing a treatment plan. All students in both 2021-2022 and 2022-2023 felt well prepared/prepared with this goal. Twenty-six students feeling well prepared was recorded in 2022-2023 which is an increase of two when compared to 2021-2022 leaving two feeling prepared in both 2021-2022 and 2022-2023 cohorts. Another goal related to this student learning outcome was does the program prepare dental hygienists who can function in the increasingly complex, interdisciplinary healthcare system and who are able to meet the dental hygiene care needs of the elderly, culturally diverse, disadvantaged, and physically challenged. Twenty-seven respondents in 2022-2023 and twenty-three in 2021-2022 stated they felt well prepared while one graduate in 2023-2022 stated they felt prepared to effectively communicate with, educate, and treat all patients from a wide variety of backgrounds. The values indicate these goals were consistently met when comparing this information.

Plans for Next Assessment Cycle: For the upcoming year, the program will strive to continue to provide an atmosphere conducive to learning and building skills in the clinical setting. Upon return for the upcoming 2023-2024 academic year, faculty will meet for clinical calibration exercises to provide a cohesiveness within the grading process. These exercises are conducted each year. As the clinical board exams have now implemented a mannequin type exam for clinical testing purposes in order to earn a dental hygiene license, the program will be conducting a clinical mock board exam using a mannequin which will provide the student the opportunity of experiencing a simulated exam process before attempting the official clinical exam.

		Program Student Learning Ou	itcome 3											
<b>Program Student Learning</b>	The dental hygi	ene graduate will be able to perform self-assess	ment to maintain professional stan	dards and encourage life-long										
Outcome	learning.													
Measurement Instrument 1	evaluation. Emp includes a self-ex- completing some provide peer eval preparation, perf	prirect measure of student learning: During laboratory and preclinical courses, students are required to self-evaluate for each process valuation. Emphasis is placed on the mastery of a skill instead of grade performance. Each process evaluation and module evaluation includes a self-evaluation component with students being required to complete the self-evaluation prior to instructor evaluation. When completing some tasks with a student partner in Preclinical Dental Hygiene and Dental Materials I and II, the partner is also required to rovide peer evaluation in relation to the confidence of the student partner. In the clinical setting, students are required to self-evaluate their reparation, performance, and approach to various services within in the clinic before instructor evaluation as well as self-evaluating adiographs in association with errors and possible retakes before their instructor will evaluate.												
Criteria for Student Success	Students should the student's self	be able to identify if they understand each concept f-evaluation. The student can then compare their of	detailed on the process evaluation.  own evaluation with the instructor. T	his approach instills the mindset for										
	continuous self-evaluation by the student for learning purposes not only through the completion of process evaluations, yet also in preparing for various competencies that must be passed throughout the curriculum.													
Program Success Target for this	Measurement	100%	Percent of Program Achieving Target	100%										
Measurement Instrument 2	program outcome	of student learning: Data from student exit survey e.	s will demonstrate at least 90% agre	ement that future graduates meet										
Criteria for Student Success	Student exit surv	reys should indicate that the upcoming dental hygi-		pared to be able to perform self-										
		aintain professional standards and encourage life-l		1000										
Program Success Target for this	Measurement	90%	Percent of Program Achieving Target	100%										

Methods		veys are provided the last week of classes before graduation. The goals of the program a											
	each asking the	student if they feel well prepared, prepared, not prepared, or do not know in relation to v	rarious component	s of these goals.									
	Surveys were pr	rovided with all BS and AS students (28) earning degrees responding. One goal listed the	at correlated with	the student									
	learning outcom	e was does the program prepare individuals who are capable of meeting the needs of so	ciety, dentistry, and	d dental hygiene									
		Future. Twenty-seven students responded that they felt well prepared to work effectively											
		and support members of the dental team with one respondent stating they felt prepared. Another goal related to this student learning											
	1 1	bes the program prepare dental hygienists who are literate, capable of problem-solving, d		_									
		s. Twenty-six of the respondents stated they felt well prepared staying current using evi											
	O		delice-based decis.	ion making with									
	two respondents	stating they felt prepared.											
<b>Measurement Instrument 3</b>													
Criteria for Student Success													
<b>Program Success Target for this</b>	Measurement	Percent of Program Achieving											
110grunn Sweeess 1m1ger 101 enns	1,1000,011,0110,110	Target											
Methods	I	Turgov											
Based on your results, circle or h	nighlight whether	r the program met the goal Student Learning Outcome 3.	⊠ Met	☐ Not Met									
Deculte Conclusion and Plans for	an Novet Aggaggm	and Cycle (Describe what worked what didn't and alon oning forward)											

Results, Conclusion, and Plans for Next Assessment Cycle (Describe what worked, what didn't, and plan going forward)

<u>Results</u>: These results were expected. It is important that the dental hygiene graduate be able to perform self-assessment to maintain professional standards and encourage lifelong learning. Throughout the matriculation of the program, students learn the importance of self-evaluating various concepts in different courses. Student exit surveys indicated graduates feel prepared with this component.

Conclusions: Students are provided daily, weekly, and routine feedback from laboratory, preclinical, and clinical performance with instructor comments on evaluation forms. Students are expected to demonstrate steady competency progression throughout each semester while also completing all requirements within a timely manner. The faculty may require any student who is not demonstrating adequate progression at a competency level or struggling with certain material or clinical aspect to seek remediation during the open clinical lab sessions or work with an individual instructor pertaining to clinical issues. Faculty also relay information to the program director when a student is having difficulty meeting parameters and a meeting with the student could be provided to discuss possible approaches to help the student be successful. Dental hygiene graduates appear to be able to perform self-assessment to maintain professional standards and encourage life-long learning. Items identified in 2022-2023 as areas where students seemed to seek assistance to continue to improve their skills while matriculating through the program included taking advantage of open lab sessions to practice cavitron adaptation/usage on a typodont, radiographic technique, and chairside instrumentation. This was not an unusual trend to see when compared to the previous year as many students wanted to practice as much as possible outside of the classroom/clinical courses to continually improve their skills.

<u>Plans for Next Assessment Cycle</u>: Students will continue to be individually monitored by faculty during their matriculation throughout the program. Process evaluations will be reviewed annually for changes as needed as well as new process evaluations created supporting new concepts/approaches to be taught introduced within the curriculum. These process evaluations will contain areas for student self-evaluation for items associated within a particular component. Any student recognized by faculty who may be struggling with a specific concept will be assisted by an instructor and referred to mandatory remediation as needed.

#### **Core Competencies Assessment**

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
C1	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X
C2	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X
C3	X	X	X	X	X	X	X	X	X	X	X	X	X	X		X	X
C4	X	X	X	X	X		X	X	X	X	X		X			X	X
C5	X	X	X	X			X		X	X	X			X		X	X
C6	X	X	X			X			X	X	X				X	X	X
C7						X			X	X		X			X	X	X
C8	X								X	X	X	X			X	X	X
C9					X	X		X	X	X		X			X	X	X
C10	X	X	X			X			X	X	X	X		X		X	X
C11	X	X			X	X		X	X	X	X	X		X		X	X

#### **Core Competencies (C)**

- C.1 Apply a professional code of ethics in all endeavors.
- C.2 Adhere to state and federal laws, recommendations, and regulations in the provision of dental hygiene care.
- C.3 Provide dental hygiene care to promote patient/client health and wellness using critical thinking and problem solving in the provision of evidence-based practice.
- C.4 Use evidence-based decision making to evaluate and incorporate emerging treatment modalities.
- C.5 Assume responsibility for dental hygiene actions and care based on accepted scientific theories and research as well as the accepted standard of care.
- C.6 Continuously perform self-assessment for lifelong learning and professional growth.
- C.7 Promote the profession through service activities and affiliations with professional organizations.
- C.8 Provide quality assurance mechanisms for health services.
- C.9 Communicate effectively with individuals and groups from diverse populations both verbally and in writing.
- C.10 Provide accurate, consistent, and complete documentation for assessment, diagnosis, planning, implementation, and evaluation of dental hygiene services.
- C.11 Provide care to all clients using an individualized approach that is humane, empathetic, and caring.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
HP1	X	X			X	X		X	X	X		X				X	X
HP2	X	X			X	X		X	X	X		X				X	X
HP3		X							X	X			X			X	X
HP4		X			X	X		X	X	X		X	X			X	X
HP5		X				X			X	X		X	X			X	X
HP6	X	X							X	X	X			X		X	X

#### **Health Promotion and Disease Prevention (HP)**

- HP.1 Promote the values of oral and general health and wellness to the public and organizations within and outside the profession.
- HP.2 Respect the goals, values, beliefs, and preferences of the patient/client while promoting optimal oral and general health.
- HP.3 Refer patients/clients who may have a physiologic, psychological, and/or social problem for comprehensive patient/client evaluation.
- HP.4 Identify individual and population risk factors and develop strategies that promote health related quality of life.
- HP.5 Evaluate factors that can be used to promote patient/client adherence to disease prevention and/or health maintenance strategies.
- HP.6 Evaluate and utilize methods to ensure the health and safety of the patient/client and the dental hygienist in the delivery of dental hygiene.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
CM1						X						X					
CM2						X				X		X				X	X
CM3										X		X				X	X
CM4						X						X					
CM5						X						X					
CM6												X					

## **Community Involvement (CM)**

- CM.1 Assess the oral health needs of the community and the quality and availability of resources and services.
- CM.2 Provide screening, referral, and educational services that allow clients to access the resources of the health care system.
- CM.3 Provide community oral health services in a variety of settings.
- CM.4 Facilitate client access to oral health services by influencing individuals and/or organizations for the provision of oral health care.
- CM.5 Evaluate reimbursement mechanisms and their impact on the patients/clients access to oral health care.
- CM.6 Evaluate the outcomes of community-based programs and plan for future activities.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PC1	X	X	X						X	X	X		X		X	X	X
PC1a	X	X	X	X			X		X	X	X		X		X	X	X
PC1b	X	X	X		X			X	X	X	X		X		X	X	X
PC1c	X	X	X						X	X	X		X	X	X	X	X
PC1d	X	X	X	X	X		X	X	X	X	X		X	X	X	X	X
PC1e	X	X	X						X	X	X		X	X	X	X	X
PC1f	X	X		X			X		X	X	X		X		X	X	X

#### **Patient/Client Care (PC)**

#### Assessment

PC.1 Systematically collect, analyze, and record data on the general, oral, and psychosocial health status of a variety of patients/clients using methods consistent with medico-legal principles.

- a. Select, obtain, and interpret diagnostic information recognizing its advantages and limitations.
- b. Recognize predisposing and etiologic risk factors that require intervention to prevent disease.
- c. Obtain, review, and update a complete medical, family, social, and dental history.
- d. Recognize health conditions and medications that impact overall patient/client care.
- e. Identify patients/clients at risk for a medical emergency and manage the patient/client care in a manner that prevents an emergency.
- f. Perform a comprehensive examination using clinical, radiographic, periodontal, dental charting, and other data collection procedures to assess the patients/clients needs.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PC2	X	X	X						X	X	X		X			X	X
PC2a	X	X							X	X	X		X			X	X
PC2b	X	X							X	X	X		X			X	X
PC2c	X	X		X			X		X	X	X		X			X	X

## Diagnosis

PC.2 Use critical decision making skills to reach conclusions about the patients/clients dental hygiene needs based on all available assessment data. This competency includes:

- a. Determine a dental hygiene diagnosis.
- b. Identify patient/client needs and significant findings that impact the delivery of dental hygiene services.
- c. Obtain consultations as indicated.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PC3	X	X							X	X	X		X			X	X
PC3a	X	X		X			X		X	X	X		X			X	X
PC3b	X	X		X			X		X	X	X		X			X	X
PC3c	X	X							X	X	X		X			X	X
PC3d	X	X							X	X	X		X			X	X
PC3e	X	X							X	X	X		X			X	X

## **Planning**

PC.3 Collaborate with the patient/client, and/or other health professionals, to formulate a comprehensive dental hygiene care plan that is patient/client-centered and based on current scientific evidence.

- a. Prioritize the care plan based on the health status and the actual and potential problems of the individual to facilitate optimal oral health.
- b. Establish a planned sequence of care (educational, clinical, and evaluation) based on the dental hygiene diagnosis; identified oral conditions; potential problems; etiologic and risk factors; and available treatment modalities.
- c. Establish a collaborative relationship with the patient/client in the planned care to include etiology, prognosis, and treatment alternatives.
- d. Make referrals to other health care professionals.
- e. Obtain the patients/clients informed consent based on a thorough case presentation.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PC4	X	X	X			X			X	X	X					X	X
PC4a	X	X	X						X	X	X		X			X	X
PC4b	X	X	X						X	X	X		X	X		X	X
PC4c	X	X	X						X	X	X					X	X

## **Implementation**

PC.4 Provide specialized treatment that includes preventive and therapeutic services designed to achieve and maintain oral health. Assist in achieving oral health goals formulated in collaboration with the patient/client.

- a. Perform dental hygiene interventions to eliminate and/or control local etiologic factors to prevent and control caries, periodontal disease, and other oral conditions.
- b. Control pain and anxiety during treatment through the use of accepted clinical and behavioral techniques.
- c. Provide life support measures to manage medical emergencies in the patient/client care environment.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PC5	X	X				X			X	X	X					X	X
PC5a	X	X							X	X	X	X	X			X	X
PC5b	X	X							X	X	X		X	X		X	X
PC5c	X	X							X	X	X					X	X
PC5d	X	X							X	X	X					X	X

#### **Evaluation**

PC.5 Evaluate the effectiveness of the implemented clinical, preventive, and educational services and modify as needed.

- a. Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient/client self-report.
- b. Evaluate the patients/clients satisfaction with the oral health care received and the oral health status achieved.
- c. Provide subsequent treatment or referrals based on evaluation findings.
- d. Develop and maintain a health maintenance program.

	DH																
	201	204	206	210	212	222	226	230	270	271	302	303	307	309	324	370	371
PGD1						X			X						X		
PGD2															X		
PGD3						X			X	X					X		

## **Professional Growth and Development**

PGD.1 Identify career options within health care, industry, education, and research and evaluate the feasibility of pursuing dental hygiene opportunities.

PGD.2 Develop practice management and marketing strategies to be used in the delivery of oral health care.

PGD.3 Access professional and social networks to pursue professional goals.

## **EVALUATION FORM FOR CASE PRESENTATION**

Presenter\_\_\_\_\_Evaluator\_\_\_\_\_Score\_\_\_\_

<b>Patient Selection</b>					
Perio	(5)	(4)	(3)	(2)	(1)
1 0110	Severe	Moderate	Slight	Gingivitis	Healthy(N/A)
Risk Factors	(5)	(4)	(3)	(2)	(1)
	Smoking plus	Smoking with	more than one	one risk factor	no risk factors
	one or more	no other risk	risk factor	with no	
	risk factors	factors	with no	history of	
			history of smoking	smoking	
Calculus Class	(5)	(4)	Silloking		
Special Needs	CC IV or	CC III or	(3)	(2)	
	CC III with	CC II with	CC II or	CC I	
	special needs	special needs	CC I with		
	-	-	special needs		
Patient's					
Medical/ Dental	(10)	(9)	(8)	(7)	(6)
Findings	Thoroughly	At least one	At least two	At least three	4 or more
Medical History	and correctly	error or	errors or	errors or	errors or
Dental History Periodontal Eval	presents findings	omission	omissions	omissions	omissions
Restorative Eval	(including				
Restorative Evar	clinical				
	attachment				
	levels) with				
	no errors				
Radiographs	(5)	(4)	(3)	(2)	(1)
Interpretation of	Thoroughly	At least one	At least one	At least two	3 or more
findings	and correctly	error or	error or	errors or	errors or
Patient	presents	omission; high	omission;	omissions;	omissions;
education	findings on FRS; high	quality radiographs;	average quality	average quality	poor quality films; does
	quality	uses for	radiographs;	radiographs;	not
	radiographs;	patient	uses for	uses for	incorporate
	uses for	education	patient	patient	into patient
	patient		education	education	education
	education				
Treatment	(10)	(9)	(8)	(7)	(6)
Planning	Logical	At least one	At least two	Three or more	Inappropriate
Sequencing	sequence;	error or	errors or	errors or	sequence of
Appt.	adequate # of	omission;	omissions;	omissions;	tx; inadequate
scheduling	appts.; all	logical	logical	logical	# of appts.
Address pt.	needs	sequence;	sequence;	sequence;	
needs	addressed	adequate # of	adequate # of	inadequate #	
		appts.	appts.	of appts.	

Appropriate	(10)	(9)	(8)	(7)	(6)
Therapy/Patient	Appropriate	At least one	At least two	At least three	4 or more
Education	incorporation of	error or	errors or	errors or omissions	errors or
OH aids	OH aids;	omission	omissions	circis or omissions	omissions
Antimicrobials	appropriate use	01111551011	011115510115		011115510115
Charts/	of antimi-				
pamphlets	crobials;				
Recommend/	appropriate				
Referrals	charts/				
Incorp. risk	pamphlets;				
factors/perio	necessary				
dx.	recommendations				
	& referrals;				
	incorporation of				
	risk factors/perio				
	disease				
Reevaluation	(20)	(18)	(16)	(14)	(12)
Assessment	Thorough, well-	At least one	At least two	At least three	4 or more
Pt. progress/	detailed;	error or	errors or	errors or omissions	errors or
prognosis	appropriate	omission	omissions		omissions
Specialist	referrals; proper				
referrals	prognosis &				
Maintenance	maintenance				
schedule	schedule				
Analysis of	(10)	<b>(9</b> )	(8)	(7)	(6)
Dietary	Thorough	Thorough	Thorough	Partial analysis;	Partial
Findings	analysis: no	analysis; one	analysis; one or	one error or	analysis; one
Potential acid	errors or	error or	more errors or	omission	or more
production	omissions	omission	omissions		errors or
					omissions
Charts	(5)	(4)	(3)	(2)	(1)
Clarity	Enhance the	Contribute	Poorly prepared	So poorly prepared	Inaccurate or
Accuracy	presentation;	to	or used	that they detract	incomplete;
Completion	prepared in a	presentation;	inappropriately;	from presentation	listeners may
	professional	size is	too small to be		have been
	manner; large	appropriate	easily seen;		misled
	enough to be	for reading;	listeners may be		
	seen by all;	appropriate	confused		
	accurate and	information			
	complete	is included;			
		some			
		material is			
		not			
		supported by			
		visual aids			

Overall	(15)	(13)	(11)	(9)	(7)
Presentation	Personal	Personal	Personal	Personal	Personal
Appearance	appearance is	appearance	appearance is	appearance is	appearance is
Ability to	completely	is	somewhat	inappropriate;	inappropriate;
answer	appropriate;	appropriate;	inappropriate;	does not engage	avoids or
questions	responds to	generally	reluctantly	audience; several	discourages
Preparedness	questions with	responsive	interacts with	grammatical errors	active
Grammar	enthusiasm and	to audience;	audience;	and	audience
Eye Contact	correct	misses some	responds to	mispronunciations;	participation;
Professionalism	responses;	opportunities	questions	very little eye	is not
	prepared; no	for	inadequately;	contact; thoughts	responsive to
	grammatical	interaction;	some	don't flow, not	group;
	errors; correctly	no	grammatical	clear	difficulty
	pronounces all	grammatical	errors and		with
	words; maintains	errors;	mispronunciation		grammar and
	eye contact with	correctly	of words;		pronunciation
	audience, seldom	pronounces	occasionally uses		of words;
	returning to	all words;	eye contact, but		reads all of
	notes; maintains	maintains	still reads notes		report with
	professionalism	eye contact	most of the time;		no eye
	throughout;	most of the	audience has		contact;
	organized	time but	difficulty		mumbles,
		frequently	following		audience has
		returns to	presentation		difficulty
		notes	because student		hearing;
			jumps around		confusing

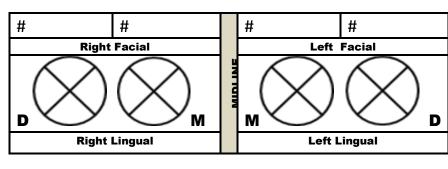
## **Comments:**

# WESTERN KENTUCKY UNIVERSITY DENTAL HYGIENE PROGRAM

## **CLINIC EVALUATION FORM**

							RFCAI	L DATE	Student	
Patient Name:				_Pt.#:			1126/12		Student:	
DOB:									#:	_
	Co	nsultatio	on					Date:		Sig:
	atient Class			Caula	CN			Date:		Sig:
1 11 111 117	edo Ado (0-9) (10-	olescent 21)	Adult (22-54)	Senio (55+)	r SN				∃Yes □No	- 0
Calculus Classification: Pedo		IV 0+	hori							
Perio Classification: Pedo		IV OI	ner:	_			N/A	Data		C:
Perio Maintenance: Slight N	/loderate	Severe						Date:		Sig:
EagleSoft® review needed? Yes	or No							Date rev	iewed:	Sig:
								Date rev	iewed:	Sig:
Radiographic review needed?	Tyne	- Γ 1PΔN	l [_]FMS	[ ] RW	[ ]Othe	r			radiographs reviewed:	Jig.
[_] Yes [_] No	1,400	. [_]ı Aı	· [_]i ivi3	[_] 544	[_]Otile	•			. аа. од. ар от . от . от .	Sig:
Treatment Completed								Data		C:
Treatment Completed								Date:		Sig:
ROCEDURES TO BE EVALUATED:			MASTERY	1	ON MAS		U=UNATT		( ) =ALLOWED ERROR	<u>s</u>
	Visit(s)	1	2	3	4	5	Faculty C	Comments		
	DATE									
	TIME IN									
	TIME OUT									
Instructor Initials For S										
1. Med/Dent History	(2/1/1)									
2. Extra/Intra Oral Exam	(2/1/1)									
Dental Charting     Periodontal Assessment	(*)									
Calculus Detection	(4/3/2)									
6. Radio Asses/Patient Needs	(1/0/0)									
7. Treatment Planning	(3/2/1)									
8. Reassessment	(1/0/0)									
Periodontal Reassessment										
10. Patient Education	(2/1/0)									
11. Pedo	(2/1/0)									
12. SRP Class I	(2/1/0)									
13. SRP Class II	(3/2/1)									
14. SRP Class III	(-/4/3)									
15. SRP Class IV	(-/6/5)									
16. Plaque and Stain Removal	(2/1/1)									
17. Safety/Prevent Disease Trai										
18. Patient/Time Management	(2/1/1)						Student	Action Ne	eded	
19. Record Completion	(2/2/1)									
20. Topical Fluoride	(1/0/0)									
21. Sealants [total #:	]									
22. Nitrous Oxide										
23. Intraoral Photographs										

# **Treatment Plan**



Calculus Classification:

AAP Periodontal Classification:	
Check the numbered column to indicate what procedure/service you plan to comp	lete at each visit.

DDOCEDI IDE (CEDVICEC			Tre	atme	nt vis	it(s)	
PROCEDURE/SERVICES		1	2	3	4	5	6
Reassess: Medical History □ BP □ Other □							
Prerinse: Listerine® □ Chlorhexidine □ Biotene®□ Listerine zero®□							
Periodontal Reassessment							
Premedicate							
EagleSoft							
Radiographs       Film □ ScanX □ CCD □ BW # Horizonal □ Vertical □         Occlusal PAN PA(s) #	FRS #						
Retakes # Film □ ScanX □ CCD □							
PHP							
Patient Education:							
Nitrous Oxide/Oxygen Sedation							
Local Anesthesia Topical□ Injections□ Oraqix®□							
Scale, Ultrasonic: Quadrant □ Full Mouth □							
Scale, Hand: Quadrant   Full Mouth							
Plaque and Stain removal: TB □ Floss □ PX Cup □ PX Brush □ Air Polisher □  PX paste: coarse □ medium □ fine □ superfine □ pumice □ toothpaste □							
Subgingival Irrigation: Listerine® □ Chlorhexidine □ Other							
Teeth selected for Sealants:  Dentist							
Fluoride: APF   NAF   Varnish							
Dietary Counseling							
Study Models							
Subgingival Medicament Placement (e.g. Arestin ®)							
Intra/Extra Oral Photos							
Other:							
Referral for:							
Establish Recall							
aculty Signature INITIAL plan Date	Toothbrush	Size			F	oss_	

Faculty Signature INITIAL plan \_\_\_\_\_ Date \_\_\_\_ Toothbrush Size \_\_\_\_ Floss \_\_\_\_ 
Faculty Signature REVISED plan \_\_\_\_\_ Date \_\_\_\_ Receptionist Signature \_\_\_\_\_

# Student (Exit) Survey 2023

With	respect to your Dental Hygiene Education at WKU, please answer the fo	llowi	ng qu	estion	is:
		Well Prepared	Prepared	Not Prepared	Do Not Know
Goa	al #1 Provide an academic atmosphere conducive to the development	of a	high (	degre	e of
	entific knowledge and clinical skill.		O	0	
1	Obtain a complete medical/dental history				
2	Recognize medical conditions that require special precautions for				
	treatment				
3	Manage medical emergencies				
4	Take and record vital signs				
5	Perform an extra/intra oral examination and record findings				
	appropriately				
6	Perform dental charting and accurately record findings				
7	Evaluate the periodontium and record findings accurately				
8	Develop individualized oral hygiene regimens for patients				
9	Perform dietary counseling for caries control and/or general health				
10	Follow the highest standards of asepsis and sterilization				
11	Expose and process radiographic films				
12	Develop and maintain a recall system				
13	Sharpen instruments effectively				
14	Maintain equipment				
15	Take alginate impressions				
16	Apply pit and fissure sealants				
		Well Prepared	Prepared	Not Prepared	Do Not Know
	al #2 Prepare dental hygienists who have a strong theoretical base in	the b	asic a	and	
1 psy	chosocial sciences, and dental hygiene science.  Detect and remove calculus				
2	Use ultrasonic instrumentation for calculus removal				
3	Control pain and anxiety				
4	Perform a polishing procedure using appropriate agents				
5	Administer appropriate chemotherapeutic agents				
7	Administer appropriate topical fluoride agents  Decument dental hygiene treatment accurately				
	Document dental hygiene treatment accurately  Evaluate outcomes of dental hygiene treatment				
8	Evaluate outcomes of dental hygiene treatment				ł

# Student (Exit) Survey 2023 (cont).

		Well Prepared	Prepared	Not Prepared	Do Not Know		
		1					
Go	al #3 Prepare individuals who are capable of meeting the needs of soc	eiety,	denti	stry,			
	d dental hygiene now and in the future.	•		•			
1	Work effectively to solve problems, make decisions, and support						
	members of the dental team						
2	Implement emerging technology in dental hygiene practice						
Go	al #4 Prepare dental hygienists who are literate, capable of problem-	solvin	g, de	cisioı	1		
ma	king, and motivated to be life-long learners.						
1	Effectively evaluate dental literature						
2	Stay current using evidence-based decision making						
Go	al #5 Prepare dental hygienists who possess the reasoning, judgment,	and	leade	rship	ı		
	lls necessary to identify problems, develop solutions to problems, impl	lemer	it the	se			
solutions, and evaluate the effectiveness of these solutions.							
1	Formulate a dental hygiene assessment and develop a treatment plan						
Go	Goal #6 Prepare dental hygienists who can function in the increasingly complex,						
int	erdisciplinary health care system and who are able to meet the dental	hygie	ene ca	are ne	eds		
of t	he elderly, culturally diverse, disadvantaged, and physically challenge	ed.	1				
1	Effectively communicate with, educate, and treat all patients from a						
	wide variety of backgrounds						
Go	al #7 Prepare dental hygienists who possess the moral and ethical val	ues r	equis	ite fo	r		
the effective performance of responsibilities within dental hygiene, dentistry, and society.							
1	Display professional and ethical conduct						
2	Establish good rapport and a caring attitude towards patients				•		
Goal #8 Prepare dental hygienists who are committed to contributing actively to the							
betterment of the profession through professional involvement and continued education.							
1	Communicate effectively with patients and other health professionals						
2	Select and attend continuing education courses that increase						
	knowledge and skills for better patient treatment						
3	Be actively involved in your professional organization						

What areas can be improved upon?

#### BITEWING RADIOGRAPHIC EVALUATION

Student:			
Instructor: Date:			
Criteria:	SE	IE	IR
1. *Wears film badge			
2. *Wears gloves, mask, glasses and appropriate attire			
3. *Determines need for two or four bitewing radiographs			
4. *Explains the necessity of radiographs and procedure to patient			
5. *Prepares operatory prior to radiographic procedures			
6. *Selects appropriate film size for exposure			
7. *Selects appropriate technique			
8. *Prepares film so that exposure side of the film packet is adjacent to the bite-tab on the film holding device			
9. *Uses disinfected/sterilized or disposable film holding device			
10. *Prepares the patient for radiographic exposure by:			
a. removing eyeglasses and removable dental appliances			
b. draping with lead apron			
c. applying thyroid collar			
11. *Properly positions the patient for exposure:			
a. midline is perpendicular to the plane of the floor			
b. occlusal plane in the mouth closed position is parallel with the plane of the floor			
12. *Selects correct kVp, mA, and time settings for each exposure prior to placement of film packet in patient's mouth			
13. Closes all doors labeled "Close Door During X-Ray Procedures."			
14. *Demonstrates correct placement of the film packet for exposure:			
<ul> <li>a. positions the lower half of the film packet so the bite tab rests on the occlusal surface of the mandibular teeth</li> </ul>			
b. stabilizes the bite tab while the patient is instructed to close slowly			
c. checks to be sure the packet is not dislodged			
d. premolar exposures the film packet is centered in the premolar area			
15. *Determines correct horizontal angulation to avoid overlapping			
16. *Determines correct vertical angulation to avoid elongation or foreshortening (uses			

approximately 5 to 10 positive angulation)		

Criteria:	SE	IE	IR
17. *Determines correct PID placement to avoid cone-cutting			
18. *Leaves the room during radiographic exposure			
19. *Presses exposure button for complete exposure cycle			
20. *Places exposed film in designated container in preparation for processing			
21. *Sanitizes operatory and processes film holding device in appropriate manner			
22. *Leaves equipment in proper position			
23. *Processes film			

 $<sup>\</sup>ensuremath{^{*}}$  Critical item. Must reevaluate if missed.

SE = Self Evaluation

IE = Instructor Evaluation

IR = Instructor Reevaluation