		Assurance of Student Learning Report		
C II CII I	111 0 '	2022-2023		
	n and Human Services	School of Nursing and Allied Health		
	al Hygiene-BS Degree (524)			
	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 Assessment Cycle)		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:		_	-
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 O	outcome 1												
Program Student Learning Outcome		ene graduate will be competent in utilizing criene process of care.	tical thinking, problem solvi	ng, and evidence-based decision making in											
Measurement Instrument 1	patient treated de study patient ince and dental philose patient to determ narrative describ presentation includes periodontal reeve Point. Students a	Direct measure of student learning: Students in Dental Hygiene 371 Clinical Dental Hygiene III provide a presentation of a case study patient treated during the previous semester in Dental Hygiene 370 Clinical Dental Hygiene II. Material considered when selecting the case tudy patient include: reason for choosing the patient, background of the patient, personal social history relevant to the patient's dental heal and dental philosophy needs, summary of dietary analysis and recommendations made to the patient, and a periodontal reevaluation of the patient to determine if the patient benefited from the therapy provided by the student. The oral presentation is provided in the form of a pararative describing the patient's chief complaint, results of the examination, treatment plan, therapy, and results of therapy. The presentation includes radiographic images and clinical intraoral photographs. Postoperative photos are taken at the beginning of the periodontal reevaluation appointment. The case study patient information is presented in an oral format in class using Microsoft Power Point. Students are evaluated on the ability to analyze these factors and link the concepts to approaches that will be used on a routine basis 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 the 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 wit and evidence-bas calculus class/sp evaluation), Rad patient needs), A incorporation of schedule), Analy	re completed by all BS students (22) participating the total value calculated to determine overall cased decision making in the dental hygiene process ecial needs), Patient's Medical/Dental Findings (ingraphs (interpretation of findings, patient education propriate Therapy/Patient Education (oral hygienisk factors/periodontal disease), Reevaluation (assis of Dietary Findings (potential acid production lity to answer questions, preparedness, grammar,	ompetence of the student in rest of care. Criteria evaluated in medical history, dental history ation), Treatment Planning (see the aids, antimicrobials, charts assessment, patient progress/prob), Charts (clarity, accuracy, companded).	elation to critical thinking, problem solving, cluded: Patient Selection (perio, risk factors, periodontal evaluation, restorative quencing, appointment scheduling, address s/pamphlets, recommendations/referrals, ognosis, specialist referrals, maintenance ompletion), and Overall Presentation											
Measurement Instrument 2	Direct measure of	of student learning: A minimum of 85% of student	ts will pass the NBDHE exam	on their first attempt.											
Criteria for Student Success	test which covers student to earn the dental hygiene p	nd of the program should achieve a score of 75 of the various components of the dental hygiene cheir dental hygiene license after graduation. Critical rocess of care are criteria examined.	urriculum. Passing this exam i cal thinking, problem solving,	s a component that must be completed for the and evidence-based decision making in the											
Program Success Target for this	Measurement	85%	Percent of Program Achieving Target	90.91%											
Methods Measurement Instrument 3	entire exam as w score and individe national average	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. Twenty-two of these students completed the BS degree. 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.													
Criteria for Student Success															

Program Success Target for this	Measurement	Percent of Program		
		Achieving Target		
Methods				
Based on your results, highlight	whether the pro	gram met the goal Student Learning Outcome 1.	⊠ Met	☐ Not Met
			⊠ Met	Not Met
Desults Conclusion and Dlans for	Mort Aggaggm	ant Cycle (Describe what woulded what didn't and plan soins forward)	•	

Results, Conclusion, and Plans for Next Assessment Cycle (Describe what 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 utilimately 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. Target was met for the 2022-2023 assessment cycle. Slight improvement was seen from 88.89% during the 2021-2022 assessment cycle as compared to the results for 2022-2023. Both students have applied to retake the exam. Suggestions have been offered to students needing to retake the exam such as asking faculty any questions while studying, to return to faculty offices to review material, and providing outside resources to assist with studying the material.

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
Program Student Learning	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	s Measurement	100%	Percent of Program Achieving Target	100%							
As each student matriculates through the Program, the performance level expectations from the beginning to the end of stude experiences increases. These expectations are indicated on the Clinic Evaluation Form. A Clinic Evaluation From must be ceach patient treatment interaction. Each clinical procedure evaluated is represented by a value indicating the maximum amo student can obtain for that particular procedure while still achieving a "Mastery." As a student progresses to the next higher the value of each error decreases meaning less errors can occur for each procedure for each subsequent clinical course. As a patient classified as SRP II, a student in Clinic I is allowed to leave three pieces of calculus and still receive a mastery for the 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 and as each semester a passing grade to earn credit for a series of images increases subsequent clinical course. The performance level is expected to be higher for each clinical course in the curriculum as these taken in order. Meeting these criteria give an indication that clinical competence is being achieved for the student's level of relation to that particular clinical course within the curriculum. Students treat a variety of patients including pedodontic, ado adult in Clinical Dental Hygiene I with calculus classifications required being Class I and II. This provides the opportunity I take these newly learned skills into the clinical setting and become acclimated to the environment while treating patients that their current skill level. By Clinical Dental Hygiene II DH 370, completed services are fully integrated and program require successive order of clinical skill competence, resulting in continued comprehensive dental hygiene treatment. Students are i more difficult calculus classifications Class III and IV, periodontal patients, senior patients, and patients with special needs. Hygiene II DH 371 provides for the continuation in the											
Measurement Instrument 2	program outcom			_							
Criteria for Student Success		veys should indicate that the upcoming dental hy I stage of life and for all periodontal classification	ons.	pared in providing oral health care to							
Program Success Target for this	s Measurement	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 descrip each asking the student if they feel well prepared, prepared, not prepared, or do not know in relation to various components of Surveys were provided with all BS and AS students (28) earning degrees responding. One goal listed that correlated with the learning outcome was does the program prepare dental hygienists who possess the reasoning, judgment and leadership skills in identify problems, develop solutions to problems, implement these solutions, and evaluate the effectiveness of these solutions formulating a dental hygiene assessment and developing a treatment plan. Twenty-six of the respondents felt well prepared with indicating they felt prepared. Another goal related to this student learning outcome was does the program prepare dental hygical function in the increasingly complex, interdisciplinary healthcare system and who are able to meet the dental hygiene care needlederly, culturally diverse, disadvantaged, and physically challenged. Twenty-seven respondents stated they felt well prepared responent stated they felt prepared to effectively communicate with, educate, and treat all patients from a wide variety of back										

Measurement Instrument 3			
Criteria for Student Success			
Program Success Target for this Measurement	Percent of Program Achieving Target		
Methods			
Based on your results, circle or highlight whether	er the program met the goal Student Learning Outcome 2.	⊠ Met	☐ Not Met

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 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 Outcome 3													
Program Student Learning		ene graduate will be able to perform self-assess	ment to maintain professional star	ndards and encourage life-long									
Outcome	learning.												
Measurement Instrument 1	evaluation. Empincludes a self-ercompleting some provide peer evaluation, perforadiographs in as	of student learning: During laboratory and preclinical phasis is placed on the mastery of a skill instead of evaluation component with students being required to tasks with a student partner in Preclinical Dental luation in relation to the confidence of the student formance, and approach to various services within association with errors and possible retakes before the student of the student formance.	grade performance. Each process et to complete the self-evaluation prior Hygiene and Dental Materials I and partner. In the clinical setting, stude in the clinic before instructor evaluation heir instructor will evaluate.	valuation and module evaluation to instructor evaluation. When II, the partner is also required to ents are required to self-evaluate their tion as well as self-evaluating									
Criteria for Student Success	Students should be able to identify if they understand each concept detailed on the process evaluation. The instructor's evaluation												
	the student's self-evaluation. The student can then compare their own evaluation with the instructor. This approach instills the min continuous self-evaluation by the student for learning purposes not only through the completion of process evaluations, yet also in for various competencies that must be passed throughout the curriculum.												
Program Success Target for this	Measurement	100%	Percent of Program Achieving Target	100%									
Methods	expectations commodalities through Students are introupon the other with proceed. For exampation and modules lear combining all of exam is also important and session of the same of the same of the process of the session of the Expanded Function on the Expanded Function of the student's self-continuous self-continuous components.	continues matriculation through the program, performance tinue to increase in relation to performance. In the ghout each course. Students must complete laborate oduced to these procedures and are expected to select the some labs culminating in a final exam where complete, students learn various fundamentals involved of Radiology I. In Preclinical Dental Hygiene, students, instrument design, instrumentation, and the appropriate in Clinical Dental Hygiene I which must be also be the previous labs and Preclinical courses, treatment planning, preventive counseling, risk arough the Program when taking Clinical Dental Hygiene I which must be the process evaluations in Pre-Clinical Dental Hygiene I which must be process evaluation. The student can then compare their contents of the student of the student for learning purposes not be bettencies that must be passed throughout the curriculation.	e laboratory setting, students are intro- tory assignments with many having f-evaluate before being checked by a competency must be shown in a particle ded with radiology and must combine dents are introduced to fundamental oproach to patient treatment. Studen etency exam is proctored at the begin and must be passed to proceed to patie to be passed at a score of 83 or higher e are continued in Clinical Dental H assessments, scaling, and radiographic giene II and Clinical Dental Hygiene et, the grading criteria should also refl ghout the curriculum. First year stude tene (DH 270), Dental Radiology I (I Pain Control in Dentistry (DH 309). To only through the completion of proculum.	a process evaluation to accompany. an instructor. These concepts build cular aspect before being able to these skills to pass a lab competency skills including positioning of both at progress with process evaluations aming of Clinical Dental Hygiene I ent treatment. An instrumentation before patient treatment can begin. The yield of the student continues at III, the evaluation scale becomes lect an increased level of evaluation. The instructor's evaluation follows this approach instills the mindset for tess evaluations, yet also in preparing									
Measurement Instrument 2	Indirect measure program outcom	of student learning: Data from student exit survey	s will demonstrate at least 90% agre	ement that future graduates meet									
Criteria for Student Success		e. veys should indicate that the upcoming dental hygi-	ene graduate is well prepared or prer	pared to be able to perform self-									
STATE OF STRUCTURE SHOULDS		aintain professional standards and encourage life-l		said to be dote to perform ben									
Program Success Target for this		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		
		nbers of the dental team with one respondent stating they felt prepared. Another goal re		
	1 1	es 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.		
Measurement Instrument 3				
Criteria for Student Success				
Program Success Target for this	Measurement	Percent of Program Achieving		
110grunn Sweeess 1m1ger 101 enns	1,1000 011 01110110	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.

Plans for Next Assessment Cycle: 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 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	304	307	309	323	324	370	371
C1	X	X	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	X	X
C3	X	X	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		X	X
C5	X	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	X
C9					X	X		X	X	X		X	X			X	X	X	X
C10	X	X	X			X			X	X	X	X	X		X			X	X
C11	X	X			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	304	307	309	323	324	370	371
HP1	X	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		X	X
HP5		X				X			X	X		X	X	X				X	X
HP6	X	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	304	307	309	323	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	304	307	309	323	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	304	307	309	323	324	370	371
PC2	X	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

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	304	307	309	323	324	370	371
PC3	X	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	304	307	309	323	324	370	371
PC4	X	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	304	307	309	323	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	304	307	309	323	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.

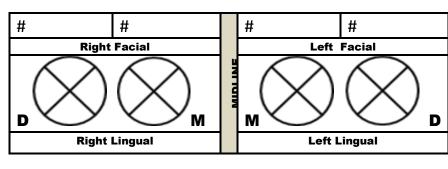
PGD.3 Access professional and social networks to pursue professional goals.

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	I [_]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	
sol	utions, and evaluate the effectiveness of these solutions.				
1	Formulate a dental hygiene assessment and develop a treatment plan				
Go	al #6 Prepare dental hygienists who can function in the increasingly α	comp	lex,		
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, dentis	stry, a	and s	ociety	/ •
1	Display professional and ethical conduct				
2	Establish good rapport and a caring attitude towards patients				•
Go	al #8 Prepare dental hygienists who are committed to contributing ac	tively	y to tl	ne	
bet	terment of the profession through professional involvement and conti	nued	educ	ation	
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:			
 a. positions the lower half of the film packet so the bite tab rests on the occlusal surface of the mandibular teeth 			
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			

 $[\]ensuremath{^{*}}$ Critical item. Must reevaluate if missed.

SE = Self Evaluation

IE = Instructor Evaluation

IR = Instructor Reevaluation