

Conclusions and Summary of the Self-Study Report

- a qualitative appraisal and analysis of the program's strengths and weaknesses.

STANDARD 1 - INSTITUTIONAL EFFECTIVENESS

1. Provide an evaluation of the assessment process. Discuss the effectiveness of the program relative to student achievement.

This effort focused on program planning and assessment has helped the department to embrace the concepts that assessment and evaluation for potential change is a process that is ongoing. The assessment process has allowed the program to have guidance for change and confirmation of what is progressing in a positive direction and specifically what needs to be improved. The planning and assessment process has made the faculty and the curriculum more cohesive and have given additional structure to the program and communication processes with faculty and staff. The University is accredited by Northwest Accrediting agency and that ongoing process of our participation in the overall University processes has helped in improving the understanding and knowledge of the accreditation process for faculty and staff.

2. Assess the stability of the program's fiscal support as anticipated over the next several years.

Fiscal support for the program is anticipated to remain at the same level with increases as the university and college have increases in financial support. With our position within the Dumke College of Health Professions, we are a part of the Interdisciplinary Professional Education group that shares resources of space, equipment, notable advancements in Health Sciences, use of the Simulation Laboratory and have had the opportunity to embrace philosophies of excellence in our base education program through integrating our knowledge with the knowledge of others in health professions.

The base budget supports our goals for the program and the clinic. Careful fiscal management is achieved through our clinic manager's activity and the department chair's oversight. The clinic is able to 'hold' funds within that account for updates, repairs and maintenance of clinic equipment. The College and Program are in a very stable situation currently. In May 2017, ground breaking for the building named: The Ezekiel R. & Katherine W. Dumke Center for Interprofessional Education in Health Care took place. The building is planned to be completed in one year. This building is adjacent to the current building where Dental Hygiene is housed in and will allow for more collaboration, additional classroom and office space and allow for focus on the concepts of the entire healthcare system, not just segmenting health professionals roles.

3. Assess how financial support affects achievement of program goals.

Financial support of the program allows the Dental Hygiene Department to attain our goals of excellence in all aspects of the program. Financial support for the program is anticipated to remain at the same level with increases as the university and college have increases in financial support. Through our active liaison and community outreach, sources of additional funding

support are available through grant programs. However, basic support that provides for the operations of the program are consistent in the university budget. Grant funds are used for program enhancements and special projects. The Program is positioned well within the college, university and state system of higher education for continued longevity. The Weber State University's Dental Hygiene Program has celebrated 40 years of Excellence in Dental Hygiene Education in 2017.

4. Evaluate the overall effectiveness of the professional community liaison of its interactions with the dental hygiene program in providing information on dental and dental hygiene practice and employment needs, and helping the program meet its objectives.

The Advisory Committee is comprised of dentists and dental hygienists and other health professionals who actively provide feedback to the program regarding practice and employment for our graduates and students. We are linked by having representation on other community committees as committee members and committee chairs, e-mail and social media to The Utah State Dental Hygienists' Association, Utah Dental Association, Weber District Dental Society, Ogden/Weber Applied Technology College (Dental Assisting Program). With the long history of the program and our activities, many of the leadership positions within the state and region are held by former students, now alumni, from our program. Recently, the President of the UDHA announced that because of the actions of the association of dental hygienists, the Practice Act and Rules has adopted changes to allow Dental Hygienists to provide services within the Standards of Practice outlined in residential care facilities. They have incorporated that practice into several sites in the Salt Lake City area. As a program, we are adding additional informational topics and plans for our curriculum to highlight the career growth that is becoming reality in the dental hygiene profession.

STANDARD 2 - EDUCATIONAL PROGRAM

1. Evaluate the admissions criteria relative to student achievement and program completion rates.

The admissions criteria are well stated in the program application, online on the Program's website and through the Program brochure that is used by the Admissions Office advisors and others to provide details. The admission criteria that are used have been good predictors of success of our students. It has been necessary to require observational or employment experience for our applicants to make sure that the applying student has a clear understanding of what the profession of dental hygiene is. It is well known that experience and high academic achievement is needed to be a competitive applicant. The admissions criteria and interview process have been modified to include a consideration of skills that a student may possess that would be helpful in the profession (written and verbal communication skills, etc).

Student achievement and program completion have been maintained at a high rate.

2. Assess the effectiveness of policies and methods used for the award of advanced standing credit. Do they effectively result in equivalent student competence?

Students are not exempted from completing all courses in the curriculum.

Specifically, prerequisite courses must be completed within 5 years of application to the program at a nationally accredited, recognized college or university. Every student in the program moves through the application processes in an identical manner: completing the prerequisite courses, applying to the program, being reviewed as an applicant.

3. Describe any concerns related to enrollment trends.

Through the program's and college's efforts at tracking applicants, it has been shown that historically a consistent number of applicants have applied to the program, annually. While there are additional dental hygiene programs in Utah, both state-funded and proprietary, WSU's application and enrollment trends at WSU have not been greatly affected. The University, College and community, at large, is aware of the WSU Dental Hygiene Program and demand for our well-educated, professional dental hygiene graduates.

The mission of the University, college and program include access to education. With the focus on access, admissions concepts and other student success programs are being developed to assure that the residents of the Ogden area, including the surrounding counties, have the appropriate access to a university education.

The population of Ogden and its surrounding communities has a broad range of population characteristics. The inner-city of Ogden is an "Enterprise Zone" as a locale where persons of low-income, ethnic minority, non-English speaking and medically underserved reside. The community learns about the dental hygiene clinic through referrals from other agencies in the city, the media and the partnership with Midtown Community Health Center Dental clinic. Nearer to the university, there are middle-class neighborhoods and university students who are also served by the dental hygiene clinics (WSU on-campus, Midtown Dental clinic, VA Dental clinic). Additionally, the off-campus rotation at the Department of Veterans' Affairs Medical Center Dental Clinic provides a diverse population of individuals who have a wide variety of medical needs and life-experiences to add to the students' education preparation.

The diversity of our Dental Hygiene Program students is limited in its variability. There are typically: a majority of females, Caucasian, with a person of Pacific Islander or African American, or Native American heritage and a male or two per year. In a perfect world considering diversity of students, the program's students/graduates would reflect the population that they are preparing to serve as a dental hygienist health care provider. The University, college and program are providing outreach to encourage all adults to know that Weber State University can be part of their lives and there are avenues to education.

4. Evaluate the extent to which the program goals and objectives provide for the ongoing inclusion of scientific advancement and innovations in dental hygiene practice and health care systems.

The program is committed to be on the leading edge of innovation. Within the planning structure of the program, ideas are brought forward regarding advancements in practice, science and in health care. The faculty and staff members, as well as our community of advisors and community partners, bring information forward for review. During the review of the curriculum arriving at a consensus on topics and strategies that should be deleted or need continued, all input is welcomed. Innovations are sought after that meet the program goals and objectives and prepare our graduates for competent and effective practice as a dental hygiene professional.

5. Explain the rationale for the overall curriculum structure and sequence.

The beginning student is introduced to dental hygiene at the most basic level in the pre-clinical course that is paralleled with basic sciences that complement the topics presented.

In the second semester, students are provided clinic practice to implement the basic clinic skills learned in the pre-clinic labs and incorporate knowledge from additional dental science courses.

During the third semester, clinic practice time increases, additional dental science background knowledge is presented; more advanced clinical skills are learned and focus moves toward integrating an advanced level problem solving skills and critical thinking through the use of evidence and research.

In the fourth semester, the student continues with advanced clinic skill building and clinical practice, with an expectation of a demonstrated increase in competency at a level of a novice dental hygiene practitioner. The competencies that are expected of a graduating student are achieved.

As a program graduate, a level of competency is possessed that allows the dental hygienist graduate to enter into practice, embrace continuing, lifelong learning and continues in advancement to the level of mastery of an experienced dental hygienist.

6. Appraise students' ability to evaluate the outcome of dental hygiene care through experience with maintenance or continuing care appointments for clinic patients.

The program curriculum through all clinical dental hygiene courses and dental science courses promotes comprehensive dental hygiene treatment planning. Thorough evaluation of the dental hygiene care is stressed for all patients; maintenance and/or continuing care. The provision of planned care requires that the student assess the outcomes of treatment throughout the treatment series and the need for individualized plans for patient maintenance and or referral. Student provide continuing treatment for maintenance care for patients who have varying degrees of periodontal conditions (relative health through severe periodontal diseases).

The program's faculty to student ratio and computerized patient tracking/charting in clinic allows for consultation and assessment of all phases of treatment with the supervising faculty. The student's clinical evaluation process, written and verbal feedback, provides

experiences with evidence-based judgments to be made throughout the students' clinical education and practice with increased competency to appraise outcomes of patient treatment.

STANDARD 3 - ADMINISTRATION, FACULTY AND STAFF

1. To what extent does the program administrator have authority commensurate with his/her responsibilities to support the goals and objectives of the dental hygiene program?

The program Chair has the authority, commensurate with her responsibilities to administer the program. The budget and planning processes are developed at the College level, distributed to the program and reviewed with the Dean for any adjustments or special requests. Open and frequent communication with the Dean is imperative to gain support for improvements, changes, ideas and any other matters that may include students, faculty and staff.

2. Summarize and provide examples of the program director's authority to make decisions regarding continuous coordination, evaluation and development of the dental hygiene program.
 - The clinic has continued the partnership off-campus clinical sites and has increased the community partnerships. The clinic provides dental hygiene care to our underserved people in the community and provides an additional resource for our students' dental hygiene patients.
 - Grant monies were awarded to provide new clinic chairs, new sinks, countertops, paint and remodeling within the past 4 years.
 - An interdisciplinary project of the dental CBCT imaging matching and the Radiologic Sciences department was established and continues to grow. Outreach and marketing to dental offices and medical offices where this service can be helpful is ongoing.
 - Faculty continue to be mentored and encouraged to seek advanced degrees in an effort to provide for ongoing excellence in teaching as well as a long-term commitment to the program, college and university.
 - Adjustments to clinic budgetary spending has allowed for the goal of rolling-over excess funds in that account to have a fund to support repairs, maintenance and purchasing of clinic equipment.
3. Evaluate the adequacy of the number of program faculty, and scheduling flexibility to achieve program goals.

The number of contract faculty is stable and adequate to coordinate and lead the adjunct clinic faculty that support and supervise students during patient treatment in the dental hygiene clinic. Demand for the Baccalaureate degree completion component of the program has been increasingly strong, but limited based on available faculty to manage additional students and classes. The Associate of Science Degree in Dental Hygiene remains the program's main focus.

The faculty have been adaptive and able to work together, especially when unforeseen situations arise such as faculty or staff illness and during FMLA situations. The number

one goal is for the students to be successful, and to achieve that goal faculty 'fill in' as needed.

4. Assess the extent to which provisions for faculty appointments ensure that faculty will have non-teaching time to evaluate the program and institute changes on a continuing basis.

Full time contract faculty have teaching assignments of 12 hours of clinic supervision and 3 contact hours of didactic teaching per semester (fall and spring), as defined by university and program policy. With this basic assignment, coupled with student advisement, faculty meetings and projects, faculty does have non-teaching time available for evaluation and change implementation

5. To what extent do laboratory, preclinical and clinical faculty/student ratios enable the program to achieve its objectives?

The Program is fortunate to have the support of the administration to have low faculty to student ratios. The entire faculty and staff is committed to providing the best learning experience as possible. The configuration of the dental hygiene clinic allows for a very high level of supervision and evaluation of the students and their patients. The faculty to student ratios are at or below the required levels to assure for safety, protection and student's competency attainment for patients, faculty and students. By allowing for lower faculty to student ratios we are able to give better education and treatment to our students and patients.

6. To what degree do faculty workloads allow for effective supervision of exceptional and/or slow students?

The faculty workloads are configured in a manner that adjustments in time commitment for supervision are possible, as needed. The program is fortunate to have a core of faculty that is an exception team that have worked together in many circumstances to brainstorm strategies to address specific student needs and to increase supervision when needed.

The workload of our faculty allows time for students to seek help and additional guidance for deficiencies. The clinical faculty work in a ratio of 1 to 5 students, with a blend of exceptional and slow students. This ratio allows for additional student supervision and guidance.

7. Assess the effectiveness of the current arrangements for the dentist(s) who provide(s) supervisory, diagnostic, consultative and referral services for the dental hygiene clinic.

In the past two years, the supervising dentist's full time contract is part of the Dental Hygiene Program's faculty and staff budget. Previously, the dentist's salary was held by the Health Sciences department and the dentist was assigned to Dental Hygiene through a cooperative agreement. The agreement had the dentist teaching in Health Sciences for approximately 6 credit hours per semester and Dental Hygiene at 6 credit hours per semester. Currently, the supervising dentists is full time with Dental Hygiene. This allows for consistent daily interactions with ongoing communication with the clinic manager, faculty, other staff and students. The dentist teaches dental science courses and participates in clinic supervision and instruction in the WSU Dental Hygiene Clinic.

Our future plan is a change in the current job description for the dentist to provide not only to function in a supervisory and teaching role but include diagnostic, consultative services for our dental hygiene patients. Later, as planning continues, there could be potential for a faculty practice in our clinic for dental restorative services.

8. Assess the effectiveness of the faculty evaluation system.

The faculty evaluation system is an effective system that allows for feedback through peer review of teaching that includes peers from within the program and those outside of the dental hygiene department (other health professions faculty). It organizes the faculty into a system that encourages self-evaluation of teaching effectiveness. Team building is enhanced through the focused evaluation and debriefing meeting that occurs at the culmination of the peer review. Individual faculty goal setting and review has been part of the annual faculty evaluation system. This activity has become less formal and needs to be brought forward as a priority within the program. The size of the faculty group, frequent faculty and staff meetings, and the camaraderie that is experienced has allowed for the formal goal setting reviews to become lenient. This is a Department Chair administrative goal to enhance the faculty evaluation system within the department.

9. Explain the extent to which the institution/program support the endeavors of faculty to meet and maintain qualifications listed within the standards.

The program encourages all faculty to be Master's degree level prepared, to give our students the best qualified faculty to meet the goals of the program. There are funding sources within the College of Health Professions that augment the tuition, fees and book costs for advanced degrees. The program encourages faculty to seek professional development opportunities at local, regional, national and international settings. Financial support is sought from on-campus, off-campus and within the program budget. Faculty are encouraged to prepare presentations, posters, and other scholarly works to demonstrate leadership roles which assists in their requests to receive faculty development funding. When a faculty member requests release time, a proposal that accounts for their use of their contract time is requested. That proposal is reviewed by the department chair and dean. Funding from the Dean's office is available on a limited basis. It is a program expectation that the faculty member's responsibility will be managed in a balanced manner to support the students, faculty and staff and the university, college and program's goal attainment through teaching, scholarship and service.

10. Evaluate the adequacy of support services available to the program.

The program is staffed by full-time, qualified individuals who participate in supporting the program and students through the Dumke College of Health Professions Learning and Testing Center, individuals who manage Information Technology at the college and university levels and the University library with its reference materials, computer search strategies classes and the assistance of library staff assigned to Dental Hygiene and Health Professions.

The library is currently experiencing new construction, new services and new programming, and will be completed by August 2017. The Student Services Center, Student Career Center and

Student Involvement Center were remodeled and reorganized. This resulted in improved services for students in many aspects. The Center for Community Involvement (CCEL) manages community outreach and Americorps opportunities program for students' educational grants for service in the community. The University received the Carnegie recognition for university service. The department chair and several faculty participate in committees to advance the goals of community and civic engagement. The University, college and program support the CCEL and community involvement, outreach and service. Specific courses, throughout the university, can be designated as a CCEL course with the appropriate level of service, learning and outcomes evaluation within the course. By application, Dental Hygiene currently has three courses that have the CCEL designation. Dental Hygiene students and the department are highly involved and recognized by the University and the state-wide association of Universities termed "the Utah Campus Compact" in our commitment to Service Learning.

STANDARD 4 - EDUCATIONAL SUPPORT SERVICES

1. Assess the advantages and disadvantages of the capacity, design, and scheduling of clinical, laboratory and classroom facilities and equipment.
 - Advantages of the capacity:
 - The capacity of the clinic and classroom is greater than what is currently being used. The employment market, at this time, does not support an increase in the number of enrolled students. There are extra dental chairs in clinic if changes in our off-campus or on campus clinic rotations require change. The classrooms that Dental Hygiene routinely use can accommodate extra students as needed. Other classroom space, on the main Ogden campus and the Davis campus are available by advanced scheduling through the WSU online scheduling system that is managed through the Dumke College of Health Professions staff members.
 - An advantage of the design of the facilities includes the convenience of having the classrooms, clinic, and faculty and staff offices in the same building and on the same floor. The clinic and program are located on the top floor (4th floor) of the building on the same level as the parking lot that is used for clinic patients. This gives greater accessibility for everyone who visits the clinic and department. There are large windows in the clinic that provides views of the mountains and valley and provides good ambient lighting.
 - One of the advantages of our program are the relationships we have with the Department of Veterans' Affairs Medical Center Dental Clinic and the Midtown Community Health Center Dental Clinic. The senior students have the advantage of interacting with a variety of individuals; of diverse

cultures, backgrounds, life experiences, health care and dental hygiene needs.

- The majority of the program's classes are held in the same classroom. This makes it convenient to everyone affiliated with the program, makes it less confusing to the students to find their class location and conducive to the cohesiveness of the Dental Hygiene students and faculty. If another classroom is needed, it can be scheduled. All classrooms in the Dumke College of Health professions have identical Instructional Technology capabilities. Our department works collaboratively with the other health professions in our building to use other unique technology to integrate dental hygiene and enhance student learning. Another advantage is the way the clinic is designed for patient flow. The check-in and patient waiting areas are in the foyer of the main doors and easy for patients to find. The patient is led to the clinic through a short hallway which opens up into the clinic. The radiology rooms are accessed through the same hallway. The instructor area looks over the entire clinic so we can see what is happening in the clinic at all times.
- Disadvantages of the capacity, design, and scheduling of clinical, laboratory and classroom facilities and equipment:

A disadvantage is the hallway between the patient check-in/waiting area, the clinic and radiology suite. Congestion of the flow of individuals can occur when multiple students and their patients are trying to access radiology, escort patients to or out of the clinic and checking out patients (paying service fees) all at the same time.

Discussions are ongoing when considering security issues that have come to the forefront as universities have become targets of violence in areas of the United States and Internationally. Weber State has a Safety Alert system that is termed "Code Purple". This is the quick texting method of informing the entire university of safety concerns. The clinic manager serves on this committee. During evaluations of the 'shelter in place' scenario, the program has identified a potential need for additional security measures for the door that opens into the clinic. The department is considering the installation of a door that is routinely locked during clinic (opened by key code or security badge), that would serve as an additional barrier to unwanted persons.

2. Evaluate the adequacy of the facilities and scheduling flexibility to achieve program goals and objectives.

Program goals and objectives focus on the success of our students. The program/department has control over the scheduling of the facilities and has been able to achieve program goals

through students' clinical practice experiences, community service learning and imparting the science of dentistry and dental hygiene to reach the end goal of acquired competency.

3. Assess the advantages and disadvantages of the capacity, design and scheduling of the clinical facility and equipment in relation to the attainment of program goals and provision of adequate clinical practice experiences for all dental hygiene students.
 - Off-campus: The students' have the advantage of practicing and learning clinical skills while providing treatment with dental hygiene patients from the Department of Veterans' Affairs Medical Center Dental Clinic and the Midtown Community Health Center Dental Clinic. Students have the advantage of interacting with individuals from diverse cultures, backgrounds and health, dental, and dental hygiene needs. All equipment and dental hygiene instruments are owned by each clinic, maintained by the clinics and are available for the student's use.
 - On-campus WSU Dental Hygiene clinic: Students have ample opportunity to learn the theory and the practice of dental hygiene in a safe, well-equipped dental hygiene clinic and a successful dental hygiene program. There are dental operatories for each student in each clinic rotation that are full equipped with ultrasonic scaling units, dental hygiene instruments (owned by the student) for their use and a process of instrument cleaning and sterilization in the clinic. The clinic has acquired adequate numbers of equipment and specialty instruments so students have access to their use.
 - Because of the many clinic hours of patient treatment, working with diverse populations of people, the dental hygiene graduates are prepared for employment in many professional settings.
4. Evaluate the comprehensiveness, diversity, currency and quality of the texts and periodicals pertaining to dentistry and dental hygiene that are available for use.
 - The comprehensiveness, diversity, currency and quality of the texts and periodicals pertaining to dentistry and dental hygiene is evidenced by the student's success in their classwork and research. The Stewart library in combination with the inter-library loan network ensures student access to a rich variety of resources. New editions and new publications are evaluated on an annual basis to ensure diversity, currency and quality. With the affiliation with the Department of Veterans' Affairs Medical Center, Dental clinic, the program students have full access to the Medical Center Library of holdings and interlibrary loan, free of charge. The VA Medical Center is part of the consortium of libraries that further joins the Dental Hygiene Program with other library resources.
5. Assess the budget available to purchase instructional aids and equipment.
 - The Department has limited funds for the purchase of instructional aids and equipment, especially those that are very expensive and if they are needed

immediately. The clinic is able to accumulate funds in that account that can be 'rolled over' annually. The clinic funds are used for clinic equipment and clinic supplies that are associated with the specific equipment. There are local, state and federal grant sources available that the department participates in annually. The department has been successful in securing grant monies from the Federal Perkins program to purchase equipment and instructional aids. The University Library allocates funds each year for purchases specifically for the dental hygiene department.

STANDARD 5 - HEALTH AND SAFETY PROVISIONS

1. Assess the effectiveness of the institution's policies and procedures in ensuring a safe environment for patients, students, faculty and staff: a) infectious diseases; b) ionizing radiation; and, c) sterilizing and disinfecting equipment and procedures in relation to practicing current infection and hazard control.
- The University, college and program adhere to safety policies and procedures as outlined by OSHA and the University Safety office. The University Safety Committee provides training for staff and faculty, provides oversight for reviewing of procedures and policies and includes a diverse group of University employees on the University Safety committee, including the Dental Hygiene Program's Clinic Manager. Through the coordinated efforts of the clinic manager, faculty and student, current infection and hazard control standards are maintained.

a) Infectious diseases

The Dental Hygiene program continues the training outlined by OSHA and the University Safety office for faculty, staff and students 'customizing' it to the health care/dental setting and maintains that adherence of current standards with students and clinic patients under faculty and staff supervision. The Dental Hygiene clinic manages spore testing procedures for the Program's sterilization of equipment and instruments for continuing quality assurance. The training and protocol are reviewed through the use of the Clinic Manual in the clinic setting. The required forms for a potential infectious exposure are on the computer monitors at every dental unit and on the faculty computer, so if an event occurs, procedures and documentation can be completed immediately.

b) Ionizing radiation

At the University radiation is taught through the first semester pre-clinic course DENT 2208/DENT 2206 Clinical DH 1. Radiation safety is reviewed through hazard training during orientation for first year and senior year students and all faculty, staff and personnel. All faculty members are licensed to practice their professional skills as dentists or hygienist and are certified to operate and provide radiology imaging services that expose patients to radiation. All patients are required to wear a lead lined apron with thyroid collar during any radiation exposure. WSU radiology suite has lead lined walls,

doors and windows that contains any scatter radiation. Further, the doors of the radiology area have “dead-man switches’ that if the door of the area is not completely closed and latched, the x-ray unit will not operate. Areas adjacent to radiology equipment is monitored through the use of radiation badges. Badges are processed through Weber State Department of Environmental Health and Safety. Badges are evaluated quarterly and reports are provided to the Clinic Manager and Faculty who teach radiology and those that work in the clinic are informed of the results.

c) Sterilizing and disinfecting equipment and procedures in relation to practicing current infection and hazard control.

Annually, Dental Hygiene faculty and staff review new OSHA guidelines for safety, proper disinfection and sterilization standards along with any updates through the year. Amalgam collector filter is installed and changed yearly even though currently no dental removal of amalgam is provided in the clinic. Three autoclaves that vary in length of time to sterilize ensure timely processing of instruments. Instruments are processed with steam indicator bags, steam test indicator strips, and spore tests. Spore tests results are recorded and kept on file. Sharps containers and chemistry used for manual development and fixing of x-rays are collected by the WSU Department of Environmental Health and Safety on campus to dispose of hazardous materials properly.

2. Evaluate the adequacy of the emergency equipment and materials in relation to instruction in managing dental emergencies. Assess the effectiveness of the program’s policies and resources relative to emergencies.

The emergency equipment is adequate for managing dental emergencies. Regularly scheduled mock-emergencies are practiced in the dental hygiene clinic. Students, faculty and staff have training and practice to prepare for emergency management. Additional training in the “Code Purple” emergency situations that require sheltering in place have been presented to students and faculty in clinic and in classroom settings.

All emergency equipment in the clinic is tested and evaluated regularly for effective working condition. There are three fire extinguishers, an AED, two portable oxygen tanks, CPR equipment, two first aid kits, Medical emergency first aid kit - 2 Epipens®, and two “land-line” telephones for access to 911.

STANDARD 6 - PATIENT CARE SERVICES

1. Evaluate the extent to which the program provides quality dental hygiene care.

The Weber State Dental Hygiene program makes every effort to provide the highest quality of care for the patients by following the guidelines of the ADHA, ADA, and HIPPA. Patients are provided with the most current and complete information on their proposed treatment, treatment, and follow up care from the beginning of their time in the clinic. Students are trained and educated in the most current and complete policies, standards of ethics and treatment theories

and techniques. Faculty and staff are calibrated several times during the school year in all areas listed above and are required to attend Continuing Education courses and training throughout the year. The supervising faculty have the responsibility to review the patients' record to assure treatment completion. The chart audit has been done more informally. With this discovery, the chart audit system has been reinstated as a formal process with the use of a updated evaluation rubric that follows the computerized chart system that is used in the clinic.

2. Assess the program's effectiveness in ensuring the continuous basic life support recognition of all students, faculty and staff who are involved in the direct provision of patient care.

All faculty, staff, and students are required to complete CPR and AED training yearly. The American Red Cross issues certification on a 2 year cycle; the dental hygiene program has policy stating that all students, faculty and staff are required annual training. The training is provided by the Weber State University Respiratory Therapy Department faculty who are American Heart Association certified trainers. It is the most current basic life support techniques and information available. The format of the training is structured that allows for high quality instruction and mannequin practice for students, faculty and staff.