



ACCREDITATION STANDARDS FOR DENTAL ASSISTING PROGRAMS

Effective: November 30, 2005

Updated November 30, 2006

Updated November 30, 2007

Updated November 30, 2008

Updated November 30, 2010

Updated November 30, 2015

Updated November 15, 2024

TABLE OF CONTENTS

0.0	PROGRAM INFORMATION.....	6
1.0	INSTITUTIONAL STRUCTURE.....	6
2.0	EDUCATIONAL PROGRAM.....	9
2.1.0	Admissions.....	9
2.2.0	Curriculum Management.....	11
2.3.0	Curriculum Content.....	13
2.4.0	Preparation for Practice.....	17
2.5.0	Evaluation.....	21
3.0	ADMINISTRATION, FACULTY AND FACULTY DEVELOPMENT.....	22
3.1.0	Program Administration.....	22
3.2.0	Faculty and Faculty Development.....	23
4.0	EDUCATIONAL SUPPORT AND SERVICES.....	25
4.1.0	Physical Facilities.....	25
4.2.0	Learning Resources.....	27
4.3.0	Didactic and Clinical Support.....	27
4.4.0	Student Issues.....	28
5.0	CLINIC ADMINISTRATION.....	30
5.1.0	Clinic Operations.....	30
5.2.0	Health and Safety Provisions.....	31
5.3.0	Patient Care and Quality Assurance.....	33
6.0	RESEARCH AND SCHOLARLY ACTIVITIES.....	35
7.0	PROGRAM RELATIONSHIPS.....	35
7.1.0	Relationships with Other Educational Programs.....	35
7.2.0	Relationships with Regulatory Authorities and Dental Assisting Organizations.....	36

ACCREDITATION STANDARDS DENTAL ASSISTING

The Commission on Dental Accreditation of Canada

The Commission on Dental Accreditation of Canada (CDAC) is a partnership with membership from the public and organizations representing oral health care professionals, educators who prepare them and regulators responsible for their competence and continuing safe practice. CDAC, in consultation with its partners, develops and approves standards for educational programs preparing dentists, dental specialists, dental interns/residents, dental hygienists and dental assistants. CDAC also develops and approves standards for institutional dental services. CDAC reviews educational programs and dental services by means of structured, on-site visits following receipt of submissions presenting detailed information in the required format. Programs and services meeting or exceeding the standards are granted accredited status.

Vision

We are the recognized leader in the accreditation of oral health education.

Mission

We set standards and accredit oral health professional programs to promote quality education and practitioner readiness.

Basic Process

The starting point within accreditation is CDAC's development, approval, and ongoing revision of accreditation standards. Educational programs and dental services are invited to apply for review against current standards. Programs applying submit detailed documentation outlining evidence addressing the accreditation standards. A survey visit is then arranged, and an accreditation survey team conducts interviews with faculty members, students, and other stakeholders to secure additional information. This process clarifies issues arising from the submission and generally verifies that the documentation reflects the program or service. The survey team submits a report to CDAC. CDAC then determines the eligibility of the program or service for accreditation.

Responsibilities of Accredited Programs or Services

Programs or services invite CDAC to conduct a review to assess eligibility for accreditation. Once initially accredited, CDAC notifies programs or services when reassessment is required, in order to maintain accredited status.

As a requirement for maintaining accreditation, programs or services must complete an Annual Program Review for CDAC. Programs or services must also, on their own initiative, inform CDAC, in writing, of any additional significant changes, completed or pending, in supporting facilities, resources, faculty member complement, curriculum or structure.

CDAC requires the cooperation of programs in studies related to the improvement of the accreditation process and in the administration of specific national mechanisms identified as important to the common interests of education and accreditation and of dental, dental specialties, dental hygiene, and dental assisting organizations. Educational programs must complete CDAC's Annual Program Review.

Additional accreditation information related to the logistics of survey visits, survey team membership, length of accreditation, accreditation status, etc. can be found in the CDAC *Guide to Accreditation* on the CDAC website http://www.cda-adc.ca/cdacweb/en/accreditation_standards/.

Clarification of Terms

Particular attention should be paid to the wording of each standard. For example, a standard may take the form of either a "must" or a "should" statement. There is a significant difference between the two. "Must" statements reflect the importance of a particular standard. CDAC defines the terms as follows:

Must or CDAC expects:

These words or phrases indicate standards that are *essential or mandatory*.

Should:

This word implies that compliance with the standard is highly desirable.

May or Could:

These words imply freedom or liberty to follow an alternative to the standard.

Curriculum Approach

Competency Based Education (CBE), Evidence Based Education (EBE) and Outcomes Based Education (OBE) are terms applied to educational programs which build curriculum, student learning experiences, and evaluation methods from documents that describe the knowledge, skills and values that a student must possess to graduate. These documents include descriptions of all competencies/abilities that a beginning practitioner must consistently perform accurately and efficiently.

Programs preparing health practitioners must also include consideration of the cognitive (foundation knowledge including clinical, biomedical and behavioural sciences), the affective (values associated with professional responsibility) and psychomotor (preclinical and clinical). These abilities may be expressed through competencies or learning outcomes.

The accreditation process reviews how individual competencies are taught and evaluated and how the program ensures that each and every graduate has achieved every competency. This principle is the foundation of the accreditation process.

Respect for Educational Innovation and Autonomy

CDAC strives to ensure that its accreditation standards and processes do not constrain innovation or program autonomy. The expertise of educators in the development and implementation of educational programs, curriculum and learning experiences is fully acknowledged.

CDAC places its emphasis upon assessment of the program's ability to meet its stated objectives and outcomes.

0.0 PROGRAM INFORMATION

0.1 Provide the following information:

- a. Name of Institution.
- b. Mailing and website addresses and any other social media site links
- c. Telephone, email address(es) and the name of survey visit coordinator.
- d. Name of President or Chief Executive Officer including telephone number and/or email.
- e. Name of Dean or equivalent including telephone number and/or email.
- f. Name of Program Director or equivalent including telephone number and/or email.
- g. Name of the Privacy Officer and the position job description.
- h. Date program was established.
- i. Provincial authority under which the institution operates.
- j. Program length.

1.0 INSTITUTIONAL STRUCTURE

Standard

1.1 The dental assisting program must be established at a post-secondary institution recognized by the appropriate government agency. The program must be identified as a recognized faculty/school/division/department of the parent institution. It is expected that the position of the program in the administrative structure will be consistent with that of other comparable programs within the institution. There must be provision for direct communication between the program and the parent institution regarding decisions that directly affect the program. Faculty members should have the opportunity to participate on institution committees.

Institutions offering dental assisting education should be capable of forming articulation agreements or collaborative partnerships with recognized degree-granting institutions.

Documentation Required

The program is requested to provide:

- a. Evidence that the institution/program is recognized by the appropriate Ministry of Education or government agency in the province or territory.
- b. The senior organizational chart of the institution, identifying the administrators' names.
- c. The organizational chart of the program, including current faculty members' names and their credentials.
- d. The terms of reference for the decision-making body that oversees the program.
- e. The list of institutional committees in which dental assisting faculty members participate.
- f. A list of articulation agreements or collaborative partnerships that permit dental assisting students to access degree-granting institutions.

Standard

- 1.2 The program must define its own vision and mission statement that is consistent with that of the parent institution.

Documentation Required

Provide a copy of the vision and mission statement or equivalent for the parent institution and a copy of the vision and mission statement or equivalent for the program.

Standard

- 1.3 Program outcome statements describing the graduate must be published and be consistent with the program's mission statement. The program must demonstrate the relationship between the program curriculum and its defined outcome statements.

Documentation Required

- a. Provide a copy of the program outcome statements established by the program.
- b. Attach as an appendix, evidence that supports the relationship between the curriculum and the program outcome statements.

Standard

- 1.4 The parent institution must recognize the unique costs involved in dental assisting education. Documentation must be submitted providing program revenue and expense data.

Documentation Required

- a. Describe or provide copies of the procedures used in determining the program budget.
- b. Provide a copy of the current program budget including year-to-date details of revenues and expenditures.
- c. Describe any significant changes in the budget over the past five years.
- d. Comment on the adequacy of the present budget. If program revenues are solely based on program tuition, how does the program deal with revenue shortfalls?
- e. Describe the process for addressing incremental cost increases for the program, clinic, contingency planning for unforeseen expenses, and the replacement of old equipment and the purchase of new equipment and resources.
- f. Describe the process and rationale used to establish clinic fees, if applicable.

Standard

- 1.5 The program must establish structures and processes for ongoing planning, evaluation and improvement of the quality of the program. Membership and terms of reference for committees must be established and published, recognizing that the parent institution has ultimate responsibility and authority. Committees should include representatives from the program, students and, where appropriate, qualified individuals from the parent institution,

and the profession.

Documentation Required

- a. List all program committees.
- b. Identify those committees that provide for the ongoing planning, evaluation, and improvement of program quality, including the list of members, the terms of reference, and the frequency of meetings.
- c. Include the purpose, scope and authority of the committee.
- d. Describe the processes that provide for ongoing planning, evaluation, and improvement of program quality.
- e. Provide meeting minutes from the last two (2) years of these committees in the pre-survey documentation.
- f. If applicable, list and describe any faculty member changes since the previous survey visit.

Standard

- 1.6 The program must have an outcome assessment process. Results of this process must be used to improve program quality.

Documentation Required

- a. Describe the program outcome assessment process(es).
- b. Explain, providing examples such as certification exam results, program surveys etc., how this/these process(es) are used to improve program quality.

Standard

- 1.7 A program advisory committee must be established for the program, structured within a college/institutional system. Terms of reference for this committee must be defined in accordance with the college/institution policies. The collective membership of the committee is intended to provide information and advice to support both the program and dental assisting education. Therefore, the program advisory committee Chair must be an external member. The voting membership must consist of non-faculty members.

Documentation Required

- a. List the members of the program advisory committee indicating their professional backgrounds and the constituent group or organization represented, if applicable.
- b. Provide a brief description of the role of the program advisory committee.
- c. Should the program have a public member on the committee, please identify it in your documentation.
- d. Provide the minutes of meetings held from the past two (2) years.

Standard

- 1.8 The parent institution may seek financial support from external sources. External contracts

must not compromise the program’s stated objectives and outcomes or restrict the research requirements established by the parent institution. To eliminate any perception of bias or breach of ethics that may be a consequence of accepting and administering such funds, the parent institution must involve program administration and maintain transparency in relation to the process to seek external funding sources and any conditions attached to the acceptance of such funds. External funding must not determine the selection of students, design and content of the curriculum, choice of techniques and materials used in teaching and the appointment of academic or administrative staff.

Documentation Required

Describe the impact of external funding on student selection, program curriculum, the selection of teaching materials and academic appointments.

2.0 EDUCATIONAL PROGRAM

2.1.0 Admissions

Standard

2.1.1 Admission must be based on specific published criteria, readily available to advisors and applicants. Criteria for admission must include academic preparation with completion of a high school program or equivalent, being the minimum standard assessed. For applicants whose primary language is not the language of instruction in the institution, the results of a language proficiency examination must be considered in the admissions process.

A candidate’s previous academic performance should not be the sole criterion for admission. The program should consider including a criminal record/vulnerable sector check be required in the admissions criteria.

Selection criteria should encourage recruitment of a diverse student population.

Faculty members must have mechanisms to provide input in the program admission and selection process.

An admission committee and/or an equivalent process must be established to select candidates for admission to the program. This committee should include individuals who are qualified to define and evaluate admissions procedures and criteria.

Criteria must be applied equitably during the selection process. The process should employ measures designed to select students who are able to successfully complete the program.

Documentation Required

- a. Attach as an appendix, the application information provided to potential applicants.
- b. Provide the admissions policy which identifies the pre-requisites for admissions and how qualified applicants are selected.

- c. Identify the language proficiency examination used for applicants whose primary language is not the program language of instruction and describe how it is used in the admissions process.
- d. Identify the individual(s) primarily responsible for admissions.
- e. Describe the role of the admissions committee. Include the membership and terms of reference for this committee.
- f. Describe if additional tests or other measures are used in the selection process and provide a sample of the test or other measures used.
- g. Describe any changes to the admissions process since the last accreditation survey visit.

Standard

- 2.1.2 Program academic and non-academic support services must be in place to support and retain students.

Documentation Required

- a. Describe the services in place to assist students experiencing academic difficulties and to retain students in the program.
- b. Describe services not financially supported by the program that are offered to students.
- c. If program revenue is derived mainly from student tuition, confirm that students are not retained solely to maintain program revenue.

Standard

- 2.1.3 If the program accepts students who transfer, with credit, from one accredited program to another, the program must ensure that transfer students are admitted into the appropriate semester to permit the students to meet program outcomes.

Documentation Required

If the program accepts transfer students from other accredited programs, attach as an appendix, the established criteria used for the admission of transfer students.

Standard

- 2.1.4 The program must establish assessment criteria for students admitted with advanced standing. These criteria must be readily available to advisors and applicants and must be applied equitably during the assessment process.

Documentation Required

Attach as an appendix the criteria for admission, if the program accepts advanced standing students (e.g., through a prior learning assessment process, etc.).

Standard

- 2.1.5 The number of students enrolled in the program must be proportionate to the resources

available. These resources must include adequate physical facilities, faculty members and staff, and availability of patients.

Documentation Required

- a. Indicate the program’s maximum student enrollment and the number of student intakes each year. Using the format below, indicate the beginning and completion dates for each student intake each year, and the current number of students enrolled in the program and other dental related programs at the institution.

	Max intake	Current #
Intake dates: start/finish 1 st year dental assisting or intake		
Intake dates: start/finish 2 nd year dental assisting or intake (if applicable)		
Other dental related programs		
Total		

- b. For programs applying for “a program survey” indicate the specific student intake, that is the focus of the application, and the program start and completion dates for that intake.
- c. Comment on adequacy of resources to support current enrollment.

2.2.0 Curriculum Management

Standard

- 2.2.1 The program must have a formal documented curriculum management process that includes:

- a. A description of the program curriculum management process.
- b. Mechanisms for input from faculty members, students, administrators, practicum sites and other appropriate sources.
- c. Mechanisms to assess new evidence-supported theories and technologies.
- d. Periodic review and evaluation of the curriculum management process.

Documentation Required

- a. Provide a copy of the curriculum management process.
- b. Identify the committee(s) involved in the curriculum management process.
- c. Describe how input is obtained from faculty members, students, administrators, practicum sites and other appropriate sources.
- d. Describe how curriculum decisions and revisions are made and implemented.
- e. Describe the mechanisms used to evaluate the curriculum management process.
- f. Provide curriculum committee minutes, or the related committee(s), for the past two (2) years.

Standard

- 2.2.2 The program must evaluate the currency and comprehensiveness of the program curriculum and use evidence-based practice as the basis for curriculum decisions. Students must have the opportunity to evaluate the program curriculum, teaching effectiveness and their preparation for entry to practice.

Documentation Required

- a. Describe how the program evaluates the curriculum.
- b. Describe how input from faculty members, students, administration practicum sites, and the Program Advisory Committee is used to evaluate the program curriculum.
- c. Describe how evidence-based practice is incorporated in the program curriculum.
- d. Describe how the program identifies gaps and/or deficiencies within the curriculum.
- e. Provide examples of gaps and/or deficiencies previously identified by the program, using the curriculum evaluation process.
- f. Provide examples of recent curriculum revisions implemented following evaluation of the curriculum.
- g. Describe how the results of the National Dental Assisting Examining Board (NDAEB) Examination and other key performance indicators are used to evaluate the program curriculum and to ensure its consistency with the dental assisting competencies and provincial standards.
- h. Provide copies of student evaluations of course content and teaching effectiveness.
- i. Provide copies of any graduate surveys conducted from the past two (2) years.

Standard

- 2.2.3 Teaching methods and student learning activities must be effectively integrated and coordinated so that the students' educational experiences are comprehensive and promote their ability to demonstrate decision-making and critical thinking skills.

Documentation Required

Provide a concise description of the teaching methods and learning activities used by the program.

2.3.0 Curriculum Content

Standards 2.3.1 to 2.3.13

- 2.3.1 CDAC recognizes that there may be various educational models to dental assisting education, however, it is expected that the dental assisting program will be a minimum of one (1) academic year in length. Programs less than one (1) academic year in length must document the process in place that permits graduates to achieve the stated outcomes within a shorter academic program.
- 2.3.2 Course information provided to students at the beginning of the course/program must include course hours, course descriptions, learning outcomes/course objectives, learning activities and evaluation procedures.
- 2.3.3 The curriculum must include foundation knowledge in the following areas:
- a. Behavioural sciences
 - b. Biomedical sciences
 - c. Oral health sciences
 - d. Dental assisting theory and practice

The program must identify specific courses that include content related to the behavioural sciences, biomedical sciences, oral health sciences, dental assisting theory and practice, including ethics, jurisprudence, professional practice, and content relating to workplace harassment.

The National Dental Assisting Examining Board (NDAEB) Domain Description ¹ represent the foundation knowledge expected within the educational program. The foundation knowledge must be integrated throughout the program and be of sufficient depth, scope, quality, and emphasis to ensure achievement of the program's defined objectives and outcomes. Particular attention must be given to the knowledge, skills and values that a student must possess upon graduation. The overall program curriculum is an interrelated body of knowledge rather than a collection of individual and separate subjects. The sequencing of learning experiences must be managed in a rational and logical way. Foundation knowledge must be established early in the program and must be of appropriate scope and depth to permit students to demonstrate competence in all defined program competencies or learning outcomes.

CDAC recognizes that the requirements for dental assisting licensure/registration vary

¹ National Dental Assisting Examining Board (NDAEB) Domain Description. www.ndaeb.ca

from province to province. For the purposes of achieving accreditation status educational programs must include, at a minimum, the dental assisting skills as identified in CDAC Standard 2.4.1. In provinces where the provincial scope of practice requires additional skills for initial licensure/registration, the program is expected to include the skills required by the provincial regulatory authority within the program curriculum.

- 2.3.4 The program must develop competencies or outcomes to express the abilities expected of program graduates. Various approaches may be used; however, they must address the following elements of dental assisting practice:
- a. Professional conduct.
 - b. Safe, ethical, and professional practice environment (i.e.: workplace harassment, violence, bullying etc.).
 - c. Communication.
 - d. Collaborative practice/teamwork.
 - e. Problem solving and critical thinking.
 - f. Dental assisting process of care (including the dental assistant's assessment, the dental assisting plan for delivering procedures, their implementation, and the evaluation of dental assisting procedures).
 - g. Provision of chairside assisting skills and clinical treatment.
 - h. Provision of dental office administration skills.
 - i. Provision of dental laboratory skills.
 - j. Health promotion and education for individuals and communities (i.e.: long term care, childcare facilities, etc.)

The objectives and outcomes must be of sufficient depth, scope and quality to reflect an entry-to-practice level/standard. Programs are encouraged to provide information to students with respect to the scope of dental assisting practice in other provinces.

Behavioural Sciences

- 2.3.5 Curriculum content must include aspects of oral and written communications, psychology, sociology, education and health promotion and community programming.
- 2.3.6 Curriculum content must be of sufficient depth within the dental assisting scope of practice to permit graduates to apply this knowledge when providing dental assisting procedures and promoting, improving, and supporting the oral health and wellness of diverse populations and to develop the communication skills to function successfully in a multicultural work environment.
- 2.3.7 Curriculum content must recognize the role of lifelong learning, self-assessment and peer-assessment in maintaining continued competence (i.e.: continuing education, infection control, CPR etc.)
- 2.3.8 Curriculum content must include the knowledge required to develop critical thinking, and problem-solving skills.

Biomedical Sciences

- 2.3.9 Curriculum content must be of sufficient depth within the dental assisting scope of practice including content in anatomy, physiology, chemistry, biology, microbiology and infection control, general pathology, nutrition, pharmacology and medical emergencies, CPR/Basic Life Support to permit graduates to apply this knowledge to implement dental assisting procedures.
- 2.3.10 Curriculum content must support an understanding of basic biological principles, consisting of a core of information on the fundamental structures, functions, and interrelationships of the body systems.
- 2.3.11 Curriculum content must be of sufficient depth within the dental assisting scope of practice to provide opportunities for graduates to apply advances in modern biology, utilize best practices related to personal protective equipment (PPE) requirements, and advanced reprocessing techniques to clinical and community practice, and to integrate new medical knowledge and therapies relevant to oral health care and to health promotion.

Oral Health Sciences

- 2.3.12 Curriculum content must be of sufficient depth within the dental assisting scope of practice including content in tooth morphology, head, neck and oral anatomy, oral pathology, radiography, preventive dentistry, the dental specialties (i.e. to include the role of the dental assistant during surgical and prosthetic techniques etc.) and dental materials to permit graduates to apply this knowledge to implement dental assisting procedures.

Dental Assisting Theory and Practice

- 2.3.13 Curriculum content must be of sufficient depth within the dental assisting scope of practice for graduates to apply the fundamental principles of dental assisting when providing dental assisting procedures. Curriculum content must emphasize dental assisting procedures to maintain, promote, and improve the patient's oral health. Dental assisting theory must be sequenced throughout the program to ensure the integration of theory and practice in the following areas:
 - a. Foundational knowledge to anticipate the operator's needs for various dental procedures to develop chairside dental assisting skills.
 - b. Foundational knowledge in the properties and manipulation of commonly used dental materials.
 - c. Foundational knowledge for assisting at the preclinical level for dental and dental specialty procedures performed within a general dental practice.
 - d. Foundational knowledge of laboratory skills as identified in the provincial scope of practice and the NDAEB Domain Description.
 - e. Foundational knowledge of office administration procedures as identified in the provincial scope of practice and the NDAEB Domain Description.
 - f. Foundational knowledge required to develop skills to assess, plan, implement and evaluate dental assisting procedures.
 - g. Foundational knowledge related to the methodology of literature review relevant to

dental assisting.

Documentation Required for 2.3.1 to 2.3.13

- a. Provide the timetables for each intake within the program.
- b. Provide a list of all courses, by year and semester/term.
- c. Using the following as an example, provide a list of all courses alphabetically using the following sections:

Section A - Behavioural Sciences

<u>Course Name</u>	<u>Semester</u>	<u>Faculty member</u>	<u>Faculty/student ratio</u>
DA 01	Fall	Ms. Jones	1:36

Section B - Biomedical Sciences

<u>Course Name</u>	<u>Semester</u>	<u>Faculty member</u>	<u>Faculty/student ratio</u>
DA 02	Fall	Ms. Jones	1:36

Section C - Oral Health Sciences

<u>Course Name</u>	<u>Semester</u>	<u>Faculty member</u>	<u>Faculty/student ratio</u>
DA 03	Fall	Ms. Jones	1:36

Section D - Dental Assisting Theory and Practice

<u>Course Name</u>	<u>Semester</u>	<u>Faculty member</u>	<u>Faculty/student ratio</u>
DA 04	Fall	Ms. Jones	1:5

- d. Provide a copy of the information given to students for each course in the program that includes the following:
 1. Course title, number and academic year offered
 2. Course description
 3. Number of instructional teaching hours, laboratory hours, preclinic hours, clinic hours, seminar hours, other instructional hours and total course hours as they apply to each course.
 4. Academic unit responsible for the course
 5. Learning activities, learning outcomes/course objectives.
 6. Detailed evaluation procedures
- e. Provide a list of required textbooks used by the students in the program.
- f. Provide a copy of the preclinic and clinic manuals provided to students. If the program does not have manuals provide a description of how students are oriented to clinical activities and evaluations. Provide a sample (1) of related documents given to students

describing these preclinical and clinical operations and evaluation.

2.4.0 Preparation for Practice

Standard

2.4.1 CDAC recognizes that there are various educational approaches for students to demonstrate competency and CDAC does not identify the required number of preclinical and clinical learning experiences. Programs must provide evidence of appropriate student learning experiences (performed by students) that are evaluated by the program to demonstrate that students graduating from the program are competent.

Students must be provided with appropriate learning experiences involving manikins, student partners and external patients² to permit program graduates to achieve the program's outcome statements and develop competence within the contemporary scope of dental assisting practice.

- a. The program must provide students with appropriate learning experiences, involving manikins as required, to permit students to practice the following:
 1. Dental assisting support procedures
 2. Chairside assisting for dental and dental specialty procedures performed within a general dental practice
 3. Examination and charting procedures
 4. Dental office administration procedures

And, to demonstrate competency in the following areas:

1. Infection control
 2. Laboratory procedures
 3. Dental dam techniques
 4. Dental radiography
 5. Application of treatment liners (no pulpal involvement)
 6. Application of matrices and wedges
 7. Suture removal
 8. Application of acid etch and bonding materials
- b. In addition, the program must provide students with appropriate learning experiences, performed on student partners to permit students to demonstrate competency in the following areas:
 1. Dental assisting support procedures
 2. Best practices in infection control including PPE requirements
 3. Application of topical anesthetic
 4. Dental dam techniques

² **External patient** is defined as anyone outside of the Dental Assisting program.

5. Preliminary impressions for study casts
6. Tooth whitening tray(s) placement
7. Examination and charting procedures
8. Preventive patient care (oral hygiene instruction, dietary counselling relative to oral health, selective rubber cup polishing, and the application of anticariogenic and desensitizing agents and pit and fissure sealants).

The program must provide learning experiences for students to practice dental assisting procedures on student partners, as identified in section C, prior to students performing dental assisting procedures on external patients.

- c. Following the learning experiences identified in sections A and B, the program must provide students with appropriate clinical experiences, performed by students on external patients as required, to demonstrate competency in the following areas:
 1. Clinical support procedures (Best practices in infection control including PPE requirements)
 2. Chairside assisting for dental and dental specialty procedures performed within a general dental practice (on site or practicum).
 3. Dental radiographs, as prescribed.
 4. Preventive patient care (oral hygiene instruction, nutritional counselling relative to oral health, coronal polishing, and the application of anticariogenic and desensitizing agents and pit and fissure sealants).

Students' clinical experiences must be evaluated by the program faculty members prior to students performing intra oral skills during an off-site practicum.

Students will be observed performing preventive procedures during their patient care clinics (including radiographs, if prescribed) during the accreditation survey visit.

Documentation Required

- a. Describe how the program ensures that each student is provided with appropriate experiences (in sections A, B, and C) to develop competency within the scope of dental assisting practice.
- b. Provide a copy of the preclinical and clinical manuals provided to students.
- c. Describe how the program manages client assignment.
- d. Describe how the program ensures that each student is provided with sufficient experiences to develop competency within the contemporary scope of dental assisting practice.
- e. Complete the following chart based on the learning experiences provided by the program (as applicable to sections A, B, and C) to identify the expected minimum experiences that are evaluated to assess student competence performing the specified national dental assisting skills. Please note that external patient experiences under 2.4.1 C do not include peer experiences.

Specified National Dental Assisting Skills	2.4.1 A Manikin Experiences	2.4.1 B Peer Experiences	2.4.1 C Preventive external patient care experiences Experiences required to determine competency
Application and removal of dental dam			
Expose dental radiographs			
Take preliminary impressions			
Suture removal			
Apply and remove matrices and wedges			
Apply liners (no pulpal involvement)			
Apply acid etch and bonding materials			
Apply topical anaesthetic			
Tooth whitening tray(s) placement			
Oral hygiene Instruction			
Nutrition counselling relative to oral health			
Coronal polishing			
Application of anticariogenic and desensitizing agents			
Application of pit and fissure sealants			

Standard

- 2.4.2 The program must take primary responsibility for external patient recruitment, for providing and maintaining a sufficient pool of external patients, and for providing clinical experiences for students with a variety of external patients appropriate for dental assisting practice. External patient recruitment must be conducted according to provincial/federal privacy legislation. The availability of such experiences must be monitored for each student. An ongoing record of the number and variety of clinical experiences for each student must be maintained.

Documentation Required

- a. Provide evidence that the active external patient pool available for educational purposes is sufficient to allow students to develop competency.
- b. Describe how the program manages patient assignments.
- c. Describe how students' clinical experiences are monitored and provide a sample of the program's clinical experiences tracking systems.
- d. Identify any areas where a shortage of patients may exist. Describe the strategies that have been implemented to ensure that students have sufficient experiences to develop competency.

- e. Describe how patients are recruited and carried out in accordance with provincial/federal privacy legislation.

Standard

- 2.4.3 The program must provide opportunities for students to implement health promotion activities within the community. The program must have a relationship with at least one (1) external health care facility, health unit and/or community or public service agency where students will implement these activities. Scheduling must be done to ensure student progress within the overall program is not compromised by these experiences. The program must provide examples of student experiences related to health promotion activities and education in the community evaluated by faculty members.

Documentation Required

- a. Identify all healthcare facilities, health units and/or community or public service agencies that the program has agreements with to permit students to implement health promotion activities. Provide the agreement(s) as an appendix.
- b. Describe students' health promotion activities and how these activities are scheduled, evaluated and tracked by faculty members.
- c. Examples of student experiences related to health promotion activities and education in the community must be provided on site during the survey.

Standard

- 2.4.4 If the program includes instruction in additional skills, as listed in the provincial legal scope of practice the didactic and clinical teaching program in these areas will be subject to review and evaluation. Course content and/or clinical experiences must be adequate to prepare students for these increased responsibilities.

Documentation Required

- a. Identify the additional skills that are included as part of the program.
- b. Describe how the program ensures that each student is provided with sufficient preclinical and clinical experiences to develop competency in these skills.
- c. Provide evidence that the patient pool available for educational purposes is sufficient to permit students to develop competency.
- d. Identify the minimum numbers and types of clinical procedures per student.
- e. Describe how students' clinical experiences are monitored.
- f. Identify any areas where a shortage of patients may exist. Describe the strategies that have been implemented to ensure that students have sufficient experiences to develop competency.

Standard

- 2.4.5 Students should have exposure to varied dental specialty practice settings.

Documentation Required

Describe how students are exposed to a variety of dental specialty practice settings.

2.5.0 Evaluation

2.5.1 Reliable and valid systems of student evaluation must be applied as the basis for judgments that govern student promotion and graduation. Processes must be defined which ensure that students are individually evaluated in terms of their achievement of program competencies/learning outcomes. The program must show evidence of scheduled formative and summative evaluation of theoretical, preclinical, and clinical experiences. The program must show evidence of remedial opportunities for students. Institutional due process policies with respect to academic standards must be followed.

In the case of hybrid (online) learning, the e-platform must be secure, reliable with appropriate IT support (as needed).

Documentation Required

- a. Describe the program evaluation system(s).
- b. Describe the program evaluation philosophy, identifying the use of formative and summative evaluations and remediation activities.
- c. Describe how formative and summative evaluations are scheduled and used to assist student learning.
- d. Describe how remediation sessions are scheduled and used to assist student learning.
- e. Describe how the program evaluates students in terms of their achievement of the program competencies/learning outcomes.
- f. Describe how students receive the results of their evaluations.
- g. Describe how the program uses student feedback to assess and revise the evaluation system.
- h. Provide a copy of the student promotion policies, including due process policies and a description of how decisions about academic progress and promotion are made and communicated to students.
- i. Provide the institute profile reports from the National Dental Assisting Examining Board (NDAEB) Examination for each graduating class since the last accreditation survey visit.
- j. Provide data for the last five (5) years regarding student attrition, specifically student failures, students required to repeat a term/semester/year, student withdrawals, and student dismissals.
- k. Describe the e-platform being used by the program.
- l. Describe how the e-platform assures examination integrity.
- m. Provide rubrics (ie: time limits and the maximum number of attempts/retakes) as an appendix.

3.0 ADMINISTRATION, FACULTY AND FACULTY DEVELOPMENT

3.1.0 Program Administration

Standard

- 3.1.1 The dean/program administrator/or equivalent must be an individual who has the educational background, professional experience, authority, and responsibility necessary to fulfill program objectives and outcomes.

Documentation Required

Attach as an appendix, a current curriculum vitae, and the job description of the dean/program administrator or equivalent.

Program Coordinator/Lead

Standard

- 3.1.2 The program coordinator/lead is defined as the individual(s) responsible for the day-to-day academic and clinical program. This individual(s) must be a registered/licensed/certified dental assistant or a registered/licensed/ dental health professional with similar foundational knowledge. The program coordinator/lead must have the educational background and training in educational theory and methodology and the professional experience, authority, and responsibility necessary to oversee the program's objectives and outcomes. This individual should have or be working towards a baccalaureate degree or higher.

This individual must have the necessary time to oversee program administration, operation, supervision, evaluation, and revision. Teaching contact hours must be less than that of faculty members who do not have administrative responsibilities.

Documentation Required

- a. Provide current curriculum vitae for the program coordinator/lead identifying the director's educational credential, and training in educational theory and methodology.
- b. Provide a copy of the job description for the program coordinator/lead.
- c. Provide details of the teaching contact hours of the program coordinator/lead and the teaching contact hours of other faculty members in the program.
- d. Provide the mechanisms for the appointment and review of the program coordinator/lead (if applicable).

Standard

- 3.1.3 When a new program is being planned, the program coordinator/lead or equivalent must be appointed in advance of the program starting date to allow time for developing curriculum, recruiting faculty members, preparing facilities, ordering equipment, making clinical program arrangements, and establishing admission procedures.

Documentation Required

If the program is a new program:

- a) Identify when the facilities were established in relation to student enrollment.
- b) Identify when the program coordinator/lead was appointed
- c) Describe how faculty members and staff were oriented to the program.
- d) Attach as an appendix the handbook, manual or other related documents to assist in faculty member orientation.

3.2.0 Faculty and Faculty Development

Standard

- 3.2.1 The program must be staffed by qualified full-time faculty members whose professional education and experience for teaching, practice, scholarship, and research (if applicable) are adequate to prepare an entry-to-practice dental assistant. The faculty member complement, including full-time and part-time, must be proportionate to the number of students enrolled in the program. Faculty members assigned responsibilities for program instruction must have current content knowledge and experience related to their instructional assignments and training in educational theory and methodology. Faculty members with instructional responsibilities should have or be working towards a baccalaureate or higher degree. Faculty members with online instructional responsibilities must have current knowledge and experience related to online teaching and learning. Faculty members assigned preclinical and clinical responsibilities as clinicians must be registered/licensed and in good standing with their respective regulatory authority.

The program must provide faculty members with adequate time for teaching preparation, student evaluation and counselling, development of subject content including appropriate evaluation criteria, program development and review, and professional development.

The program must have mechanisms for the appointment, review, and reappointment of faculty members, including those with administrative positions.

Documentation Required

- a. List alphabetically the names of all full- and part-time and casual faculty members teaching in the program indicating their assigned workload and teaching responsibilities. List the faculty members as full-time, part-time and casual.
- b. Provide current curricula vitae for all faculty members, identifying their educational qualifications. Provide evidence (copies of certificates) that individuals assigned instructional responsibilities have training in educational theory and methodology.
- c. Provide the program profile or definition for full-time and part-time and casual faculty members.
- d. Provide evidence (copies of faculty member's registration/license/permit) that all faculty members assigned responsibilities for preclinical and clinical instruction are registered/licensed with their respective regulatory authority.

- e. Provide evidence that the faculty member complement is sufficient to meet program outcomes.
- f. Describe how faculty members' workloads are determined to permit sufficient time for teaching preparation, student evaluation and counselling, development of subject content and appropriate evaluation criteria, program development and review, and professional development.
- g. Identify any areas where there is insufficient coverage and the strategies implemented to address these areas.
- h. Provide the mechanisms for the appointment, review, and reappointment of full-time faculty members, including those with administrative positions.
- i. Provide the mechanisms for the appointment, review, and reappointment of part-time faculty members, including those with administrative positions.

Standard

- 3.2.2 An evaluation process must be in place to measure faculty members' performance in teaching, scholarship, and service within the context of the organization mission.

Documentation Required

Describe the process in place for faculty members' performance evaluation.

Standard

- 3.2.3 The faculty to student ratios must be adequate to ensure that neither student learning nor the health and safety of patients are compromised. The program must ensure that sufficient personnel (qualified faculty members and staff) are available for effective instruction, adequate supervision, and timely evaluation during preclinical and clinical experiences.

Documentation Required

Provide the faculty/student ratios in relation to the maximum student enrollment per intake in each of the following areas: lectures, preclinic, clinic, laboratory, and seminar sessions.

Standard

- 3.2.4 Faculty members must be involved in continuing professional development. The program must show evidence of an ongoing faculty development plan.

Documentation Required

- a. Describe professional development opportunities available for faculty members.
- b. Describe the budget support available for professional development opportunities.
- c. Describe how faculty members are supported or encouraged in these initiatives.

Standard

- 3.2.5 There must be opportunities for faculty members to meet on a regular basis to discuss

program issues.

Documentation Required

Provide a list of full faculty meeting dates held within the past two (2) years and provide copies of the meeting minutes for the past two (2) years.

Standard

- 3.2.6 The program must have a process to calibrate faculty members with respect to the consistent evaluation of students.

Documentation Required

- a. Describe the program calibration activities.
- b. Provide a copy of the program calibration policies and procedures.
- c. Provide copies of calibration activities for the last two (2) years.

4.0 EDUCATIONAL SUPPORT AND SERVICES

4.1.0 Physical Facilities

Standard

- 4.1.1 Physical facilities and equipment must be adequate to support the didactic, laboratory, preclinical and clinical objectives of the program. The adequacy of facilities will be evaluated in relation to availability and student enrollment. If other programs utilize the same facilities, the program must provide evidence that the existing facilities are sufficient to meet the program needs. The facility must meet applicable legislative, public health, regulatory and institutional requirements (i.e.: physical accessibility, occupational health and safety requirements).

Documentation Required

- a. Provide a floor plan of the program facilities, including the number and capacity of lecture rooms, clinics, reprocessing area, laboratory facilities, offices, storage, and locker space/change room space for all students. Identify any areas in which there is insufficient space.
- b. Specify the number of dental units available for the program using the following format:
 1. Units with radiology facilities
 2. Units without radiology facilities
 3. Total units
 4. Number of units shared with other programs
 5. Number of units for dental assisting only

- c. Describe how clinical facilities are shared with other programs, if applicable. If the program has multiple enrollments describe the facility usage, the scheduling and sharing of class, lab, and clinical activities.

Standard

- 4.1.2 Didactic, clinical, and other program facilities should ideally be located in reasonable physical proximity to one another.

Documentation Required

- a. Describe where all teaching, clinical activities and instruction occur.
- b. Identify areas of the physical facilities that should be improved in order to enhance the program.

Standard

- 4.1.3 If the program does not have a clinical facility on site, describe the clinical facilities. Specific requirements for administration, faculty members, facilities, patients, and instruction must be identified. Policies and procedures for operation of any off-campus clinical facility must be consistent with the objectives/outcomes of the program. A formal agreement between the educational institution and any agency or institution providing the off-campus facility must be negotiated and confirmed in writing. Such agreement(s) must include clearly defined provisions for renewing and terminating the agreement to ensure program continuity. The program administrator must retain authority and responsibility for instructional requirements and assignment of students.

Documentation Required

- a. Describe off-campus student clinical experiences and include information on the location, arrangements for supervision, evaluation, length of time each student is assigned, and the types of patients and the treatment provided.
- b. Provide a list and copies of all the affiliation agreements between the institution and any agency or site where students receive off-site clinical experiences.

Standard

- 4.1.4 Adequate space must be available for the faculty members and secretarial and clinical support staff. The location and size of offices should be conducive to the effective use of faculty and staff time, and program resources for teaching preparation and student counselling. Space must be available for storage of office, clinic and laboratory supplies and equipment, instructional media, and student, patient, and program records.

Documentation Required

Provide commentary to supplement the floor plan provided in 4.1.1 confirming the adequacy of space.

Standard

- 4.1.5 The institution must make provision for the acquisition and/or replacement of clinical and laboratory equipment, supplies, reference materials and teaching aids.

Documentation Required

Provide information to supplement the policies provided in 1.4 to describe the program's plan for the repair and/or replacement of clinical and laboratory equipment, supplies, reference materials and teaching aids.

4.2.0 Learning Resources

Standard

- 4.2.1 Students and faculty members and staff must have access to computers, secure and reliable Internet, databases, and other multimedia resources to permit the retrieval of current scientific literature.

Documentation Required

- a. Describe student and faculty members' and staff access to computers, secure and reliable Internet, databases, and other multimedia resources.
- b. Describe how the program provides access to current literature and journals.
- c. Describe how the program supports students to effectively access and retrieve current scientific literature.
- d. Describe how faculty members encourage students to use the available literature.
- e. Describe how faculty members, staff and students have appropriate IT support, and how the e-platform is supported for faculty members, students, and staff.

4.3.0 Didactic and Clinical Support

Standard

- 4.3.1 Student learning must not be compromised by an over-reliance on students to provide institutional service, clinical productivity solely to enhance revenue, teaching, and/or scholarship, which cannot be justified as an educational requirement of the program. Teaching clinics must provide the necessary supplies and equipment required for patient comfort and safety (i.e.: personal protective equipment).

Documentation Required

- a. Describe students' obligations to provide instructional treatment and/or support services within the program.
- b. Provide evidence that there are adequate documented protocols to ensure student and client safety.

- c. Provide evidence that routine safety checks of equipment, resources and supplies are scheduled, conducted, and logged by individuals who, by credentials and experience, are qualified to perform this function.

Standard

- 4.3.2 Sufficient qualified support personnel must be assigned to the program to support both instruction and patient care. Adequate administrative, secretarial, clerical, IT and other support staff must be available to assist faculty members and students to meet program objectives and outcomes. Adequate maintenance and custodial staff must be available.

Documentation Required

Describe the number and types of support staff assigned to the program and comment on adequacy.

4.4.0 Student Issues

Standard

- 4.4.1 Students must have rights, responsibilities, and privileges.

Policies must exist concerning student representation on appropriate committees.

The program must have methods (i.e.: a department/person(s)) to identify and address student concerns.

Documentation Required

- a. Provide copies of documentation supplied to students describing their rights, responsibilities, and privileges.
- b. Provide a list of the Institution's facilities available for student use (i.e., learning resources, lounge, cafeteria, washrooms, lockers, health clinic, day care, etc.).
- c. Provide copies of policies concerning student representation on appropriate committees.
- d. Provide copies of policies describing the process(es) in place to identify and address student concerns.
- e. Provide the job description of the individual(s) responsible for addressing student concerns.

Standard

- 4.4.2 There must be an institutional policy which provides for due process for students with respect to grievances.

Documentation Required

Provide the institution policy that provides for due process if a student has a grievance.

Standard

- 4.4.3 Access to, or referral to, counselling and health services must be available to all students.

Documentation Required

Describe how students access counselling and health services.

Standard

- 4.4.4 Prior to admission, students must receive general information concerning the expected costs of the program.

Documentation Required

Describe how students are provided with information related to the costs of dental assisting education. Provide data on the estimated costs to students for each year. The following table may be used as a guide.

	DA
Tuition (a) resident (b) non-resident	
General fee	
Instruments/Equipment: (a) purchase (b) rental	
Laboratory/ Clinic fees	
Diploma fees	
Locker fees	
Textbooks	
Health Services	
Miscellaneous fees for student associations, NDAEB examination, etc.	
Clinic attire	
Additional items	

5.0 CLINIC ADMINISTRATION

5.1.0 Clinic Operations

Standard

- 5.1.1 The program must identify an individual responsible for client relations, clinical care, and clinic administration. This individual must have access to relevant faculty decision-making groups and have appropriate committee appointments. This individual must have effective working relationships with other administrators.

Clinical operations as well as the related policies and protocols will be observed during the accreditation survey visit.

Documentation Required

- a. Provide the name of the individual responsible for the clinic and their job description.
- b. Describe their status and access to relevant faculty decision-making groups.
- c. Describe how they have has effective working relationships with other administrators.

Standard

- 5.1.2 A licensed/registered dental professional must be available to examine all patients (peers and external patients) consistent with provincial regulations and authorize and prescribe as needed.

Documentation Required

Identify if a dental professional is available (consistent with provincial regulations) for all clinical sessions. Attach as an appendix, the job description, and current curriculum vitae for the dental professional(s) available for clinical sessions.

Standard

- 5.1.3 Patient treatment records must be comprehensive and adequate for teaching purposes and consistent with current regulatory requirements for record keeping.

The following elements must be noted clearly and legibly within the patient treatment record:

- a. The patient treatment record must include:
 1. Personal information
 2. Health history/medical alert
 3. Patient consent
 4. Update of patient record during each visit
 5. Authorization of procedures/services provided in accordance with provincial legislation

6. Services rendered recorded and co-signed by a faculty member
 7. Patient referral, if required
- b. In relation to the services provided by the dental assisting student, the patient treatment record must contain the following:
1. Documentation of an oral assessment that includes the patient's current oral health status; the patient's oral health treatment needs, including patient goals.
 2. An appropriately sequenced appointment plan to deliver the services prescribed for the patient.
 3. Documentation by the student of materials and procedures selected to implement the appointment plan.
 4. Verification that the prescribed patient care was completed and that faculty members assessed the treatment provided.

Documentation Required

- a. Provide a copy of a blank patient treatment record in PDF or screen shot.
- b. Provide for review the following documentation with identifiers removed:
 1. Ten (10) completed patient treatment records that have been audited by the program.
 2. Ten (10) patient treatment records representing patients in treatment
- c. Provide confirmation that patient authorization for their chart to be reviewed as part of the accreditation process has been obtained.

In addition, the accreditation survey team will review, while on site, 8 to 10 randomly selected patient treatment records.

5.2.0 Health and Safety Provisions

Standard

- 5.2.1 Written policies and procedures relating to quality assurance to ensure the safe use of ionizing radiation must be in place and be compliant with applicable regulations for radiation hygiene and protection. Mechanisms must be in place to monitor compliance of these policies and protocols by faculty members, staff and students. The design and construction of radiology facilities must provide adequate protection from ionizing radiation for the patient, operator and others in close proximity. The program must ensure that it is in compliance with provincial and federal regulations relating to radiation protection. Where provincial or federal regulations are not in force, the program must show evidence that radiography equipment is routinely inspected to ensure the safe use of ionizing radiation, and that the radiology facilities are designed in such a way to ensure that occupational and public exposure is not in excess of the current recommendations of the International Commission on Radiological Protection (ICRP).

In addition, the program must identify a radiation protection officer and have in place a quality assurance program that includes daily monitoring of radiographic quality.

Radiographs must be prescribed based on the specific needs of the patient (includes both peers and external patients), employing the ALARA principle and taking into account the existence of any current radiographs. Radiographs must be exposed solely for diagnostic purposes, not to achieve instructional objectives.

Documentation Required

- a. Provide the name, title and job description of the radiation protection officer.
- b. Provide copies of policies and protocols related to prescription of radiographs.
- c. Provide a copy of the quality assurance program used at the institution.
- d. Provide reports of the radiation safety inspections undertaken since the last accreditation survey.

Standard

- 5.2.2 Policies and/or protocols must exist relating to Fire and Safety Procedures, Hazardous Materials and Waste Management, Pandemic Management, Infection Control and Medical Emergency Procedures. Such policies and/or protocols must be consistent with related elements of the didactic program, related regulation, legislation, and bylaws of the various jurisdictions and must be readily available for faculty members, staff, and students. An automated external defibrillator (AED), oxygen tank, eyewash stations, and emergency drug kits must be available within the facility and in close proximity to the clinics, following health and safety requirements.

Mechanisms must be in place to monitor compliance of these policies and protocols by faculty members, staff, and students. Policies and/or protocols with respect to Health and Safety will be observed, as appropriate, during the clinical observation session scheduled during the survey visit.

Documentation Required

- a. Provide as an appendix, copies of policies and/or protocols outlined in 5.2.2.
- b. Describe how these policies and/or protocols are monitored for faculty members, staff, and students.
- c. Records/schedules of safety drills and mock emergency drills
- d. Describe the location of the AED in the facility.

Standard

- 5.2.3 Students, faculty members and appropriate staff must be encouraged to be immunized against and/or tested for infectious diseases according to Federal or Provincial guidelines, such as mumps, measles, rubella, tuberculosis, tetanus/diphtheria, Hepatitis B, and influenza like illnesses (i.e.: COVID – 19) prior to contact with patients and/or infectious objects or materials in an effort to minimize the risk to patients and dental personnel. All individuals who provide patient care must follow standards of risk management.

Documentation Required

Describe steps that are taken to ensure compliance with institutional immunization requirements by students, faculty members, and staff against infectious diseases prior to contact with patients.

Standard

- 5.2.4 The program should develop (or adopt provincial policies if applicable) and implement policies and procedures related to individuals who have bloodborne infectious disease(s).

Documentation Required

Provide a copy of the program policies and procedures related to faculty members, staff and students who have bloodborne infectious disease(s).

Standard

- 5.2.5 Students, faculty members, and staff involved with the direct provision of patient care must be certified in Basic Life Support (BLS) (or equivalent) or cardiopulmonary resuscitation (CPR) and procedures as per the dental assisting regulatory requirements of the province.

Documentation Required

Provide documentation that identifies the process used to monitor that all faculty members, staff, and students are certified in Basic Life Support or cardiopulmonary resuscitation (CPR).

5.3.0 Patient Care and Quality Assurance

Standard

- 5.3.1 The program must have written policies and/or protocols related to the following:

- a. Audit of Patient Care.
- b. Collection of Fees
- c. Confidentiality of Patient Information
- d. Privacy of Patient information
- e. Consultative Protocols and referrals
- f. Informed Consent
- g. Patient Assignment
- h. Patient Continuing and Recall Care
- i. Patient Treatment Record Storage and Disposal
- j. Professional Decorum

Such policies and protocols must be written, consistent with related elements of the didactic program and provincial requirements, and readily available for the faculty members, students, and staff. Mechanisms must be in place to monitor compliance with these policies

and protocols by faculty members, staff and students.

Documentation Required

- a. Provide the policies and/or protocols outlined in 5.3.1.
- b. Describe how these policies and/or protocols are monitored for faculty, staff and students.

Standard

- 5.3.2 Patient treatment records must be audited by the program at the completion of patient care. Information obtained during the audit process must be used by the program to improve patient care and clinic administration.

Documentation Required

- a. Provide a sample copy of the audit form.
- b. Describe how the information obtained during the audit process is used by the program to improve patient care and clinic operations.

Standard

- 5.3.3 The program must have policies and mechanisms in place that provide quality assurance. Patients accepted for dental assisting services must be educated about their treatment needs, advised of the scope of care available at the facility and be appropriately referred for procedures that cannot be provided by the program.

The care provided within the program's clinic must assure that the rights and best overall health interests of the patient are protected at all times. The program must have processes in place to collect and assess patient feedback and this feedback must be used to improve program quality.

Documentation Required

- a. Describe the quality assurance policies and mechanisms in place within the program.
- b. Provide a sample copy of the client feedback form.
- c. Describe the processes in place to collect and assess client feedback and identify how this information is used to improve program quality.
- d. Provide a minimum of 25 copies of completed feedback forms and reports generated when the feedback forms were analyzed.

Standard

- 5.3.4 Treatment undertaken by students prior to advancement and graduation must be reasonably expected to be beneficial for the health and care of patients.

Documentation Required

Describe mechanisms that ensure that student education requirements are beneficial for the health and care of patients.

6.0 RESEARCH AND SCHOLARLY ACTIVITIES

Standard

- 6.1 Opportunities for faculty members and student involvement in scholarly activities is encouraged. Such experiences should be consistent with, and support the achievement of, the program outcomes. Initiatives leading to the improvement of the educational program should be included. Activities in this area will be assessed in relationship to the organization's mission and mandate.

Documentation Required

List and describe areas of research and scholarly activities being undertaken by faculty and/or student members of the program. This may include educational research and/or projects, experiments in course content or length, use of technology, special laboratory, or clinical procedures, development of instructional resources, etc.

7.0 PROGRAM RELATIONSHIPS

7.1.0 Relationships with Other Educational Programs

Standard

- 7.1.1 Where other health science programs and/or baccalaureate/graduate/postgraduate educational programs exist, efforts should be made to integrate the didactic and clinical aspects of these programs wherever possible and/or appropriate, in order to foster effective working relationships.

Documentation Required

Describe the program's relationships with other health sciences educational programs that permit students to develop multidisciplinary working relationships, as appropriate, with other programs and students.

Standard

- 7.1.2 CDAC recognizes the potential value of faculty-based continuing education courses. However, the demands of continuing education programs must not jeopardize the quality of the program.

Documentation Required

- a. Describe how faculty members provide and/or participate in delivering continuing education courses.
- b. If faculty members deliver continuing education courses, describe the impact on program quality and faculty member workloads.

7.2.0 Relationships with Regulatory Authorities and Dental Assisting Organizations

Standard

- 7.2.1 Students must be made aware of the distinct roles of professional associations and certification agencies and the regulatory framework for dental assisting practice. Students should be encouraged to join their professional associations. Faculty members should be encouraged to accept positions of responsibility in such organizations and their contributions should be supported and recognized by the program.

Documentation Required

- a. Describe how students are made aware of the role of provincial and national dental assisting organizations, the NDAEB and provincial regulatory authorities.
- b. Describe how the program promotes both student and faculty member participation in these organizations.