PROGRAM COMPETENCIES

MCC ASSOCIATES DEGREE IN DENTAL HYGIENE

8/10/2012
PROGRAM COMPETENCIES

MCC ASSOCIATES DEGREE IN DENTAL HYGIENE

Adapted with permission from the BSDH-Entry Level Program Competencies Document, Gene W. Hirschfeld School of Dental Hygiene, Old Dominion University, Norfolk, Virginia, accessed June, 2011: http://hs.odu.edu/dental/academics/bs/competencies.shtml

INTRODUCTION

Competence is an acceptable, measurable, defined level of special skill and knowledge derived from education, experience, role modeling, and overall socialization. To be competent, an entry-level dental hygienist must perform at or above the acceptable, defined, program competencies.

DOMAINS (D)

The organization of the document flows from the general categories that comprise the central domains of the curriculum, to the specific behaviors that reflect the foundational abilities expected of students at the course level. The domains should be viewed as themes or broad categories of professional focus that transcend numerous courses and learning activities. The concept of domains is intended to encourage threads of consistency, emphasis and focus that develop and advance throughout the curriculum. In this document, domains are labeled:

I. Professionalism and Ethics
II. Dental Hygiene Process of Care
III. Health Promotion and Community Involvement
IV. Professional Commitment and Advancement

Major Competencies (MC)

Within each domain, “Major Competencies” are listed. A “Major Competency” is defined as the ability to perform or provide a particular, complex service or task. The complexity of the service suggests that multiple and more specific abilities are required to support the performance of any “Major Competency”.

Supporting Competencies (SC)

Foundational Knowledge (FK)
SUPPORTING COMPETENCIES (SC)

THE MORE SPECIFIC ABILITIES ARE CONSIDERED SUBDIVISIONS OF THE “MAJOR COMPETENCY” AND ARE TERMED “SUPPORTING COMPETENCIES”. THE ACQUISITION AND DEMONSTRATION OF A “MAJOR COMPETENCY” REQUIRES A LEVEL OF MASTERY OF ALL “SUPPORTING COMPETENCIES” RELATED TO THAT PARTICULAR SERVICE OR TASK. WHILE LESS COMPLEX THAN A “MAJOR COMPETENCY”, A “SUPPORTING COMPETENCY” ALSO requires “FOUNDATIONAL KNOWLEDGE”.

Foundational Knowledge (FK)

Foundational knowledge is the product of didactic laboratory and clinical sciences instruction which imparts the information and experience that are prerequisite for satisfactory mastery of “Supporting Competencies”.

The biomedical, dental, behavioral and clinical science all provide instruction at the foundational level and establishes the foundation for the entire dental hygiene care process. This education ensures an understanding of basic biological principles for student analysis and synthesis of the interrelations of the body systems when making decisions regarding oral health services within the context of total body health. These sciences provide the student with knowledge of oral health and disease as a basis for assuming responsibility for assessing, analyzing, planning, implementing and evaluating dental hygiene care. Didactic, small group discussion, seminar and laboratory instruction provide information and psychomotor experiences that enable students to acquire and demonstrate competence in the clinical setting.

Domain/Program Competencies

The program competencies define a level of practice for the new graduate, rather than predict the higher level of practice that will be attained by dental hygiene practitioners over their career. Supporting and foundational competencies are identified for each domain.

I. PROFESSIONALISM AND ETHICS (D)

A. Professional Behavior (MC)

Professional behavior encompasses many components including a team approach, positive verbal and nonverbal communication, interpersonal skills, attention to feedback, protocol adherence, thorough and complete documentation and time management. The dental hygiene graduate must be able to practice using a team concept in a professional manner.

THE GRADUATE MUST BE ABLE TO: (SC)
1. PROVIDE ACCURATE, CONSISTENT AND COMPLETE DOCUMENTATION WHEN SERVING IN PROFESSIONAL ROLES (111, 114, 115, 121, 125, 212, 214, 215, 222, 224, 225, 228, SADHA);

2. COMMUNICATE EFFECTIVELY USING VERBAL, NONVERBAL WRITTEN AND ELECTRONIC COMMUNICATION SKILLS (110, 111, 112, 113, 114, 115, 121, 122, 124, 125, 212, 215, 222, 224, 225, 228, SADHA).

B. Ethical Behavior (MC)

The dental hygiene graduate must be able to discern and manage the ethical issues faced in dental hygiene.

THE GRADUATE MUST BE ABLE TO: (SC)

1. INTEGRATE THE “ADHA CODE OF ETHICS” IN ALL PROFESSIONAL ENDEAVORS AND ADHERE TO LOCAL, STATE AND FEDERAL LAWS, RECOMMENDATIONS AND REGULATIONS FOR DENTAL HYGIENE ACTIONS AND SERVICE (113, 115, 121, 123, 212, 214, 215, 222, 224, 225, 228, SADHA);

2. SERVE ALL CLIENTS WITHOUT DISCRIMINATION, APPRECIATING THE DIVERSITY OF THE POPULATION (111, 112, 113, 121, 124, 212, 215, 222, 224, 225);

3. APPLY PRINCIPLES OF RISK MANAGEMENT TO MANAGE PROFESSIONAL RISKS AND PREVENT LIABILITY (111, 113, 114, 121, 212, 215, 222, 224, 225, 228);

4. EVALUATE THE SAFETY AND EFFICACY OF ORAL HEALTH PRODUCTS, INTERVENTIONS AND TREATMENT IN A SCIENTIFIC AND PROFESSIONAL MANNER (110, 112, 124, 125, 211, 212, 214, 215, 222, 225).

II. DENTAL HYGIENE PROCESS OF CARE (D)

The dental hygiene graduate is a licensed health professional who provides educational, preventive and therapeutic services in the support of optimal oral health. The dental hygiene process of care applies principles from the biomedical, clinical and psychosocial sciences to diverse populations.

A. Assessment (MC)

The dental hygiene graduate must be able to systematically collect, analyze and record data on the general, oral and psycho-social health status of clients using methods consistent with medico-legal ethical principles.
THE GRADUATE MUST BE ABLE TO: (SC)
1. ASSESS CLIENT CONCERNS, GOALS, VALUES AND PREFERENCES TO GUIDE CLIENT CARE (110, 111, 121, 122, 124, 125, 212, 214, 215, 222, 225 228);
2. OBTAIN, REVIEW, UPDATE, INTERPRET AND IDENTIFY THE NEED FOR ASSESSMENT DATA PRIOR TO OR DURING DENTAL HYGIENE CARE (110, 111, 114, 115, 121, 125, 212, 214, 215, 216, 222, 224, 225, 226);
3. RECOGNIZE PREDISPOSING AND ETIOLOGICAL RISK FACTORS THAT REQUIRE INTERVENTION TO PREVENT AND CONTROL DISEASE (110, 111, 112, 121, 122, 123, 125, 129, 212, 213, 214, 215, 217, 219, 222, 225, 229);
4. IDENTIFY CLIENTS AT RISK FOR A MEDICAL EMERGENCY AND TAKE APPROPRIATE PRECAUTIONS TO MINIMIZE THOSE RISKS (110, 111, 114, 115, 121, 125, 212, 214, 215, 216, 222, 224, 225, 226).

B. Diagnosis (MC)
The dental hygiene graduate must be able to use critical decision making skills to reach conclusions about the client’s human needs related to oral health and disease, based on all available assessment data.

THE GRADUATE MUST BE ABLE TO: (SC)
1. ANALYZE AND INTERPRET THE DATA TO FORMULATE A DENTAL HYGIENE DIAGNOSIS RELATED TO AND CONGRUENT WITH THE DIAGNOSIS OF THE DENTIST AND OTHER HEALTH PROFESSIONALS AND OBTAIN APPROPRIATE CONSULTATIONS (111, 121, 122, 124, 125, 212, 214, 215, 222, 225).

C. Planning (MC)
The dental hygiene graduate must be able, through collaboration with the client and/or other health professionals, to formulate a comprehensive dental hygiene care plan. The care plan will delineate dental hygiene interventions to be provided that are evidenced-based, client-centered and related to the identified human need deficits.

THE GRADUATE MUST BE ABLE TO: (SC)
1. ESTABLISH A PLANNED SEQUENCE OF EDUCATIONAL, PREVENTIVE AND THERAPEUTIC SERVICES COLLABORATIVELY WITH THE CLIENT, BASED ON THE DENTAL HYGIENE DIAGNOSIS (111, 121, 124, 125, 212, 214, 215, 222, 224, 225, 226, 228);

2. FORMULATE GOALS AND ESTABLISH EXPECTED OUTCOMES RELATED TO THE NEEDS AND DESIRES OF THE CLIENT AND THE DENTAL HYGIENE DIAGNOSIS (111, 121, 122, 124, 125, 212, 214, 215, 222, 225);

3. MAKE REFERRALS TO PROFESSIONAL COLLEAGUES AS INDICATED BY THE CARE PLAN (111, 121, 125, 211, 212, 213, 214, 215, 217, 219, 222, 225, 226, 229).

D. Implementation (MC)

The dental hygiene graduate must be able to provide specialized care that includes educational, preventive and therapeutic services designed to assist the client in achieving and maintaining oral health goals.

THE GRADUATE MUST BE ABLE TO: (SC)

1. EDUCATE CLIENTS TO PREVENT AND CONTROL RISK FACTORS THAT CONTRIBUTE TO CARIES, PERIODONTAL DISEASE AND OTHER ORAL CONDITIONS (110, 111, 121, 122, 123, 125, 129, 212, 213, 214, 215, 216, 219, 225, 226, 229, SADHA);

2. UTILIZE ACCEPTED INFECTION CONTROL PROCEDURES (111, 113, 115, 121, 125, 211, 212, 214, 215, 222, 225);

3. OBTAIN RADIOGRAPHS OF DIAGNOSTIC QUALITY (111, 121, 215, 225);

4. APPLY BASIC AND ADVANCED PRINCIPLES OF DENTAL HYGIENE INSTRUMENTATION TO REMOVE DEPOSITS WITHOUT TRAUMA TO HARD OR SOFT TISSUE (114, 125, 214, 215, 225);

5. CONTROL PAIN AND ANXIETY DURING TREATMENT THROUGH USE OF ACCEPTED PHARMACOLOGICAL AND BEHAVIORAL TECHNIQUES (110, 111, 114, 121, 125, 214, 215, 216, 225, 226);

6. SELECT AND ADMINISTER THE APPROPRIATE CHEMOTHERAPEUTIC AGENT AND PROVIDE PRE- AND POST-TREATMENT INSTRUCTIONS (110, 124, 125, 212, 214, 215, 219, 222, 224, 225, 229);

7. PROVIDE SUPPORTIVE DENTAL HYGIENE SERVICES THAT CAN BE LEGALLY PERFORMED IN THE STATE OF NEW YORK (111, 121, 124, 125, 211, 212, 214, 215, 222, 224, 225, 226);

8. MANAGE MEDICAL EMERGENCIES IN THE CLIENT CARE ENVIRONMENT (111, 121, 125, 214, 215, 216, 225, 226).
E. *Evaluation and Maintenance (MC)*

The dental hygiene graduate must be able to evaluate the effectiveness of implemented educational, preventive and therapeutic services and modify as needed.

THE GRADUATE MUST BE ABLE TO: (SC)
1. DETERMINE THE OUTCOMES OF DENTAL HYGIENE INTERVENTIONS USING INDICES, INSTRUMENTS, EXAMINATION TECHNIQUES AND CLIENT SELF-REPORT AS SPECIFIED IN THE CLIENT GOALS (124, 125, 212, 214, 215, 222, 225);
2. COMPARE ACTUAL OUTCOMES TO EXPECTED OUTCOMES, REEVALUATING GOALS, DIAGNOSES AND SERVICES WHEN EXPECTED OUTCOMES ARE NOT ACHIEVED (124, 125, 212, 214, 215, 222, 225);
3. DEVELOP A PERIODONTAL MAINTENANCE PROGRAM (212, 214, 215, 219, 222, 225, 226, 229);
4. DETERMINE THE CLIENT'S SATISFACTION WITH THE ORAL HEALTH CARE RECEIVED (125, 212, 215, 222, 225).

III. **HEALTH PROMOTION AND COMMUNITY INVOLVEMENT (D)**

Trends toward consumerism, self-care, disease prevention, health promotion and health lifestyles means that clients, wherever they might be, want and need information on oral health and disease. Teaching and health promotion strategies are involved in the full range of dental hygiene actions directed toward helping diverse populations achieve oral wellness.

A. *Education and Communication (MC)*

The dental hygiene graduate must be able to promote the values of oral and general health to the public and organizations outside the profession.

THE GRADUATE MUST BE ABLE TO: (SC)
1. IDENTIFY FACTORS THAT CAN BE USED TO MOTIVATE THE CLIENT FOR HEALTH PROMOTION, DISEASE PREVENTION AND/OR HEALTH MAINTENANCE (110, 113, 114, 123, 129, 212, 213, 215, 219, 222, 225, 229, SADHA);
2. EDUCATE OTHER INDIVIDUALS AND/OR ORGANIZATIONS ABOUT ACCESS AND DELIVERY OF SERVICES IN THE PROVISION OF ORAL HEALTH CARE (110, 113, 114, 211, 212, 214, 215, 217, 222, 225, SADHA);
3. PRESENT EDUCATIONAL INFORMATION TO DIVERSE CLIENT POPULATIONS IN A VARIETY OF SETTINGS USING APPROPRIATE TEACHING STRATEGIES (110, 113, 114, 211, 212, 215, 222, 225, 226, SADHA).

B. *Community Involvement (MC)*
The dental hygiene graduate must be able to initiate and assume responsibility for health promotion and disease prevention activities for diverse populations in a variety of settings.

THE GRADUATE MUST BE ABLE TO: (SC)
1. Assess community oral health needs, risk and available resources and evaluate outcomes for health improvement and access to the healthcare system (110, 113, 114, 212, 222);
2. Plan, implement, and evaluate community oral health education and services in a variety of settings (110, 113, 114, 212, 222);
3. Use screening, education and referral to introduce consumers to the healthcare system 110, 113, 114, 212, 215, 222, 225);
4. Provide dental hygiene services as an interdisciplinary healthcare member in a variety of settings (110, 113, 114, 212, 215, 222, 225).

IV. PROFESSIONAL COMMITMENT AND ADVANCEMENT (D)

For professional advancement and lifelong learning, the dental hygienist must be able to derive the relevance from rapidly changing information. Knowledge of the scientific method ensures that actions taken by the dental hygienist are based on scientific evidence, not merely on ritual, tradition, intuition or personal preference.

A. Professional Commitment (MC)

The dental hygiene graduate must be concerned with improving the knowledge, skills and values of the profession.

THE GRADUATE MUST BE ABLE TO: (SC)
1. Advance the values of the profession through leadership, service activities and affiliations with professional and public organizations (110, 113, 114, 212, 215, 222, 224, 225, SADHA);
2. Assume the roles of the professional dental hygienist (clinician, educator, researcher, change agent, consumer advocate, administrator) as defined by the ADHA (110, 111, 113, 114, 121, 122, 212, 214, 215, 222, 225, 228, SADHA).

B. Professional Advancement (MC)

The graduate must pursue new knowledge on a continual basis due to the changing health care environment.

THE GRADUATE MUST BE ABLE TO: (SC)
1. ASSUME RESPONSIBILITY FOR PROFESSIONAL GROWTH THROUGH LIFELONG LEARNING (110, 111, 112, 113, 114, 121, 122, 212, 215, 222, 224, 225, SADHA);
EVALUATION OF PROGRAM COMPETENCIES

To assure the incorporation of emerging information and achievement of appropriate sequencing and the attainment of student competence, the program has developed an evaluation mechanism that relates program domains, competencies and foundational knowledge to all dental studies courses. The following table lists the major domains and the related courses.

### DENTAL HYGIENE PROGRAM COMPETENCIES RUBRIC

I. Professionalism and Ethics  
II. Dental Hygiene Process of Care  
III. Health Promotion and Community Involvement  
IV. Professional Commitment and Advancement

<table>
<thead>
<tr>
<th>Freshman</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Domains</td>
<td>110</td>
<td>111</td>
<td>112</td>
<td>113</td>
<td>114</td>
<td>115</td>
<td>121</td>
<td>122</td>
<td>123</td>
<td>124</td>
<td>125</td>
</tr>
<tr>
<td>Freshman</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Freshman</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Freshman</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Freshman</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Freshman</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sophomore</th>
<th>211</th>
<th>212</th>
<th>213</th>
<th>214</th>
<th>215</th>
<th>216</th>
<th>217</th>
<th>219</th>
<th>222</th>
<th>224</th>
<th>225</th>
<th>226</th>
<th>228</th>
<th>229</th>
<th>SADHA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sophomore</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sophomore</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sophomore</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sophomore</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

### STUDENT EVALUATION OF PROGRAM COMPETENCIES AND COURSES

At the completion of each semester, every student is required to complete an evaluation of the specific courses in that semester. Refer to the Course Related Program Competency document and follow the directions to complete the evaluation that will assess the effectiveness of all courses as they support the program’s goals and competencies. Points will be deducted from the final grade if the evaluation is not completed.
DEN 110 Dental Health Education
DEN 111 Dental Radiography I
DEN 112 Oral Anatomy and Physiology I
DEN 113 Barrier Precautions and Infection Control Measures
DEN 114 Dental Hygiene I
DEN 115 Clinical Dental Hygiene I
DEN 121 Dental Radiography II
DEN 122 Oral Anatomy and Physiology II
DEN 123 Oral Pathology I
DEN 124 Dental Hygiene II
DEN 125 Clinical Dental Hygiene II
DEN 129 Periodontics I
DEN 211 Dental Materials
DEN 212 Community Dentistry I
DEN 213 Oral Pathology II
DEN 214 Dental Hygiene III
DEN 215 Clinical Dental Hygiene III
DEN 216 Dental Therapeutics I
DEN 217 Dental Specialties
DEN 219 Periodontics II
DEN 222 Community Dentistry II
DEN 224 Dental Hygiene IV
DEN 225 Clinical Dental Hygiene IV
DEN 226 Dental Therapeutics II
DEN 228 Dental Office Management/Business Practice
DEN 229 Periodontics III