SITE VISITOR EVALUATION REPORT
For the Evaluation of a
Dental Education Program

Commission on Dental Accreditation
American Dental Association
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Adopted and Implemented Date: January 25, 2007
Site Visitor Instructions

The statements in this form represent each of the “MUST” statements contained in the Accreditation Standards for Dental Education Programs. Each statement is numbered the same as in the Standards.

This document is to be used only as a reference guide in the development of your section of the report. The document will not be attached to the report. The statements contained in the document are intended to help you focus on the required areas of the Standards and to assist you in determining if the program is in compliance with each Standard.

If you circle YES following a particular statement, it should be assumed that the program meets the minimum for that particular standard. In developing the narrative portion of the report you may wish to note that these areas are in compliance. In most instances, no comment may be necessary. However, you may wish to make a commendation in a particular area or address the area in the narrative and follow it up with a suggestion for program enhancement.

NOTE: Suggestions are placed within the related section of a report (admissions, curriculum, etc.) and immediately follow the related narrative description. Suggestions are viewed as areas where there is need for strengthening or enhancement—a suggestion means that the Standard is very minimally being met and could easily fall below the minimum. Please be sure to include adequate background information to support the suggestion. Institutions are not required to respond formally to suggestions.

If you circle NO following a particular statement, you must include detailed information in the narrative of the report regarding the nature and seriousness of the deficiency. A recommendation for addressing the deficiency must be included. Recommendations cannot be made unless noncompliance with the Standards can be substantiated. If no deficiencies are identified in a particular section, it will be assumed that, in your opinion, the area meets minimum standards as described in the Standards. Institutions are required to respond formally to recommendations.

In summary, the purpose of this document is to guide you in the development of your report. This document need not be turned in with your report; it is for your use only. Comments or suggestions concerning the usefulness of this document are always appreciated.
PREVIOUS SITE VISIT REPORT

1. Recommendations noted in the last site visit report, that are current standards, have been remedied. NA YES NO

Please note, if the last site visit was conducted prior to the implementation of the revised Standards (January 25, 2007), some recommendations may no longer apply. Should further guidance be required, please contact Commission on Dental Accreditation staff. If no, please identify by Standard the ongoing area(s) of non-compliance.

COMPLIANCE WITH COMMISSION POLICIES

1. The program is complying with the Commission’s policy on “Third Party Comments.” YES NO

The program is responsible for soliciting third-party comments from students and patients that pertain to the standards or policies and procedures used in the Commission’s accreditation process. An announcement for soliciting third-party comments is to be published at least 90 days prior to the site-visit. The notice should indicate that third-party comments are due in the Commission’s office no later than 60 days prior to the site visit. The entire policy on “Third Party Comments” can be found in the Commission’s Evaluation Policies and Procedures manual.

If NO, please explain below, include the concern in the draft site visit report and note at the final conference.

2. The program is complying with the Commission’s policy on “Complaints.” YES NO

The program is responsible for developing and implementing a procedure demonstrating that students are notified, at least annually, of the opportunity and the procedures to file complaints with the Commission. Additionally, the program must maintain a record of student complaints related to the Commission’s Accreditation Standards and/or policy received since the Commission’s last comprehensive review of the program. The entire policy on “Complaints” can be found in the Commission’s Evaluation Policies and Procedures manual.

If NO, please answer a. and b. below and explain. In addition, please include the concern in the draft site visit report and note at the final conference.

   a. Students notified of the Commission’s address YES NO

   b. Record of student complaints maintained YES NO
STANDARD 1—INSTITUTIONAL EFFECTIVENESS

1-1 The dental school has developed a clearly stated purpose/mission statement appropriate to dental education, addressing teaching, patient care, research and service.

**Intent:**
A clearly defined purpose and a mission statement that is concise and communicated to faculty, staff, students, patients and other communities of interest is helpful in clarifying the purpose of the institution.

1-2 Planning for, evaluation of and improvement of educational quality at the dental school is broad-based, systematic, continuous and designed to promote achievement of institutional goals related to education, patient care, research and service.

1-3 The dental school demonstrates the effectiveness of its programs and units using a formal and ongoing outcomes assessment process to include measures of student achievement.

**Intent 1-2, 1-3:**
Assessment, planning, implementation and evaluation of the educational quality of a dental education program that is broad-based, systematic, continuous and designed to promote achievement of program goals will maximize the academic success of the enrolled students. The Commission on Dental Accreditation expects each program to define its own goals and objectives for preparing individuals for the practice of dentistry.

1-4 The financial resources are sufficient to support the dental school’s stated purpose/mission, goals and objectives.

**Intent:**
The institution should have the financial resources required to develop and sustain the program on a continuing basis. The program should have the ability to employ an adequate number of full-time faculty, purchase and maintain equipment, procure supplies, reference material and teaching aids as reflected in annual budget appropriations. Financial allocations should ensure that the program will be in a position to recruit and retain qualified faculty. Annual appropriations should provide for innovations and changes necessary to reflect current concepts of education in the discipline. The Commission will assess the adequacy of financial support on the basis of current appropriations and the stability of sources of funding for the program.
1-5 The sponsoring institution ensures that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.

*Examples of evidence to demonstrate compliance include:*
  
  - Written agreement(s)
  - Contracts between the institution/program and sponsor(s) (For example: contract(s)/agreement(s) related to facilities, funding, faculty allocations, etc.)

1-6 The authority and final responsibility for curriculum development and approval, student selection, faculty selection and administrative matters rests within the sponsoring institution.

1-7 The dental school is a component of a higher education institution that is accredited by a regional accrediting agency.

1-8 The dental school shows evidence of interaction with other components of the higher education, health care education and/or health care delivery systems.
STANDARD 2—EDUCATION PROGRAM

Admissions

2-1  Specific written criteria, policies and procedures are followed when admitting predoctoral students.  YES  NO

2-1.1  Admission of students with advanced standing is/will be based on the same Standards of achievement required by students regularly enrolled in the program.  YES  NO

2-1.2  Transfer students with advanced standing will receive an appropriate curriculum that results in the same standards of competence required by students regularly enrolled in the program.  YES  NO

Examples of evidence to demonstrate compliance include:
- policies and procedures on advanced standing
- results of appropriate qualifying examinations
- course equivalency or other measures to demonstrate equal scope and level of knowledge

2-2  Admissions policies and procedures are designed to include recruitment and admission of a diverse student population.  YES  NO

Intent 2-1, 2-2:
The dental education curriculum is a scientifically-oriented program which is rigorous and intensive. Admissions criteria and procedures are necessary to ensure that students are selected who have the potential for successfully completing the program. The administration and faculty, in cooperation with appropriate institutional personnel, should establish admissions procedures that are non-discriminatory and ensure the quality of the program.

Instruction

2-3  In advance of each course or other unit of instruction, students are provided written information about the goals and requirements of each course, the nature of the course content and the method(s) of evaluation to be used.  YES  NO

2-4  If students do not meet the didactic, behavioral and/or clinical criteria as published and distributed, individual evaluations are performed that lead to an appropriate decision in accordance with institutional due process policies.  YES  NO
**Curriculum Management**

2-5 The curriculum includes at least four academic years of instruction or its equivalent. **YES** **NO**

2-6 The stated goals of the dental education program include the preparation of graduates who possess the knowledge, skills and values to begin the practice of general dentistry. **YES** **NO**

2-7 The dental school defines the competencies needed for graduation, which are focused on educational outcomes. **YES** **NO**

2-8 The dental school employs student evaluation methods that measure the defined competencies. **YES** **NO**

**Intent:**

*The evaluation of competence is an ongoing process that requires a variety of assessments that can measure not only the acquisition of knowledge and skills but also assesses the process and procedures which will be necessary for entry level practice.*

2-9 Biomedical, behavioral and clinical science instruction is integrated and of sufficient depth, scope, timeliness, quality and emphasis to ensure the achievement of the curriculum’s defined competencies. **YES** **NO**

2-10 The dental school has a curriculum management plan that ensures: (address separately)

a) an ongoing curriculum review and evaluation process which includes input from faculty, students, administration and other appropriate sources; **YES** **NO**

b) evaluation of all courses with respect to the defined competencies of the school to include student evaluation of instruction; and **YES** **NO**

c) elimination of unwarranted repetition and outdated and unnecessary material, incorporation of emerging information and achievement of appropriate sequencing. **YES** **NO**

2-11 The dental school ensures the availability of adequate patient experiences that afford all students the opportunity to achieve its stated competencies within a reasonable time. **YES** **NO**
**Biomedical Sciences**

2-12 Biomedical science instruction in dental education ensures an in-depth understanding of basic biological principles, consisting of a core of information on the fundamental structures, functions and interrelationships of the body systems.  

2-13 The biomedical knowledge base emphasizes that the oro-facial complex is an important anatomical area existing in a complex biological interrelationship with the entire body.  

2-14 In-depth information on abnormal biological conditions is provided to support a high level of understanding of the etiology, epidemiology, differential diagnosis, pathogenesis, prevention, treatment and prognosis or oral and oral-related diseases.  

2-15 Biomedical science knowledge is of sufficient depth and scope for graduates to apply advances in modern biology to clinical practice and to integrate new medical knowledge and therapies relevant to oral health care.

**Behavioral Sciences**

2-16 Graduates are competent in the application of the fundamental principles of behavioral sciences as they pertain to patient-centered approaches for promoting, improving and maintaining oral health.  

2-17 Graduates are competent in managing a diverse patient population and have the interpersonal and communication skills to function successfully in a multicultural work environment.

**Practice Management**

2-18 Graduates are competent in evaluating different models of oral health care management and delivery.  

2-19 Graduates understand the basic principles and philosophies of practice management, and have the skills to function successfully as the leader of the oral health care team.
**Ethics and Professionalism**

2-20 Graduates are competent in applying ethical, legal and regulatory concepts to the provision and/or support of oral health care services.  

2-21 Graduates are competent in the application of the principles of ethical reasoning and professional responsibility as they pertain to patient care and practice management.  

2-22 Graduates recognize the role of lifelong learning and self-assessment in maintaining competency.

**Information Management and Critical Thinking**

2-23 Graduates are competent in the use of critical thinking and problem solving related to the comprehensive care of patients.  

2-24 Graduates are competent in the use of information technology resources in contemporary dental practice.
Clinical Sciences

2-25 At a minimum, graduates are competent in providing oral health care within the scope of general dentistry, as defined by the school, for the child, adolescent, adult, and geriatric patient, including: (address separately)

a. patient assessment and diagnosis; YES NO
b. comprehensive treatment planning; YES NO
c. health promotion and disease prevention; YES NO
d. informed consent; YES NO
e. anesthesia, pain and anxiety control; YES NO
f. restoration of teeth; YES NO
g. replacement of teeth; YES NO
h. periodontal therapy; YES NO
i. pulpal therapy; YES NO
j. oral mucosal disorder; YES NO
k. hard and soft tissue surgery; YES NO
l. dental emergencies; YES NO
m. malocclusion and space management; and YES NO
n. evaluation of the outcomes of treatment. YES NO

Intent:
Graduates possess the basic knowledge, skills, and values to practice dentistry, independently, at the time of graduation. The school identifies the competencies that will be included in the curriculum based on the school's goals, resources, accepted general practitioner responsibilities and other influencing factors. The comprehensive care experiences provided for patients by students should be adequate to ensure competency in all components of general dentistry practice.
2-26 Graduates are competent in assessing the treatment needs of patients with special needs.

**Intent:**

*An appropriate patient pool should be available to provide a wide scope of patient experiences that include patients whose medical, physical, psychological, or social situations may make it necessary to modify normal dental routines in order to provide dental treatment for that individual. These individuals include, but are not limited to, people with developmental disabilities, complex medical problems, and significant physical limitations. Clinical instruction and experience with the patients with special needs should include instruction in proper communication techniques and assessing the treatment needs compatible with the special need. These experiences should be monitored to ensure equal opportunities for each enrolled student.*

2-27 Graduates are competent in providing appropriate life support measures for medical emergencies that may be encountered in dental practice.
STANDARD 3—FACULTY AND STAFF

3-1 The number and distribution of faculty and staff are sufficient to meet the dental school’s stated purpose/mission, goals and objectives.  YES  NO

3-2 The dental school shows evidence of an ongoing faculty development process.  YES  NO

3-3 Faculty are ensured a form of governance that allows participation in the school’s decision-making process.  YES  NO

3-4 A defined process ensures objective measurement of the performance of each faculty member in teaching, patient care, scholarship, and service.  YES  NO

3-5 The dental school has a stated process for promotion and tenure (where tenure exists), that is clearly communicated to the faculty.  YES  NO

STANDARD 4—EDUCATIONAL SUPPORT SERVICES

Facilities and Resources

4-1 The dental school provides adequate and appropriately maintained facilities and learning resources to support the purpose/mission of the dental school and which are in conformance with applicable regulations.  YES  NO

4-2 Student services include the following: (address separately)

   a. personal, academic and career counseling of students;  YES  NO

   b. assuring student participation on appropriate committees;  YES  NO

   c. providing appropriate information about the availability of financial aid and health services;  YES  NO

   d. developing and reviewing specific written procedures to ensure due process and the protection of the rights of students; and  YES  NO

   e. student advocacy.  YES  NO

Intent:
All policies and procedures should protect the students as consumers and provide avenues for appeal and due process. Policies should ensure that student records accurately reflect work accomplished and are maintained in a secure manner. Students should have available the necessary support to provide career information and guidance as to practice, post-graduate and research opportunities.
**Student Financial Aid**

4-3 Prior to admission, students receive a statement of the total expected cost of dental education, including estimates of living expenses and educational fees, an analysis of financial need and the availability of financial aid based on their need analysis.  

4-4 During each year of enrollment, each student receives a statement of accumulated debt, expected costs of remaining dental education, including living expenses and educational fees, an updated analysis of financial need and current information on the availability of financial aid based on the need analysis.  

4-5 Immediately prior to graduation, each student receives a written statement identifying all sources of financial assistance received through the school for which repayment is required, as well as a review of promissory notes for each outstanding loan and the terms and conditions contained in each note including, but not limited to, the following: (address separately)

a. repayment schedules and specific billing procedures;  
b. grace periods and their impact on repayment schedules;  
c. deferments and their implications;  
d. cancellation provisions; and  
e. a description of available consolidation options and the time frame in which students would be eligible for them.

**Health Services**

4-6 The dental school has pre-matriculation health standards that will ensure that prospective students are qualified to undertake dental studies.  

4-7 There is a mechanism for ready access to health care for students while they are enrolled in dental school.  

4-8 Students are encouraged to be immunized against infectious diseases, such as, mumps, measles, rubella and hepatitis B, prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk of infection to patients and dental personnel.
STANDARD 5—PATIENT CARE SERVICES

5-1 The dental school conducts a formal system of quality assurance for the patient care program that demonstrates evidence of:

a. standards of care that are patient-centered, focused on comprehensive care and written in a format that facilitates assessment with measurable criteria;  

b. an ongoing review of a representative sample of patients and patients records to assess the appropriateness, necessity and quality of the care provided;  

c. mechanisms to determine the cause(s) of treatment deficiencies; and  

d. patients review policies, procedures, outcomes and corrective measures.

5-2 The use of quantitative criteria for student advancement and graduation is not allowed to compromise the delivery of comprehensive patient care.

5-3 The dental school has developed and distributed to all appropriate students, faculty, staff and each patient a written statement of patients’ rights.

Intent:

The primacy of care for the patient should be well established in the management of the program and clinical facility assuring that the rights of the patient are protected. A written statement of patient rights could include:

a) considerate, respectful and confidential treatment;  
b) continuity and completion of treatment;  
c) access to complete and current information about his/her condition;  
d) advance knowledge of the cost of treatment;  
e) informed consent;  
f) explanation of recommended treatment, treatment alternatives, the option to refuse treatment, the risk of no treatment, and expected outcomes of various treatments;  
g) treatment that meets the standard of care in the profession.

5-4 The dental school ensures that active patients have access to professional services at all times for the diagnosis and management of dental emergencies.

5-5 All students, faculty and support staff involved in the direct provision of patient care are continuously recognized in basic life support (B.L.S.), including cardiopulmonary resuscitation, and are able to manage common medical emergencies.
5-6  Written policies and procedures are in place for the safe use of ionizing radiation.  

**Intent:**
*Policies and procedures on the use of ionizing radiation should include criteria for patient selection, frequency of exposing radiographs on patients, and retaking radiographs consistent with current, accepted dental practice.*

5-7  The dental school establishes and enforces a mechanism to ensure adequate preclinical/clinical/laboratory asepsis, infection and biohazard control and disposal of hazardous waste.

5-8  The school’s policies ensure that the confidentiality of information pertaining to the health status of each individual patient is strictly maintained.

**STANDARD 6—RESEARCH PROGRAM**

6-1  Research, the process of scientific inquiry involved in the development and dissemination of new knowledge, is an integral component of the purpose/mission, goals and objectives of the dental school.

6-2  The dental school faculty, as appropriate to meet the school’s purpose/mission, goals and objectives, engage in research or other forms of scholarly activity and provide opportunities for students to participate.
SUMMARY

Use the following space for additional information that you feel would be of value to the Commission on Dental Accreditation during its review of this report.
Before the Final Conference…

Have You:

1. Indicated a response for EACH question?

2. Written a detailed rationale for each NO answer indicated?

3. Written a recommendation for each NO answer?

Remember: Every NO indicated must be reported during the final conference.

After the Final Conference…

Be sure to provide staff with an electronic and written copy of your report.