Eastern Washington University
Dental Hygiene Department Policies and Procedures

DISCLOSURE STATEMENT:

The faculty and staff of the Department of Dental Hygiene agree to, and are in compliance with, the mission and goals of the University at-large, the College Plan of Science, Mathematics, and Technology and the Collective Bargaining Agreement between the Eastern Washington University Board of Trustees and the United Faculty of Eastern. Where this academic unit’s policies and procedures coincide with the University Plan, the Plan of the College of Science, Mathematics, and Technology, and the Collective Bargaining Agreement, this Department Policies and Procedures will not include a duplication of existing policies. Faculty and staff are referred to the university, college, and collective bargaining agreement documents for these policies and procedures.

Faculty Member’s Adoption: April 2007
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INTRODUCTION AND PURPOSE

This document supplements and amplifies the College of Science, Health, and Engineering’s College Policies and Procedures and the Collective Bargaining Agreement between Eastern Washington University’s Board of Trustees and the United Faculty of Eastern (UFE). As part of the Collective Bargaining Agreement, each college and department is to develop a plan that is consistent with the university mission.

Purposes for a Department Policies and Procedures can be summarized as follows:

• To establish the Department of Dental Hygiene’s mission, vision, competencies, and strategies as a foundation for decision making regarding priorities and resource allocation.

• To establish and communicate department policies and procedures in the following areas: department organization, governance and administration; personnel matters including department expectations for teaching, scholarship and service for probationary, tenured and Special Faculty appointments; recruitment and selection of new faculty; programs and curricula, including accreditation, advising, program review, and continuing education.

• To establish the outcomes assessment measures which will be used to evaluate program effectiveness, need, and the extent to which the department accomplishes its mission and goals.

• To articulate linkages between college and department goals, objectives, and activities

This document also augments the EWU Policies and Procedures document, the EWU Student and Academic Conduct Codes, the Commission on Dental Accreditation’s Accreditation Standards for Dental Hygiene Programs, the Department of Dental Hygiene’s Clinic Policies and Procedures Manual, Student Handbook, and Blood Borne Pathogen Manual.

The Department of Dental Hygiene Policies and Procedures will be kept in a booklet form in the Department Chair’s office. All full-time and part-time faculty and staff have continual electronic access to this document.
HISTORY OF THE DEPARTMENT

1960’s

In 1963 the first official meeting between Eastern Washington State College (EWSC) and Spokane area dentists (Dr. Vincent Stevens, Dr. Marion Bacon, Dr. Dana Harter, Dr. George Kabat, Dr. Doug Solvie, and Dr. Otto Stevens) was held to discuss the possibility of establishing a baccalaureate program in dental hygiene. At this time, the only dental hygiene school in the State of Washington was the program at the University of Washington.

One year later (1964), Dr.’s Stevens and Harter worked with the University of Washington’s dental hygiene program, the American Dental Hygienist Association, and Spokane area dentists to draft a proposal for a degree program. It was designed to include three years of general education requirements and dental hygiene requirements and a final 12 months of clinical professional training. The first proposal for the clinic was in Spokane in the Saint Lukes’ Hospital. The plans and curriculum were submitted and approved by the Spokane District Dental Society (SDDS) and the Washington State Dental Association. The comptroller prepared a budget for the EWSC administration for inclusion in the college’s 1965–66 biennial budget. For reasons not known or understood, the dental hygiene budget was not included in the school’s budget proposal. Consequently, the program proposal was dropped.

Plans for a new program were again initiated by members of the SDDS, EWSC, the University of Washington, and the University of Oregon dental schools. The curriculum was similar to the 1964 proposal and patterned after the University of Washington’s dental hygiene program. The Council of Higher Education evaluated the proposal and agreed that there was a shortage of dental hygienists in the Eastern Washington, Northern Idaho, Northeast Oregon and Western Montana areas.

In 1969, the 41st State Legislature by special appropriations established the initial funding ($249,000) for the dental hygiene program. There were no federal funds or funds directly from the college. A marketing project was conducted and resulted in the selection of Cheney as the site for the dental hygiene clinic. A twelve-member Advisory Board was appointed and approved by the EWSC Board of Trustees. Members of the college faculty, Eastern Washington Dental Hygiene Association and the Spokane District Dental Society were on the board. The Bachelor of Science Subcommittee of the Undergraduate Council recommended the program be approved but required an additional review at the end of the year when the fourth year was more detailed. Advertising for a program director was initiated. December 8, 1969, Dr. Clifton M. Smith, D.D.S. was appointed director of the program commencing January 1, 1970. The Music Building (Rowles Hall) was proposed as a location for program.
Eligible status for the dental hygiene program was granted by the American Dental Association’s Council on Dental Education in June, 1970. This allowed the program to accept its first students (7) into the program in September, 1970. A site evaluation was scheduled for February, 1972. Since the dental clinic in Rowles Hall was not ready for occupancy, temporary offices, lab, and classrooms were held in the Science Building. Rowles Hall was subsequently vacated by the Music Department and a $90,000 remodeling project was started. The projected date for completion was February, 1971. However, this date was not realized because of strikes involving the contractors. In April of 1971, the clinic was partially assembled so students could begin clinically treating patients. The operation of the clinic was “make-shift” for the first two months but was adequate. The estimated cost of the original equipment (17 units) was $125,000. (Note: Rowles Hall was demolished in 1993 to make room for the newly expanded PUB. The PUB’s bookstore and food service area now occupy this space.)

At the beginning of the program, the faculty consisted of one full-time dentist (Dr. Clifton Smith), one part-time dentist (Dr. Art Doran), and one full-time dental hygienist (Ms. Diane McHenry). The staff included a secretary and a dental assistant (Karen Barber Ocheltree). At the time of this writing (1996), Ms. McHenry and Ms. Ocheltree are still serving in this program.

A second class of 17 students was enrolled in September, 1971. By this time, the program was completely located in the remodeled Rowles Hall. The faculty now consisted of two full-time dentists, two full-time dental hygienists, four part-time dental hygienists and three part-time dentists. Expanded duties, restorative and local anesthesia courses were added to the curriculum as the state practice act was changed to permit these duties. Internship programs were started with the Veterans’ Administration Hospital (VAH) Dental Clinic in Spokane and the dental clinic at Fairchild Air Force Base. These extramural programs were designed to provide students the opportunity to treat patients with more complex dental problems. The cooperative arrangements for FAFB were discontinued while the Veterans’ Administration Hospital program continued. In the fall of 1972, Gayle Orton started working part-time, supervising clinical activities at the VAH and full accreditation was given by the ADA Council on Dental Education. Patient fees in 1971 included a $2.00 charge for a child prophylaxis and a $5.00 adult prophylaxis. Fluoride was $1.00 for children and $2.00 for adults. Full mouth x-rays were $8.00 for adults ($5.00 for children), and bitewings were $2.00 for children and $3.00 for adults. A panographic x-ray brought $10.00 in clinic fees. Restorations were charged at $2.00 for 1 surface, $4.00 for 2 surface and $6.00 for 3 surfaces.

A sixteen day dental auxiliary training program was sponsored by the Department of Health Education and Welfare (HEW) in 1972. The purpose of this program was to train dental hygiene educators in expanded functions (local anesthesia and restorative procedures). Diane McHenry and Gayle Orton were participants in this program. Every other weekend for 8 sessions was spent at the University of Washington Dental School where classes were held. The second phase of this HEW project involved teaching a comprehensive workshop for Eastern Washington practicing hygienists. EWSC faculty, in conjunction with the HEW project staff, provided the training. Fifteen licensed dental
hygienists completed this course in the Summer of 1972. (Just weeks after the dental hygiene instructors completed their training!)

In September, 1972, enrollment was increased to 21 students. Part-time faculty members were increased to provide the proper 1:5 instructor/student ratio. A $21,040 public health service grant was received and enabled the department to purchase audiovisual equipment, closed circuit TV and clinical equipment. The clinic was unique in that a television monitor was available at each clinic station to view instructional demonstrations and videotapes.

During the years 1973 to 1975, 20 students were enrolled in each class (juniors and seniors). Eastern was selected as a testing site for the ACORDE (A Consortium for Restorative Dental Education) Project which was developed by an agency for HEW. This project consisted of extensive use of videotapes to teach expanded functions to dental auxiliaries. States were just beginning to change their practice acts to include expanded functions and Washington State was one of the first states to legislate these procedures into the dental hygiene practice act.

In 1976, a $187,000 federal grant for special improvement was received and marked the beginning of many significant changes in the department. A fifteen-chair satellite dental hygiene clinic and office were established in the Paulsen Building, downtown Spokane. As part of this federal grant, increased student enrollment was encouraged. Twenty-four students were enrolled in the class beginning in September, 1976. Senior students completed their training in this facility while junior dental hygiene students remained in the Cheney facility. A contract between the Eastern Washington Agency on Aging and EWSC Dental Hygiene Program was established which provided badly needed dental services for the senior citizen population in Spokane. These patients also provided a more diverse patient case load for the dental hygiene students. Three full-time dental hygiene instructors now made up the program in addition to the full-time program director (Dr. Clifton Smith). Numerous part-time dentists and dental hygienists were added to the faculty. Two secretary receptionists and one dental assistant made up the classified staff.

In 1977, twenty-three dental hygiene students were enrolled as juniors and a fourth full-time dental hygienist was hired. A cooperative program between EWSC and Eastern Washington State Hospital was established. Students, under the supervision of a faculty member, provided inservice training for ward attendants, ward-patient instruction in preventive dental care and limited direct patient care. Pre-clinical experiences were expanded to include dental care to the primates in the Regional Primate Research Center at Medical Lake.

In 1978, Dr. Clifton Smith resigned as director and Judith Larson Hartje was appointed as acting director. The number of students enrolled was 32. The faculty was increased by one more full-time dental hygienist (four full-time dental hygienists). The department participated in a pilot program for a modular approach to clinical education. This project was sponsored by Health Education and Welfare (HEW) and the Kellogg Foundation. Gayle Orton acted as liaison with the Kellogg Foundation in implementing the first year of the program. The program was discontinued after one year. A second accreditation site visit was conducted in 1978 and the program was granted Provisional Accreditation. Several factors needing change were less involvement with the modular
curriculum pilot project, expanded library facilities for both Spokane and Cheney facilities and increased student clinic hours.

The number of students admitted into the program in 1979 was 29. The faculty was increased by one full-time dental hygienist. Dr. Clifton Smith passed away in late August. The Council on Dental Education granted full accreditation to the program in December, 1980. A general degree program was started in coordination with graduates of community colleges. This program was designed to provide dental hygienists with the additional curriculum needed for a BA degree. At least two students completed this program. A Clinic Coordinator position was started and clinical instructors worked with both junior and senior students. Coordinating activities in both the Cheney and Spokane clinics was particularly complex. Another special equipment grant was received from the Eastern Washington Agency on Aging.

1980’s

In 1980, enrollment was 27 students in the fall. The curriculum was modified and several new courses were added (photography and nitrous oxide administration). Students participated in preventive care for the institutionalized people at Interlake School for the profoundly retarded. Sometime in the early 1980’s, the dental hygiene program was granted department status and the program director’s title was changed to Department Chair.

The department continued with two separate facilities until the fall of 1986 when both junior and senior classes were moved to the Paulsen Building in Spokane. Cyndi Garvin replaced Judy Hartje as chair of the department. The existing clinic facility was enlarged to accommodate six additional dental units, eliminating the existing reception room and secretarial area. The classroom in the Paulsen Building was converted into a reception room with secretarial offices. All didactic classes were moved to the Spokane Center at First and Wall. Student class size at this time was approximately 20 per class.

1990’s

A major dental equipment fund raising project was initiated in 1991. Gayle Orton, replacing Cyndi Garvin Cutler as chair in the fall of 1990, spearheaded the drive. All dental chairs, stools, lights and carts were to be replaced with state-of-the-art dental equipment. External money was raised and included grants and donations from the following: Washington Dental Service Foundation ($75,000), Spokane District Dental Society ($10,000), Study Clubs and Dental Hygiene Component Societies ($3,500), and Comstock Foundation ($7,500). Individual donations from local dental hygienists and dentists as well as gifts in kind allowed the department to pay for this $200,000 project. The new clinic equipment was installed in the fall of 1992.

Class size was enlarged to 24 students in the fall of 1993 as part of an agreement with the Washington Dental Service Foundation as there continued to be demand for dental hygienists in Washington. Enlargement of class size placed increasing demands on the existing facility: 48 students now occupied this crowded facility. In response to a need for portable dental equipment to assist in expanding the community dentistry program, $25,000 in external funds was raised and two portable units were purchased in
1994. Once again, Washington Dental Service Foundation, Spokane District Dental Society, and Comstock Foundation were major donors for this project.

A $25,000 scholarship endowment was established in January, 1994. The department continues to seek external funding to enlarge the scholarship fund to meet increasing student demands and to encourage outstanding students to select Eastern for their dental hygiene education. Beginning in January, 1996, the first two $500 EWU dental hygiene scholarships were awarded. At this time, Washington Dental Service Foundation and Spokane District Dental Society were also providing four $500 scholarships for a total of 6 regional scholarships.

During the early 90’s, the university was undergoing its own major changes. An emphasis on enhanced upper division liberal arts education resulted in a significant change in general education requirements. (Beginning with the freshman class of 1995 (Class of 1999), 16 additional credits of upper division liberal arts education courses were added to the university graduation requirements.) The Dental Hygiene Department realized that adding 16 additional upper division credits would not be possible with the existing 2 + 2 dental hygiene program (two years general education + 2 years dental hygiene education). In response to the liberal arts reform movement, the Department of Dental Hygiene converted to a 1 + 3 curriculum model and accepted its first class of 24 sophomore students in the fall of 1995. For one year only, the department enrolled two starting classes (one first year and one junior class in addition to its existing senior class). Cap enrollment was now 72 students and 71 students were enrolled in the program.

To ease the transition to the 1 + 3 curriculum model, additional space was provided in the Paulsen facility. A small restorative lab was converted for additional locker room space, and a classroom/lab and student/faculty conference/study room were added on the third floor. Most didactic classes were now held in the Paulsen Building.

During the fall of 1995, the Department Dental Hygiene began the predesign phase for a new Health Sciences facility. This facility will be located at the Riverpoint Higher Education Park and would house the Departments of Physical Therapy, Department of Occupational Therapy, Communication Disorders and Dental Hygiene from EWU as well as other health related programs (pharmacy, nutrition, etc.) from Washington State University. A 45-chair dental hygiene facility is planned which would enable the department to accept 30 students in each class for a total enrollment of 90 students. The program is slated to move into the building August 2001.

In late May, 1998, the department received approval by the Higher Education Coordinating Board to offer a Bachelor of Science degree in dental hygiene to associate degree dental hygiene graduates. This program, in coordination with Clark College in Vancouver, Washington, enrolled 18 part time students in the fall of 1999. Gail Liberman of Clark College and Gayle Orton served as co-coordinators for this successful Expanded Degree Dental Hygiene Program.

2000’s

In July 1, 2000, Rebecca Stolberg became the new chair of the department upon retirement of Gayle Orton. Rebecca also serves as the co-coordinator, along with Brenda
Knutson at Clark College, for the successful Expanded Degree Program at Clark College, in its third year of existence.

On April 11, 2001 the Department was awarded permission to have additional Expanded Degree Programs at Shoreline Community College and Pierce College. Rebecca Stolberg, along with the help of Monica Hospenthal at Pierce, and Karen Barter, at Shoreline, directs all three Expanded Degree Programs. In 2003 the Pierce Program began offering the degree completion program via televideo and web-based coursework to Columbia Basin Community College and Yakima Valley Community College. A $60,000 grant, obtained by Rebecca Stolberg from Washington Dental Foundation, helped to purchase additional high tech equipment needed for the new Health Sciences Building.

The Dental Hygiene Department moved December 2002 into the new Health Sciences Building at the WSU/EWU Riverpoint Campus. This move included the addition of dental treatment units totaling 46, six radiography rooms with one using Schick Direct Digital, three intraoral cameras, a digital camera, a Perioscope®, EagleSoft dental software, and the Stagefront® Presentation Systems which allows for interactive simulation. With the new building came an increase from 72 total students in the program to 90 students total. A $60,000 grant, obtained by Rebecca Stolberg from Washington Dental Foundation, helped to purchase additional high tech equipment needed for the new Health Sciences Building.

In 2004 Rebecca Stolberg wrote a grant to the Higher Education Coordinating Board for High Demand Enrollment Dollars. A grant of $119,428 was received which allowed for 36 students in each class and one additional tenure-track faculty member.

In 2005 the Department began the Dental Team Experience (DTE) in which three 4th year dental students spend three weeks in our clinics working in a team environment with five dental hygiene students and eight dental assisting students from Spokane Community College. During this year discussions began for first year dental student education at Riverpoint. This project, Rural Initiatives in Dental Education (RIDE), would include eight dental students from the University of Washington with 20 medical students, taking their first year curriculum in Spokane; some courses with dental hygiene students.
VISION

As the state’s only four-year entry-level baccalaureate dental hygiene program, the Department of Dental Hygiene at Eastern Washington University has an outstanding reputation as the leading institution for dental hygiene education in the Northwest. This is further illustrated by the addition of three expanded degree completion programs on the West side of the state.

The dental hygiene program integrates a strong general and liberal arts education throughout the curriculum. Along with professional coursework, students are concurrently enrolled in upper division liberal arts enrichment courses including cultural diversity and international studies. A final capstone course studies problems of worldly significance and contributes to the development of students. The curriculum emphasizes problem solving and critical thinking skills and is linked to upper division general university coursework. As a result of students’ broad-based education, dental hygiene graduates possess exceptional communication skills as well as technical skills and are sought after by employers of the Northwest.

Graduates of Eastern’s Dental Hygiene program are well-known for their broad-based professional education. Not only are they recognized for their clinical competence, but their professional education has provided a sound basis for performing other services related to the health professions including research, industry, education, and public health. Many graduates are primary care providers, offering services to clients in underserved and/or rural areas. Graduates are exceptionally well skilled in oral and written communication and are known for their ability to function effectively in interdisciplinary and collaborative settings.

The dental hygiene clinic facility is well-known for its state-of-the-art clinic design and equipment. Communications and computer assisted instruction are enhanced by individual computer stations and video monitors located at each dental unit. State-of-the-art equipment including intraoral cameras, a dental simulation laboratory, Perioscopy® and digital radiography equipment serve to further establish this department as one of outstanding leaders in advanced education. This facility is also utilized by the dental community to provide dental care for underserved populations.

The dental hygiene clinic is a popular site for continuing education courses for dental hygienists, dentists, and other dental auxiliaries. Participants take part in hands-on coursework as well as learn to utilize computer assisted instruction to stay current in the field. The program is also providing distance learning to dental professionals. Dental hygienists from all areas of the state are enrolled in programs which allow students to obtain a Bachelor of Science in Dental Hygiene degree or a Masters in Dental Hygiene. Both on-site and distance learning modalities are available.
DEPARTMENT MISSION, GOALS AND STRATEGIC PLAN

Mission:

The Department’s mission is to educate baccalaureate dental hygienists to assume positions of responsibility. The faculty of the department are committed to creating a quality educational environment that will facilitate the development of responsible professionals who can function effectively in a constantly changing society.

Goals:

1. The Dental Hygiene Department will provide all students the skills necessary to function in a constantly changing society, an obligation of Washington’s only baccalaureate dental hygiene program.

2. The Dental Hygiene faculty are supported throughout their careers.

3. Dental Hygiene Students, faculty and staff impact the university, the region and the world.

4. The Dental Hygiene Department will grow resources to enhance the dental hygiene academic quality.
COMPETENCIES FOR EASTERN WASHINGTON UNIVERSITY
DENTAL HYGIENE GRADUATES

Introduction

Competencies stated in this document identify and organize the knowledge and skills our graduates must acquire to become competent and caring practitioners in the delivery of dental hygiene services in both public and practice settings.

By stating publicly what graduates must know and be able to do after completing our program, we establish a basis for the content of all courses. Competencies set the standards for identifying relevant course content and provide guidance in making decisions related to our pedagogy and course sequencing.

The degree to which our curriculum is relevant, complete, educationally sound, and well organized will be a direct reflection of this document and will be judged by its outcome results. Therefore, the department must also identify specific methods which will be used to measure the degree to which a student has acquired and can demonstrate the competencies needed to deliver dental hygiene services in all settings. Ultimately, the true measure of the value of competencies will be the quality of our graduates and the care they render to the clients they treat.

The competencies stated in this document should be viewed as dynamic standards, which must be responsive to any clear need for change. They are intended to serve as the “blueprint” for our dental hygiene curriculum. It is recognized and understood that this educational plan will require regular review for continual improvement.

Competency as an Educational Concept

This document has been organized around the concept of “competencies”. The term competent is defined as the level of special skill and knowledge derived from training and experience. Competencies can be more specifically described by several basic characteristics:

- a typical part of the practice of dental hygiene
- a combination of knowledge, attitude, psycho-motor skill and/communication skill
- performed at or above an acceptable level of defined standards

The term competency is not to be confused with specific instructional objectives. Specific instructional objectives define didactic, laboratory and clinical instruction, which imparts the information and experience that are prerequisite for satisfactory mastery of competencies. Specific instructional objectives are considered foundational abilities and define the student’s ability to use information and correctly answer specific questions when asked, for example, on an examination. They also are used to describe the student’s ability to following specific rules to produce acceptable results in standardized situations.
for example, charting periodontal readings and bleeding points. These specific instructional objectives should be based on the direct support of one or more of the competencies described in this document and may be found listed in individual course syllabi.

**Competencies Organization**

**Domains**

The general organization of this document (and ultimately our curriculum) is structured from the general to the more specific. Three major Domains have been identified:

- Client Care
- Health Promotion and Disease Prevention
- Professionalism

These three Domains represent broad categories of professional activity and concern, which occur in the delivery of dental hygiene services and care. By design, these categories are not related to specific courses within the curriculum at Eastern Washington University because that structure does not always reflect the scope of practice for the typical dental hygiene graduate. The concept of domains is intended to encourage an eventual structure and process in the curriculum, which is more interdisciplinary.

**Major Competencies**

Within each domain, Major Competencies are listed which involve that Domain’s activity or concern. A Major Competency is the ability to perform or provide a specific, yet complex, service or task. For example, “the dental hygienist must be able to systematically collect and accurately record baseline data on the general, oral and psychosocial health status of clients using methods consistent with medicolegal principles.” The complexity of this service suggests that multiple and more specific abilities are required to support the performance of any Major Competency.

**Supporting Competencies**

The more specific abilities are organized under each Major Competency and are referred to as Supporting Competencies. Examples of Supporting Competencies would include, “the ability to obtain, review, and update a complete medical, social, family, psychological, and dental history. The acquisition of the Major Competency, therefore, requires a mastery of all Supporting Competencies related to that particular service or task. Supporting Competencies required more specific abilities and knowledge. These specific abilities and knowledge are described as Specific Instructional Objectives and can be found in individual course syllabi.
The dental hygienist is a licensed preventive oral health professional who provides educational and clinical services in the support of oral health. The dental hygiene process of care applies principles from the basic sciences, humanities, social sciences, and dental hygiene sciences to diverse populations. These populations may include, but are not limited to, the medically compromised, the mentally or physically challenged and the socially, economically or culturally disadvantaged.

1. **Assessment:** The dental hygienist must be able to systematically collect, analyze and accurately record baseline data on the general, oral and psychosocial health status using methods consistent with medico/dentolegal principles and be able to appropriately counsel the client regarding these findings.

Specifically, the competent dental hygienist must:

1.1 Obtain, review, update and assess a complete, social, family, psychological, dental and medical history, including vital signs.

1.2 Recognize medical conditions, etiologic factors and risk factors that require special precautions or considerations prior to or during dental hygiene treatment.

1.3 Identify the client at risk for a medical emergency and be prepared to provide appropriate life support measures for medical and dental emergencies that may be encountered in dental hygiene practice.

1.4 Accurately record, assess, and analyze data gathered from the following procedures:

- Extra/intra oral exams
- Periodontal and dental exams, including indices
- Radiographic exposure
- Risk assessments (i.e. tobacco, systemic, caries)

and appropriately counsel the client regarding the findings within the scope of dental hygiene practice and law.

1.5 Recognize the need for referral to an appropriate health professional and make the referral within the scope of dental hygiene practice and law.

1.6 Identify the need for radiographs, specify the type and appropriately counsel the client regarding the need within the scope of dental hygiene practice and law.

1.7 Radiographically distinguish normal from abnormal anatomical findings and correlate these findings with the clinical exam.

1.8 Evaluate the diagnostic quality of radiographs and determine the measures needed to improve the quality if indicated.

1.9 Apply critical thinking and decision making skills in the collection, analysis, and recording of assessment data.

2. **Planning:** Having appropriately assessed the problems and/or conditions present, dental hygienist must be able to formulate an individualized dental hygiene care plan, providing recommended and alternative plans to the client.

Specifically, the competent dental hygiene graduate must:
2.1 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.

2.2 Develop a planned sequence of educational and clinical services based on the dental hygiene diagnosis and the motivations and desires of the client/family and/or guardian.

2.3 Within the scope of dental hygiene practice and law communicate the plan for health services to the client at his/her level of understanding and receive the client's implied and/or informed consent.

3. **Implementation:** The dental hygienist must be able to provide treatment including preventive, therapeutic, and restorative procedures to promote and maintain oral health and treat oral health diseases within the scope of dental hygiene practice and the law.

   Specifically, the competent dental hygienist must:

   3.1 Utilize and demonstrate current infection control procedures.

   3.2 Produce radiographs of diagnostic quality.

   3.3 Apply basic and advanced principles of dental hygiene instrumentation to remove deposits without trauma to hard or soft tissue.

   3.4 Safely control pain and anxiety during treatment through the use of accepted clinical techniques and appropriate behavioral management strategies within the scope of dental hygiene practice and the law.

   3.5 Select and administer appropriate chemotherapeutic agents, including fluorides.

   3.6 Provide appropriate health education, preventive, and nutritional counseling.

   3.7 Provide appropriate restorative procedures within the scope of dental hygiene practice and law.

   3.8 Implement appropriate measures to minimize occupational hazards in the work place.

   3.9 Provide appropriate dental hygiene care for the child, adolescent, adult, geriatric, and medically compromised client.

   3.10 Apply pit and fissure sealants, utilizing currently accepted procedures.

   3.11 Provide appropriate dental hygiene care for all types of classifications of periodontal disease including clients who exhibit moderate to severe periodontal disease.

   3.12 Identify the need for and perform coronal and selective polishing procedures safely and effectively.

   3.13 Safely and effectively care for oral prostheses, and instruct clients to maintain these appliances safely and effectively at home.

   3.14 Safely and effectively care and maintain dental restorations.

4. **Evaluation:** The dental hygienist must be able to evaluate the effectiveness of planned clinical and educational services, modifying the plan as necessary.

   Specifically, the competent dental hygienist must:

   4.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, and examination techniques.

   4.2 Determine the client’s satisfaction with the dental hygiene care received and the oral health status achieved.
4.3 Recommend to the client an appropriate continuing care system appropriate to the practice setting and to the individual client’s needs.

4.4 Subsequent to dental hygiene care, recommend to the client treatment needs and refer clients to other health professionals as appropriate.
DOMAIN #2: HEALTH PROMOTION AND DISEASE PREVENTION

The dental hygienist serves the community in both practice and public health settings. Public health is concerned with promoting health and preventing disease through organized community efforts, which is an important component of any interdisciplinary approach. In the practice setting, the dental hygienist plays an active role in the promotion of optimal oral health and its relationship to general health. The dental hygienist should, therefore, be competent in the performance and delivery of oral health promotion and disease prevention services in public health, private practice, or other alternative settings.

5. **Community involvement:** The dental hygienist must be able to initiate and assume responsibility for health promotion and disease prevention activities for diverse populations.

   Specifically, the competent dental hygienist must:

   5.1 Assess, plan, implement and evaluate community-based oral health programs, coordinating such programs with other interdisciplinary professionals.

   5.2 Provide dental hygiene services in a variety of settings, for example: hospitals, clinics, private offices, assisted living and extended care facilities, schools and community centers.

   5.3 Possess effective interpersonal and communication skills to effectively interact both verbally and in writing with diverse populations.

6. **Self-Care Management:** The dental hygienist must be able to promote healthy lifestyles and provide planned educational services using appropriate interpersonal communication skills and educational strategies.

   Specifically, the competent dental hygienist must:

   6.1 Promote preventive health behaviors.

   6.2 Identify the health needs of individuals and assist them in the development of appropriate, individualized, self-care regimens.

   6.3 Use appropriate interpersonal communication skills and strategies to encourage clients to assume responsibility for health and adherence to self-care regimens.
DOMAIN #3: PROFESSIONALISM

The competent dental hygienist provides care using sound professional judgment, skills and behaviors. The ADHA Code of Ethics serves as a guide to professional behavior. This professional behavior should be based on contemporary knowledge, and the dental hygienist should be capable of discerning and managing ethical issues and problems in community and practice settings. However, these settings may change as the dental hygienist experiences a rapidly changing environment. Regulatory action, economics, social policy, cultural diversity and health care reform frequently influence treatment, therapy and ethical issues. Additionally, dental hygiene is currently involved in the process of creating an identity unique to the profession, requiring the validation of its own knowledge base. Thus, the competent dental hygienist must have regular involvement with large and diverse amounts of information in order to be prepared to function in this dynamic environment.

7. **Ethics:** The dental hygienist must be able to discern and manage the ethical issues of dental hygiene practice in a rapidly changing environment.

Specifically, the competent dental hygienist must:

7.1 Articulate ethical principles relevant to dental hygiene and practice with personal and professional integrity.

7.2 Serve all clients and the community without discrimination, providing humane and compassionate care to all clients.

7.3 Articulate the steps in a model of ethical reasoning and apply this reasoning protocol to actual ethical dilemmas.

7.4 Identify and articulate cultural differences as they relate to the delivery of dental hygiene care.

7.5 Maintain honesty in relationships with clients, colleagues and other professionals.

7.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

8. **Information Management and Critical Thinking:** The dental hygienist must be able to acquire and synthesize information in a critical, scientific, and effective manner.

Specifically, the competent dental hygienist must:

8.1 Critically analyze and evaluate published reports of oral health research and apply this information to the practice of dental hygiene.

8.2 Evaluate the safety and efficacy of oral health products, methods, techniques, and treatments.

8.3 Demonstrate the ability to communicate professional knowledge verbally and in writing.

8.4 Demonstrate the ability to develop and articulate a thorough research design for a proposal.

8.5 Apply self-assessment skills to prepare the graduate for life-long learning.

9. **Professional Identity:** The dental hygienist must be concerned with improving the knowledge, skills, and values of the profession.

Specifically, the competent dental hygienist must:

9.1 Advance the profession through leadership, service activities and affiliation with professional organizations.

*Rev 8/13/00*
GOVERNANCE AND ADMINISTRATION OF THE DEPARTMENT

DEPARTMENT ORGANIZATIONAL STRUCTURE

The department’s organization structure consists of full- and part-time dental hygiene faculty and supporting classified staff. Classified staff report directly to the Department Chairperson (henceforth referred to as Department Chair or Chair).

Participation in Department Decision Making

All faculty and staff participate in decisions which affect the operation of the clinic and the educational program of dental hygiene students. All employees are encouraged to make suggestions and develop programs which enhance the smooth operation of the dental hygiene program, the dental clinic, and the clients and students we serve.

Budget Decision Authority

Budget decision authority ultimately rests with the Department Chair. However, the Operations Manager and Dental Clinic Supervisor also have authorized budget authority for the purchase of equipment and supplies which support the normal operation of the program and clinic. All other items purchased through the department require the signature of the Department Chair. Faculty and staff are encouraged to bring their requests to the Department Chair and dental hygiene faculty for consideration. Decisions regarding major purchases are brought up as agenda items at regular full-time faculty meetings and are voted on by faculty members. In the absence of the ability to call a short-notice faculty meeting, the chair has signature authority for major purchases.

Terminal Degree

The terminal degree for the dental hygiene profession is a Master’s Degree. Therefore, all full-time faculty must have a Master’s Degree or higher. Under rare circumstances a faculty member without a Master’s Degree may be appointed Special Faculty as long as she/he are currently attending, and showing progress in, a Master’s Degree program.

DEPARTMENT CHAIR

Selection: Selection of the Department Chair shall be in accordance with the procedures as outlined in the Collective Bargaining Agreement and the College Policies and Procedures of the College of Science, Health, and Engineering.

Term of Office: Term of office of the Department Chair shall be in accordance with the procedures as outlined in the Collective Bargaining Agreement and the College Policies and Procedures of the College of Science, Health, and Engineering.

Administrative Release Time: Administrative release time for the Department Chair shall be 75% of a full-time teaching load. According to Accreditation Standards of the
American Dental Association’s Commission on Accreditation, the Department Chair shall hold a full-time position within the Department of Dental Hygiene.

**Evaluation of the Chair:** Performance evaluation of the Department Chair shall be in accordance with the procedures as outlined in the Collective Bargaining Agreement and the College Policies and Procedures of the College of Science, Health, and Engineering. As a faculty member of the department, the Chair will also be evaluated annually by the Department Personnel Committee for his/her teaching performance.

**Role of the Department Chair:** The Department Chair is the chief administrative officer of the academic department and reports administratively to the dean of the college. The Chair is expected to provide effective leadership and management in the operation of the department within college and university policies and goals. The Chair is also expected to provide leadership to the department focused on achieving excellence in instruction and scholarship, as well as equity, and due process in department decision-making.

– Specifically, the Department Chair is expected to perform, in an effective manner, the following duties:

**Leadership**

1. Identify and lead the department in accomplishing department, college, and university goals
2. Represent the department to the college, the university and the community
3. Represent the college and the university to the department
4. Foster innovative teaching methods and curriculum development leading to improved student learning
5. Develop and implement processes to encourage and support scholarship and research
6. Support faculty, staff, and students in their responsibilities and professional development; encouraging initiative, innovation, and collegiality
7. Administer university policies and procedures including the Collective Bargaining Agreement. Administration includes the exercise of delegated university disciplinary authority and participation in the grievance process.
8. Support fund-raising and development efforts of the college and university
9. Establish and maintain positive, professional relationships with external constituency groups.

**Communication and Inter-Intra Personal Skills**
1. Be accessible to the administration, faculty, staff, and students for timely fulfillment of
the chair’s duties.

2. Establish positive, collegial working relations with all elements of the university

3. Facilitate open communication within the university

4. Improve alumni relationships by maintaining continuing relationships with students
who have left the university

**Fiscal Management**

1. Manage all departmental budgetary matters including budget requests, salary
enhancements, supply and equipment dollar allocations, expenditures, budget
planning, as well as those budget responsibilities associated with grants and contracts
within the department

2. Manage departmental inventory and equipment. This responsibility includes
periodically informing the dean as to the quality, adequacy, maintenance, repair and
replacement needs relating to departmental equipment.

**Program management**

1. Manage faculty workload in accord with department, college and university policy
and goals. This responsibility includes making student advising assignments and
instructional assignments of faculty, and the scheduling of academic year and
summer offerings of the department consistent with a student-centered university.

2. Develop and implement student recruitment, and retention programs for the
department. This would include programs such as methods of detecting early warning
signs of academic difficulties, adequate, student-oriented advising availability;
programs for contacting “stop-outs” or potential stop or drop outs; creating
opportunities for faculty-student contact outside of the classroom through student
organizations, speakers, or social events; cooperating with career planning staff; and
follow-up with alumni regarding placement or graduate school concerns

3. Oversee the development and execution of departmental programs and curricula

4. Respond to requests for information from the college, the university and the
community

5. Develop and execute the department’s end of program assessment(s). This would
include regular assessment of overall student satisfaction, and executing internal
and external program reviews, and incorporation of assessment results into program
or instructional changes.
6. Facilitate the maintenance of updated department course transfer equivalencies. When appropriate this will include responsibility for departmental information required for an automated degree audit system.

**Personnel Management**

1. Administer and coordinate all personnel processes relating to faculty and staff evaluation in accord with relevant policies, including the preparation and oversight of all faculty plans and statements of staff expectations, and evaluations.

2. Review quarterly, evaluations on all faculty from all university coursework offered by the department.

3. Facilitate faculty and staff development, i.e. personnel and professional development, service training, cross-training, awareness of various campus services.

4. Develop and/or update print and electronic promotional materials for the department’s academic programs.

5. Manage faculty and staff recruitment

6. Supervise departmental support staff, delegate staff work, and evaluate staff performance

7. Resolve conflicts within the department in a fair manner.

**Additional Commitments**

The Chair generally teaches 1 didactic course per year, teaches in pain control lab, preclinics, and clinics as needed, and is active on campus governing committees. The Dental Hygiene Department Chair also Co-Directs three Expanded Degree Programs on the West side of the state; at Pierce College, Clark College and Shoreline Community College. The Department Chair performs all advising for students in these three programs and teaches a web-based course every other year to these students. The Chair has no split appointment with other departments.

**ADMISSIONS AND RECRUITMENT ADVISORS**

**Selection:** Selection of individuals who will serve in the capacity of admissions and recruitment advisor is the primary responsibility of the Department Chair in consultation with full and appropriate part-time faculty. Selection of advisor(s) will be based upon appropriate experience and familiarity with university admissions procedures and dental hygiene prerequisite coursework. Dental hygiene advisors must possess appropriate communication skills to best represent the department.

**Responsibilities:** The responsibilities of advisor(s) include(s) advising predental hygiene students of the requirements for admission into the dental hygiene program as well as admission to the university. Preparing current information packets, recruitment brochures, and transfer sheets will also be the responsibility of advisors. Advisors will
have the primary responsibility of applying the admissions criteria and policies as established by the Admissions and Advising Committee. In addition, advisors are required to follow the Department’s Philosophy on Teamwork/Interdependence.

**Administrative Release Time:** Administrative release time for this (these) position(s) will be determined by the Department Chair in consultation with full-time faculty of the Department of Dental Hygiene. Administrative release time will be based on the time and level of responsibilities expected of the position(s).

**CLINIC COORDINATOR**

**Selection:** Selection of the Clinic Coordinator is the primary responsibility of the Department Chair in consultation with full and appropriate part-time faculty. Selection of Clinic Coordinator will be based upon appropriate experience in clinical dental hygiene procedures and the ability to plan and coordinate the complete clinical dental hygiene curriculum.

**Responsibilities:** The primary responsibility of the Clinic Coordinator is to oversee general operations of clinical courses and coordinate clinical activities with the clinical course directors. Specific responsibilities of the Clinic Coordinator will be outlined in writing and reviewed by full-time faculty. Significant modifications will be approved by mutual agreement between the Clinic Coordinator, the clinical course directors, and full time faculty. In addition, the clinic coordinator is required to follow the Department’s Philosophy on Teamwork/Interdependence.

**Administrative Release Time:** Administrative release time for this position will be determined by the Department Chair in consultation with full-time faculty of the Department of Dental Hygiene. Administrative release time will be based on the time and level of responsibilities expected of this position.

**CLINICAL COURSE LEADS**

**Selection:** Selection of the clinical course leads is the primary responsibility of the Department Chair in consultation with full and appropriate part-time faculty. Selection of clinical course leads will be based upon appropriate experience in teaching clinical dental hygiene procedures.

**Responsibilities:** The primary responsibility of clinical leads is to plan and coordinate the clinical activities of the respective student classes. Scheduling and assignment of topics for workshops, lectures, discussions, inservice of part- and full-time faculty members, and all clinic activities will originate with the clinical course lead. Clinical leads must calibrate with other clinical leads concerning student preparation so students are ready to advance to the next level. It is the leads responsibility to ensure that the student has reached a competency level to advance to the next level, quarter, and/or year. Clinic course leads are also responsible for reviewing, assessing, and supplying information for ordering all clinic supplies and equipment including student issue. Modifications will be approved by mutual agreement with clinical leads, the Clinic Coordinator, and Department Chair. In addition, clinical course leads are required to follow the Department’s Philosophy on Teamwork/Interdependence.
RESTORATIVE LEAD INSTRUCTOR

Selection: Selection of the Restorative Lead instructor is the primary responsibility of the Department Chair in consultation with full and appropriate part-time instructors. Selection of Restorative Lead instructor will be based upon appropriate experience in expanded functions restorative procedures. In addition, the restorative lead is required to follow the Department’s Philosophy on Teamwork/Interdependence.

Responsibilities: The primary responsibility of the Restorative Lead instructor is to oversee the general operations of the restorative aspects of the curriculum. The Restorative Lead instructor is responsible for coordinating the activities and inservice all restorative lab instructors. It is the restorative lead responsibility to ensure that the student has reached a competency level to advance to the next level, quarter, and/or year. The restorative leads must also review, assess, and supply information for ordering all restorative clinic supplies and equipment including student issue. Modifications will be approved by mutual agreement with clinical lead instructors, the Clinic Coordinator, Restorative Lead instructor, Dentist Lead, and Department Chair.

Administrative Release Time: Administrative release time for this position will be determined by the Department Chair in consultation with full-time faculty of the Department of Dental Hygiene. Administrative release time will be based on the time and level of responsibilities expected of this position.

DENTIST LEAD INSTRUCTOR

Selection: Selection of the Dentist Lead instructor is the primary responsibility of the Department Chair in consultation with full and appropriate part-time instructors. Selection of Dentist Lead instructor will be based upon appropriate experience in dental procedures and supervising capabilities.

Responsibilities: The primary responsibility of the Dentist Lead instructor is to oversee all dentists who supervise the dental hygiene students. The Dental Lead instructor is responsible for coordinating the activities and in servicing all supervising dentists. The dentist lead must act as a consultant to restorative lead for ordering clinic supplies and equipment. The dentist lead must also review, revise and update the Supervising Dentist Manual. Modifications will be approved by mutual agreement with clinical lead instructors, the Clinic Coordinator, Restorative Lead instructor, and Department Chair. In addition, the dentist lead is required to follow the Department’s Philosophy on Teamwork/Interdependence.

Administrative Release Time: Administrative release time for this position will be determined by the Department Chair in consultation with full-time faculty of the Department of Dental Hygiene. Administrative release time will be based on the time and level of responsibilities expected of this position.
ADJUNCT POSITIONS

In accordance with the CBA, II-23,g.i, adjunct is a rank for appointees who are: 1) identified primarily with institutions or other activities outside the University and who participate in University affairs for only a small fraction of their time, or 2) are specially qualified individuals who agree to assist with institutional research programs with nominal or no stipend.

Recommendations for adjunct appointments are sent to the dean from the Department Chair following department concurrence and must include the reasons for the adjunct position and a comprehensive vita on the prospective candidate. In addition, adjunct instructors are required to follow the Department’s Philosophy on Teamwork/Interdependence.

GRADUATE FACULTY (the following section is provided as a mandatory section of the Department Policies and Procedures according to the College Plan. The Department of Dental Hygiene currently does not have any graduate faculty needs)

Faculty that excel in scholarship, teaching, and research are essential for graduate education. The title of Graduate Faculty recognizes the particular professional role in graduate education.

Graduate Faculty status allows faculty to teach graduate courses, serve on graduate committees, direct master’s theses, or chair master’s committees.

At Eastern Washington University, the Graduate Faculty are responsible for conducting graduate education. Faculty members are eligible for recommendation for Graduate Faculty status if they:

1. Have demonstrated competence in teaching, scholarship, research or artistic creation, and/or skills appropriate to the faculty member’s special field within the five year period preceding the nomination; and

2. Hold an earned doctorate; or hold a degree other than the doctorate recognized by the faculty in their academic department as a terminal or professional degree; or are endorsed by their departmental colleagues as having unique qualifying skills or experiences needed by the department.

To attain Graduate Faculty status, the faculty member must be recommended through the appropriate Department procedure. The departmental standards and procedures used for recommending faculty for Graduate Faculty status must be approved by the appropriate college/school dean and be on file with the Office of Graduate Studies and Faculty Development. These procedures should include the procedures to be followed within a department or college/school to revoke Graduate Faculty status. The departmental standards and procedures within a college or school normally should be consistent across departments. The Department forwards the list of recommended faculty, along with a curriculum vita for each faculty member recommended, to the office of Graduate Studies and Faculty Development.
The Policy Development and Review subcommittee of the Graduate Affairs Council, except for the Graduate Dean, will evaluate the vitae of the faculty recommended for Graduate Faculty status and forward a recommendation to the Dean of Graduate Studies. The Graduate Dean will review all evidence submitted and approve appointments to the Graduate Faculty.

A faculty member who is denied Graduate Faculty status by either the department/program, college/school, graduate Affairs Council subcommittee or graduate Dean can request a review by the Graduate Affairs Council subcommittee and the Graduate Dean.

Appointments to the Graduate Faculty are reviewed every three year. Part-time and adjunct faculty must follow the above procedures on an annual basis.

The Graduate Dean has authority to review exceptions to the criteria and grant status to the applicant if a proven benefit to the Department is demonstrated in the department’s recommendation.

PROFESSOR EMERITI

Selection: Tenured faculty who are eligible for retirement under University Policies and Procedures may be recommended by the Personnel Committee of his/her employing department, the Department Chair, the Dean, the Chief Academic Officer or the President for emeritus status awarded by the Board of Trustees in recognition of service to his/her department, college or the University.

If this recommendation is initiated in the Department, a vote will be taken by all full-time faculty members, or shared full-time positions, during a regular faculty meeting. If the vote is positive, a recommendation will be forwarded to the Dean from the Department Chair for approval.

DEPARTMENT STANDING COMMITTEES

Responsibilities

Full-time faculty of the Department of Dental Hygiene are expected to share in the responsibility of various administrative functions within the department and actively participate in department decision making. All full-time faculty, and shared full-time positions, are eligible to vote in departmental elections. Each full-time faculty member is expected to participate in at least two or more of the following Departmental Committees and attend regular full-time faculty meetings. Full-time faculty, shared full-time positions, and faculty who share an appointment with another department will be expected to share a proportional amount of responsibility in committee responsibilities and attend faculty meetings. Additional committees, including ad hoc committees, may be added as the need arises. A brief description of each committee follows:

- Admissions - Members of this committee include admissions and recruitment advisors as well as other full-time faculty members. Members of this
committee are responsible for the annual review of admissions criteria, evaluation of applicants’ files (as requested by the advisors) and provide assistance in planning and implementing recruitment activities. The Chair is a standing member of this committee.

- Academic Achievement and Misconduct - The primary purpose of this committee is to review and update the Department of Dental Hygiene’s Academic Achievement and Misconduct Policy, conduct interviews and conferences with students placed on academic probation (as outlined in the policy) and/or conference students placed on probation for professional misconduct. The Chair is a standing member of this committee.

- Curriculum Development - All full time faculty and shared full-time positions have major responsibility for contributing to the ongoing development of the dental hygiene curriculum and as such, all full-time dental hygiene faculty are members of this committee. Primary responsibilities include reviewing course syllabi, coordinating the curriculum and specific course topics with other faculty members, and provide major assistance to the chair in writing the Self-Study Report for the Commission on Dental Accreditation.

- Assessment/Outcomes - Members of this committee assist the Department Chair in the development of outcome assessment measures and in the analysis of the results of assessment findings. Other duties include participating in senior exit interviews, and distributing outcome surveys. The Chair is a standing member of this committee.

- Library - Responsibilities of the Library Committee includes maintaining files of potential library requests, submitting yearly library requests, analyzing department library needs, and facilitating the acquisition of library resources.

- Department Personnel (DPC) - Members of the Personnel Committee, as well as the Department Chair, have the major responsibility in evaluating faculty members for retention, tenure and promotion. Additionally, members review Faculty Activity Plans, and provide counsel for future faculty needs and recruitment. All recruitment decisions, promotions and Tenure-Track decisions are coordinated through this committee. The Department Personnel Committee is made up of a minimum of three tenured faculty who, where possible, hold a rank at or above that of the person being considered. If three tenured faculty do not exist within the department, a tenured faculty member from another related discipline in the College will be asked to participate.

- Infection Control, Waste Management and Safety - Members of this committee are responsible for maintaining an accurate, complete and comprehensive Infection Control Manual. Members assure that the department is meeting local, state, and national policies and is in compliance with the Occupational Safety and Health Administration (OSHA) and Washington Industrial Safety and Health Administration (WISHA)
requirements and recommendations. The Dental Clinic Supervisor, Department Chair, and Clinic Coordinator are standing members of this committee.
PERSONNEL POLICIES:

CLASSIFIED STAFF

Decisions regarding present and future classified staff needs rest with the Department Chair and full-time faculty members in consultation with the college dean. Personnel decisions should advance the vision, goals and objectives of the Department of Dental Hygiene.

The primary responsibility of all classified staff is to enhance and support the goals and objectives of the Department of Dental Hygiene which includes supporting dental clients, students and department faculty. Under the supervision of the Department Chair, each member of the classified staff is expected to support the dental hygiene program by providing a positive environment for faculty, students, clients, and prospective students. The specific role and responsibilities of each classified staff are kept on file with the Department Chair and reviewed at least annually with the respective classified staff member. Modifications to the list of duties and responsibilities will be made as needed and in consultation with all affected parties.

The Department of Dental Hygiene will otherwise adhere to the policies and procedures governing classified staff as outlined by university policy and procedures as well as the Science, Health and Engineering College Policies and Procedures.
PERSONNEL POLICIES:

FACULTY

RESPONSIBILITIES

Supervising Dentists - The primary responsibilities of supervising clinical dentists are outlined below. This list is reviewed by clinical course lead(s), the restorative lead, the dentist lead, and the clinic coordinator.

1) Authorize and/or prescribe all appropriate client services based on the individual client's current needs, length of time since last dental exam, medical history, etc. Taking these factors into consideration, prescribe the necessary initial services after discussing the case with the clinical faculty and the student.

2) Perform a complete oral examination of each client utilizing the diagnostic work-up prepared by the student. Diagnose and refer clients to Eastern Washington University Clinic or other health care provider(s) for appropriate treatment.

3) Discuss the examination findings with the client, student, and/or clinical faculty.

4) Sign the appropriate form(s) for treatment, evaluation, diagnoses and/or referral and follow-up to confirm that the diagnosis and recommendations are properly documented.

5) Be present at the beginning of clinic and until the last client is dismissed.

6) Be responsible for emergency management.

7) Determine and prescribe appropriate drug therapy for the clinical clients.

8) Determine (or review) the restorative treatment plan for each restorative client. Supervise the dental hygiene student's restorative treatment of the client. Prepare the teeth for the restoration. Supervise and evaluate the student's completion of the restoration.

9) Evaluate the restorative treatment done by the student according to the criteria established for clinic. Give objective evaluation (verbal and written feedback) to each student to document and reinforce the students' learning experiences.

10) Be familiar with the Dental Hygiene Department Clinic Policies and Procedures Manual. Follow department policies at all times.

11) Interact with the students and clients for the benefit of the client's oral health care.

12) Assist in developing guidelines, policies and procedures which affect the function of the EWU Dental Hygiene Clinic.

13) Maintain current certification in Health Care Provider Basic Life Support (at least every two years) providing the Department Chair with a copy of the certification.

14) Maintain a current Washington State Dental license, providing the Department Chair with a copy of the license.

15) Document compliance with hepatitis B vaccination or sign a declination form.

16) Document yearly tuberculosis skin testing, or sign a declination form.
**Dental Hygiene Clinical Instructors/Professors** - The primary responsibilities of the dental hygiene clinical professors are as follows:

1) Be familiar with clinic course syllabi, particularly with regards to clinic requirements.
2) Be knowledgeable of the content in the Clinic Policies and Procedures Manual, providing suggestions for future editions of the manual.
3) Be prompt in attending assigned clinical sessions.
4) Assist students in supervising clinic check in and check out procedures in a timely manner.
5) Be responsible for planning and implementing assigned stations for clinic workshops.
6) Attend regularly scheduled faculty inservice meetings.
7) Meet annual continuing education requirements for relicensure (i.e. 15 hours continuing education/year). Provide instruction utilizing current scientific methods and principles.
8) Maintain current certification in Health Care Provider Basic Life Support (at least every two years), providing the Department Chair with a copy of the certification.
9) Maintain current Washington State Dental Hygiene license, providing the Department Chair with a copy of the license.
10) Document compliance with hepatitis B vaccination or sign a declination form.
11) Provide written and oral feedback to students, evaluating their clinical performance in an objective and positive manner.
12) Interact with the students and clients for the benefit of the client's oral health care.
13) Maintain current membership in one’s professional association (i.e. American Dental Hygienists’ Association, American Dental Association).
14) Document yearly tuberculosis skin testing, or sign a declination form.

**Didactic Dental Hygiene Course Instructors/Professors** - The primary responsibilities of didactic course instructors who teach dental hygiene courses are as follows:

1) Develop individual course outlines which shall be distributed to students the first week of the quarter. Each course outline shall follow accreditation standards and include at least the following:
   - course description
   - course texts and other instructional materials
   - course hours
   - office hours (part-time faculty, by appointment)
   - general course objectives with matching competencies
   - specific instructional objectives
   - learning activities to achieve objectives
   - course requirements
   - course evaluation (grading criteria, including weighting of course grade)
   - topical course schedule (include amount of time for each topic)
2) Attend class regularly and on time.
3) Develop, coordinate, and teach appropriate course content so students can easily move to the next quarter, course, and/or level.

4) Coordinate, with the front office staff, distribution of faculty course evaluation forms to students near the end of each course. Faculty members cannot be present when their course is being evaluated.

5) Uphold the department standards of excellence in teaching (see Faculty Evaluation section of this document).

6) Follow departmental policy regarding distribution of course grade points. All didactic and clinical faculty shall utilize the following distribution schedule for course grades:

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7) Inform Department Chair as soon as a final grade of 1.9 or lower is assigned any dental hygiene student.

8) Maintain current knowledge in the faculty member’s specialty area as determined by their activity plan or recommendations made by DPC and/or Department chair. Each faculty member who teaches dental hygiene courses is expected to provide documentation, when requested, that he/she has maintained currency in his/her area of specialty and has met annual continuing education requirements for licensure (i.e. 15 hours continuing education per year, 21 hours for dentist).

9) Maintain current membership in one’s professional association (i.e. American Dental Hygienists’ Association, American Dental Association).

**Didactic Non-Dental Hygiene Course Instructors/Professors** - The primary responsibilities of didactic course professors/instructors who teach courses outside the Dental Hygiene Department are as follows:

1) Develop individual course outlines which shall be distributed to students the first week of the quarter. Each course outline shall follow accreditation standards and include at least the following:
   - course description
• course texts and other instructional materials
• course hours
• office hours (part-time faculty, by appointment)
• general course objectives with matching competencies
• specific instructional objectives
• learning activities to achieve objectives
• course requirements
• course evaluation (grading criteria, including weighting of course grade)
• topical course schedule (include amount of time for each topic)

2) Attend class regularly and on time.

3) Distribute faculty course evaluation forms to students near the end of each course. Evaluation forms must be collected by someone other than the course instructor and delivered to the Department Chair. Faculty members cannot be present when their course is being evaluated.

4) Uphold the Dental Hygiene Department and College standards of excellence in teaching (see Science, Health, and Engineering College Policies and Procedures as well as the Faculty Evaluation section of this document).

5) Maintain a regular consultative relationship with appropriate program director or Department Chair.

6) Maintain current knowledge in the faculty member’s specialty area as determined by the Department Personnel Committee and Department Chair(s) in yearly evaluation meetings. Each faculty member is expected to provide documentation that he/she has maintained currency in his/her area of specialty when requested.

7) Maintain current membership in one’s professional association.
Distribution of Workloads, Assignments, and Other Responsibilities

All faculty, whether Special Faculty, probationary track or tenured, are expected to comply with the policies and procedures as outlined in the Eastern Washington University’s Policies and Procedures Manual, the EWU Faculty Handbook, the College of Science, Health, and Engineering College Policies and Procedures, and the Dental Hygiene Department Policies and Procedures.

The Dental Hygiene Department Chair, in consultation with dental hygiene faculty, will be responsible for determining workloads, assignments and other responsibilities including summer quarter responsibilities. Every attempt will be made by Department Chair to equalize the teaching load and responsibilities of faculty members.

The primary consideration for assigning teaching responsibilities and workloads will be the department’s mission, goals, and objectives. Other considerations include department needs, faculty expertise, faculty availability, areas of interest, and stipulations of the Collective Bargaining Agreement. In distributing teaching assignments and responsibilities, the following unique demands of the department should be considered: (1. Most courses are taught in single sections once per year; (2. Clinic and laboratory courses require extensive data processing, student counseling and contact hours; (3. Large numbers of part-time clinical instructors require regular faculty inservice; (4. Large numbers of transfer students require extensive admissions and advising responsibilities; and (5) The clinic facility mandates additional operational duties (e.g. overseeing maintenance and reporting of equipment malfunctions, identifying clinic needs, etc.)

Distribution of teaching loads will be determined based on the following:

1. Recommended yearly contact hours of 45 will be given to special faculty.

2. Recommended yearly contact hours of 36 will be given to tenure-track faculty.

It is expected that teaching loads and responsibilities will be assigned to give probationary and tenure track full-time faculty members a variety of didactic classes, laboratory/clinical classes and other responsibilities as dictated by the unique demands and skills/interests of the faculty member as well as of the department. For the academic year, the suggested range of department responsibilities for regular full-time faculty is as follows:

- didactic course assignments - 2 to 7 hours per week
- clinic and/or laboratory assignments - 3 to 12 hours week (each lab or clinic is 3 to 4 hours in length; 3 hour for pre-clinic, 4 hours for 2nd year, 3 hrs. for 3rd year.)
- administrative responsibilities related to department needs - 2 to 20 hours per week
- student counseling responsibilities - 1 to 2 hours per week
- class preparation - 6 to 13 hours per week
- committee responsibilities - 2 to 4 hours per week
- research and/or service - 4 hours per week
• extramural (dental-related) employment - 4 to 8 hours per week

Statement of Department Philosophy: Interdependence/Teamwork

Faculty members of the Department of Dental Hygiene value interdependence and teamwork. Faculty members provide important role models for dental hygiene students who are involved in a curriculum which encourages students to function as team members in the delivery of care and services. As such, they should demonstrate interdependence and teamwork while working with fellow colleagues, students, and staff.

All course content taught in the department are interdependent on each other. It is critical that each faculty member’s course is taught to a level of understanding or knowledge that will allow the student to advance comfortably to the next level or course. Additionally, it’s critical that faculty members coordinate course content and activities with other faculty members who will depend on his/her instructional content.

The department faculty describes interdependence as teamwork, cooperation and synergy produced by a spirit of trust and mutual respect. The following criteria exemplify the interdependence and teamwork:

• willingness to be flexible in considering/accepting change and department goals
• demonstration of a team spirit by maintaining a positive attitude and supportive of other faculty members
• trustworthy, cooperative, and respectful to peers, staff, clients, and students
• consistently demonstrating accountability and upholding policies, department mission and goals
• maintains currency in one’s subject areas which is reflected in his/her course content and activities
• participates and cooperates in department decisions, policies, goals and development
• demonstrates effectiveness and willingness to work with other faculty members to coordinate classes, activities, and curriculum
• demonstrates effectiveness in teaching appropriate class content so the student can advance to the next course and/or activity
FACULTY EVALUATION:

TEACHING EVALUATIONS

Faculty will be evaluated for retention, tenure and/or promotion utilizing department, college and university procedures. Faculty evaluations will be conducted in coordination and recognition of university, college and department mission, goals, and objectives.

Faculty members will be evaluated periodically using the established criteria and procedures outlined in this document and their activity plan. For full-time faculty or special faculty members, criteria and expectations for teaching performance, service, and scholarly/research activities will be outlined in their individual activity plan.

Evaluation of faculty teaching performance may be based on a variety of sources, including outcomes measurements (e.g. alumni surveys, national board results, etc.), student evaluations and comments, and peer evaluations. Student and peer evaluations will follow the guidelines and protocol outlined below and in individual Activity Plans.

Documentation of Activity Plan
As evidence of continual improvement of teaching methods, all full-time faculty, as well as faculty in a shared full-time position will be expected to create and maintain documentation of his/her activity plan. This documentation will describe teaching responsibilities, educational philosophy, and resulting teaching methods in accordance with the guidelines set forth in the Dental Hygiene Department Policies and Procedures and individual Activity Plan. Documentation of the activity plan will be submitted to the Department Chairperson May 1 of each year. This will aid in the Department Chair submitting a memo pertaining to the review to the faculty member as well as to the DPC Chair October of the same year. The activity plan documentation may be submitted more frequently if requested by the DPC or Department Chair.

Each faculty member’s documentation will follow the exact outline of his/her activity plan—inserting the achievements immediately following each section of the activity plan that they pertain to. New faculty should review tenured faculty’s documentation of the activity plan as samples.

Student Evaluation Policies
The faculty of the Department of Dental Hygiene have recognized teaching excellence as their most important responsibility. One of the methods of assessing teaching effectiveness is student evaluations. Both full and part-time didactic faculty members are expected to provide an opportunity for students to voluntarily assess teaching effectiveness and other aspects of course evaluation near the end of each didactic course. Faculty teaching effectiveness in clinic and laboratory courses will be evaluated by students at least once a year. Evaluation forms must be handed out and collected by a classified staff and promptly delivered to the chair upon completion.
The Department Chair shall be the first person to review all student evaluations of faculty members for each didactic, laboratory, and clinical course taught. Following the chair’s review, student evaluations of laboratory and clinic course instructors will first be reviewed by the Clinic/Dentist/Restorative Lead instructors. Following his/her review, the evaluations will be delivered to the respective clinical course directors, and/or the individual faculty member.

Under the supervision of the Department Chair, department staff are responsible for computing averages for all student evaluations of all faculty members. These averages are then forwarded to the Department Chair. The Department Chair will advise the Clinic/Dentist/Restorative Lead if a part-time faculty member’s average does not meet the department standards (see below). Clinic/Dentist/Restorative Lead assume responsibility for conferencing clinic/restorative faculty for the purpose of enhancing teaching effectiveness.

The Department Chair will conference all full time faculty, as appropriate, for the purpose of enhancing teaching effectiveness. Averages for the four basic evaluation statements (see below) will be displayed on a matrix by the Department Chair and will be distributed to each didactic faculty member at the end of each quarter. Names of individual faculty members will not be listed on the matrix.

All faculty members are responsible for filing, organizing, and securing their respective student evaluation forms for merit, retention, tenure, and promotion purposes.

Student evaluation forms for all didactic courses may be individualized by faculty as appropriate but must include at least the following four evaluation statements:

1. The course as a whole was:
2. The course content was:
3. The instructor’s contribution to the course was:
4. The instructor’s effectiveness in teaching the subject matter was:

The following scoring system will be used: 1=Excellent, 2=Very Good, 3=Good, 4=Fair, 5=Poor, and 6=Very Poor.

Student evaluation forms for all clinic and laboratory courses may be individualized by faculty as appropriate but must include at least the following four evaluation statements:

1. The laboratory as a whole was:
2. The laboratory content was:
3. The instructor’s contribution to the course was:
4. The instructor’s effectiveness in teaching the subject matter was:

The following scoring system will be used: 1=Excellent, 2=Very Good, 3=Good, 4=Fair, 5=Poor, and 6=Very Poor.

At a minimum, the following guidelines for student evaluations must be followed:
1. In order to fulfill department expectations for teaching effectiveness (and thus retention), all faculty members are expected to maintain a minimum mean score of 2.5 for questions 1, 2, 3, and 4 for all courses taught during the academic year (i.e., pooled academic year average).

2. In addition, all faculty members are expected to maintain a minimum average of 3.0 (good) for questions 1, 2, 3, and 4 above for all student evaluations for each individual course (i.e., mean average for each course).  

Student comments on evaluation forms are encouraged and should be submitted with the student evaluation forms. These comments are used as qualitative data in the evaluation of the course and instructor's teaching effectiveness during faculty performance reviews and/or during individual conferences with the Department Chair or clinic/lab lead instructor.

With regards to the standards for student evaluation, faculty members must follow the criteria outlined in their individual Activity Plan. Additionally, if the faculty member does not meet criteria 1 and 2 below, the faculty member must discuss her/his teaching effectiveness with the Department Chair. The faculty member will also be expected to develop a written plan to improve individual teaching methods and may wish to select a faculty person to assist in improving the faculty member's teaching effectiveness. This plan will be submitted to the department and DPC chairpersons.

**Part-Time Faculty Evaluation**

Since part-time faculty who do not have Activity Plans, the DPC and/or department chair may establish criteria for evaluating teaching performance. The student evaluation criteria used for full-time faculty will be followed.

**Peer Evaluation Policies**

Peer performance evaluations of all full-time or special faculty members will be conducted periodically in accordance with their individual Activity Plans. Generally depending on the need, for full-time or special faculty, peer evaluation will consist of at least one classroom observation each year by a full-time faculty member. The classroom observation and peer evaluation would be done by a faculty member within the department of the person being evaluated. Upon permission by the DPC and Department Chair someone from another department may do peer evaluation. For classes taught outside the Dental Hygiene Department, the DPC chairperson shall be consulted regarding the choice of peer evaluator.

Each faculty member is responsible for initiating the peer evaluation process and contacting the peer evaluators. The DPC and/or Department Chair may select the person to conduct a peer evaluation for the faculty member.

The Department Chairperson or DPC Chairperson can initiate the peer evaluation process if the student evaluations and feedback do not meet department standards.

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1 Note: These minimum averages become more stringent for promotion to associate and full professor and for retention of faculty associates. See Standards for Promotion - Teaching Excellence in subsequent sections of this document.
Normally, the faculty member will be consulted prior to a peer evaluation. If pertinent, the Department Chair is expected to provide the DPC with assessment information regarding the faculty member who is being evaluated.

The Classroom Faculty Peer Performance Evaluation document is the standardized form that will be used in the Department of Dental Hygiene to evaluate faculty performance in the area of teaching effectiveness, curriculum development and/or development of teaching methods. Other types of evaluation methods can also be used to supplement the peer evaluation. Faculty members may be required to use other evaluation methods as outlined in their Activity Plans or as indicated by the DPC or Department Chair.

If a faculty member receives a peer evaluation rating higher than 3 in a section, the evaluator will be required to provide specific comments to the faculty member. The faculty member being evaluated will be asked to sign the peer performance evaluation document, but this signature does not necessarily indicate agreement with the evaluation. The faculty member being evaluated has the option to meet with the peer evaluator(s) to discuss the evaluation. If major deficiencies are noted, the faculty person must develop a plan approved by the department and/or DPC chair to improve his/her teaching effectiveness. At any time, the DPC or Department Chair have the right to see the Faculty Peer Performance Evaluation form and the faculty member’s plan to improve his/her teaching effectiveness and performance. While faculty colleagues are committed to assisting other faculty members with their teaching performance, it is the individual faculty member’s responsibility to continually assess his/her teaching performance and to develop methods for improving performance, and to seek assistance as necessary.

Depending on need, the DPC or Department Chair may ask to have a curriculum/course content/teamwork peer evaluation done on specific courses a faculty teaches. In this case the evaluator may assess syllabi, course objectives, activities, or other pertinent information to evaluate course content, curriculum development, teamwork, and calibration. A standardized Course or Curriculum/Professional/Teamwork Peer Evaluation form is used for this type of evaluation.
FACULTY EVALUATION:

STANDARDS FOR RETENTION, TENURE, AND PROMOTION TO ASSOCIATE PROFESSOR

Purpose: The Activity Plan will inform and guide the faculty member as to the requirements of his/her position and to achieve retention, tenure and/or promotion. Activity Plans will serve as a guide for department expectations in order to obtain a positive recommendation for promotion to associate professor. Each Activity Plan is to be tailored to the unique skills and or assignments of the individual faculty member as well as the current needs of the department. Each Activity Plan will specify the time period it will cover.

Who/When: All probationary and tenured faculty at the assistant professor rank will have a written individualized Activity Plan approved no later than the conclusion of the first academic quarter of employment. Reviews of the activity plan will follow time frames outlined in the Collective Bargaining Agreement. The plan may be modified at the time of the renewal dependent upon department needs.

Development: Activity Plans will be drafted by the individual faculty member in collaboration and agreement with the Department Personnel Committee (DPC) and Department Chair (or dean, if the member holds the chair position). Individual roles and goals will contribute to the department’s vision, mission and strategic plan. Adjustments to the plan must be mutually agreed upon by the faculty member, Department Chair, department personnel committee, and the dean.

Approval: Following review and approval by the Department Personnel Committee and Department Chair, the Activity Plan will be forwarded to the College Personnel Committee and dean for approval. At any point, the Activity Plan may be returned to the faculty member for revision. Final approval of the Activity Plan rests with the College Personnel Committee and ultimately with the dean.

Review: A specific timetable and evaluation procedures will be followed as outlined in his/her Activity Plan. Before the faculty member starts their written performance documentation of their activity plan, they must consult with the DPC Chair on the format for the review. As needed, the faculty member will provide the Department Chair (or dean, if the member holds the chair position) and/or the Department Personnel Committee (DPC) necessary information as outlined in his/her Activity Plan. For each year of employment, recommendation on retention, and guidance on meeting expectations will be given to the faculty member. A copy will be signed by the faculty member and kept in her file. These assessments are meant to give the faculty member guidance towards her/his retention and promotion, however; it is entirely the faculty member’s responsibility to assess her/his progress and seek assistance towards meeting her/his Activity Plan expectations. At request anytime the DPC, Department Chair, Dean or faculty member, the DPC may review the person’s progress toward her/his Activity Plan.

Qualifications, Expectations, and Criteria: Faculty Activity Plans will follow the requirements, standards, procedures, and criteria as outlined in the Science, Health, and Engineering College Policies and Procedures and Department Policies and Procedures.
Activity Plans will assist the department in enhancing its vision, mission, goals, and strategic plan. Each plan must follow the guidelines outlined below for teaching effectiveness; scholarship/research and professional activity; and service. Faculty members are referred to appropriate sections of this Department Policies and Procedures for guidelines in the development of their plans.

Qualifications for professional rank are determined by each department in accordance with the conditions stated in the Collective Bargaining Agreement, EWU Policies and Procedures and in the Science, Health, and Engineering College Policies and Procedures.

Since courses and activities are interdependent it is of highest priority that faculty follow the Department’s philosophy for Interdependence/Teamwork. Specific objectives for each area are outlined in individual Faculty Activity Plans.

General expectations for promotion, tenure and retention in the Department of Dental Hygiene are outlined below and encompass three general areas: teaching, scholarship/research/professional activity and service. The Department of Dental Hygiene expects that applicants for retention, promotion, and tenure demonstrate excellence in teaching as the highest priority of the three general areas.

**EXCELLENCE IN TEACHING**

*for retention, tenure, and promotion to associate professor*

All full-time faculty must follow expectations for teaching effectiveness as outlined in the Faculty Evaluation section of the Dental Hygiene Department Policies and Procedures and her/his Activity Plan. All faculty members are expected to maintain a minimum mean score of 2.5 for questions 1, 2, 3 and 4 (of the Student Evaluation form) for all courses taught during the academic year (i.e. academic year average). In addition, all faculty members are expected to maintain a minimum average of 3.0 for questions 1, 2, 3 and 4 for all student evaluations for each individual course (i.e. mean average for each course).

**EXCELLENCE IN SCHOLARSHIP/RESEARCH AND PROFESSIONAL ACTIVITY**

*for retention, tenure, and promotion to associate professor*

The Dental Hygiene Department Policies and Procedures and Activity Plan provide guidance for development of significant scholarship, research and professional activity.

“For professional and scholarly activity requires active engagement with one’s discipline or field. It includes the search for new knowledge, the expression of creative talent, and the application or dissemination of existing knowledge to one’s discipline or to issues and problems within our society”

For promotion to rank of associate professor, retention, and tenure status the faculty member must provide evidence that she/he is actively engaged in, and appears likely to continue with scholarly activity that is of significant quality and has significant impact at a regional and national/international level. Her/his accomplishments will be presented in terms of quality by describing the significance of the contributions to
her/his discipline or professional field. For this evaluation, only activities from a specified time period which is stated in her/his Activity Plan will be considered. Evidence of these accomplishments will be described according to the following sections. Scholarship and research activities listed must be related to the discipline or profession. Additional expectations can be described in the faculty member’s Activity Plan.

A. This category must provide documentation of significant impact at a regional and national/international level. For categories one through five below, a minimum of eight total activities will be met for retention, tenure, and promotion to associate professor. These eight activities must be distributed among a minimum of three categories and include at least one refereed publication in a national or international journal and one grant application outside Eastern Washington University: (1 through 5). Evidence should include a description of the significant achievements.

1. Refereed publication as deemed appropriate by the department.
2. Presentation at regional, national or international professional meeting.
3. Submission of grant proposals for instructional improvement and/or research.
4. Additional scholarly written work, including abstracts for journals, poster presentations and educational exhibits, book reviews, technical reports, audio/visual tapes, slide series, modules, unpublished studies, software, newsletters, recruitment materials.
5. Development and/or delivery of short courses or workshops in one's discipline.

B. In addition to significant scholarly contributions as listed above, external peer recognition of scholarly achievement is expected for retention, tenure, and promotion to associate professor. Additional expectations can be described in faculty member’s activity plan. Evidence should include a description of the significant achievements in at least five of the following categories (1 through 22 below):

1. Citation of published research by other researchers.
2. Editor and membership activities of an editorial board of a professional journal.
3. Invitations to review manuscripts for professional journals or book chapters for professional texts.
4. Invitations to review grant proposals for funding agencies.
5. Invitations to review abstracts for professional society meetings.
6. Election to membership in selective professional societies.
7. Election to office in professional societies.
8. Appointment to membership on committees that utilize professional expertise.
9. Invitations to chair sessions at professional society meetings.
10. Invitations to speak at professional meetings or guest lectures at other universities.
11. Awards or letters of recognition from outside the university.
12. Awards or letters of recognition from internal constituencies.
13. Private practice and/or clinic management which includes assessing, implementing and evaluating new methodologies and techniques.
14. Membership on regional, state, or national professional boards.
15. Invitation to mentor or serve as consultant for professional boards, societies, or individuals.
16. Membership and significant membership activity in professional organizations.
17. Attendance at professional meetings, symposia, or workshops that indicate an effort to remain current in the discipline.
18. Description of an ongoing research program with projected goals and aims.
19. Description of creative projects.
20. Description of professional leave or faculty development or grant funding activities that enhance research and scholarly capabilities.
22. Other evidence of achievement as defined by the department.

EXCELLENCE IN SERVICE

for retention, tenure, and promotion to associate professor

Any faculty member promoted to the rank of associate professor shall demonstrate active participation in departmental, university and community service. She/he has an obligation to accept her/his share of responsibilities for the operation of the department and the governance of the university. For this evaluation, only activities from a specified time period which is stated in her/his Activity Plan will be considered.

Evidence of these accomplishments will be described according to the following sections. Additional expectations can be described in the faculty member’s Activity Plan.

Service to the Dental Hygiene Department, College and University - a faculty member is expected to serve on an equitable share of department, college, and university committees. For purposes of promotion, a list of department committees should be submitted, those chaired or provided special leadership should be listed, and a description of the purpose and/or accomplishments of the committees must be recorded.

Service to Professional and/or Community Organizations - a faculty member is expected to provide service to the profession and/or to community organizations. Service activities listed must provide a contribution to her/his discipline or profession. For purposes of promotion, a list of service activities and the significant achievements or contributions must be described in at least three of the following categories:

1. Service to professional boards (regional, state, or national)
2. Service in a leadership/delegate role at state professional society meetings.
3. Membership on community boards on behalf of the university.
4. Membership on professional society committees.
5. Presentations or workshops to community groups which utilize professional expertise.
6. Other utilization of professional expertise for public or community purposes.
7. Volunteering for community projects, workshops, or clinics.
8. Organizing professional community projects, workshops and/or continuing education courses.
9. Membership on statewide higher-education and inter-institutional committees.
10. Other evidence of achievement as defined by the department.
STANDARDS FOR RETENTION, TENURE, AND PROMOTION TO PROFESSOR

Activity Plans

Purpose: The Activity Plan will inform and guide the faculty member as to the requirements of his/her position and/or promotion. Activity Plans will serve as a guide for department expectations in order to obtain a positive recommendation for promotion to full professor. Each Activity Plan is to be tailored to the unique skills and/or assignments of the individual faculty member as well as the current needs of the department. Each Activity Plan will specify the time period it will cover.

Who/When: All tenured faculty seeking promotion to professor will have a written individualized Faculty Activity Plan approved no later than the conclusion of the first academic quarter of the time period of activity covered by the Activity Plan. Reviews of the activity plan will follow time frames outlined in the Collective Bargaining Agreement. The plan may be modified at the time of the renewal dependent upon department needs.

Development: Activity Plans will be drafted by the individual faculty member in collaboration and agreement with the Department Personnel Committee (DPC) and Department Chair (or dean, if the member holds the chair position). Individual roles and goals will contribute to the department’s vision, mission and strategic plan. Adjustments to the plan must be mutually agreed upon by the faculty member, Department Chair, department personnel committee and the dean.

Approval: Following review and approval by the Department Personnel Committee and Department Chair, the Activity Plan will be forwarded to the College Personnel Committee and dean for approval. At any point, the Activity Plan may be returned to the faculty member for revision. Final approval of the Activity Plan rests with the College Personnel Committee and ultimately with the dean.

Review: A specific timetable and evaluation procedures will be followed as outlined in his/her Activity Plan. Before the faculty member starts their written performance documentation of their activity plan, they must consult with the DPC Chair on the format for the review. As needed, the faculty member will provide the Department Chair (or dean, if the member holds the chair position) and/or the Department Personnel Committee (DPC) necessary information as outlined in his/her Activity Plan. For each year of employment, recommendation on retention, and guidance on meeting expectations will be given to the faculty member. A copy will be signed by the faculty member and kept in her file. These assessments are meant to give the faculty member guidance towards her/his retention and promotion, however; it is entirely the faculty member’s responsibility to assess her/his progress and seek assistance towards meeting her/his Activity Plan expectations. At request anytime the DPC, Department Chair, Dean, or faculty member, the DPC may review the person’s progress toward her/his Activity Plan.

Qualifications, Expectations, and Criteria: Faculty Activity Plans will follow the requirements, standards, procedures, and criteria as outlined in the Science, Health, and Engineering College Policies and Procedures and Department Policies and Procedures and will assist the department in enhancing its vision, mission, goals, and strategic plan. Each Activity Plan must follow the guidelines outlined below for teaching
effectiveness; scholarship/research and professional activity; and service. Faculty members are referred to appropriate sections of this Department Policies and Procedures for guidelines in the development of their plans.

Qualifications for professional rank are determined by each department in accordance with the conditions stated in the Collective Bargaining Agreement, EWU Policies and Procedures Manual and in the Science, Health, and Engineering College Policies and Procedures.

Since courses and activities are interdependent it is of highest priority that faculty follow the Department’s philosophy for Interdependence/Teamwork. Specific objectives for each area are outlined in individual Faculty Activity Plans.

General expectations for promotion and retention in the Department of Dental Hygiene are outlined below and encompass three general areas: teaching, scholarship/research/professional activity and service. The Department of Dental Hygiene expects that applicants for retention and promotion demonstrate excellence in teaching as the highest priority of the three general areas.

**EXCELLENCE IN TEACHING**

*for retention and promotion to professor*

All full-time faculty must follow expectations for teaching effectiveness as outlined in the Faculty Evaluation section of the Dental Hygiene Department Policies and Procedures and Promotion Plan. A higher level of performance based on student evaluations is expected for promotion to professor. All faculty members are expected to maintain a minimum mean score of 2.5 for questions 1, 2, 3 and 4 (of the Student Evaluation section) for all courses taught during the academic year (i.e. academic year average). In addition, all faculty members are expected to maintain a minimum average of 3.0 for questions 1, 2, 3 and 4 above for all student evaluations for each individual course (i.e. mean average for each course).

**EXCELLENCE IN SCHOLARSHIP/RESEARCH AND PROFESSIONAL ACTIVITY**

*for retention and promotion to professor*

The Dental Hygiene Department Policies and Procedures and Promotion Plan provide guidance for development of significant scholarship, research and professional activity.

“Professional and scholarly activity requires active engagement with one’s discipline or field. It includes the search for new knowledge, the expression of creative talent, and the application or dissemination of existing knowledge to one’s discipline or to issues and problems within our society”

For promotion to rank of full professor, the faculty member must provide evidence that she/he is actively engaged in, and appears likely to continue with scholarly activity that is of significant quality and has significant impact at a regional and national/international level. Her/his accomplishments will be presented in terms of quality by describing the significance of her/his contributions to her/his discipline or professional field. For this evaluation, only activities from a specified time period
which is stated in her/his Promotion Plan will be considered. Scholarship and research activities listed must be related to the discipline or profession.

Evidence of these accomplishments will be described according to the following sections. Additional expectations can be described in the faculty member’s Activity Plan.

A. This category must provide documentation of significant impact at a regional and national/international level. For categories one through five below, a minimum of twelve total activities will be met for retention, tenure, and promotion to full professor. These twelve activities must be distributed among a minimum of three categories and include at least one refereed publication in a national or international journal and one grant application outside Eastern Washington University: (1 through 5). Evidence should include a description of the significant achievements.

1. Publication in peer-reviewed national/international journals and/or book or book chapters.
2. Presentation at regional and/or national/international professional meetings.
3. Submission of grant proposals for instructional improvement and/or research.
4. Additional scholarly written work including (but not limited to) abstracts for journals, poster presentations and educational exhibits, book reviews, technical reports, audio/video tapes, slide series, modules, etc. The types of journals (regional, national/international) should be noted.
5. Development and/or delivery of short courses or workshops in one’s discipline.

B. In addition to significant scholarly contributions as listed above, external peer recognition of scholarly achievement is expected for promotion to full professor. Additional expectations can be described in the faculty member’s activity plan. Evidence should include a description of the significant achievements in at least eight of the following categories (1 through 22 below): which indicates an effort to remain current in the discipline.

1. Citation of published research by other researchers.
2. Editor and membership activities of an editorial board of a professional journal.
3. Invitations to review manuscripts for professional journals or book chapters for professional texts.
4. Invitations to review grant proposals for funding agencies.
5. Invitations to review abstracts for professional society meetings.
6. Election to membership in selective professional societies.
7. Election to office in professional societies.
8. Appointment to membership on committees that utilize professional expertise.
9. Invitations to chair sessions at professional society meetings.
10. Invitations to speak at professional meetings or guest lectures at other universities.
11. Awards or letters of recognition from outside the university.
12. Awards or letters of recognition from internal constituencies.
13. Private practice and/or clinic management which includes assessing, implementing and evaluating new methodologies and techniques.
14. Membership on regional, state, or national professional boards.
15. Invitation to mentor or serve as consultant for professional boards, societies, or individuals.
16. Membership and significant membership activity in professional organizations.
17. Attendance at professional meetings, symposia, or workshops that indicate an effort to remain current in the discipline.
18. Description of an ongoing research program with projected goals and aims.
19. Description of creative projects.
20. Description of professional leave or faculty development or grant funding activities that enhance research and scholarly capabilities.
22. Other evidence of achievement as defined by the department.

**EXCELLENCE IN SERVICE**
*for retention and promotion to professor*

Any faculty member promoted to the full professor shall demonstrate active participation in departmental, university and community service. She/he has an obligation to accept her/his share of responsibilities for the operation of the department and the governance of the university. For this evaluation, only activities from a specified time period which will be stated in her/his Activity Plan will be considered.

Evidence of these accomplishments will be described according to the following sections. Additional expectations can be described in the faculty member’s promotion plan.

**Service to the Dental Hygiene Department, College and University** - a faculty member is expected to show leadership and serve on an equitable share of department, college, and university committees. For purposes of promotion, a list of department committees should be submitted, those chaired or provided special leadership should be listed, and a description of the purpose and/or accomplishments of the committees must be recorded. Leadership is defined as holding an elected position on committee.

**Service to Professional and/or Community Organizations** - a faculty member is expected to provide service and leadership to the profession and/or to community organizations. Leadership is defined as holding an elected position on committee. Service activities listed must provide a contribution to her/his discipline or profession. For purposes of promotion, a list of service activities and the significant achievements, leadership, or contributions must be described in at least four of the following categories:

1. Service to professional boards (regional, state, or national)
2. Service in a leadership/delegate role at state professional society meetings.
3. Membership on community boards on behalf of the university.
4. Membership on professional society committees.
5. Presentations or workshops to community groups which utilize professional expertise.
6. Other utilization of professional expertise for public or community purposes.
7. Volunteering for community projects, workshops, or clinics.
8. Organizing professional community projects, workshops and/or continuing education courses.
9. Membership on statewide higher-education and inter-institutional committees.
10. Other evidence of achievement as defined by the department.
STANDARDS FOR RETENTION AND PROMOTION TO SENIOR LECTURER FOR SPECIAL FACULTY APPOINTMENTS

Activity Plan

Purpose: The Special Faculty Activity Plan will inform and guide the faculty member as to the requirements of her/his position and to achieve retention and/or promotion. Activity Plans will serve as a guide for department expectations in order to obtain a positive recommendation for retention and/or promotion to senior lecturer. Each Activity Plan is to be tailored to the unique skills and or assignments of the individual faculty member as well as the current needs of the department. Each Activity Plan will specify the time period it will cover.

Who/When: All Special Faculty appointments, including faculty associates, will have a written individualized Faculty Activity Plan approved no later than the conclusion of the first academic quarter of employment. Reviews of the activity plan will follow time frames outlined in the Collective Bargaining Agreement. The plan may be modified at the time of the renewal dependent upon department needs.

Following six years of successful teaching at the rank of Special Faculty lecturer, the faculty member may apply for promotion to senior lecturer. This is not a tenurable position.

Development: Activity Plans will be drafted by the individual faculty member in collaboration and agreement with the Department Personnel Committee (DPC) and Department Chair (or dean, if the member holds the chair position). Individual roles and goals will contribute to the department’s vision, mission and strategic plan. Adjustments to the plan must be mutually agreed upon by the faculty member, Department Chair, department personnel committee and the dean.

Approval: Following review and approval by the Department Personnel Committee and Department Chair, the Activity Plan will be forwarded to the College Personnel Committee and dean for approval. At any point, the Faculty Activity Plan may be returned to the faculty member for revision. Final approval of the Faculty Activity Plan rests with the College Personnel Committee and ultimately with the dean.

Review: The following evaluation procedures will be followed as outlined in his/her Activity Plan. Special Faculty members are subject to review by the department each year according to the Collective Bargaining Agreement. As needed, the faculty member will provide the Department Chair and/or the Department Personnel Committee (DPC) necessary information as outlined in the Department Policies and Procedures and Activity Plan. Before the faculty member starts their written performance documentation of their activity plan they must consult with the DPC Chair on the format for the review. At a minimum, for each review, the Special Faculty will provide the DPC and Chair written assessment and documentation of her/his faculty activity plan.

At the commencement of fall quarter for the first five years, the faculty member will meet with the Department Chair (or dean, if the member holds the chair position) to review the progress of her Activity Plan. The Department Chair will forward written documentation to the DPC Chair. If the Department and DPC Chair are in agreement (either positive or negative recommendation) then one combined recommendation may proceed to the Dean.
The Department Chair is expected to provide the DPC with pertinent information regarding the Special Faculty members past performance and guidance.

At the commencement of fall quarter the sixth year, the DPC and Chair will review the Special Faculty activity plan documentation and provide one combined recommendation (if in agreement of recommendation) separate written recommendations for retention and consideration of promotion to Senior Lecturer.

For each evaluation, a written assessment of her/his progress, recommendation on retention, and guidance on meeting expectations will be given to the faculty member. A copy will be signed by the faculty member and kept in her/his file. These assessments are meant to give her/him guidance towards retention and promotion; however, it is entirely the faculty member’s responsibility to assess her progress and seek assistance towards meeting her/his Activity Plan expectations. At the request of the DPC, Dean, Department Chair or the faculty member, the DPC may review the progress of her/his Activity Plan.

Evaluation for reappointment or promotion will be based on teaching effectiveness and any other items as outlined in her/his Activity Plan. For this evaluation, only activities from a specified time period (stated in her/his Activity Plan) will be considered.

**Qualifications, Expectations and Criteria:** Faculty Activity Plans will follow the requirements and procedures outlined in the Science, Health and Engineering College Policy and Procedures and Department Policies and Procedures and will assist the department in enhancing its vision, goals, and objectives. The Department of Dental Hygiene expects that faculty associates demonstrate excellence in teaching as the highest priority. In addition, the department expects Special Faculty to remain current in his/her subject areas, as well as to attend all faculty meetings, workshops, and inservices.

Since courses and activities are interdependent it is of highest priority that faculty follow the Department’s philosophy for Interdependence/Teamwork. Specific objectives for each area are outlined in individual Faculty Activity Plans.

General expectations in the areas of scholarship/research and professional activity and service will be determined and established on a case-by-case basis by the Department Chair in collaboration with the Department Personnel Committee. Faculty members are referred to appropriate sections of this Department Policies and Procedures for guidelines in the development of their plans.

**EXCELLENCE IN TEACHING for retention and/or promotion to senior lecturer**

All faculty associates must follow expectations for teaching effectiveness as outlined in the Faculty Evaluation section of the Dental Hygiene Department Policies and Procedures and her/his Activity Plan. A higher level of performance based on student evaluations is expected for full-time faculty associate positions. Faculty associates are expected to maintain a **minimum** mean score of 2.5 for questions 1,2,3 and 4 (see Student Evaluation section) for all courses taught during the academic year (i.e. academic year average). In addition, all faculty members are expected to maintain a **minimum** average of 3.0 for questions 1,2,3 and 4 for all student evaluations for each individual course (i.e. mean average for each course).
EXCELLENCE IN SCHOLARSHIP/RESEARCH AND PROFESSIONAL ACTIVITY

_for retention and/or promotion to senior lecturer_

For Special Faculty associates, standards for excellence in scholarship/research and professional activity will be agreed upon on a case-by-case basis and in collaboration with the Department Personnel Committee and the Department Chair, (or dean, if the member holds the chair position). Individual activities and procedures for promotion and retention must be outlined in her/his Activity Plan. For this evaluation, only activities from a specified time period (stated in her/his Activity Plan) will be considered. His/her accomplishments will be presented in terms of quality by describing the significance of the contribution to his/her discipline or professional field.

EXCELLENCE IN SERVICE

_for retention and/or promotion to senior lecturer_

For those Special Faculty associates, excellence in service will be limited to service to the department or as outlined in the individual Activity Plan. A faculty member is expected to serve on an equitable share of department committees. For this evaluation, only activities from a specified time period (stated in her/his Activity Plan) will be considered. For those faculty associates, standards for excellence in service activity will be agreed upon on a case-by-case basis and in collaboration with the Department Personnel Committee and the Department Chair (or dean, if the member holds the chair position). The significant achievement, leadership, or contribution of individual activities must be described in her/his activity plan document.

1. Service to professional boards (regional, state, or national)
2. Service in a leadership/delegate role at state professional society meetings.
3. Membership on community boards on behalf of the university.
4. Membership on professional society committees.
5. Presentations or workshops to community groups which utilize professional expertise.
6. Other utilization of professional expertise for public or community purposes.
7. Volunteering for community projects, workshops, or clinics.
8. Organizing professional community projects, workshops and/or continuing education courses.
9. Membership on statewide higher-education and inter-institutional committees.
10. Other evidence of achievement as defined by the department.
STANDARDS FOR TENURED PROFESSORS AND TENURED ASSOCIATE PROFESSORS NOT WORKING TOWARD PROMOTION

Activity Plans

Purpose: The Activity Plan will promote and encourage the continued professional growth of the faculty member and will provide a list of desired future contributions. Each Activity Plan is to be tailored to the unique skills and/ or assignments of the individual faculty member as well as the current needs of the department.

Who/When: All tenured professors and all tenured associate professors not working toward promotion are expected to prepare an Activity Plan. Activities accomplished under the Activity Plan may not be considered for promotion to associate or full professor; or senior associate or lecturer. For professor rank faculty, Activity Plans should be prepared within six months following promotion. Reviews of the activity plan will follow time frames outlined in the Collective Bargaining Agreement. The faculty member’s new Faculty Activity Plan shall include plans and processes for improvements in specified areas of activity if recommended.

Development: The Activity Plan will be drafted by the individual faculty member in collaboration and agreement with the Department Personnel Committee (DPC) and Department Chair (or dean, if the member holds the chair position). Individual roles and goals will contribute to the department’s vision, mission and strategic plan. Adjustments to the plan must be mutually agreed upon by the faculty member, Department Chair, department personnel committee and the dean.

Approval: Following review and approval by the DPC and Department Chair, the Activity Plan will be forwarded to the dean for approval. At any point, the Activity Plan may be returned to the faculty member for revision. Final approval of the Activity Plan rests with the College Personnel Committee and ultimately with the dean.

Review: The faculty member will meet with the Department Chair (or dean if the member holds the chair position) annually to review the faculty member’s progress towards meeting the expectations of the Activity Plan. The review process for retention will follow the timelines set by the College Personal Committee.

Qualifications, Expectations, and Criteria: Faculty Activity Plans will follow the requirements, standards, procedures, and criteria as outlined in the Science, Health, and Engineering College Policies and Procedures and Department Policies and Procedures and will assist the department in enhancing its vision, mission, goals, and strategic plan. Each Activity Plan must follow the guidelines outlined below for teaching effectiveness; scholarship/research and professional activity; and service. Faculty members are referred to appropriate sections of this Department Policies and Procedures for guidelines in the development of their plans.

Qualifications for professional rank are determined by each department in accordance with the conditions stated in the Collective Bargaining Agreement, EWU Policies and Procedures Manual and in the Science, Health, and Engineering College Policies and Procedures.
Since courses and activities are interdependent it is of highest priority that faculty follow the Department’s philosophy for Interdependence/Teamwork. Specific objectives for each area are outlined in individual Faculty Activity Plans.

General expectations for promotion and retention in the Department of Dental Hygiene are outlined below and encompass three general areas: teaching, scholarship/research/professional activity and service. The Department of Dental Hygiene expects that applicants for retention and promotion demonstrate excellence in teaching as the highest priority of the three general areas.

EXCELLENCE IN TEACHING
for retention of full professor

All full-time faculty must follow expectations for teaching effectiveness as outlined in the Faculty Evaluation section of the Dental Hygiene Department Policies and Procedures and Promotion Plan. A higher level of performance based on student evaluations is expected for retention of full professor. All faculty members are expected to maintain a minimum mean score of 2.5 for questions 1, 2, 3 and 4 of the Student Evaluation section for all courses taught during the academic year (i.e. academic year average). In addition, all faculty members are expected to maintain a minimum average of 3.0 for questions 1, 2, 3 and 4 above for all student evaluations for each individual course (i.e. mean average for each course).

EXCELLENCE IN SCHOLARSHIP/RESEARCH AND PROFESSIONAL ACTIVITY
for retention of full professor

The Dental Hygiene Department Policies and Procedures and Promotion Plan provide guidance for development of scholarship, research and professional activity.

“Professional and scholarly activity requires active engagement with one’s discipline or field. It includes the search for new knowledge, the expression of creative talent, and the application or dissemination of existing knowledge to one’s discipline or to issues and problems within our society.”

The faculty member must provide evidence that she/he is actively engaged in, and appears likely to continue with scholarly activity that is of significant quality and has significant impact at a regional, national, and/or international level. Her/his accomplishments will be presented in terms of quality by documenting the significance of her/his contributions to her/his discipline or professional field. For this evaluation, only activities from a specified time period which will be stated in her/his Activity Plan will be considered. Scholarship and research activities listed must be related to the discipline or profession.

EXCELLENCE IN SERVICE
for retention of full professor

Any faculty member promoted to the full professor shall demonstrate active participation in departmental, university and community service. She/he has an obligation to accept her/his share of responsibilities for the operation of the department.
and the governance of the university. For this evaluation, only activities from a specified time period which will be stated in her/his Activity Plan will be considered.

Service to the Dental Hygiene Department, College and University - a faculty member is expected to serve on an equitable share of department, college, and university committees. A list of department committees should be submitted, those chaired or provided special leadership should be listed, and a description of the purpose and/or accomplishments of the committees may be recorded.

Service to Professional and/or Community Organizations - a faculty member is expected to provide service to the profession and/or to community organizations. Service activities described must provide a contribution to the her/his discipline or profession.
FACULTY DEVELOPMENT ALLOCATION: CRITERIA AND PLANS FOR DISTRIBUTION

Per the College Plan and the Collective Bargaining Agreement, to support individual Faculty Activity Plans and Department Policies and Procedures, a minimum faculty development allocation of $1,200 per probationary tenure-track and tenured faculty members shall be allocated and distributed each year. Full-time Special Faculty may submit funding requests to the Chair for approval if monies are available.

The Department Chair, in consultation with full-time faculty of the department will establish criteria and guidelines for the faculty development allocation. The following activities and materials may be eligible for allocation:

- Travel, lodging, per diem, registration and related expenses for attendance at state, national, and international meetings which are directly related to dentistry and dental hygiene education. Attendance at other types of meetings, workshops, and conferences must be approved by department faculty and/or the Department Chair for funding.

- Registration fees for local meetings, conferences, and workshops which are directly related to dentistry and dental hygiene education. Attendance at other types of meetings, workshops, and conferences must be approved by department faculty and/or the Department Chair.

- Educational texts and other educational materials, including journals, software and other materials directly related to the support of dental and dental hygiene education. Purchase of other types of materials must be approved by department faculty and/or the Department Chair.

- Equipment which is directly related to the support of dental hygiene education. Purchase of other types of equipment must be approved by department faculty and/or the Department Chair.

- Membership dues for the American Dental Hygienist Association.

- Hiring of substitute faculty to provide supervision and coverage of clinics, labs, and/or classes when department faculty attend state, national, and/or international meetings, conferences, or workshops which are directly related to dental and dental hygiene education. Hiring of substitute faculty to provide supervision and coverage of classes unrelated to dental and dental hygiene education (e.g. jury duty or other community service) must be approved by the Department Chair.

Consideration of the allocation of faculty development funds outside the criteria established above will need department faculty and/or the Department Chair approval. The Department of Dental Hygiene budget will support faculty substitutes (for each full-time faculty member up to eight hours for each academic year) to provide supervision in clinics, labs, and/or classes. These funds are to be used when the
department faculty attend state, national, and/or international meetings, conferences, or workshops which are directly related to dental and dental hygiene education. Substitute faculty must be approved by the Department Chair.

Depending on funding available, special and part-time faculty may also apply for development funding. The chair will determine funding availability and current department needs. Requests and approval for funding will be made through the Department Chair.

RECRUITMENT AND SELECTION OF NEW FACULTY

Faculty Personnel Decision Making - General Policy

Decisions regarding present and future faculty personnel needs in dental hygiene will rest with the full-time faculty members in consultation with the college dean. Personnel decisions should advance the vision, goals and objectives of the Department of Dental Hygiene.

Recruitment and Appointment

Full-time faculty members play a major role in the recruitment and appointment of all full- and part-time faculty. The Clinical Coordinator and Clinical Course Leads are responsible for assisting in the selection and recruitment of part-time clinical instructors, while the Restorative Lead and Dentist Lead are responsible for assisting in the selection and recruitment of part-time supervising dentists and laboratory instructors. The Department Chair, in consultation with all full-time faculty members, is responsible for the general hiring and recruitment of all part-time faculty members.

Procedures regarding the recruitment and appointment of full-time faculty members to the Department of Dental Hygiene will follow university and college policies as outlined in the EWU Policies and Procedures, the Collective Bargaining Agreement, and the Science, Health, and Engineering College Policies and Procedures.
PROGRAMS AND CURRICULA

ACCREDITATION

The Department of Dental Hygiene at Eastern Washington University is fully accredited under the Commission on Dental Accreditation (CODA) of the American Dental Association. The Accreditation Standards for Dental Hygiene Education Programs is a formal document which outlines the requirements and guidelines for accredited dental hygiene programs in the United States.

Accreditation standards have been developed for the following reasons:

• Protect the public welfare
• Serve as a guide for dental hygiene program development
• Serve as a stimulus for the improvement of established programs
• Provide criteria for the evaluation of new and established programs

To be accredited by the Commission on Dental Accreditation, a dental hygiene program must meet the standards set forth in the accreditation standards document. These standards are national in scope and represent the minimum requirements for accreditation.

To be eligible for dental hygiene licensure in all states except one (Alabama), dental hygiene alumni must graduate from an accredited dental hygiene program.

The formal accreditation process takes place once every seven years. The next site visit for the Department of Dental Hygiene is in 2011. A year-long self-study process takes place in preparation for the two day site visit.

Interim reports to the Commission on Dental Accreditation are prepared annual by the Department Chair. The department reports annually the following information: program administration/setting; admissions, retention, licensure and job placement statistics; enrollment data; graduate practice information; student cost information; financial support; faculty information; and curriculum information.

An annual accreditation fee is assessed for each dental hygiene program which the department pays.

ADVISING PLAN(S)

The major responsibilities of advising and admissions to the Department of Dental Hygiene rests with the Admissions and Recruitment Advisor(s) for the department. See the section: GOVERNANCE AND ADMINISTRATION OF THE DEPARTMENT, subsection - Admissions and Recruitment Advisor(s) for the selection, responsibilities and administrative release time for this position.

CONTINUING EDUCATION
The Department of Dental Hygiene supports continuing education for its faculty, staff, alumni and dental professionals in the surrounding community. In that endeavor, faculty members assist in sponsoring and co-sponsoring continuing education courses. In addition, faculty volunteer to teach courses at the local, state, national, and international levels.

**GRANTS AND CONTRACTS**

The Department of Dental Hygiene encourages the participation of its faculty in externally and internally-funded grants and contracts that are compatible and consistent with, and beneficial to, the department’s academic role, mission, and vision.

For further information regarding policy, see the section on grants and contracts in the College Policies and Procedures.

**PROGRAM REVIEW**

See the program review section of the college plan. The Department of Dental Hygiene received its most recent formal program review by Eastern Washington University in the 2003/2004 academic year. Two internal reviewers from EWU and an external reviewers from another dental hygiene program or department conduct the site evaluation. The program review schedule is on a ten year cycle. The Department of Dental Hygiene will be reviewed again in 2014.
OUTCOMES ASSESSMENT

Assessment Plan

The Department of Dental Hygiene at Eastern Washington University utilizes a variety of outcome assessments and other procedures in evaluating program performance and in determining whether the program goals and objectives are met. Formal assessments include a written national board examination, a three part regional practical examination, sophomore, junior and senior curriculum surveys, alumni and employer surveys, and mockboard examinations. In addition, program goals and objectives are reviewed by the Dental Hygiene Department Advisory Board, the Student Advisory Committee, and both full- and part-time faculty members. The process of reviewing departmental goals and objectives occurs every year. Every seven years, the dental hygiene program is formally evaluated by the Council on Dental Accreditation of the American Dental Association; a two day site visit by commission consultants follows an extensive self-study report. The last site visit by the Council on Dental Accreditation was in the spring 2004. The dental hygiene received full approval by this organization. There were no recommendations needing attention, and there were three commendations highlighting exceptional aspects of the program.

The Department of Dental Hygiene outcome assessment plan includes the following schedule of activities:

Student Evaluations of each didactic course - at the end of each course
Written National Board Examination Scores - yearly
Western Regional Board Examination Scores - yearly
Sophomore Curriculum Survey - annually or as needed
Junior Curriculum Survey - annually or as needed
Senior Curriculum Survey - annually or as needed
Senior Mock Board Examinations - annually
Client Survey – every two years (minimum 40 surveys)
Alumni Survey - every three years or as needed
Employer Survey - every three years or as needed
COMPETENCIES FOR EASTERN WASHINGTON UNIVERSITY
DENTAL HYGIENE GRADUATES

Our broad education goal is: To ensure the quality of the Department of Dental Hygiene’s educational program.

The following strategies assist the department in meeting its educational goal and are outlined along with the outcome measures that are used to determine the degree to which the educational goals are met.

Domain #1: Client Care
The dental hygienist is a licensed preventive oral health professional who provides educational and clinical services in the support of oral health. The dental hygiene process of care applies principles from the basic sciences, humanities, social sciences, and dental hygiene sciences to diverse populations. These populations may include, but are not limited to, the medically compromised, the mentally or physically challenged and the socially, economically or culturally disadvantaged.

Major Competency:

1. Assessment: The dental hygienist must be able to systematically collect, analyze and accurately record baseline data on the general, oral and psychosocial health status using methods consistent with medico/dentolegal principles and be able to appropriately counsel the client regarding these findings.

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<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
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<td>1.1 Obtain, review, update and assess a complete medical, social, familial, psychological, and dental history, including vital signs.</td>
<td>Case histories and case presentations</td>
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<td>Health histories and clinic forms</td>
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<td>Course objectives</td>
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<td>Employer surveys</td>
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<td></td>
<td>Alumni surveys</td>
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<td>Success on regional board examinations</td>
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<td></td>
<td>Success on national board examinations</td>
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<td></td>
<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<tr>
<td></td>
<td>End of the year curriculum surveys</td>
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<tr>
<td></td>
<td>Daily clinical evaluation of performance</td>
</tr>
</tbody>
</table>

62
<table>
<thead>
<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
</tr>
</thead>
</table>
| **1.2** Recognize medical conditions, etiologic factors and risk factors that require special precautions or considerations prior to or during dental hygiene treatment. | Audits of clinic records  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Daily clinical evaluations of performance  
Employer surveys  
Alumni surveys  
End of the year curriculum surveys |
| **1.3** Identify the client at risk for a medical emergency and be prepared to provide appropriate life support measures for medical and dental emergencies that may be encountered in dental hygiene practice. | Daily clinical evaluations of performance  
Success on national board examinations  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Case presentations  
End of the year curriculum surveys  
Alumni surveys |
| **1.4**Accurately record, assess, and analyze data gathered from the following procedures:  
• Extra/intra oral exams  
• Periodontal and dental exams, including indices  
• Radiographic exposure  
• Risk assessments (i.e. tobacco, systemic, caries) and appropriately counsel the client regarding the findings within the scope of dental hygiene practice and law. | Clinic competency exams  
Daily clinical evaluations of performance  
Success on regional board examinations  
Success on national board examinations  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Case presentations  
End of the year curriculum surveys  
Employer surveys  
Alumni surveys |
| **1.5** Recognize the need for referral to an appropriate health professional and make the referral within the scope of dental hygiene practice and law. | Success on national & regional board examinations  
Case studies  
Clinic competency exams  
End of the year curriculum surveys  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Daily clinical evaluations of performance  
Employer surveys  
Alumni surveys |
| 1.6 Identify the need for radiographs, specify the type and appropriately counsel the client regarding the need within the scope of dental hygiene practice and law. | Success on regional board examinations  
Success on national board examinations  
Daily clinical evaluations of performance  
Results of completed coursework (i.e., exams, papers, group assignments, journals, self evaluations, etc.)  
Alumni surveys  
Employer surveys  
End of the year curriculum surveys |
|---|---|
| 1.7 Radiographically distinguish normal from abnormal anatomical findings and correlate these findings with the clinical exam. | Success on national & regional board examinations  
Case studies  
End of the year curriculum surveys  
Employer surveys  
Alumni surveys  
Dental exam forms & referral forms  
Daily clinical evaluations of performance  
Clinic competency exams  
Results of completed coursework (i.e., exams, papers, group assignments, journals, self evaluations, etc.) |
| 1.8 Evaluate the diagnostic quality of radiographs and determine the measures needed to improve the quality if indicated. | Success on regional board examinations  
Success on national board examinations  
Clinic competency exams  
Daily clinical evaluations of performance  
Clinic evaluation (competency) forms  
Employer surveys  
Alumni surveys  
End of the year curriculum surveys |
| 1.9 Apply critical thinking and decision making skills in the collection, analysis, and recording of assessment data. | Daily clinical evaluations  
Clinic competency exams  
Alumni surveys  
Employer surveys  
End of year curriculum surveys |
Major Competency:
2. **Planning:** Having appropriately assessed the problems and/or conditions present, dental hygienist must be able to formulate an individualized dental hygiene care plan, providing recommended and alternative plans to the client.

Specifically, the competent dental hygiene graduate must:

<table>
<thead>
<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 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.</td>
<td>Client surveys and feedback Daily clinic evaluation forms Case presentations Dental hygiene clinic care plans End of year curriculum surveys Alumni surveys Employer surveys</td>
</tr>
<tr>
<td>2.2 Develop a planned sequence of educational and clinical services based on the dental hygiene diagnosis and the motivations and desires of the client/family and/or guardian.</td>
<td>Client surveys and feedback Daily clinic evaluation forms Case presentations Dental hygiene clinic care plans End of year curriculum surveys Alumni surveys Employer surveys</td>
</tr>
<tr>
<td>2.3 Within the scope of dental hygiene practice and law communicate the plan for health services to the client at his/her level of understanding and receive the client's implied and/or informed consent.</td>
<td>Client surveys and feedback Daily clinic evaluation forms Case presentations Dental hygiene clinic care plans End of year curriculum surveys Alumni surveys Employer surveys</td>
</tr>
</tbody>
</table>
Major Competency:
3. **Implementation:** The dental hygienist must be able to provide treatment including preventive, therapeutic, and restorative procedures to promote and maintain oral health and treat oral health diseases within the scope of dental hygiene practice and the law.

Specifically, the competent dental hygienist must:

<table>
<thead>
<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
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<tbody>
<tr>
<td>3.1 Utilize and demonstrate current infection control procedures.</td>
<td>Success on regional board examinations</td>
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<td></td>
<td>Success on national board examinations</td>
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<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td></td>
<td>Daily clinic evaluation forms</td>
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<td></td>
<td>Case presentations</td>
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<td></td>
<td>Dental hygiene clinic care plans</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td></td>
<td>Clinic competency exams</td>
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<td></td>
<td>End of year curriculum surveys</td>
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<tr>
<td>3.2 Produce radiographs of diagnostic quality.</td>
<td>Success on regional board examinations</td>
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<tr>
<td></td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td>Daily clinic evaluation forms</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td>Clinic competency exams</td>
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<td>End of year curriculum surveys</td>
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<td>Supporting Competencies</td>
<td>Methods of Measuring Competencies/Outcomes</td>
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<tr>
<td>3.3 Apply basic and advanced principles of dental hygiene instrumentation to remove deposits with undue trauma to hard or soft tissue.</td>
<td>Success on regional board examinations Employer surveys Alumni surveys Daily clinic evaluation forms Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.) Clinic competency exams End of year curriculum surveys</td>
</tr>
<tr>
<td>3.4 Safely control pain and anxiety during treatment through the use of accepted clinical techniques and appropriate behavioral management strategies within the scope of dental hygiene practice and the law.</td>
<td>Success on regional board examinations Success on national board examinations Employer surveys Alumni surveys Daily clinic evaluation forms Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.) Clinic competency exams End of year curriculum surveys</td>
</tr>
<tr>
<td>3.5 Select and administer appropriate chemotherapeutic agents, including fluorides.</td>
<td>Success on regional board examinations Success on national board examinations Employer surveys Alumni surveys Daily clinic evaluation forms Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.) Clinic competency exams End of year curriculum surveys</td>
</tr>
<tr>
<td>Supporting Competencies</td>
<td>Methods of Measuring Competencies/Outcomes</td>
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</tbody>
</table>
| 3.6 Provide appropriate health education, preventive, and nutritional counseling. | Success on regional board examinations  
Success on national board examinations  
Employer surveys  
Alumni surveys  
Daily clinic evaluation forms  
Case presentations and graded simulations  
Dental hygiene clinic care plans  
Results of completed coursework (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
End of year curriculum surveys |
| 3.7 Provide appropriate restorative services within the scope of dental hygiene practice and law. | Success on regional board examinations  
Employer surveys  
Alumni surveys  
Daily clinic and laboratory evaluation forms  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Clinic competency exams  
End of year curriculum surveys |
| 3.8 Implement appropriate measures to minimize occupational hazards in the work place. | Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Daily clinic competency exams  
Employer surveys  
Alumni surveys  
End of year curriculum surveys |
| 3.9 Provide appropriate dental hygiene care for the child, adolescent, adult, geriatric, and medically compromised client. | Daily clinic evaluation forms  
Employer surveys  
Alumni surveys  
Dental hygiene care plans  
Clinic competency exams  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
End of year curriculum surveys |
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<tbody>
<tr>
<td>3.10 Apply pit and fissure sealants, utilizing currently accepted procedures.</td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td>Daily clinic evaluation forms</td>
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<td>Clinic competency exams</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td>End of year curriculum surveys</td>
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<td>3.11 Provide appropriate dental hygiene care for all types of classifications of periodontal disease including clients who exhibit moderate to severe periodontal disease.</td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td></td>
<td>Daily clinic and laboratory evaluation forms</td>
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<td>Dental hygiene care plans</td>
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<td></td>
<td>Clinic competency exams</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td></td>
<td>End of year curriculum surveys</td>
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<tr>
<td>3.12 Identify the need for and perform coronal and selective polishing procedures safely and effectively.</td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td></td>
<td>Daily clinic and laboratory evaluation forms</td>
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<td>Dental hygiene care plans</td>
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<td>Clinic competency exams</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td>End of year curriculum surveys</td>
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<tr>
<td>3.13 Safely and effectively care for oral prostheses, and instruct clients to maintain these appliances safely and effectively at home.</td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<td></td>
<td>Daily clinic and laboratory evaluation forms</td>
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<td>Clinic competency exams</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td>End of year curriculum surveys</td>
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<tr>
<td>3.14 Safely and effectively care and maintain dental restorations.</td>
<td>Employer surveys</td>
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<td>Alumni surveys</td>
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<tr>
<td></td>
<td>Daily clinic and laboratory evaluation forms</td>
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<td>Clinic competency exams</td>
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<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)</td>
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<td>End of year curriculum surveys</td>
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</tbody>
</table>
**Major Competency:**

4. **Evaluation:** The dental hygienist must be able to evaluate the effectiveness of planned clinical and educational services, modifying the plan as necessary.

Specifically, the competent dental hygienist must:

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<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
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</table>
| 4.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, and examination techniques. | Success on national board examinations  
Employer surveys  
Alumni surveys  
Daily clinic evaluation forms  
Case presentations and graded simulations  
End of the year curriculum surveys  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.) |
| 4.2 Determine the client’s satisfaction with the dental hygiene care received and the oral health status achieved. | Client surveys  
Daily clinic evaluation forms  
Log of client complaints  
% of returning maintenance clients  
Number of clients paying their bills |
| 4.3 Recommend to the client an appropriate continuing care system appropriate to the practice setting and to the individual client’s needs. | Dental hygiene care plans  
Daily clinic evaluation forms  
Case presentations and graded simulations  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
End of year curriculum surveys  
Alumni surveys  
Employer surveys |
| 4.4 Subsequent to dental hygiene care, recommend to the client treatment needs and refer clients to other health professionals as appropriate. | Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
Dental hygiene care plans  
Daily clinic evaluation forms  
Case presentations and graded simulations  
End of year curriculum surveys  
Alumni surveys  
Employer surveys |
The dental hygienist serves the community in both practice and public health settings. Public health is concerned with promoting health and preventing disease through organized community efforts, which is an important component of any interdisciplinary approach. In the practice setting, the dental hygienist plays an active role in the promotion of optimal oral health and its relationship to general health. The dental hygienist should, therefore be competent in the performance and delivery of oral health promotion and disease prevention services in the public health, private practice, and alternative settings.

Major competency:

5. **Community involvement:** The dental hygienist must be able to initiate and assume responsibility for health promotion and disease prevention activities for diverse populations.

Specifically, the competent dental hygienist must:

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<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
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</thead>
<tbody>
<tr>
<td>5.1 Assess, plan, implement and evaluate community-based oral health programs, coordinating such programs with other interdisciplinary professionals.</td>
<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)&lt;br&gt;Community service project&lt;br&gt;Alumni surveys&lt;br&gt;End of the year student curriculum surveys&lt;br&gt;Results of national board exam&lt;br&gt;Evaluations by community agencies/leader and instructor</td>
</tr>
<tr>
<td>5.2 Provide dental hygiene services in a variety of settings, for example: hospitals, clinics, private offices, assisted living and extended care facilities, schools and community centers.</td>
<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)&lt;br&gt;Community service project&lt;br&gt;Alumni surveys&lt;br&gt;End of the year student curriculum surveys&lt;br&gt;Results of national board exam&lt;br&gt;Evaluations by community agencies/leader and instructor</td>
</tr>
<tr>
<td>5.3 Possess effective interpersonal and communication skills to effectively interact both verbally and in writing with diverse populations.</td>
<td>Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)&lt;br&gt;Community service project&lt;br&gt;Alumni surveys&lt;br&gt;End of the year student curriculum surveys&lt;br&gt;Evaluations by community leaders/agencies &amp; instructor</td>
</tr>
</tbody>
</table>
**Major Competency:**

6. **Self-Care Management:** The dental hygienist must be able to promote healthy lifestyles and provide planned educational services using appropriate interpersonal communication skills and educational strategies.

Specifically, the competent dental hygienist must:

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<thead>
<tr>
<th>Supporting Competencies</th>
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</table>
| 6.1 Promote preventive health behaviors. | Plaque indices  
Alumni surveys  
Employer surveys  
End of year curriculum surveys |
| 6.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens. | Plaque indices  
Alumni surveys  
Employer surveys  
End of year curriculum surveys  
Dental hygiene care plans  
Daily clinic evaluation forms |
| 6.3 Use appropriate interpersonal communication skills and strategies to encourage clients to assume responsibility for health and adherence to self-care regimens. | Dental hygiene care plans  
Daily clinic evaluation forms  
Clinic competency exams  
Plaque indices  
Alumni surveys  
Employer surveys  
End of year curriculum surveys |
DOMAIN #3: PROFESSIONALISM

The competent dental hygienist provides care using sound professional judgment, skills and behaviors. The ADHA Code of Ethics serves as a guide to professional behavior. This professional behavior should be based on contemporary knowledge, and the dental hygienist should be capable of discerning and managing ethical issues and problems in community and practice settings. However, these settings may change as the dental hygienist experiences a rapidly changing environment. Treatment, therapy and ethical issues are frequently influenced by regulatory action, economics, social policy, cultural diversity and health care reform. Additionally, dental hygiene is currently involved in the process of creating an identity unique to the profession, requiring the validation of its own knowledge base. Thus, the competent dental hygienist must have regular involvement with large and diverse mounts of information in order to be prepared to function in this dynamic environment.

Major Competency:
7. **Ethics:** The dental hygienist must be able to discern and manage the ethical issues of dental hygiene practice in a rapidly changing environment.

Specifically, the competent dental hygienist must:

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<tr>
<th>Supporting Competencies</th>
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<tr>
<td>7.1 Articulate ethical principles (such as beneficence &amp; non-maleficence) relevant to dental hygiene and practice with personal and professional integrity.</td>
<td>Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc.) Ethical dilemma simulations and papers Daily clinical evaluation forms Alumni surveys Employer surveys End of year curriculum survey Journals of ethical dilemma experiences</td>
</tr>
<tr>
<td>7.2 Serve all clients and the community without discrimination, providing humane and compassionate care to all clients.</td>
<td>Employer surveys Alumni surveys Client survey Ethical dilemma simulations and papers Daily clinical evaluation forms End of year curriculum survey</td>
</tr>
<tr>
<td>7.3 Articulate the steps in a model of ethical reasoning and apply this reasoning protocol to actual ethical dilemmas</td>
<td>Daily clinical evaluation forms Ethical dilemma simulations Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc.) End of year curriculum survey</td>
</tr>
<tr>
<td>7.4 Identify and articulate cultural differences as they relate to the delivery of dental hygiene care.</td>
<td>Case presentations Client survey Daily clinical evaluation forms Employer surveys Alumni surveys Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc.)</td>
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</tbody>
</table>
### Supporting Competencies

#### 7.5 Maintain honesty in relationships with clients, colleagues and other professionals.

- Case presentations
- Daily clinical evaluation forms
- Employer surveys
- Alumni surveys
- Student evaluations of colleagues
- End of year curriculum surveys

#### 7.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

- Client survey
- Daily clinical evaluation forms
- End of year curriculum surveys
- Employer surveys
- Alumni surveys

### Major Competency:

8. **Information Management and Critical Thinking:** The dental hygienist must be able to acquire and synthesize information in a critical, scientific, and effective manner.

Specifically, the competent dental hygienist must:

<table>
<thead>
<tr>
<th>Supporting Competencies</th>
<th>Methods of Measuring Competencies/Outcomes</th>
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</thead>
</table>
| 8.1 Critically analyze and evaluate published reports of oral health research and apply this information to the practice of dental hygiene. | Clinic evaluation forms  
Employer surveys  
Alumni surveys  
Dental hygiene care plans  
Results of completed course work (i.e. exams, papers, group assignments, journals, self evaluations, etc.)  
End of year curriculum surveys |
### Supporting Competencies

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<tr>
<th>8.2</th>
<th>Evaluate the safety and efficacy of oral health products, methods, techniques, and treatments.</th>
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<tbody>
<tr>
<td></td>
<td>Results of critiques of scientific reports</td>
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<td>Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc)</td>
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<td>Clinic evaluation forms</td>
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<td>Dental hygiene care plans</td>
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<td>Clinic competency exams</td>
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<td>Alumni survey</td>
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<td>Employer survey</td>
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<td>End of year curriculum surveys</td>
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<th>8.3</th>
<th>Demonstrate the ability to communicate professional knowledge verbally and in writing.</th>
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<tr>
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<td>Results of critiques of scientific reports</td>
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<td></td>
<td>Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc)</td>
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<td>Dental hygiene care plans</td>
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<td>End of year curriculum surveys</td>
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<td>Alumni surveys</td>
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<td>Employer surveys</td>
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<th>8.4</th>
<th>Demonstrate the ability to develop and articulate a thorough research design for a proposal.</th>
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<tbody>
<tr>
<td></td>
<td>Results of critiques of scientific reports</td>
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<td>Evaluations by community leaders/agencies</td>
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<td>Clinic evaluation forms</td>
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<td>Alumni surveys</td>
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<td>Dental hygiene care plans</td>
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<td>Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc)</td>
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<td>End of year curriculum surveys</td>
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<th>8.5</th>
<th>Apply self-assessment skills to prepare the graduate for life-long learning.</th>
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<td>Results of critiques of scientific reports</td>
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<td>End of year curriculum surveys</td>
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<td>Results of completed course work (i.e. exams, paper group assignments, journals, self evaluations, etc)</td>
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<td>Alumni surveys</td>
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### Methods of Measuring Competencies/Outcomes

### 9. Professional Identity: The dental hygienist must be concerned with improving the knowledge, skills, and values of the profession.

Specifically, the competent dental hygienist must:

<table>
<thead>
<tr>
<th>9.1</th>
<th>Advance the profession through leadership, service activities and affiliation with professional organizations.</th>
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<tr>
<td></td>
<td>Alumni surveys</td>
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<td></td>
<td>Employer surveys</td>
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<td></td>
<td>End of year curriculum surveys</td>
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</table>
In summary, a variety of qualitative and quantitative outcomes measures are utilized to determine the degree to which program goals and competencies are being met. Employer and alumni surveys specifically address the program goals and competencies for respondents to evaluate and comment. Other outcomes measures that provide information about attainment of program goals and competencies include client surveys, quarterly student evaluations, yearly student curriculum surveys, student surveys, national, and regional examination results, student scholarship and attrition rates.

**Professional, Scholarly, and Research Mission and Goal**

The following outcomes assessment activities/measurements will be used to evaluate the degree to which the Department of Dental Hygiene is meeting its professional, scholarly, and research mission and goal:

- Record of faculty activities such as involvement in research projects; attendance at continuing education courses, workshops, seminars, conferences, etc.; professional journal subscriptions; presentations at local, state, national, and international continuing education courses, conferences, seminars, workshops, etc.

- Department record of funded research and scholarly activities.

- Membership in professional organizations and institutions which promote, support, and disseminate the results of scientific research and/or other forms of advancing knowledge.

- Department faculty participation and active support for university general education requirements and the liberal arts enrichment of our students.

- Number of full-time faculty positions compared to part-time faculty positions.

- Number of faculty receiving promotions.

- Number of faculty pursuing advanced degrees.

- Number of faculty employed with advanced degrees.

- Number of years of teaching service in the department.

- Faculty salaries compared to other baccalaureate dental hygiene institutions.

- Number of faculty involved in interdisciplinary collaborative teaching.

- Number of faculty holding membership in professional organizations.

- Number of faculty engaged in scholarly and research activities.

- Number of faculty accessing faculty development funds.
**Service Mission and Goal**

The following outcomes assessment activities/measurements will be used to evaluate the degree to which the Department of Dental Hygiene is meeting its service mission and goal:

- Statistics indicating the number of clients and services provided by the clinic facility.
- Results of client satisfaction surveys.
- Results of employer and alumni surveys.
- Fee comparisons of EWU clinic charges compared to average private practice fees.
- Record of maintenance and capital budget for on-going replacement and purchase of equipment needed to maintain state-of-the-art facility.
- Survey of Allied Dental Health Programs - Expense and Admissions Criteria.
- Number of professional organizations, committees, commissions, etc. engaged in by faculty members.

**Student Quality Goal**

The following outcomes assessment activities will be used to evaluate the degree to which the Department of Dental Hygiene is meeting its student quality goal:

- Academic record of incoming dental hygiene students.
- Application pool for dental hygiene applicants.
- Number of student members in the Student Dental Hygienists’ Association.
- Results from alumni surveys, senior exit interviews, and student evaluations.
- Statistics of graduates who have pursued advanced degrees.
- Statistics of graduates involved in community activities, professional organizations, and community leadership positions.

**PROGRAM/COURSE DISCONTINUANCE**

See College Policies and Procedures for policy.
STUDENT POLICIES, RELATIONS, AND ENROLLMENT

STUDENT POLICIES

As a means of identifying policies, procedures and expectations of faculty, staff, students of the Department of Dental Hygiene, a Student Handbook is distributed to all dental hygiene students, full-time faculty and staff members yearly. Copies of the Student Handbook are available in the department. It is the primary responsibility of the Department Chair to update, duplicate, and distribute the Student Handbook on an annual basis. Full-time faculty are responsible for providing input to the Department Chair regarding its content. The Department Chair will meet with first year students to review the Student Handbook and answer questions regarding its content. Student from all three classes will be notified should major modifications to the Student Handbook be made.

STUDENT RELATIONS

In addition to the Department of Dental Hygiene Student Handbook, each student is also provided a copy of the EWU Student Conduct Code. Each student signs a Department of Dental Hygiene Student Agreement, a Student Educational Record Release form and an Honor Code agreement. These documents are kept in each student’s academic file which is located in the Department Chair’s office.

To enhance communication between faculty, staff, and dental hygiene students, a Student Dental Hygiene Advisory Board has been formed. Members of this Advisory Committee include the Department Chair and two representatives from each class, voted on by class members. The Advisory Committee meets at least once each quarter, or more often as necessary. Grievances which have been unresolved by the individual student meeting with the faculty member may be reviewed and resolved by the members of the Student Advisory Committee. The Department Chair may assist in resolution of issues as needed.

Members of this committee have an important role in advising the Department Chair, faculty, and staff in matters of program planning and program concerns. Student input is directed towards establishing and maintaining a successful educational program.

STUDENT ENROLLMENT

In the history of the Department of Dental Hygiene, the program has always been able to meet its cap on enrollment. The department employs a variety of methods to ensure capacity enrollment:

- Department of Dental Hygiene Endowed Scholarship
- Department of Dental Hygiene Advisory Board
- Dental Hygiene Department Career brochures
- Dental Hygiene Department Application packets
- Science, Health and Engineering High School and Community College Advisor’s notebooks
- Dental Hygiene Department Alumni and Employer surveys
- Representation at Career Fairs
- Representation at Community College and University Advising Offices
- Representation at EWU Career Fair, Open Houses
DEVELOPMENT/ALUMNI RELATIONS

The faculty and staff of the Department of Dental Hygiene are committed to maintaining positive relations with the surrounding dental community, including dentists and dental hygiene alumni. To meet that endeavor, the following mechanisms are in place:

COLLEGE OF SCIENCE, HEALTH, AND ENGINEERING ADVISORY BOARD

The Department of Dental Hygiene supports the advancement and activities of the college advisory board by regular attendance at meetings of the board and appropriate subcommittees. The department further promotes the advisory board by contributing names of potential advisory board members from the surrounding community to the Dean.

DEPARTMENT OF DENTAL HYGIENE ADVISORY BOARD

The Department of Dental Hygiene maintains a positive relationship with the dental community through its Dental Hygiene Advisory Board. The surrounding dental community offers a rich resource of professionals who volunteer to serve on the board. Area dental hygienists, alumni, dentists and other community leaders are invited to serve as members of the board. Ex-officio members are the college dean, college development director, and Department Chair.

The purpose of the Dental Hygiene Advisory Board is to provide advice and assistance in program planning. Dental community needs, curriculum planning and department needs are agenda items frequently discussed at these meetings. The Advisory Board meets at least once a year.

ALUMNI SURVEYS

Alumni surveys are employed by the department at least every three years to assess the effectiveness and satisfaction with the dental hygiene program and to provide data regarding employment status. Results of the alumni surveys are presented to students, faculty, staff and advisory board members.

EMPLOYER SURVEYS

Employer surveys are conducted by the department at least every three years to assess the effectiveness and satisfaction with the dental hygiene program and to provide data regarding employment status and future employment needs. Results of the employer surveys are presented to students, faculty, staff and advisory board members.

CONTINUING EDUCATION COURSES

The faculty of the Department of Dental Hygiene are committed to the professional development of alumni, dentists, and dental hygienists employed in the Inland Empire. To that endeavor, the department serves as a resource for continuing education speakers and frequently sponsors or co-sponsors continuing education programs for area dental professionals.

COMMUNITY SERVICE EVENTS

The department hosts a variety of community service event. Some of sponsored by the Department of Dental Hygiene, while others are sponsored by local organizations and the Department simply
provides the space. Examples of these include Eagle Kids Health Day, Senior Smile Day, Dental Camp, and Give Kids a Smile Day.
**SUGGESTED CURRICULUM FOR DENTAL HYGIENE MAJORS**
**AT EASTERN WASHINGTON UNIVERSITY**

### PREREQUISITE YEAR

<table>
<thead>
<tr>
<th>Fall Quarter</th>
<th>Winter Quarter</th>
<th>Spring Quarter</th>
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</thead>
<tbody>
<tr>
<td>CHEM 161 (5)*</td>
<td>CHEM 162 (5)*</td>
<td>CHEM 163 (5)*</td>
</tr>
<tr>
<td>BIOL 232 (5)*</td>
<td>BIOL 233 (5)*</td>
<td>BIOL 234 (5)*</td>
</tr>
<tr>
<td>ENGL 101 (5)</td>
<td>FNDT 356 Nutrition (5)</td>
<td>CMST Interper Comm (4-5)</td>
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<tr>
<td>CPLA 100 Computer Lit (1)</td>
<td>PSYC 100 (5)</td>
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Total credits 17

### FIRST DENTAL HYGIENE YEAR

<table>
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<tr>
<th>Fall Quarter</th>
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<tr>
<td><strong>ENGL 201 (5)</strong></td>
<td><strong>Cultural or Intl Diversity (4-5)</strong></td>
<td><strong>GECR or Cultural or Intl. Diversity (5)</strong></td>
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<td>DNHY 330 Preclinic I (4)</td>
<td>DNHY 320 Pharm (3)</td>
<td>DNHY 300 Head &amp; Neck Anat (3)</td>
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<tr>
<td>DNHY 301 Dent Anat (3)</td>
<td>DNHY 331 Preclinic II (4)</td>
<td>DNHY 332 Preclinic III (4)</td>
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<td>DNHY 310 Radio I (3)</td>
<td>DNHY 311 Radio II (2)</td>
<td>DNHY 360 Preventive Dentistry (2)</td>
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Total credits 15

### SECOND DENTAL HYGIENE YEAR

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<tbody>
<tr>
<td>DNHY 350 Clinic I (4)</td>
<td>DNHY 351 Clinic II (4)</td>
<td>DNHY 352 Clinic III (4)</td>
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<tr>
<td>DNHY 302 Histo/Embryology (3)</td>
<td>DNHY 380 Intro Restor Duties I (3)</td>
<td>DNHY 470 Research Methods(3)</td>
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<tr>
<td>DNHY 341 Patho/Physiology I (3)</td>
<td>DNHY 342 Patho/Physiology II (3)</td>
<td>DNHY 430 Gen/Oral Pathology (3)</td>
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<td>DNHY 321 Pain Control (3)</td>
<td>DNHY 421 Periodontology I (3)</td>
<td>DNHY 381 Prin.Rest.Duties II (3)</td>
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Total credits 13

### THIRD DENTAL HYGIENE YEAR

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<th>Fall Quarter</th>
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<th>Spring Quarter</th>
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<tbody>
<tr>
<td>DNHY 451 Clinic V (5)</td>
<td>DNHY 452 Clinic VI (5)</td>
<td>DNHY 453 Clinic VII (5)</td>
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<tr>
<td>DNHY 422 Periodontology II (2)</td>
<td>DNHY 481 Rest.Clinic II (2)</td>
<td>DNHY 482 Rest.Clinic III (2)</td>
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<td>DNHY 460 Cmty.Dent.Hlth I (2)</td>
<td>DNHY 461 Cmty.Dent.Hlth II (2)</td>
<td>DNHY 490 DH Capstone (4)</td>
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<td>DNHY 480 Rest. Clinic I (3)</td>
<td>DNHY 476 Teaching Prac II (1)</td>
<td>DNHY Teaching Prac III (1)</td>
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<tr>
<td>DNHY 475 Teaching Prac I (1)</td>
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Total credits 12-13

* This four-year plan assumes permission is granted to take the BIOL and CHEM series concurrently and also assumes that student enters with pre-college math and writing skills.

* *This plan assumes student knowledge of and responsibility for general education and graduation requirements; students may modify the timeline and number of credits per quarter as needed.

REV 6/06
EVALUATION AND UPDATING OF THE DEPARTMENT POLICIES AND PROCEDURES

The Department Policies and Procedures is not a static document and, as such, requires periodic evaluation and updating. The Department Chair will conduct an annual evaluation of the Department Policies and Procedures and seek approval for modification of the plan from department faculty. Classified staff, students, and the college dean will also be sources for revision of the document. Full-time faculty members will approve the revised Department Policies and Procedures by overall consensus.

Following final review by all full-time faculty, the revised Department Policies and Procedures will be available for review by all faculty, both full- and part-time in the Department of Dental Hygiene. Modifications to the Department Policies and Procedures will be presented to the college dean for his/her approval.