



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee

Agenda



Notice is hereby given that a public meeting of the Education Subcommittee of the Dental Hygiene Committee of California will be held as follows:

EDUCATION SUBCOMMITTEE MEETING

Friday, November 16, 2018

Radisson Hotel Fresno

Conference Center

1055 Van Ness Avenue

Fresno CA 93721

9:00 am until adjournment

Education Subcommittee Members:

Nicolette Moultrie, RDH, Chair

Michelle Hurlbutt, RDH Educator

Edcelyn Pujol, Public Member

Evangeline Ward, RDH

Upon conclusion of Full Agenda Item 9 on November 16, 2018

Agenda

EDU 1 – Roll Call

EDU 2 – Public Comment for Items Not on the Agenda

[The DHCC may not discuss or take action on any matter raised during the Public Comment section that is not included on this agenda, except whether to decide to place the matter on the agenda of a future meeting (Government Code §§ 11125 & 11125.7(a))]

EDU 3 – Chairperson's Report

EDU 4 – Approval of the April 20, 2018 Education Subcommittee Meeting Minutes

EDU 5 – Discussion, Possible Action, and Recommendation to the Full Committee Approval of Changes to the San Joaquin Valley College Dental Hygiene Programs Locations

EDU 6 – Discussion, Possible Action, and Recommendation to the Full Committee Approval of Changes in Ownership of the Carrington College Dental Hygiene Programs

EDU 7 – Discussion and Possible Action, and Possible Recommendation to the Full Committee on Approval Status for Concorde Career Colleges Three Campuses (Garden Grove, San Bernardino, and San Diego) due to Dental Hygiene Program Deficiencies

EDU 8 - Update on Dental Hygiene Educational Program Reviews

EDU 9 – Discussion, Possible Action, and Recommendation to the Full Committee on the Proposed Revisions to the Following Educational Regulations:

- a.** 16 CCR §1103. Educational Programs Definitions.
- b.** 16 CCR §1104. Approval of New RDH Educational Programs and Continuation of Approval for Approved RDH Educational Programs.
- c.** 16 CCR §1104.1. Process for Approval of a New RDH Education Program.
- d.** 16 CCR §1105. Requirements for RDH Educational Programs.
- e.** 16 CCR §1105.1. Faculty
- f.** 16 CCR §1105.2. Required Curriculum.
- g.** 16 CCR §1107. RDH Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage.
- h.** 16 CCR §1108. Remedial Education.

EDU 10 – Future Agenda Items

EDU 11 – Adjournment

DHCC members who are not members of this subcommittee may attend meetings as observers only and may not participate or vote. Action may be taken on any item listed on this agenda, including information only items. Items may be taken out of order for convenience, to accommodate speakers, or maintain a quorum. All times are approximate and subject to change. The meeting may be cancelled without notice. For verification of the meeting, call (916) 263-1978 or access the Committee's Web Site at www.dhcc.ca.gov.

The meeting facilities are accessible to individuals with physical disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Brittany Alicia at (916) 576-5001 or e-mail at: brittany.alicia@dca.ca.gov or send a written request to DHCC at 2005 Evergreen Street, Ste. 2050, Sacramento, CA 95815. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodation.



*Roll Call for the Dental Hygiene Committee of California's
Education Subcommittee Meeting*

November 16, 2018

	Present	Absent
Nicolette Moultrie, RDH Member, Chair		
Michelle Hurlbutt, RDH Educator Member		
Edcelyn Pujol, Public Member		
Evangeline Ward, RDH Member		



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 2

Public Comment for Items Not on the Agenda

[The DHCC may not discuss or take action on any matter raised during the Public Comment section that is not included on this agenda, except whether to decide to place the matter on the agenda of a future meeting (Government Code §§ 11125 & 11125.7(a))]



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 3

Chairperson's Report

A Verbal Report Will Be Given



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 4

**Approval of the April 20, 2018 Education Subcommittee
Meeting Minutes**

Education Subcommittee Meeting Minutes *April 20, 2018*

Department of Consumer Affairs
Dental Hygiene Committee of California
Doubletree by Hilton Hotel – San Diego Mission Valley
7450 Hazard Center Drive
San Diego, CA 92108

Education Subcommittee Members Present:

Michelle Hurlbutt, Chairperson, Registered Dental Hygienist (RDH) Educator
Noel Kelsch, Registered Dental Hygienist in Alternative Practice (RDHAP)
Edcelyn Pujol, Public Member

Education Subcommittee Members Absent:

Nicolette Moultrie, RDH
Evangeline Ward, RDH

DHCC Staff Present:

Anthony Lum, Executive Officer
Brittany Alicia, Receptionist
Nancy Gaytan, Enforcement Analyst
Adina Pineschi-Petty, Doctor of Dental Surgery (DDS), Educational Specialist
Jason Hurtado, Department of Consumer Affairs (DCA) Legal Counsel for the DHCC

Public Present:

Beth Wilson, California Dental Hygienist's Association (CDHA)
Maureen Titus, CDHA
Heidi Cossam, CDHA
Karen Fischer, Executive Officer, Dental Board of California (DBC)
Thomas Stewart, DDS, President, DBC
JoAnn Galliano, RDH, MS, DHCC Educational Consultant and Subject Matter Expert (SME)
Debra Daniels, Taft College
Vickie Kimbrough, Taft College, Purple Pen
Leslie Nazaroff, San Joaquin Valley College (SJVC) – Ontario
Brenda Serpa, SJVC – Visalia
Morgan Stacey, Duane Marris, LLP
Kelly Reich, Western Regional Examination Board (WREB)
Sabrina Santucho, Concorde Career College (CCC) – San Bernardino
Jana Pierce, Shasta College

Meg Robison, Southwestern College (SWC), Dental Hygiene Student
Jen Stoehr, SWC Dental Hygiene Student
Amanda Friednchs, SWC Dental Hygiene Student
Kassandra Brown, SWC Dental Hygiene Student
Kerrin Bradford, SWC Dental Hygiene Student
Amelia Mosser, SWC Dental Hygiene Student
Lisa Kamibayashi, West Los Angeles College (WLAC)
Arezou Goshtasbi, Concorde Career College (CCC) – Garden Grove
Laurel Sampson, CCC – San Diego
Veronica Patino, SWC
Victoria Mayfield, SWC
Summery Cheam, SWC
Jeressa Balagot, SWC
Farah Al-jay, SWC
Jean Honny, SWC, RDH
Donna Smith, University of Southern California (USC)
Linda Brookman, USC

Roll Call and Establishment of a Quorum

Acting Chair Dr. Michelle Hurlbutt called the subcommittee to order (appointed by President Susan Good as stand in for the absent Educational Subcommittee Chair Nikki Moultrie) at 10:20 a.m.

Members present: Acting member Noel Kelsch (appointed by President Susan Good), Edcelyn Pujol, and Michelle Hurlbutt. A quorum was established with three members present.

Public Comments for Items Not on the Agenda

None.

Chairperson's Report

None.

Approval of the November 17, 2017, Education Subcommittee Minutes

Dr. Hurlbutt presented the November 17, 2017 Educational Subcommittee Minutes. Educational Subcommittee accepted the November 17, 2017 Educational Subcommittee Minutes.

No public comment received.

Discussion and Possible Action, and Recommendation to the Full Committee to Amend CCR, Title 16, Division 11, § 1107(b)(O)(9)(A) RDH Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia, and Periodontal Soft Tissue Curettage (Specifically, Local Anesthesia Injection Sites and Nitrous Oxide Administration Clarification)

DHCC Executive Officer (EO) Anthony Lum presented “letters of concern” submitted by dental hygiene educational programs (DHEPs) regarding 16 CCR § 1107.

Letters address concerns on language and parameters of number and type of injections as well as language and parameters of nitrous oxide-oxygen analgesia covered in 16 CCR § 1107.

Dr. Hurlbutt stated a table was created via a section 100 for clarification of 16 CCR § 1107. Terminology utilized was appropriate at the time the regulations were written, but now need to be amended to reflect current terminology.

Motion: The Educational Subcommittee to recommended to the full committee 16 CCR § 1107 concerns be referred to a task force composed of Committee members and subject matter experts to review and make recommendations to the Full Committee to amend the regulatory language.

Motion: Noel Kelsch

Second: Edcelyn Pujol

Public comment:

Diane Melrose (USC) requested clarification of nasopalatine (P-ASA).

EO Lum clarified chart created paralleled the regulations.

Maureen Titus (CDHA) expressed concern and requested 16 CCR § 1107 to be reviewed.

Dr. Hurlbutt clarified the decision regarding types and number of injections paralleled out-of-state RDH applicant SLN course requirements to ensure continuity.

JoAnn Galliano (DHCC Educational Consultant and SME) requested nitrous oxide-oxygen analgesia timing clarification for application by DHCC staff during site visits.

Dr. Hurlbutt clarified the intent was for the patient to experience twenty minutes of nitrous oxide-oxygen exposure to ensure proper student management of the patient.

The Subcommittee and legal counsel Jason Hurtado defined the twenty minutes to include beginning titration of nitrous oxide-oxygen to final oxygenation, not to include set up of unit or final oxygenation.

Noel Kelsch requested that it be stressed when the task force reviews requested nitrous oxide-oxygen analgesia timing, that the patient's best interest, rather than the amount of time, should be paramount in deciding the timing.

Lisa Kamibayashi (WLA) stated concerns that WLA's budget and a lack of access to nitrous oxide due to a shortage is of concern.

Dr. Hurlbutt stated the Committee makes regulations based on the best interest of the public and can't take educational program budget concerns into consideration.

Lisa Kamibayashi stated DBC is not as prescriptive with dental education and feels DHCC should mirror Dental Board of California (DBC) regulations.

Dr. Hurlbutt clarified the decision regarding nitrous oxide-oxygen analgesia paralleled out-of-state RDH applicant SLN course requirements to ensure continuity.

Dr. Hurlbutt stated the task force would be made aware of concerns voiced during public comment and be considered during deliberations.

Vickie Kimbrough (Taft, Purple Pen) requested the Committee separate the SLN requirements between California DHEPs and SLN courses for out-of-state applicants. Stated injection count sufficient but nitrous oxide-oxygen exposure time needs revisiting.

Jean Honny (SWC, SLN provider) requested the Committee separate the SLN requirements between California DHEPs and SLN courses for out-of-state applicants. Stated in-state DH students are monitored by the program for twenty-four months and educators are acutely aware of student competence, whereas the SLN providers have limited exposure with out-of-state students.

Dr. Hurlbutt stated that the Committee is aware the California DHEPs are competency based and not requirement based, in-state RDH educators have an awareness of student abilities and will ensure public comments will be taken into consideration.

Diane Melrose requested clarification as to how input will be provided to the task force.

Dr. Hurlbutt covered task force process and reassured that the public/DHEP educators will have input into the process.

Noel Kelsch stated that the Committee acknowledges the comments and concerns of the educators and recommended that a diverse group of subject matter experts make up the task force.

EO Lum will review the parameters of including educators onto the task force.

Dr. Hurlbutt requested that EO Lum send an update to the DHEP educators clarifying nitrous oxide-oxygen analgesia timing would define the twenty minutes to include beginning titration of nitrous oxide-oxygen to final oxygenation, not to include set up of unit or final oxygenation. In addition, the educators will be informed of the clarification of types and numbers of injections.

EO Lum thanked DHEP educators for sending in the letters to open discussion on 16 CCR § 1107.

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: Motion for the Education Subcommittee to recommend to the full committee 16 CCR § 1107 concerns be referred to a task force composed of Committee members and subject matter experts to review and make recommendations to the Full Committee to amend the regulatory language.

Vote: Pass (3:0).

Discussion and Possible Action, and Recommendation to the Full Committee to Clarify Radiography Instruction in Dental Hygiene Educational Programs

EO Lum presented concerns submitted by DHEPs regarding sole use of digital radiology format. DHEP educators stated they were informed in the past that instruction in analog radiology was no longer required and some programs have disposed of analog equipment and/or switched solely to digital equipment. DHEP educators feel analog radiology can be

covered sufficiently didactically and rely on digital for use in preclinic/clinic. Staff requests clarification of Radiology requirements.

Dr. Hurlbutt stated the DHCC utilizes 16 CCR §1014.1 (f-g) “Requirements for Radiation Safety Courses” when reviewing dental hygiene education program and clarified the DHCC statutes allow the DHCC to utilize Dental Board of California (DBC) regulations when the DHCC does not have a regulation that applies to the area under review.

Ms. Kelsch requested clarification from the Dental Board into the interpretation of 16 CCR §1014.1 (f-g).

DBC EO Karen Fischer clarified that the DBC does not give recommendations, interpretations, nor clarifications of regulations and/or statutes and stated if the DHCC wanted to put the question in writing, she would bring it up in a future DBC meeting and work with the DHCC as to any concerns the Committee has.

Dr. Hurlbutt stressed that the goal of the Committee is to ensure that dental hygiene schools prepare students for the workforce. Therefore, analog should still be covered to competency as not all dentists are using digital radiography equipment. The Committee’s concern is standardization of education.

Ms. Kelsch stated that training in analog radiography can occur at the office and that she is concerned for the schools that have disposed of their analog equipment.

Dr. Hurlbutt stated that currently the DHCC must follow CODA Standards 4-2 when reviewing educational programs.

JoAnn Galliano, DHCC Educational Consultant, referred to CODA Standard 2-11 as well as DHCC regulations, stating students must have sufficient radiographic experiences, but neither CODA nor DHCC regulations delineate between analog and digital requirements. Ms. Galliano felt that the DHCC could determine the guidelines independent of 16 CCR §1014.1 (f-g). As 16 CCR §1014.1 (f-g) is not referred to in our regulations, the DHCC is not bound to utilize them.

Motion: The Educational Subcommittee recommends to the full Committee to direct the DHCC to utilize CODA Standards as to radiography educational requirements for dental hygiene educational programs.

Motion: Noel Kelsch
Second: Edcelyn Pujol

Public Comment: None

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: The Educational Subcommittee recommends to the full Committee to direct the DHCC to utilize CODA Standards as to radiography educational requirements for dental hygiene educational programs.

Vote: Pass (3:0).

Motion: The Educational Subcommittee recommends to the full Committee to direct the Educational Task Force to review, discuss, and make recommendations to the Full Committee regarding digital and analog radiography requirements within dental hygiene educational programs.

Motion: Noel Kelsch

Second: Edcelyn Pujol

Public Comments:

Public requested clarification as to what dental hygiene programs should currently follow.

Dr. Hurlbutt clarified the meeting process regarding Subcommittee recommendations to the full Committee, and that any decision will be part of the update EO Lum will send out.

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: The Educational Subcommittee recommends to the full Committee to direct the Educational Task Force to review, discuss, and make recommendations to the Full Committee regarding digital and analog radiography requirements within dental hygiene educational programs.

Vote: Pass (3:0).

Discussion and Possible Action, and Recommendation to the Full Committee to Determine the Number of Interim Therapeutic Restorations (ITR) to be Completed in Dental Hygiene Educational Programs for Competency

EO Lum presented concerns from DHEPs as to the number of ITRs to be completed by dental hygiene students to ensure competency. DHEPs feel that the current number of 10 ITRs is unnecessarily high to determine competency in ITRs and requested that each program be able to decide how many ITRs determines competency for their respective students as well as be an optional requirement for DHEP curriculum.

DHCC staff requests the Educational Subcommittee discuss and determine the request of the DHEPs and determine action, if any, to take place.

Dr. Hurlbutt addressed the DHEP ITR requests and stated as it is written in statute, it allows individual DHEPs to teach ITRs as an optional duty. To change the number of ITRs required would be a regulatory language change. DHCC will be looking at regulations concerning ITRs.

EO Lum provided an update stating ITR regulations are not ready as of yet and are in draft form and will be a future agenda item. EO Lum spoke to Dr. Glassman regarding the number of ITRs and as the DHCC is promulgating regulations, there can be a compromise and that the DHCC may require a minimum of 5 and then leave it up to the DHEPs to decide the number to determine competency.

Dr. Hurlbutt stated that DHEPs do educate students over a long period of time and are responsible to deem students as competent. Regulations may be created to apply differently to the graduate hygienist in an optional course versus a student hygienist in a DHEP and stated a task force will be assigned to address this.

Dr. Hurlbutt clarified that if a DHEP wishes to teach ITR, it must be approved by the DHCC and must follow the Health Workforce Pilot Project (HWPP) #172 protocols. Regulations

could take two to three years to be put in place so until then the HWPP #172 protocols must be followed.

Ms. Kelsch requested EO Lum to clarify for the audience as to if ITR qualifications are added to RDH licenses.

EO Lum clarified that ITR qualifications are added when notified by DHEPs or licensees from Dr. Glassman's courses.

JoAnn Galliano requested clarification to the law which states that the regulatory language for curriculum must be created in tandem with the DBC.

EO Lum stated that the DHCC and the DBC jointly decided that each will create their own curriculum packets that will parallel each other's curriculum and then combine them into one set of regulations. DBC will promulgate the regulations and the DHCC will propose amendments during the process and the DBC and DHCC will each be responsible for their own licensing populations.

Legal counsel Hurtado clarified BPC §1910.5(c) states the DHCC shall use the curriculum submitted by the board pursuant to Section 1753.55 to adopt regulatory language for approval of courses of instruction for ITRs and if changes need to be made they would have to be agreed upon by both the DHCC and DBC.

DBC EO Fisher stated language was approved by the DBC and that cooperation can be accomplished by having the DHCC weigh in during the hearing and if any changes need to be addressed, the DHCC can bring these changes to the attention of the DBC. The DBC has approved two programs utilizing curriculum from HWPP #172. The DBC is waiting until the regulations are promulgated before approving any more. In addition, the DBC has not had much interest by RDAEFs as they will need a permit from the DBC in order to perform ITRs and stated that these regulations are more for RDHs than RDAEFs.

Dr. Hurlbutt feels a task force would be necessary to review ITR regulatory language and clarified that ITRs are optional, but that CODA requires DHEPs to teach all duties that are permissible by state laws and regulations except for optional duties.

Noel Kelsch stated that DHEPs are also having difficulty obtaining the number of patients required to have students proficient in ITRs.

Motion: The Educational Subcommittee recommends to the full Committee to refer to a regulatory task force to draft regulatory language concerning ITR course curriculum.

Motion: Edcelyn Pujol

Second: Noel Kelsch

Public comment:

JoAnn Galliano stated that the Educational Subcommittee members along with the Educational Program Specialist could review the language and make the necessary recommendations.

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

***Vote: The Educational Subcommittee recommends to the full Committee to refer to a regulatory task force to draft regulatory language concerning ITR course curriculum.
Vote: Pass (3:0).***

Discussion and Possible Action, and Recommendation to the Full Committee on Dental Hygiene Educational Program Review Updates:

Carrington San Jose Dental Hygiene Program (CSJ)
Cerritos College Dental Hygiene Program (Cerritos)
Concorde Career College – Garden Grove Dental Hygiene Program (CCCGG)
Concorde Career College – San Bernardino Dental Hygiene Program (CCCSB)
Concorde Career College – San Diego (CCCSB)
Moreno Valley College Dental Hygiene Program (Moreno)
Shasta College Dental Hygiene Program (Shasta)
Taft College Dental Hygiene Program (Taft)
University of the Pacific Dental Hygiene Program (UOP)
Complaints Received from Students, Faculty, and the Public

DHCC Educational Consultant JoAnn Galliano, RDH, MS, and DHCC Educational Specialist Adina Pineschi-Petty, DDS provided an update as to the nine schools visited by DHCC Educational Staff.

Concorde Career Colleges (CCC) have had several site visits and significant deficiencies have been discovered. CSJ, Cerritos, Moreno, Shasta, and UOP have had minor deficiencies that are in the process of remediation or have been remedied and are in full compliance.

Taft College has a current status of withdrawn with a staid. Future status is to be determined by the Committee. As of a site visit on January 29, 2018, all outstanding deficiencies have been confirmed as remedied and is now in full compliance. It is DHCC staff's recommendation to reinstate the Committee's approval of Taft.
Dr. Hurlbutt questioned the status of CCCGG and Taft as to when the status can be converted back to approved.

Legal counsel Hurtado stated that Taft's status would need to be brought to the full Committee to be determined and direct the EO to issue a new decision.

Motion: The Educational Subcommittee recommends to the full Committee to direct the Executive Officer to issue a new decision regarding approval of the Taft College Dental Hygiene Educational Program.

Motion: Noel Kelsch

Second: Edcelyn Pujol

Discussion: None

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: The Educational Subcommittee recommends to the full Committee to direct the Executive Officer to issue a new decision regarding approval of the Taft College Dental Hygiene Educational Program.

Vote: Pass (3:0).

CCCGG has a status of withdrawn with a stay provided they stay in compliance of all laws and regulations. As of January 18, 2018, CCCGG new deficiencies were discovered and no longer in compliance.

Ms. Kelsch requested clarification of infection control compliance issues at CCCGG.

Dr. Petty clarified types of compliance issues and informed the Subcommittee that waterline issues have been handled appropriately and have been remedied.

Ms. Kelsch expressed concern and requested clarification of new deficiencies that were not previously discovered.

Dr. Petty clarified that the new deficiencies included a deficiency of lack of requirements and of approximately 200 program hours. The report was intended to bring these deficiencies to the Committee's attention for a decision. Laurel Sampson, CCCSD Program Director, has been working towards remedying the deficiencies for all three CCC programs. The curriculum changes have been drafted and submitted to CCC's Corporate.

Dr. Hurlbutt requested clarification that the previously undiscovered deficiencies are new, and the previous deficiencies discovered that caused the withdrawal have been remedied.

Dr. Petty confirmed all previous deficiencies have been corrected and are now in compliance.

Dr. Hurlbutt stated that the Subcommittee could recommend to the full Committee to either withdraw CCCGG with a stay pending further investigation or maintain the withdrawal and direct the EO to send communication to CCCGG as to appeal rights.

Ms. Kelsch stated students have not completed required courses and therefore are not qualified to take the required boards to obtain a license.

Dr. Hurlbutt clarified that when programs are reviewed, the CODA Standards of content of (e.g. biochemistry as a part of organic chemistry) have been accepted as satisfying the DHCC regulations. CCCGG does not have a course in, nor content of, biochemistry. In addition, CCCGG is not up to university standards in anatomy and physiology. Staff's concern is current students will be graduating deficient in ten weeks of education.

Dr. Hurlbutt stated that the options are to do nothing, to withdraw the program, or to withdraw the program and stay the withdrawal pending compliance of an additional ten weeks of education for the current class to complete to meet the regulations. If CCCGG does not add the additional ten weeks, they will be withdrawn.

Dr. Petty requested clarification if this option would apply to CCCSD and CCCSB.

Dr. Hurlbutt stated CCCSB and CCCSD will be addressed separately.

Dr. Hurlbutt questioned the Subcommittee as to the recommendation the Subcommittee should present to the full committee.

Ms. Kelsch stated that there are reasons for minimum requirements and as CCCGG has not completed the minimum requirements, the Subcommittee would need to move forward with recommending action to the full committee.

Ms. Pujol concurred action must be taken.

Dr. Hurlbutt stated the Educational Subcommittee is charged with overseeing DHEPs and stated all the programs should be as uniform in standards as possible, barring any innovation or creativity within the individual programs.

Dr. Hurlbutt clarified that there have been reviews of other schools in addition to the nine investigations currently updated and stated her surprise as to the regulation issues that have come to light.

Ms. Kelsch thanked staff for their diligence during the review of programs and the attendance of DHEP directors within the audience for attending and taking an active part in the process.

Dr. Hurlbutt requested clarification from legal counsel Hurtado if CCCGG does not meet the conditions of the Stay, CCCGG will be withdrawn and the graduates will have graduated from a non-approved school.

Legal counsel Hurtado concurred.

Motion: The Educational Subcommittee recommends to the full Committee to withdraw the approval of the CCCGG DHEP with the issuance of a stay of the withdrawal pending compliance of an additional ten weeks of education for the current class to complete to meet the regulations and submit a plan to the DHCC by July 2, 2018.

Motion: Noel Kelsch

Second: Edcelyn Pujol

Public Comment:

Dr. Arezou Goshtasbi (CCCCG DHEP PD) stated that as soon as the CCCs were notified of the deficiencies, they immediately began to construct a plan to correct the deficiencies and clarified that the students did have some biochemistry, and biochemistry is covered somewhat during nutrition.

Dr. Hurlbutt clarified for Dr. Goshtasbi that CCCGG needs to have a plan in place for the current graduating class to be in compliance with an additional ten weeks of education to include biochemistry, anatomy, and physiology. If CCCGG does not comply, the withdrawal will stand and the students will graduate from a non-approved program and will not be eligible for California licensure.

Dr. Goshtasbi stated CCCGG is approved by CODA. The deficiencies were brought to the attention of the CCCs during the review of CCCSB's CODA self study and stated the CCCs are committed to comply.

Dr. Hurlbutt stated, to ensure clarification for CCCGG, that the compliance must be in place for the August graduates.

Dr. Goshtasbi stated she was not clear that the intent for compliance was to be for the August graduates, but is now clear that the compliance conditions must be in place for the August graduates.

Ms. Kelsch requested clarification that the additional deficiencies discovered will also be in compliance with the August graduates.

Dr. Goshtasbi stated that all deficiencies will be in compliance for the August graduates.

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: The Educational Subcommittee recommends to the full Committee to withdraw the approval of the CCCGG DHEP with the issuance of a stay of the withdrawal pending compliance of an additional ten weeks of education for the current class to complete to meet the regulations and submit a plan to the DHCC by July 2, 2018

Vote: Pass (3:0).

Dr. Hurlbutt requested recommendations from staff as to the status of the CCCSB and CCCSD DHEPs

Dr. Petty stated as the way the law is written, staff recommends withdrawal of CCCSB and CCCSD pending resolution of the deficiencies by July 1, 2018.

EO Lum requested clarification if CCCSB and CCCSD will be allowed to comply with the deficiencies by July 1, 2018.

Dr. Hurlbutt requested clarification from legal counsel Hurtado if the withdrawal will be automatic if the deficiencies are not met by July 1, 2018.

Legal counsel Hurtado confirmed withdrawal will be automatic and EO Lum would notify CCCSD and CCCSB of their right to appeal.

Motion: The Educational Subcommittee recommends to the full Committee to withdraw the approval of the CCCSD and CCCSB DHEP in the event deficiencies are not resolved by July 2, 2018.

Motion: Noel Kelsch
Second: Edcelyn Pujol

Public Comment:

Dr. Petty requested clarification if the same conditions moved in CCCGG's case would apply to current upcoming graduating cohorts of CCCSB and CCCSD.

Ms. Kelsch clarified in previous cases the same conditions had applied and would apply to these cohorts as well.

Dr. Hurlbutt concurred.

Legal counsel Hurtado stated the stay can be applied by the EO if CCCSD and CCCSB appealed the decision.

Ms. Galliano stated in the past, if deficiencies were significant enough, the DHCC did not allow a cohort to graduate and obtain a California license. Ms. Galliano stated a precedence in this area has been set and have to hold all DHEPs to the same standard and requested clarification of the motion if it includes adding the additional ten weeks to the current graduating cohort.

Dr. Hurlbutt confirmed the conditions includes an additional ten weeks of education for the current graduating cohort.

Name	Aye	Nay	Abstain	Absent
Michelle Hurlbutt	X			
Noel Kelsch	X			
Edcelyn Pujol	X			
Nicolette Moultrie				X
Evangeline Ward				X

Vote: The Educational Subcommittee recommends to the full Committee to withdraw the approval of the CCCSD and CCCSB DHEP in the event deficiencies are not resolved by July 2, 2018.

Vote: Pass (3:0).

Ms. Kelsch thanked the Subcommittee for applying the laws and regulations consistently as it is important to keep all DHEPs equal.

EO Lum informed the Subcommittee and audience that the laws and regulations are under review to give the Committee other options than approved and withdrawal, such as Cite and Fine and probation.

Future Agenda Items

Future Agenda Items: None

Public Comment: None

Adjournment

Chair Hurlbutt adjourned the Education Subcommittee meeting at 12:37 p.m.



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 5

**Discussion and Possible Action, and Recommendation
to the Full Committee Approval of Changes to the
San Joaquin Valley College Dental Hygiene Programs
Locations**



MEMORANDUM

DATE	November 16, 2018
TO	Educational Subcommittee
FROM	Adina A. Pineschi-Petty DDS Educational Specialist Dental Hygiene Committee of California
SUBJECT	Discussion and Possible Action, and Recommendation to the Full Committee Approval of Changes to the San Joaquin Valley College Dental Hygiene Programs Locations

Background

San Joaquin Valley College (SJVC) held two (2) separate dental hygiene educational program (DHEP) approvals with the Dental Hygiene Committee of California (DHCC) and two (2) separate accreditations with the Commission on Dental Accreditation (CODA). The approvals/accreditations were located at:

1. SJVC Visalia Campus with an extension site at the SJVC Ontario Campus.
2. SJVC San Diego Campus.

Due to continued low enrollment, the SJVC San Diego Campus had been in a period of "Non-Enrollment" (DHCC and CODA approved) since November 2016, with the final cohort graduating in November 2017.

In May of 2018, SJVC submitted program change reports to CODA requesting:

1. Permission to teach out the SJVC Ontario Campus Extension Site (under the Visalia Campus accreditation) and discontinue the site under the Visalia Campus approval after the last extension site cohort graduates in September 2019.
2. Permission to geographically transfer the SJVC San Diego Campus accreditation to the SJVC Ontario Campus with the intention of having an independent approval and accepting a new class under the Ontario Campus accreditation in February 2019.

At the August 8, 2018 CODA meeting, the Commission adopted a resolution to adopt both program changes and continue the status of both programs as "approval without reporting requirements" and be reviewed in full during their next scheduled site visits of 2019 for Visalia and 2021 for San Diego/Ontario.

On October 5, 2018 SJVC sent a letter to the DHCC requesting to be placed on the November 16-17, 2018 meeting agenda to formally request approval for this program change.

Action Requested

Consider and possibly recommend to the full Committee to approve the request of SJVC to geographically move the SJVC San Diego Campus site approval to the SJVC Ontario Campus.

Staff Recommendation

Staff recommendation is to approve the change submitted by SJVC.

Pros: Approval to the change simply moves the geographic location of the DHEP and poses no significant change to the educational content of the SJVC program.

Cons: None.

October 5, 2018

Dr. Adina A. Pineschi-Petty, DDS
Educational Program Specialist
Dental Hygiene Committee of California
2005 Evergreen Street, Suite 2050
Sacramento, CA 95815

RE: San Joaquin Valley College (SJVC) San Diego Campus Dental Hygiene Program Facility Change;
San Joaquin Valley College (SJVC) Visalia & Ontario Campuses Dental Hygiene Program Changes

Dear Dr. Petty,

Per our prior e-mail dialogue, I would like to now submit a request for our San Joaquin Valley College (SJVC) Dental Hygiene programs to be placed on the agenda for the November 16-17, 2018 DHCC Committee meeting.

To provide a brief summary, in May 2018, SJVC submitted program change reports to the Commission on Dental Accreditation (CODA) for two primary purposes. The first was for permission to teach-out the SJVC Ontario Campus Extension Site (Visalia approval), to be discontinued once the final cohort of Extension Site students complete their program in September 2019. The second request was for permission to geographically transfer the SJVC San Diego Campus approval to the SJVC Ontario Campus, with the plan to enroll students at the SJVC Ontario Campus (San Diego approval) with the February 2019 cohort start.

Due to continued low enrollments, the SJVC San Diego Campus Dental Hygiene program has been in a CODA-approved Period of Non-Enrollment since November 2016. All first-year positions have been vacant since March 2017. The final cohort of students on this campus completed their program in November 2017. SJVC senior management made the decision to seek CODA approval for a geographical transfer of the San Diego Campus approval to the Ontario Campus so that the latter will have an independent approval status of its own.

At the August 2, 2018 CODA meeting, the Commission adopted a resolution to approve both reports of program change and continue the programs' accreditation status of "approval without reporting requirements." No additional information related to the change was requested from the programs. The Commission noted that these changes will be further reviewed at the time of the next site visit for the programs, now scheduled for 2019 (Visalia approval) and 2021 (San Diego approval).

The college would now like to request approval from the DHCC for these program changes. For your ease of reference, I am now attaching the two program change reports submitted to CODA and I am also attaching the two letters received back with CODA's approval.

Please let us know if you have any further questions or need anything additional at this time. As always, thank you for your support of our programs!

Sincerely,



Greg Osborn, MEd, MA
Director of Program Compliance
SJVC Central Administrative Offices



Commission on Dental Accreditation

Via Email Transmission: OfficeofPresident@sjvc.edu

August 30, 2018

Mr. Michael Perry
President
San Joaquin Valley College
3828 W. Caldwell Avenue
Visalia, CA 93277

RE: San Joaquin Valley College-San Diego, Chula Vista, California
Dental Hygiene Program
Status: Approval without Reporting Requirements

Dear Mr. Perry,

At its August 2, 2018 meeting, the Commission on Dental Accreditation (CODA) granted the dental hygiene program the accreditation status of “approval without reporting requirements.” The definitions of accreditation classifications are provided at the link below. Below is a summary of actions and additional information.

Dental Hygiene Program Change

The Commission considered the June 2018 report describing a proposed program change for the dental hygiene program. The Commission noted that the report describes the San Diego campus has been in a period of non-enrollment since March 2017 and the final San Diego cohort graduated in November 2017. It is also noted that San Joaquin Valley College is the sponsor of the San Diego campus; however, the San Diego campus will no longer serve as a major site where educational activity occurs for the Ontario program campus. Therefore, the institutional sponsor has requested a change in the geographic location of the San Diego program located in Chula Vista, California to the Ontario program site as its primary facility located in Ontario, California with enrollment at this location to begin in February 2019.

Following careful review of the information provided, the Commission adopted a resolution to approve the report of program change and continue the program’s accreditation status of “approval without reporting requirements.” No additional information related to the change is requested from the program at this time. No special focused site visit is warranted at this time. This change will be reviewed at the time of the next site visit for the program scheduled for **2021**.

Mr. Michael Perry
August 30, 2018
Page 2

General Information

The Commission expects institutions to keep the Commission informed as soon as possible of anticipated changes in any approved educational program offered, particularly in the areas of administration, enrollment, faculty, facilities and curriculum. The Commission's policy and guidelines for reporting program changes can be found at the link below. Guidelines for specific program changes, including reporting enrollment changes, adding sites where educational activity occurs, and developing a teach-out report are found on the Commission's website.

Institutions/Programs are expected to follow Commission policy and procedure on privacy and data security related to compliance with the Health Insurance Portability and Accountability Act (HIPAA). The Commission's statement on HIPAA, as well as the Privacy and Data Security Summary for Institutions/Programs (PDF), are found in the Policies/Guidelines section of the Commission's website at <http://www.ada.org/en/coda/policies-and-guidelines/hipaa/>. Programs that fail to comply with CODA's policy will be assessed a penalty fee of \$4000.

The Commission has authorized use of the following statement by institutions or programs that wish to announce their programmatic accreditation by the Commission. Programs that wish to advertise the specific programmatic accreditation status granted by the Commission may include that information as indicated in italics below (see text inside square brackets); that portion of the statement is optional but, if used, must be complete and current.

The program in dental hygiene is accredited by the Commission on Dental Accreditation [and has been granted the accreditation status of "approval without reporting requirements"]. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611. The Commission's web address is: <http://www.ada.org/en/coda>.

If this office can be of any assistance to you, please contact me by telephone, at 1-800-621-8099, extension 2695 or by e-mail, at johnsond@ada.org.

Sincerely,

Doreen B. Johnson, RDH, MA, Ed.

Doreen Johnson, RDH, MA.Ed.
Manager, Allied Dental Education
Commission on Dental Accreditation

Mr. Michael Perry

August 30, 2018

Page 3

DJ/ds

Enclosures: CODA Accreditation Status Definitions
<https://www.ada.org/en/coda/find-a-program/status-definitions>
Guidelines for Reporting Program Changes in Accredited Programs
<https://www.ada.org/en/coda/policies-and-guidelines/program-changes>
Electronic Submission Guidelines for General Correspondence
<https://www.ada.org/en/coda/policies-and-guidelines/electronic-submission-guidelines>

cc: Mr. Gregory Osborn, director, Program Compliance, San Joaquin Valley College,
San Diego Campus
Ms. Amanda Verissimo, program director, Dental Hygiene Program
Mr. Herman Bounds, Jr., director, Accreditation Division, U.S. Department of
Education (via CODA website)
State Boards of Dentistry (via CODA website)
Institutional Accreditors (via CODA website)
Dr. William G. Leffler, chair, CODA
Dr. Sherin Tookes, director, CODA



Commission on Dental Accreditation

Via Email Transmission: OfficeofPresident@sjvc.edu

August 30, 2018

Mr. Michael Perry
President
San Joaquin Valley College
3828 W. Caldwell Avenue
Visalia, CA 93277

RE: San Joaquin Valley College-Visalia, Visalia, California
Dental Hygiene Program
Status: Approval without Reporting Requirements

Dear Mr. Perry,

At its August 2, 2018 meeting, the Commission on Dental Accreditation (CODA) granted the dental hygiene program the accreditation status of “approval without reporting requirements.” The definitions of accreditation classifications are provided at the link below. Below is a summary of actions and additional information.

Dental Hygiene Program Change

The Commission considered the June 2018 report describing a proposed program change for the dental hygiene program. The Commission noted that the report describes how the Visalia campus is discontinuing the use of its site where educational activity occurs at the institution’s Ontario campus. The Ontario campus will now be a separately accredited program (formerly the San Diego campus).

Following careful review of the information provided, the Commission adopted a resolution to approve the report of program change and continue the program’s accreditation status of “approval without reporting requirements.” No additional information related to the change is requested from the program at this time. This change will be reviewed at the time of the next site visit for the program scheduled for **2019**.

General Information

The Commission expects institutions to keep the Commission informed as soon as possible of anticipated changes in any approved educational program offered, particularly in the areas of administration, enrollment, faculty, facilities and curriculum. The Commission’s policy and guidelines for reporting program changes can be found at the link below. Guidelines for

Mr. Michael Perry
August 30, 2018
Page 2

specific program changes, including reporting enrollment changes, adding sites where educational activity occurs, and developing a teach-out report are found on the Commission's website.

Institutions/Programs are expected to follow Commission policy and procedure on privacy and data security related to compliance with the Health Insurance Portability and Accountability Act (HIPAA). The Commission's statement on HIPAA, as well as the Privacy and Data Security Summary for Institutions/Programs (PDF), are found in the Policies/Guidelines section of the Commission's website at <http://www.ada.org/en/coda/policies-and-guidelines/hipaa/>. Programs that fail to comply with CODA's policy will be assessed a penalty fee of \$4000.

The Commission has authorized use of the following statement by institutions or programs that wish to announce their programmatic accreditation by the Commission. Programs that wish to advertise the specific programmatic accreditation status granted by the Commission may include that information as indicated in italics below (see text inside square brackets); that portion of the statement is optional but, if used, must be complete and current.

The program in dental hygiene is accredited by the Commission on Dental Accreditation *[and has been granted the accreditation status of "approval without reporting requirements"]*. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611. The Commission's web address is: <http://www.ada.org/en/coda>.

If this office can be of any assistance to you, please contact me by telephone, at 1-800-621-8099, extension 2695 or by e-mail, at johnsond@ada.org.

Sincerely,

Doreen B. Johnson, RDH, MA, Ed.

Doreen Johnson, RDH, MA
Manager, Allied Dental Education
Commission on Dental Accreditation

DJ/ds

Mr. Michael Perry
August 30, 2018
Page 3

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Electronic Submission Guidelines for General Correspondence
<https://www.ada.org/en/coda/policies-and-guidelines/electronic-submission-guidelines>

cc: Mr. Gregorgy Osborn, director, Program Compliance, San Joaquin Valley College
Visalia Campus
Dr. Leslie Nazaroff, co-program director, Dental Hygiene Program
Ms. Brenda Serpa, co-program director, Dental Hygiene Program
Mr. Herman Bounds, Jr., director, Accreditation Division, U.S. Department of
Education (via CODA website)
State Boards of Dentistry (via CODA website)
Institutional Accreditors (via CODA website)
Dr. William G. Leffler, chair, CODA
Dr. Sherin Tooks, director, CODA

Narrative Report on Program Changes


SJVC San Diego Campus Relocation




Submitted to
Joint Commission on Dental Accreditation

San Joaquin Valley College
Central Administrative Office (CAO)
3828 W. Caldwell Avenue
Visalia, CA 93277
(559) 734-9000
www.sjvc.edu

DENTAL HYGIENE PROGRAM


Leslie Nazaroff RDH, DrPH
Dental Hygiene Program Co-Director
Ontario Campus
4580 Ontario Mills Pkwy
Ontario, CA 91764
(909) 291-8121, Ext. 115
LeslieN@sjvc.edu


Greg Osborn, MEd, MA
CAO Director of Program Compliance
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Brenda Serpa, RDH, MS
Dental Hygiene Program Co-Director
Visalia Campus
8344 W Mineral King Avenue
Visalia, CA 93291
(559) 622-1964
BrendaS@sjvc.edu


Michael Perry
CAO President/Chief Executive Officer
(559) 734-9000, Ext. 1617
OfficeOfPresident@sjvc.edu

May 31, 2018

NARRATIVE SUMMARY OF CHANGES:

SJVC is requesting to relocate the Dental Hygiene program through a geographical transfer from the San Diego Campus to the Ontario Campus. The San Diego program is now in a *Period of Non-Enrollment*, with all first-year positions vacant since March 2017. The final San Diego cohort completed their program in November 2017 so currently there are no students in attendance in San Diego. The proposed plan would allow for the first enrollments in the Ontario program in February 2019, prior to the expiration of the San Diego program's *Period of Non-Enrollment*. The next site visit for the San Diego program is now scheduled for 2021.

Currently, the SJVC Ontario Campus Dental Hygiene program is an extension site of the SJVC Visalia Campus Dental Hygiene program, sharing a single accreditation status. Although it is considered an extension site, it is supported and managed more like an independent campus/program, much like the San Diego program. The Visalia Dental Hygiene program is co-directed by Brenda Serpa, RDH, MS at the Visalia Campus and Leslie Nazaroff, RDH, DrPH at the Ontario Campus. The proposed plan would maintain the same leadership at each site as solo directors and the transition would be seamless for students and faculty. The incoming February 2019 Ontario students would be sharing the resources and facilities with the final cohort of Visalia students at the extension site. As the new Ontario (former San Diego program) students phase in to the Ontario campus, the Visalia (Ontario extension) students will phase out, per the chart below*:

Table 1. Relocation Transition Timeline by Term (Semester) and Cohort

June 2018	September 2018	February 2019	June 2019	September 2019	February 2020
Term 3	Term 4	Term 1	Term 2	Term 3	Term 4
Oct 2017 – Jan 2019	Oct 2017 – Jan 2019	Feb 2019 – May 2020	Feb 2019 – May 2020	Feb 2019 – May 2020	Feb 2019 – May 2020
Term 1	Term 2	Term 3	Term 4	Term 1	Term 2
Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Oct 2019 – Jan 2021	Oct 2019 – Jan 2021

*Blue = Ontario Extension Cohorts; Green = Ontario Stand-Alone Cohorts (former San Diego program)

For clarification in this document, the relocation request will be abbreviated as SD_ONT (San Diego / Ontario proposed relocation) and the VIS_ONT (Visalia / Ontario extension program) will serve as reference to the teach-out for remaining students at the Ontario Campus. The teach-out of VIS_ONT request will have a separate Change of Program submission.

The same SJVC oversight process remains for the Dental Hygiene program regardless of geographic location. The Dental Hygiene program shares the same curriculum and outcome expectations. SJVC SD_ONT relocation will in no way negatively affect the ability of the program to meet and maintain the CODA DH Standards (please see next page). There should be no significant difference to the program before or after the change, and there should be no negative impact on the program. The College institutional accreditor, ACCJC/WASC, sees no problem with this change since the Ontario Campus is already approved to offer the Dental Hygiene program (confirmation made through a phone conversation with SJVC's Accreditation Liaison Officer and ACCJC Vice President,

Stephanie Droker). The Ontario Campus Dental Hygiene program (VIS_ONT) has been in existence since 2001 (relocating from Rancho Cucamonga to Ontario in 2013).

STANDARD 1: INSTITUTIONAL EFFECTIVENESS

DESCRIPTION OF CHANGE: No changes anticipated

APPRAISAL AND ANALYSIS: SD_ONT will continue to utilize all resources available at the SJVC Central Administrative Office in Visalia, which includes financial support.

STANDARD 2: EDUCATIONAL PROGRAM

DESCRIPTION OF CHANGE: SJVC will reduce SD_ONT maximum cohort enrollment from 36 to 30.

APPRAISAL AND ANALYSIS: Though the San Diego campus had not reached a maximum enrollment, long-term goals were to provide instruction for cohorts of 36.

The Ontario campus has existing accommodations for the Dental Hygiene program to provide all necessary resources for 30 students per cohort. This will support Standard 2.5 which requires the number of students enrolled in the program be proportionate to the resources available.

All other categories and criteria in Standard 2 will remain consistent between sites which will not differ from the San Diego experience.

STANDARD 3: ADMINISTRATION, FACULTY AND STAFF

DESCRIPTION OF CHANGE: SD_ONT will utilize the existing Ontario Campus Dental Hygiene Program Director, faculty and support staff.

APPRAISAL AND ANALYSIS: San Diego Dental Hygiene program faculty and staff ended their employment shortly after completion of the final San Diego student cohort.

Utilizing the Ontario Dental Hygiene Program Director, faculty and staff will be seamless since the program is currently active. The program has been in existence for 16+ years with successful outcomes. Therefore, as VIS_ONT teaches out, the SD_ONT will simultaneously ensue with no break in the planned cohort start dates for the Ontario campus.

STANDARD 4: EDUCATIONAL SUPPORT SERVICES

DESCRIPTION OF CHANGE: No changes necessary.

APPRAISAL AND ANALYSIS: The Ontario Campus facilities has space allocated to meet the needs of the Dental Hygiene program already in existence. Therefore, the relocation of SD_ONT will continue to utilize the current clinic facilities, laboratory facilities and radiographic facilities to ensure a full student educational experience.

Office space supports Standard 4-6 to allow faculty and the Program Director necessary privacy. The student and program records are stored in a confidential and safe manner.

STANDARD 5: HEALTH AND SAFETY PROVISIONS

DESCRIPTION OF CHANGE: No change.

APPRAISAL AND ANALYSIS: All existing standards of VIS_ONT and the San Diego Campus meet/met local, state and federal regulations for infectious disease and radiation management. Immunization recommendations and emergency management share(d) the same college and/or program policies. These standards will continue to apply for SD_ONT.

STANDARD 6: PATIENT CARE SERVICES

DESCRIPTION OF CHANGE: No change.

APPRAISAL AND ANALYSIS: All SJVC Dental Hygiene program core values regarding the process of patient care remain the same for the Dental Hygiene program regardless of geographic location. Student requirements and achieving a competent level of patient care are demonstrated with the same criteria and standards.

CLOSING: SJVC Dental Hygiene program shares the same programmatic design, standards, core values and College support systems regardless of location. The request to relocate SD_ONT allows the Ontario Campus the opportunity to have the stand-alone accreditation status. An advantage is having interested candidates recognize that the Ontario Campus has an accredited Dental Hygiene program. Currently, as an extension site of Visalia, there is no mention of the Ontario location on the CODA website. This has confused applicants over the years who found the Ontario site through other resources, but struggled to confirm accreditation status on the CODA website. Thank you for your consideration.

Narrative Report on Program Changes

SJVC Ontario Campus Teach Out



Submitted to
Joint Commission on Dental Accreditation

San Joaquin Valley College
Central Administrative Office (CAO)
3828 W. Caldwell Avenue
Visalia, CA 93277
(559) 734-9000
www.sjvc.edu

DENTAL HYGIENE PROGRAM

Brenda Serpa, RDH, MS

Dental Hygiene Program Co-Director
Visalia Campus
8344 W Mineral King Avenue
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LeslieN@sjvc.edu

Michael Perry

CAO President/Chief Executive Officer
(559) 734-9000, Ext. 1617
OfficeOfPresident@sjvc.edu

May 31, 2018

NARRATIVE SUMMARY OF CHANGES:

SJVC Visalia is requesting approval to discontinue using the Ontario Campus as an extension site and, instead, relocate the San Diego program to the Ontario Campus so that it will be an independently accredited program. This report will focus on how the transition affects the current Visalia Campus accreditation. Concurrently, the San Diego Campus is submitting a change report to relocate to Ontario.

The SJVC Ontario Campus Dental Hygiene program is an extension site of the Visalia Campus Dental Hygiene program, sharing a single accreditation status. Although it is considered an extension site, it is supported and managed more like an independent campus/program, much like the San Diego program. The Visalia Dental Hygiene program is co-directed by Brenda Serpa, RDH, MS at the Visalia Campus and Leslie Nazaroff, RDH, DrPH at the Ontario Campus. The next site visit for the Visalia Campus program is now scheduled for July 2019.

SJVC is requesting to teach-out the Ontario campus extension site cohorts to seamlessly relocate the Dental Hygiene program from San Diego to the Ontario Campus. The proposed plan will allow for continuous enrollments at the Ontario Campus with the final Visalia cohort enrolling at the Ontario extension site in June 2018. The February 2019 cohort will be the first Ontario (formerly San Diego) independent cohort. The Ontario Campus will continue as usual with two cohorts running simultaneously, the students in their final academic year will continue in the Visalia program and the first-year students will be in the new Ontario (former San Diego) independent program, per the chart below*:

Table 1. Relocation Transition Timeline by Term (Semester) and Cohort occupying Ontario Campus

June 2018	September 2018	February 2019	June 2019	September 2019	February 2020
Term 3	Term 4	Term 1	Term 2	Term 3	Term 4
Oct 2017 – Jan 2019	Oct 2017 – Jan 2019	Feb 2019 – May 2020	Feb 2019 – May 2020	Feb 2019 – May 2020	Feb 2019 – May 2020
Term 1	Term 2	Term 3	Term 4	Term 1	Term 2
Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Jun 2018 – Sep 2019	Oct 2019 – Jan 2021	Oct 2019 – Jan 2021

*Blue = Ontario Extension Cohorts; Green = Ontario Stand-Alone Cohorts (former San Diego program)

For clarification in this document, the relocation request will be abbreviated as SD_ONT (San Diego / Ontario proposed relocation) and the VIS_ONT (Visalia / Ontario extension program) will serve as reference to the teach-out for remaining students at the Ontario Campus.

STANDARD 1: INSTITUTIONAL EFFECTIVENESS

DESCRIPTION OF CHANGE: No changes anticipated

APPRAISAL AND ANALYSIS: VIS_ONT will continue to utilize all resources available at the Central Administrative Office in Visalia, which includes financial support, throughout the teach-out phase.

STANDARD 2: EDUCATIONAL PROGRAM

DESCRIPTION OF CHANGE: No changes anticipated

APPRAISAL AND ANALYSIS: All categories and criteria in Standard 2 will continue to be met during the teach-out phase with no modification needed.

STANDARD 3: ADMINISTRATION, FACULTY AND STAFF

DESCRIPTION OF CHANGE: The Visalia Program Administrator is a co-directorship, one director at the Visalia Campus and one director at the Ontario Campus; each will remain as director at their respective campus. Faculty and staffing will remain unchanged.

APPRAISAL AND ANALYSIS: The Ontario Dental Hygiene Program Director, faculty and staff will remain active during the teach-out and in readiness for the SD_ONT relocation. The program co-directors now work closely in all aspects of program administration and will continue to do so as they transition to independent program administration.

STANDARD 4: EDUCATIONAL SUPPORT SERVICES

DESCRIPTION OF CHANGE: No changes necessary.

APPRAISAL AND ANALYSIS: The Ontario Campus VIS_ONT will continue to utilize the current clinic facilities, laboratory facilities and radiographic facilities to ensure a full student educational experience throughout the remainder of the teach-out phase.

There will be no change to office space which supports Standard 4-6 in allowing faculty and the Program Director necessary privacy. The student and program records will continue to be stored in a confidential and safe manner.

STANDARD 5: HEALTH AND SAFETY PROVISIONS

DESCRIPTION OF CHANGE: No change.

APPRAISAL AND ANALYSIS: All existing standards of VIS_ONT will continue to meet local, state and federal regulations for infectious disease and radiation management. Immunization recommendations and emergency management share the same college and/or program policies. These standards will seamlessly continue to apply for SD_ONT after relocation approval.

STANDARD 6: PATIENT CARE SERVICES

DESCRIPTION OF CHANGE: No change.

APPRAISAL AND ANALYSIS: All SJVC Dental Hygiene program core values regarding the process of patient care remain the same for the Dental Hygiene program regardless of geographic location. Student requirements and achieving a competent level of patient care are demonstrated with the same criteria and standards.

CLOSING: The SJVC Dental Hygiene program shares the same programmatic design, standards, core values and College support systems regardless of location. The request to teach-out the VIS_ONT cohorts and relocate SD_ONT allows the Ontario Campus the opportunity to have the stand-alone accreditation status. The request will in no way negatively affect the ability of the program to continue to meet all state and CODA standards. There should be no significant difference to the program before or after the change, and there should be no negative impact on the program. The College institutional accreditor, ACCJC/WASC, sees no problem with this change since the Ontario Campus is already approved to offer the Dental Hygiene program (confirmation made through a phone conversation with SJVC's Accreditation Liaison Officer and ACCJC Vice President, Stephanie Droker). Thank you for your consideration.



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 6

**Discussion and Possible Action, and Recommendation
to the Full Committee Approval of Changes in
Ownership of the Carrington College Dental Hygiene
Programs**



MEMORANDUM

DATE	November 16, 2018
TO	Educational Subcommittee
FROM	Adina A. Pineschi-Petty DDS Educational Specialist Dental Hygiene Committee of California
SUBJECT	Discussion and Possible Action, and Recommendation to the Full Committee Approval of Changes in Ownership of the Carrington College Dental Hygiene Programs

Background

On September 14, 2018 Carrington College - San Jose Campus (CCSJ) and Carrington College - Sacramento Campus (CCS) each submitted a "Report of Program Change" to the Commission on Dental Accreditation (CODA) to inform of the proposed change of ownership and control of Carrington College to the proposed new parent entity, San Joaquin Valley College, Inc.

In addition, the Committee on Substantive Change of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges (ACCJC/WASC) met on August 24, 2018, to review the Substantive Change Application from Carrington College regarding change of ownership to San Joaquin Valley College, Inc. The Committee acted to approve the substantive change and notified Carrington on September 27, 2018 of the approval.

In the proposed transaction, San Joaquin Valley College, Inc. will acquire the stock of Carrington College. There are currently no planned changes to Carrington College's governance structure, operational, or corporate structure as a result of the transfer of ownership. Carrington will maintain its existing accreditations and retain the same Office of Postsecondary Education Identification (OPEID) with the U.S. Department of Education.

The proposed stock purchase transaction will not result in a merger, and Carrington College and San Joaquin Valley College will continue to operate as separate and distinct postsecondary institutions with independent boards, governance structures and management.

Action Requested

Consider and possibly recommend to the full Committee to approve the major change request of San Joaquin Valley College, Inc. to acquire the stock of Carrington College.

Staff Recommendation

Staff recommendation is to approve the change submitted by SJVC.

Pros: The only change will be in the parent company, with the current reporting structure remaining intact. The proposed transaction is not expected to have any change on the matters within the Carrington College Dental Hygiene Educational programs' (DHEP) scope of accreditation, specifically the mission, offerings, curriculum or credentials conferred by Carrington's DHEPs, nor the length or method of delivery. Similarly, there will be no material changes to the program directors or other campus-level leadership of the programs nor to the faculty, to other program staff, or to applicable student support services.

Cons: None known.



September 27, 2018

Dr. Donna Loraine
President
Carrington College
8909 Folsom Blvd.
Sacramento, CA 95826

Dear President Loraine,

The Committee on Substantive Change of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges met August 24, 2018, to review the Substantive Change Application from Carrington College regarding change of ownership to San Joaquin Valley College, Inc.

The Committee acted to **approve** the substantive change.

On behalf of the Commission, I wish to express appreciation for the work that the College undertook to prepare this Application for Substantive Change. The Commission encourages the College's continued work to ensure educational quality and to support student success.

If you should have any questions concerning this letter or the Commission action, please don't hesitate to contact me. We'd be glad to help you.

Sincerely,

A handwritten signature in black ink that reads "Stephanie Droker". The script is fluid and cursive, with the first name "Stephanie" written in a larger, more prominent hand than the last name "Droker".

Stephanie Droker, Ed.D.
Vice President

Cc: Dr. Danika Bowen, Vice President of Instruction/Accreditation Liaison Officer



**DENTAL HYGIENE
EDUCATIONAL PROGRAM**

Report of Program Change

September 14, 2018

Carrington College

**Sacramento Campus
8909 Folsom Blvd.
Sacramento, CA 95826**

Program Director-Marie Miranda

Submitted to

**Commission on Dental Accreditation
American Dental Association**



Administrator Verification
Program Change for a
Dental Hygiene Education Program

I have reviewed this document and verify that the information it is accurate and complete, and that it complies with the Commission on Dental Accreditation's Privacy and Data Security Requirements for Institutions.

SPONSORING INSTITUTION
Name: Carrington College- Sacramento, CA Street Address (do not list P.O. Boxes) 8909 Folsom Blvd. City, State, Zip: Sacramento, CA 95826
Chief Executive Officer (Univ. Pres., Chancellor, Hospital President) Carrington College Name: Dr. Donna M. Loraine Title: President Phone: (916) 361-1660 Email: dloraine@carrington.edu Signature: <i>Donna M. Loraine</i> Date: 9/21/18
Chief Executive Officer (Univ. Pres., Chancellor, Hospital President) San Joaquin Valley College, Inc. Name: Mr. Mike Perry Title: President Phone: (559) 734-9000 Email: <i>officeofpresident@sjvc.edu</i> Signature: <i>Michael Perry</i> Date: 9-21-18



Chief Administrative Officer (Dean/Chief of Dental Service)

Name: **Jonathan Sherman**

Title: **Dean of Accreditation**

Phone: **(623) 512-2860**

Email: jsherman@carrington.edu

Signature: *Jonathan Sherman*

Date: 9/21/18

Program director/administrator or Co-Program director/administrator

Name: **Marie Miranda**

Title: **Program Director**

Phone: **(916) 361-5165**

Email: mmiranda@carrington.edu

Signature: *Marie Miranda*

Date: 9/21/2018

*If the program is co-sponsored by more than one institution, the appropriate administrators of both institutions must verify the contents of the application. This page may be expanded to include all verifications.

Table of Contents

Description and Overview of the Program Change	4
Exhibit A- SJVC to Carrington Organizational Chart	6
Exhibit B- Carrington Reporting Organizational Chart.....	8
Exhibit C- ACCJC Approval Letter.....	10

Description and Overview of the Program Change

The purpose of this Report of Program Change is to inform you of the proposed change of ownership and control of Carrington College to the proposed new parent entity, San Joaquin Valley College, Inc.

Under the proposed transaction, the closing of which is conditioned upon receipt of various regulatory approvals, San Joaquin Valley College, Inc. will acquire the stock of Carrington College. There are currently no planned changes to Carrington College's governance structure, operational, or corporate structure as a result of the transfer of ownership. Carrington will maintain its existing accreditations and retain the same Office of Postsecondary Education Identification (OPEID) with the U.S. Department of Education. To be clear, this transaction will not result in a merger of Carrington College with San Joaquin Valley College, which is owned by San Joaquin Valley College, Inc. Following the proposed stock purchase transaction, Carrington College and San Joaquin Valley College will continue to operate as separate and distinct postsecondary institutions with independent boards, governance structures and management. The only change will be in the parent company, please see **Exhibit A-SJVC to Carrington Organizational Chart**. Also, the reporting structure will remain exactly as it currently is, please see **Exhibit B-Campus Reporting Organizational Chart**.

Additionally, this proposed transaction will in no way affect Carrington's Dental Hygiene programs. It is not expected to have any change on the matters within the programs' scope of accreditation, specifically the mission, offerings, curriculum or credentials conferred by Carrington's programs, nor the length or method of delivery. Similarly, there will be no material changes to the program directors or other campus-level leadership of the programs nor to the faculty, to other program staff, or to applicable student support services. This change will not have a significant impact on the program's potential ability to comply with the CODA Accreditation Standards.

The institutional accreditor for Carrington College, the Accrediting Commission for Community and Junior College (ACCJC) recently approved this proposed change of ownership, please see **Exhibit C-ACCJC Approval Letter**.

In recognition of the CODA Guidelines for Reporting Program Change to an approved program, Carrington College would like to request the committee to add this item on to the agenda for the next available meeting to discuss this matter for approval.

Exhibits:

Exhibit A- SJVC to Carrington Organizational Chart.

Exhibit B- Campus Reporting Organizational Chart.

Exhibit C- ACCJC Approval Letter.

Exhibit A- SJVC to Carrington Organizational Chart

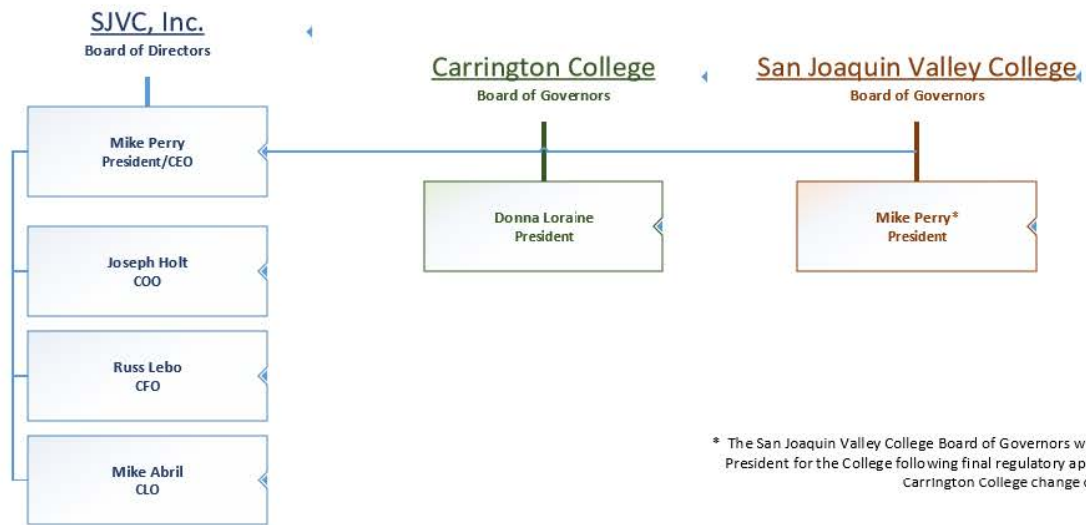


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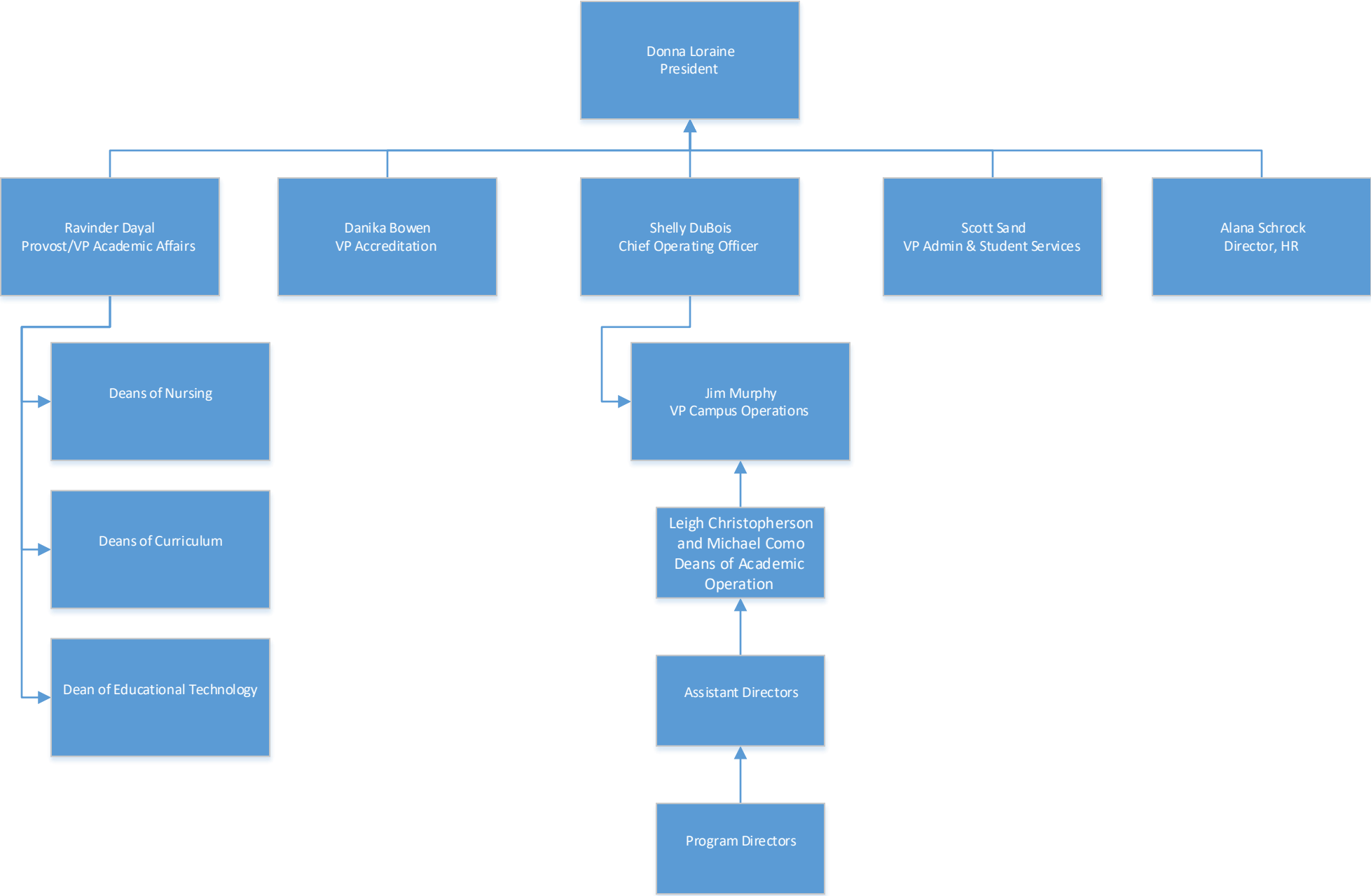




Exhibit C- ACCJC Approval Letter.



August 27, 2018

Dr. Donna Loraine
President
Carrington College
8909 Folsom Blvd.
Sacramento, CA 95826

Dear President Loraine,

The Committee on Substantive Change of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges met August 24, 2018, to review the Substantive Change Application from Carrington College regarding:

- Change of Ownership to San Joaquin Valley College, Inc.
- Program Migrations and Campus Transfers (see attached)

The Committee acted to **approve** the substantive change.

On behalf of the Commission, I wish to express appreciation for the work that the College undertook to prepare this Application for Substantive Change. The Commission encourages the College's continued work to ensure educational quality and to support student success.

If you should have any questions concerning this letter or the Commission action, please don't hesitate to contact me. We'd be glad to help you.

Sincerely,

A handwritten signature in black ink that reads "Stephanie Droker". The script is fluid and cursive, with the first name and last name clearly legible.

Stephanie Droker, Ed.D.
Vice President

Cc: Dr. Danika Bowen, Vice President of Instruction/Accreditation Liaison Officer
Ms. Martina Fernandez-Rosario, U.S. Department of Education

Enclosure



**DENTAL HYGIENE
EDUCATIONAL PROGRAM**

Report of Program Change

September 14, 2018

Carrington College

**San Jose Campus
5883 rue Ferrari
San Jose, CA 95138**

Program Director-Kim Clark

Submitted to

**Commission on Dental Accreditation
American Dental Association**



Administrator Verification
Program Change for a
Dental Hygiene Education Program

I have reviewed this document and verify that the information it is accurate and complete, and that it complies with the Commission on Dental Accreditation's Privacy and Data Security Requirements for Institutions.

SPONSORING INSTITUTION
Name: Carrington College- San Jose, CA Street Address (do not list P.O. Boxes) 5883 Rue Ferrari City, State, Zip: San Jose, CA 95138
Chief Executive Officer (Univ. Pres., Chancellor, Hospital President) Carrington College Name: Dr. Donna M. Loraine Title: President Phone: (916) 361-1660 Email: dloraine@carrington.edu Signature: <i>Donna M. Loraine</i> Date:
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Name: **Jonathan Sherman**

Title: **Dean of Accreditation**

Phone: **(623) 512-2860**

Email: jsherman@carrington.edu

Signature: *Jonathan Sherman*

Date: 9/21/18

Program director/administrator or Co-Program director/administrator

Name: **Kim Clark**

Title: **Program Director**

Phone: **(408) 960-0164**

Email: kclark@carrington.edu

Signature: *KClark*

Date: 9-21-18

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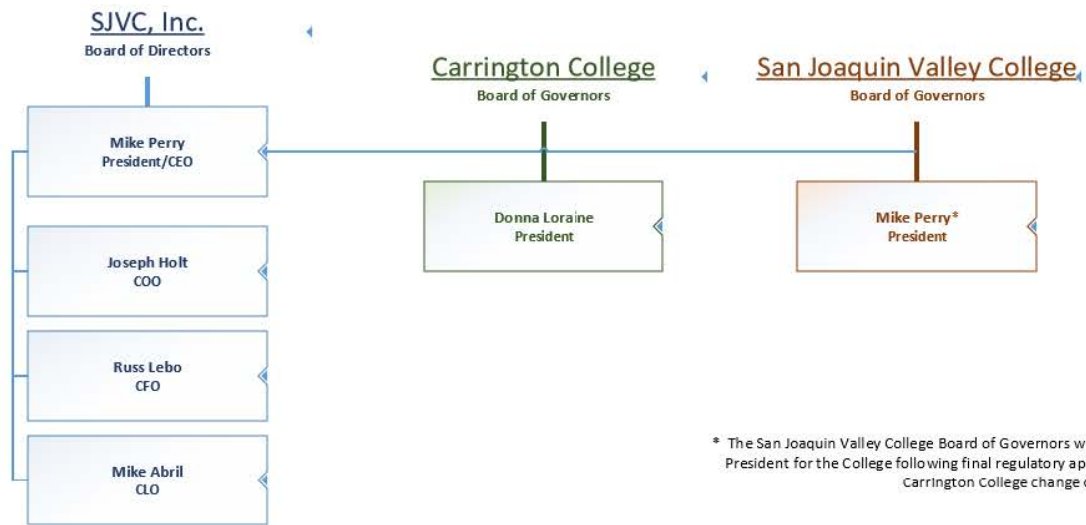


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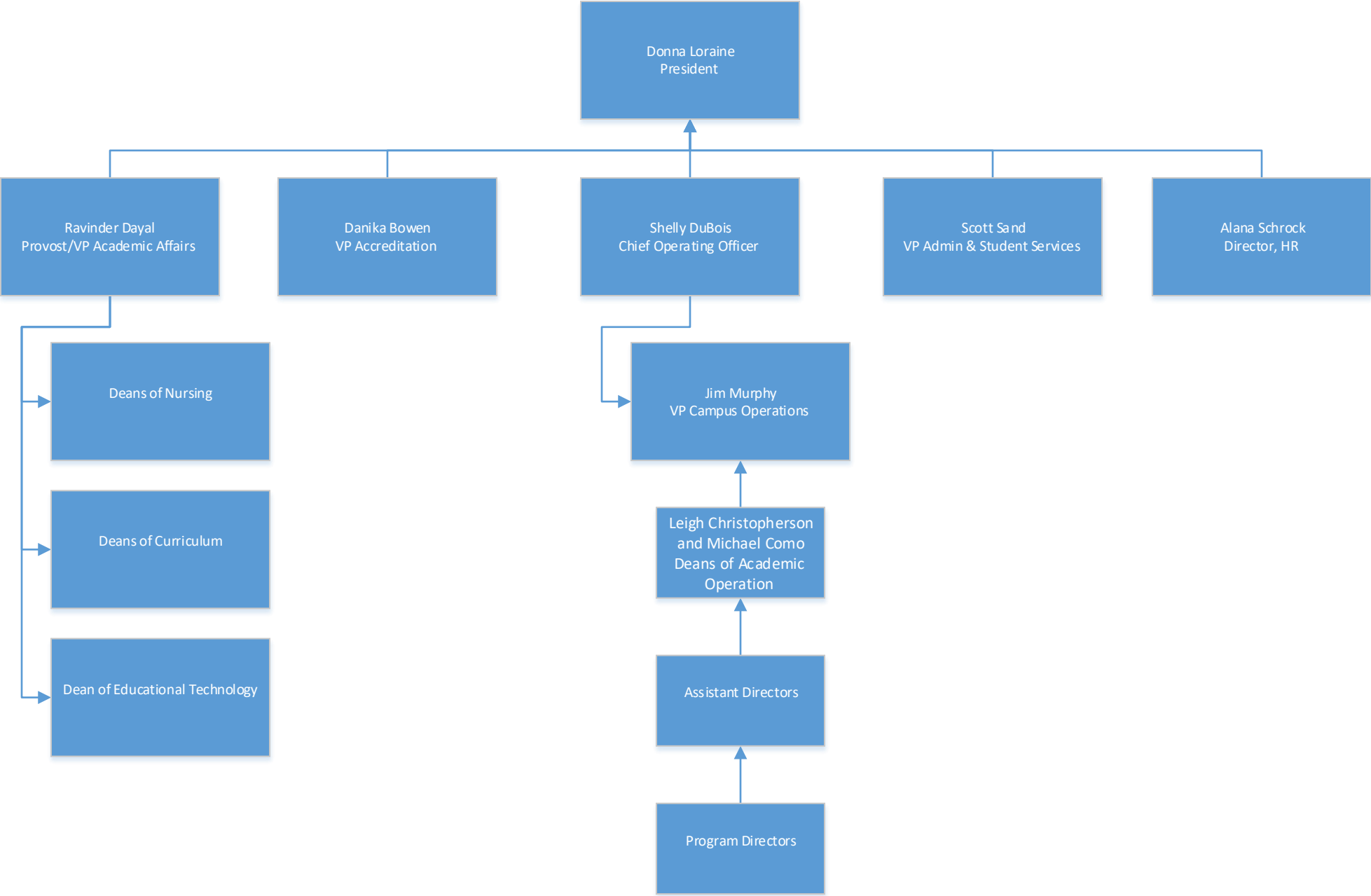




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Stephanie Droker, Ed.D.
Vice President

Cc: Dr. Danika Bowen, Vice President of Instruction/Accreditation Liaison Officer
Ms. Martina Fernandez-Rosario, U.S. Department of Education

Enclosure



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 7

**Discussion and Possible Action, and Possible
Recommendation to the Full Committee on Approval
Status for Concorde Career Colleges Three Campuses
(Garden Grove, San Bernardino, and San Diego) due to
Dental Hygiene Program Deficiencies**



MEMORANDUM

DATE	November 16, 2018
TO	Dental Hygiene Committee of California Educational Subcommittee
FROM	Anthony Lum, Executive Officer
SUBJECT	Discussion and Possible Action, and Possible Recommendation to the Full Committee on Approval Status for Concorde Career Colleges Three Campuses (Garden Grove, San Bernardino, and San Diego) due to Dental Hygiene Program Deficiencies

Background

The Dental Hygiene Committee of California (DHCC) conducted site visits to the Concorde Career College (CCC) dental hygiene educational programs (DHEPs) on January 18 – 19, 2018. During these visits, it was discovered that the CCC DHEPs were short of the required duration, were not taught at the university level, science coursework was not identified as required, and other campus specific deficiencies of DHCC laws and regulations.

At the April 20-21, 2018 meetings, the DHCC was informed of these deficiencies and voted to withdraw the three CCC DHEP's approval, as this was the only recourse for non-compliance of the law. Subsequently, the DHCC voted to stay the withdrawal of approval to provide time for the CCC DHEPs to submit a plan that would allow them to come into compliance of the law. The CCC DHEPs were notified in a "Stay of Withdrawal" letter dated May 4, 2018 that they had until the July 2, 2018 deadline to submit an ongoing plan of action to the DHCC to correct the deficiencies of the law. This plan was to include a course of action to be implemented for the current cohort of students as well. All three CCC DHEPs submitted their plan by the deadline, but unfortunately did not include an implementation date as they believed they were required to obtain accreditation approvals prior to proceeding. The CCC DHEPs were awaiting official approval of the program changes from various agencies, including the DHCC, prior to implementation of their plan. The plans to correct the deficiencies were presented to the DHCC in July for review.

In the submitted plans, the CCC DHEPs presented corrective measures to the curriculum that would be implemented once approvals are received. Their anticipated timeline to implement the corrections was to be determined by the receipt of the approvals from the ACCSC (Accrediting Commission of Career Schools and Colleges), BPPE (Bureau for Private Postsecondary Education), CODA (Commission on Dental Accreditation), and the DHCC. The CCC DHEPs received the approval letter from ACCSC, submitted the approval letter from ACCSC to BPPE, and were awaiting responses from CODA, as they were considering the issue at their August 2-3, 2018 meeting. The CCC DHEPs were not expecting a response from CODA until 30 days after their meeting.

At the August 8, 2018 DHCC teleconference meeting, the DHCC voted to allow the "Stay of Withdrawal" for the CCC DHEPs to stay in effect until the November 2018 DHCC Committee Meeting and to approve the action plan submitted by the CCC DHEPs.

Current Status

The Concorde Dental Hygiene Educational Programs will present to the DHCC their accreditation agency approvals to change the curriculum of the programs and the date to implement the changes to address the program deficiencies identified for the current and future cohorts.

Action Requested

Consider the presented documentation submitted by the CCC DHEPs, discuss, and consider possible action on approval status for the CCC DHEPs (Garden Grove, San Bernardino, and San Diego) due to dental hygiene program deficiencies

Staff Recommendation

Staff recommends for the DHCC to approve the curriculum changes, the date of implementation, and restoring the DHCC approval status for the CCC DHEPs to "Approved".

Pros: By approving staff's request, it allows the students of the CCC DHEPs to receive the proper amount of education required by the DHCC Educational Regulations and restore their DHCC approval status to allow students to graduate from a DHCC approved school.

Cons: None.



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 8

Update on Dental Hygiene Educational Program Reviews



MEMORANDUM

DATE	November 16, 2018
TO	Educational Subcommittee
FROM	Adina A. Pineschi-Petty DDS Educational Specialist Dental Hygiene Committee of California
SUBJECT	DHCC Site Visit Update

Below is a list of Site Visits carried out by DHCC staff since April 2018:

1. Foothill College Dental Hygiene Program (Foothill)
 - a. Site visit generated by a CODA Self Study review and as a part of the DHCC oversight goals to review all dental hygiene educational programs in California.
 - b. On October 18, 2018 a site visit was conducted at the Foothill campus.
 - c. Current status:
 - i. See Foothill report.
 - ii. Nine deficiencies were identified during the program review.
 1. Foothill provided documentation showing correction for six deficiencies.
 2. Three deficiencies outstanding to provide evidence of correction by November 30, 2018.
 - iii. Sixteen infection control deficiencies identified during the site visit.
 1. Immediate correction required.
2. West Los Angeles College Dental Hygiene Program (WLA)
 - a. Site visit generated by a CODA Self Study review and as a part of the DHCC oversight goals to review all dental hygiene educational programs in California.
 - b. On October 30, 2018 a site visit was conducted at the WLA campus.
 - c. Current status:
 - i. See WLA report.
 - ii. Three deficiencies were identified during the program review.
 1. WLA provided documentation showing correction for the three deficiencies.
 - iii. One infection control deficiency identified during the site visit.
 1. WLA to provide evidence of correction by November 30, 2018.

Dental Hygiene Committee of California

2005 Evergreen Street, Suite 2050, Sacramento, California 95815
P 916-236-1978 F 916-263-2688 | www.dhcc.ca.gov



October 19, 2018

Phyllis Spragge

Program Director, Department of Dental Hygiene

Foothill College

12345 El Monte Road

Los Altos Hills, CA 94022

Dear Ms. Spragge,

The Dental Hygiene Committee of California (DHCC) conducted a site visit on October 18, 2018 of the Foothill College Dental Hygiene Educational Program (Foothill). This site visit was generated by a review of the Foothill Commission on Dental Accreditation (CODA) as well as due to DHCC oversight goals to review all dental hygiene educational programs in California. Based on the results of the CODA self study, DHCC site visit and a review of documentation provided by Foothill, it was noted that evidence of program compliance with the minimum program standards set by the California Code of Regulations (CCR) and CODA was insufficient.

During the program review, the following deficiencies of minimum program standards were discovered:

1. Major Program Changes

a. Self Study:

- i. Self Study states: "Change #1: the dental hygiene program was awarded a pilot program by the California Community College Chancellor's Office to offer the bachelor of science degree in dental hygiene. We added upper division general education and reviewed and revised our dental hygiene courses to ensure the content had higher level learning objectives. We did consult with Patrice Renfrow (CODA manager, allied health education) about the need to submit a substantive change to CODA. She said we did not since we were not increasing our class size or changing the basic structure or time of the dental hygiene program. The Accrediting Commission for Junior and Community Colleges (ACCJC) did approve the change from the AS degree to the BS degree program. Documents will be submitted as exhibits for the self-study."
- ii. DHCC not notified of this major change.

b. Refer to:

- i. 16 CCR §1105.3 (b)(3) Any changes that require a report to the Commission on Dental Accreditation or equivalent accrediting body shall require approval from the Committee.

c. Site Visit:

- i. DHCC staff notified Foothill of deficiency.

d. Determination:

- i. Foothill shall notify/request approval from the DHCC of any future major changes required by Foothill to report.

2. Faculty Ratios

- a. Self Study
 - i. CODA 2011 Recommendation:
 - 1. 2 instructors for 22 students in dental materials (1:11 instead of required 1:10).
- b. Refer to:
 - i. 16 CCR §1105(b)(4): The instructor to student ratio shall meet approved Commission on Dental Accreditation standards referenced in subsection (c) of section 1103 of this article.
 - ii. CODA 3-6: The faculty to student ratios must be sufficient to ensure the development of competence and ensure the health and safety of the public. The faculty to student ratios for preclinical, clinical and radiographic clinical and laboratory sessions must not be less than one to five. Faculty to student ratios for laboratory sessions in dental materials courses must not be less than one to ten to ensure the development of clinical competence and maximum protection of the patient, faculty and students.
- c. Site Visit:
 - i. Foothill provided evidence of appropriate faculty to student ratios.
- d. Determination:
 - i. In compliance.

3. Standards of Competency

- a. Self Study:
 - i. No competencies or requirements for patients with special needs.
 - ii. Competencies not clear on grading criteria.
- b. Refer to:
 - i. 16 CCR § 1105.2 (b): The curriculum shall include education in the dental hygiene process of care and shall define the competencies graduates are to possess at graduation, describing (1) the desired combination of foundational knowledge, psychomotor skills, communication skills, and professional behaviors and values required, (2) the standards used to measure the students' independent performance in each area, and (3) the evaluation mechanisms by which competence is determined.
 - ii. CODA 2-12: Graduates must be competent in providing dental hygiene care for the child, adolescent, adult and geriatric patient. Graduates must be competent in assessing the treatment needs of patients with special needs.
- c. Site Visit:
 - i. Foothill provided evidence of newly created competencies for patients with special needs and has been incorporated in current cohort requirements.
 - ii. Foothill provided evidence of newly created competencies with clear grading criteria and has been incorporated in current cohort requirements.
- d. Determination:
 - i. In compliance.

4. Admission/Prerequisites

a. Self Study

- i. Mathematics not clear as a firm prerequisite online or in Self Study Exhibits page 249.
 1. Online information/Self Study states "One of the following: MATH 10, PSYC 7 or SOC 7 or equivalent".
 2. Mathematics must clearly be listed as a prerequisite.
- ii. Self Study Exhibit 2-27 page 328 of DH Exhibits
 1. Conflicting information on prerequisite requirements.
 - a. Organic/Biochemistry (30B) not listed.
 - b. Nutrition (BIOL 45) not listed.
 - c. Microbiology (BIOL 41) not listed.

b. Refer to:

- i. 16 CCR § 1105 (f) (1) The minimum basis for admission into an educational program shall be the successful completion of all of the following: (A) A high school diploma or the recognized equivalent, which will permit entrance to a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation; and, (B) College-level general education courses in the topic areas of: (i) Oral and Written Communication (ii) Psychology (iii) Sociology (iv) Mathematics (v) Cultural Diversity* (vi) Nutrition* *This course is required prior to graduation, and may be waived as an admission requirement if included within the dental hygiene program curriculum. (C) College-level biomedical science courses, each of which must include a wet laboratory component, in: (i) Anatomy (ii) Physiology (iii) Chemistry (iv) Biochemistry (v) Microbiology (2) Admission of students shall be based on specific written criteria, procedures and policies. Previous academic performance and/or performance on standardized national tests of scholastic aptitude or other predictors of scholastic aptitude and ability shall be utilized as criteria in selecting students who have the potential for successfully completing the educational program. Applicants must be informed of the criteria and procedures for selection, goals of the program, curricular content, course transferability and the scope of practice of and employment opportunities for dental hygienists.

c. Site Visit

- i. Foothill provided evidence of clear requirements on Foothill application sheet.

d. Determination:

- i. In compliance.

5. Support Services/Staff

a. Self Study:

- i. Exhibits page 214 states: "DH students have told ACCJC site visitors that they felt academic counseling needed improvement. The counseling department has identified four counselors who will work with dental hygiene students, but we still do not have a designated counselor for dental hygiene. It should be noted that of the 15 pilot baccalaureate programs in CA, we are the only pilot program that does not have a designated counselor. We also need ongoing support from an evaluator who can transcribe prerequisite courses from other colleges and universities. We will evaluate the counseling department's solution of four counselors and see if this improves student satisfaction with counseling services."

- ii. Self Study page 105 states: "Dental hygiene students do not perform clerical functions in the program. The fulltime dental programs administrative assistant assists the program director with management of appointments, records, billing, inventory, and hazardous waste. Dental hygiene students do help with disinfection and sterilization processes. One student per clinic session is assigned to the sterilization rotation to process, sterilize, sort and distribute sterilized instruments. The program does not use distance sites."

b. Refer to:

- i. 16 CCR § 1105 (i): The educational program shall have learning resources, including faculty, library, staff and support services, technology and physical space and equipment, including laboratory and clinical facilities, to support the program's stated mission and goals and in accordance with approved accreditation standards referenced in subsection (c) of section 1103 of this article.
- ii. CODA 3-11: Qualified institutional support personnel must be assigned to the program to support both the instructional program and the clinical facilities providing a safe environment for the provision of instruction and patient care.

c. Site Visit:

- i. Foothill provided evidence that five (5) counselors are trained in the needs and requirements of the dental hygiene educational program.
- ii. Foothill provided evidence of a qualified dental programs administrative assistant who is a registered dental assistant (RDA).

d. Determination:

- i. In compliance.

6. Program Director

a. Self Study:

- i. Self Study Conclusion Standard 3 page 152 states: "The Director has recently been given an increase from 33% to 50% release time for administrative duties related to the dental hygiene program. The time allotted is not adequate at times for the director to conduct faculty meetings, complete administrative duties and make program assessments without working over 40 hours per week. The dean has been supportive in giving the director additional release time for the additional work related to implementing the BS-DH pilot program and preparing for accreditation."

b. Refer to:

- i. 16 CCR § 1105.1 (a) "Program Director" or "Interim Program Director" means a registered dental hygienist or dentist who has the authority and responsibility to administer the educational program in accordance with approved accreditation standards referenced in subsection (c) of section 1103 of this article. The educational program may have an Interim Program Director for a maximum of twelve (12) months. The director shall have a full-time appointment as defined by the institution, whose primary responsibility is for the operation, supervision, evaluation and revision of the program.
- ii. CODA 3-2 The dental hygiene program administrator must have a full-time appointment as defined by the institution, whose primary responsibility is for operation, supervision, evaluation and revision of the program.

- c. Site Visit:
 - i. Program director stated 50% of her time is devoted to program administration while 50% is spent devoted to teaching.
 - d. Determination:
 - i. Foothill director stated that her primary responsibility was for program administration.
7. Required Program Curriculum
- a. Self Study:
 - i. Preclinical hours first year
 - 1. Self Study exhibit 2-21 pages 298-300 of DH Exhibits.
 - a. Preclinical hours (DH 304) only 4.5 hours/week.
 - 2. Self Study Standard 4-1 response page 109 states: "First year dental hygiene students have a 3 hours clinic session three times per week for a total of 9 hours of instruction fall and winter quarters. These students use 12 chairs each session for pre-clinic."
 - a. 12 chairs each session only allows for half time for the student (½ time patient, ½ time clinician) which equates out preclinical hours (DH 304) at only 4.5 hours/week.
 - b. CODA 2-10 requires 6 hours/week.
 - ii. Clinical hours first year
 - 1. Self Study Standard 4-1 Response page 109 states: Once students begin to see patients in spring quarter of first year, all 18 chairs are generally in use for treatment of patients and instruction two 3 hours clinic sessions per week for a total of 6 hours.
 - 2. CODA 2-10 requires 8-10 hour/week.
 - b. Refer to:
 - i. 16 CCR §1105.2 (b) The curriculum shall include education in the dental hygiene process of care and shall define the competencies graduates are to possess at graduation, describing (1) the desired combination of foundational knowledge, psychomotor skills, communication skills, and professional behaviors and values required, (2) the standards used to measure the students' independent performance in each area, and (3) the evaluation mechanisms by which competence is determined.
 - ii. CODA 2-10 The number of hours of clinical practice scheduled must ensure that students attain clinical competence and develop appropriate judgment. Clinical practice must be distributed throughout the curriculum.
 - c. Site Visit:
 - i. Program Director stated CODA was satisfied with preclinical/ first year clinical hours.
 - d. Determination:
 - i. Compliance to be determined pending review of CODA final report.
8. Instruction in Local Anesthesia, Nitrous Oxide/Oxygen Sedation, and Soft Tissue Curettage
- a. Self Study:
 - i. Self Study exhibit 2-51 page 363 of DH Exhibits lists injections required for graduation.
 - 1. Only requires 2 preclinical and 4 clinical injections for mental and incisive injections combined.

2. Must have 2 preclinical and 4 clinical injections for mental and incisive injections each.
- ii. Self Study exhibit 2-51 page 363 of DH Exhibits lists nitrous experiences required for graduation.
 1. Requires 3 preclinical experiences and 2 clinical experiences.
 2. Must have 2 preclinical experiences and 3 clinical experiences.
 - iii. Self Study exhibit 2-56 page 373 of DH Exhibits lists injections required for graduation.
 1. Information on "State-Specific Additional DH Skills and Functions" chart quoted from the CCRs for local anesthesia is incorrect.
- b. Refer to:
- i. 16 CCR §1107(b)(9)(A-C): (A) Local anesthetic agents curriculum must include at least thirty (30) hours of instruction, including at least fifteen (15) hours of didactic and preclinical instruction and at least fifteen (15) hours of clinical instruction. Preclinical instruction shall include a minimum of two (2) experiences per injection, which may be on another student. Clinical instruction shall include at least four (4) clinical experiences per injection on four different patients, of which only one may be on another student. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltration, field block and nerve block to include anterior superior alveolar (ASA) nerve block (infraorbital), middle superior alveolar nerve block (MSA), anterior middle superior alveolar nerve block (AMSA), posterior superior alveolar nerve block (PSA), greater palatine nerve block, nasopalatine (P-ASA) nerve block, suprapariosteal, inferior alveolar nerve block (to include Gow-Gates technique), lingual nerve block, buccal nerve block, mental nerve block, incisive nerve block and intraseptal injections. One clinical experience per injection shall be used to determine clinical competency in the course. The competency evaluation for each injection and technique must be achieved at a minimum of 75%. (B) Nitrous oxide-oxygen analgesia curriculum must include at least eight (8) hours of instruction, including at least four (4) hours of didactic and preclinical instruction and at least four (4) hours of clinical instruction. This includes at least two (2) preclinical experiences on patients, both of which may be on another student, and at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency in the course. Each clinical experience shall include the performance of a dental hygiene procedure while administering at least twenty (20) minutes of nitrous oxide-oxygen analgesia. The competency evaluation must be achieved at a minimum of 75%. (C) Periodontal soft tissue curettage curriculum must include at least six (6) hours of instruction, including at least three (3) hours of didactic and preclinical instruction and at least three (3) hours of clinical instruction. Education may include use of a laser approved for soft tissue curettage. This includes at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency in the course. The competency evaluation for this procedure must be achieved at a minimum of 75%.
 - ii. CODA 2-18: Where graduates of a CODA accredited dental hygiene program are authorized to perform additional functions required for initial dental hygiene licensure as defined by the program's state specific dental board or regulatory agency, program curriculum must include content at the level, depth, and scope required by the state. Further, curriculum content must include didactic and laboratory/preclinical/clinical objectives for the additional dental hygiene skills and functions. Students must demonstrate laboratory/preclinical/clinical competence in performing these skills.

- c. Site Visit:
 - i. DHCC staff informed Foothill of deficiencies.
 - d. Determination:
 - i. Not in compliance.
 - ii. Foothill shall provide documentation to the DHCC of correction to the requirements.
9. Infection Control Requirements
- a. Self Study:
 - i. Exhibit 5-1 Radiology Policy and Information Manual
 - 1. Page 636
 - a. C 1: X-ray Room Preparation: no mention of donning/doffing mask/gloves for unit disinfection.
 - b. Potential for splatter of disinfection solution.
 - 2. Page 637
 - a. C9: no mention of doffing mask/gloves post radiation exposure of patient.
 - b. C 13: Any PPE for handling contaminated films?
 - c. D. Cleanup After Examination: no mention of donning/doffing mask/gloves for unit disinfection.
 - i. Potential for splatter of disinfection solution.
 - ii. Exhibit 5-2 Bloodborne Pathogens Exposure Policy
 - 1. Page 664
 - a. #1 - Standard precautions (not universal) is standard of care.
 - 2. Page 665
 - a. #6 Cleaning up – “A surface contaminated with blood or OPIM will be disinfected immediately. The disinfectant used will be a solution of household bleach diluted daily with water at the rate of 1/4-cup bleach per 1 gallon of water or a registered sterilant.”
 - i. Per CCR§1005 (b)(1)(14): “Non-critical surfaces and patient care items shall be cleaned and disinfected with a California Environmental Protection Agency (Cal/EPA)-registered hospital disinfectant (low-level disinfectant) labeled effective against HBV and HIV. When the item is visibly contaminated with blood or OPIM, a Cal/EPA-registered hospital intermediate-level disinfectant with a tuberculocidal claim shall be used.
 - b. Refer to:
 - i. 16 CCR §1105.2(d)(3)(C) An educational program shall comply with local, state, and federal health and safety laws and regulations.(i) All students shall have access to the program's hazardous waste management plan for the disposal of needles, cartridges, medical waste and storage of oxygen and nitrous oxide tanks.(ii) All students shall have access to the program's clinic and radiation hazardous communication plan.(iii) All

students shall receive a copy of the program's bloodborne and infectious diseases exposure control plan, which shall include emergency needlestick information.

- ii. 16 CCR §1105.2(d)(3)(D)(xii) Proper infection control procedures according to the provisions of Title 16, Division 10, Chapter 1, Article 1, Section 1005 of the California Code of Regulations
- iii. 16 CCR §1005. Minimum Standards for Infection Control
- iv. 8 CCR §5193. Bloodborne Pathogens.

c. Site Visit:

- i. Foothill provided verbal confirmation that issue of 9. a. i. was covered in powerpoint.
- ii. Foothill provided evidence that issue of 9. a. ii. was a district policy.
- iii. Sterilization Room
 - 1. Clean instruments storage insufficient and exposed to aerosols.
 - 2. No clear delineation between clean and dirty areas of sterilization room.
 - 3. Dirty instruments not labeled.
 - 4. Dirty instrument bins not secure and pose threat to student/staff/faculty exposure.
 - 5. Exterior of biohazard bin dirty.
 - 6. Biohazard bin located beneath "clean instruments" bin and clean supplies.
 - 7. Brooms located to the left of "clean instrument" bin.
 - 8. Unpackaged instruments in "clean instrument" bin.
 - 9. Stacked supplies located in sterilization room exposed to aerosols.
 - 10. Lack of ventilation due to stacked supplies blocking windows.
 - 11. No exhaust fan.
 - 12. Ultrasonic not properly labeled.
 - 13. Bottled chemicals do not have MSDS labels.
 - 14. Plastic wrap used as a barrier (wall) between dirty instruments and garbage can/doorway to sterilization room.

d. Determination:

- i. Not in compliance.
- ii. Documentation providing evidence of clarification for students for 9. a. i. and 9. a. ii. to be sent to DHCC.
- iii. Immediate measures must be taken to remedy above deficiencies in 9. c. ii.
- iv. Plans for permanent solutions (cabinetry to ensure appropriate sterility/cleanliness of patient use items, etc.) must be submitted to the DHCC to demonstrate compliance.

Foothill will be required to provide evidence of compliance to outstanding deficiencies no later than November 30, 2018. If you have any questions regarding this report, please feel free to contact me at adina.petty@dca.ca.gov.

Sincerely,

Adina A. Pineschi-Petty DDS

Educational Program Specialist

Dental Hygiene Committee of California

cc: Anthony Lum, Executive Officer, Dental Hygiene Committee of California
Thuy Thi Nguyen, JD, President, Foothill College

Dental Hygiene Committee of California

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November 1, 2018

Ms. Lisa Kamibayashi
Program Director, Department of Dental Hygiene
West Los Angeles University
9000 Overland Ave.
Culver City, CA 90230

The Dental Hygiene Committee of California (DHCC) conducted a site visit on October 30, 2018 of the West Los Angeles College Dental Hygiene Educational Program (WLA). This site visit was generated by a review of the WLA Commission on Dental Accreditation (CODA) Self Study as well as due to DHCC oversight goals to review all dental hygiene educational programs in California. Based on the results of the CODA Self Study it was noted that evidence of program compliance with the minimum program standards set by the California Code of Regulations (CCR) and CODA was insufficient. After the site visit and review of submitted documentation, correction to CODA Self Study deficiencies was sufficient. However, during the site visit minimum program standards in infection control set by the CCR was insufficient.

During the program review, the following deficiencies of minimum program standards were discovered:

1. Program Prerequisites:

a. Self Study

i. Volume II

1. Standard 2-3 p. 6 and Exhibit 2-D p.51

a. Mathematics not listed as a pre-requisite.

b. Biochemistry not listed as a pre-requisite.

2. Exhibit 2-L

a. Admissions ranking sheet states Biochemistry not required.

ii. Volume V

1. Mathematics not listed as a pre-requisite.

b. Refer to:

i. The California Code of Regulations (CCR) Title 16, Division 11, §§1105 (f)(1)(A-C)
(f) Admission.

(1) The minimum basis for admission into an educational program shall be the successful completion of all of the following:

(A) A high school diploma or the recognized equivalent, which will permit entrance to a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation; and,

(B) College-level general education courses in the topic areas of:

(i) Oral and Written Communication (ii) Psychology (iii) Sociology (iv) Mathematics (v) Cultural Diversity* (vi) Nutrition*

*This course is required prior to graduation, and may be waived as an admission requirement if included within the dental hygiene program curriculum.

(C) College-level biomedical science courses, each of which must include a wet laboratory component, in:

(i) Anatomy (ii) Physiology (iii) Chemistry (iv) Biochemistry (v) Microbiology.

c. Notification:

- i. On 12-4-17 WLA was notified of above deficiency.
- ii. On 12-11-17 WLA notified the DHCC of plan to comply with deficiency.

d. Site Visit:

- i. Reviewed documentation and confirmed correction of deficiency.

e. Compliance:

- i. In compliance.

2. Infection Control Standards

a. Self Study:

i. Volume II

1. Exhibit 2-N p. 143

- a. Infection control policy states "As an alternative to hand washing between patients, antimicrobial hand sanitizer may be used when hands are not visibly soiled."
 - i. Per § 5193(l) when antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

2. Standard 5 p. 85 (p. 10 of Infection Control and Hazard Policy)

- a. As an alternative to hand-washing between patients, antimicrobial hand sanitizer may be used when hands are not visibly soiled.
 - i. Per § 5193(l) when antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

3. Exhibit 2-N pp. 143 and 146

- a. #6 - Cartridge disposal accomplished without utility gloves.
 - i. Red vs. blue unclear.
- b. #9 - Scrubbing instruments by hand.
 - i. Manual scrubbing is never recommended. See § 5193(d)(3)(B)(7).
- c. No handwashing between #10 & #11.

4. Standard 5 p. 88 (p.13 of Infection Control and Hazard Policy)

- a. #9 while wearing exam gloves under nitrile utility gloves, take the instrument cassettes to sterilization room for ultrasonic cleaning or high thermal disinfectant cleaning machine for cleaning. OR while wearing exam gloves under nitrile utility gloves, scrub instruments as follows: place open cassette WITH INSTRUMENTS LOCKED UNDER THE CLIP in the base of the sink, hold down in the center, scrub away from you with your long handled brush. DO NOT SCRUB INSTRUMENTS ONE BY ONE. Dry instruments (with cassette) using thick pads of paper towel, and place into sterilization bags. Take off utility gloves and

wash them with instrument brush with soap with hands with exam gloves.

- i. Instruments should not be hand scrubbed. See §5193 (d)(3)(B)(7).
 - ii. Drying instruments with paper towels increases chance of exposure.
 - iii. Per CDC Guidelines for Infection Control in Dental Health-Care Settings 2003:
 1. DHCP should process all instruments in a designated central processing area to more easily control quality and ensure safety (248). The central processing area should be divided into sections for 1) receiving, cleaning, and decontamination; 2) preparation and packaging; 3) sterilization; and 4) storage. Ideally, walls or partitions should separate the sections to control traffic flow and contain contaminants generated during processing. When physical separation of these sections cannot be achieved, adequate spatial separation might be satisfactory if the DHCP who process instruments are trained in work practices to prevent contamination of clean areas (248). Space should be adequate for the volume of work anticipated and the items to be stored (248).
 - b. #14 Put on over-gloves. Walk the bagged instruments back to the sterilization area or into the container.
 - i. Over-gloves are not considered proper PPE and not approved for use in the dental practice setting.
 - ii. See CCR §1005(b)(8).
5. Exhibit 2-N p. 152-153 and p. 94 (19 of Infection Control and Hazard Policy)
 - a. Encourage using Class 5 Integrator for instruments that has high risk of puncturing skin (Scalers and explorers).
 - i. Unclear if they are used.
 - ii. Per CDC Work Practice Recommendations 2003: Use an internal chemical indicator in each package. If the internal indicator cannot be seen from outside the package, also use an external indicator (II) (243,254,257).
 - b. Objects, other than implantable objects, do not need to be recalled because of a single positive spore test unless the sterilizer or the sterilization procedure is defective.
 - i. Per CDC Work Practice Recommendations 2003: "Recall, to the extent possible, and reprocess all items processed since the last negative spore test" (II)(9,243, 283).
- ii. Standard 3-11 p. 15
 1. Support staff assigned to sterilization.
 2. No credentials submitted.

b. Refer to:

- i. 16 CCR §1105.2 (d)(3)(A)
An educational program shall provide infection control equipment according to the requirements of California Code of Regulations, Title 16, Division 10, Chapter 1, Article 1, Section 1005.
- ii. 16 CCR §1105.2 (d)(3)(C)
An educational program shall comply with local, state, and federal health and safety laws and regulations. (i) All students shall have access to the program's hazardous waste management plan for the disposal of needles, cartridges, medical waste and storage of oxygen and nitrous oxide tanks. (ii) All students shall have access to the program's clinic and radiation hazardous communication plan. (iii) All students shall receive a copy of the program's bloodborne and infectious diseases exposure control plan, which shall include emergency needlestick information.
- iii. 16 CCR §1105.2 (d)(3)(D)(xii)
Proper infection control procedures according to the provisions of Title 16, Division 10, Chapter 1, Article 1, Section 1005 of the California Code of Regulations.
- iv. 16 CCR §1005 Minimum Standards for Infection Control.
- v. 8 CCR §5193 Bloodborne Pathogens.
- vi. OSHA CCR Subchapter 7, Group 16, Article 109, § 5193(I)
(I) Hygiene. 1. Employers shall provide handwashing facilities which are readily accessible to employees. 2. When provision of handwashing facilities is not feasible, the employer shall provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible. 3. Employers shall ensure that employees wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment. 4. Employers shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or OPIM.
- vii. OSHA CCR Subchapter 7, Group 16, Article 109, § 5193(d)(3)(B)(7)
Sharps containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of sharps injury.

c. Notification:

- i. On 12-4-17 WLA was notified of above Self Study deficiencies.
- ii. On 12-11-17 WLA provided documentation of correction of Self Study deficiencies.

d. Site Visit:

- i. Reviewed documentation and confirmed correction of Self Study deficiencies.
- ii. Sterilization room
 1. Clean and sterile instrument storage insufficient and exposed to aerosols.
 2. Student mail placed in the clean and sterile instrument storage cubbies.

e. Compliance:

- i. In compliance with Self Study deficiencies.
- ii. Instrument storage not in compliance.

3. Faculty

a. Self Study

i. Standard 3

1. A. Aguilar listed as full time in exhibit 3E p. 26 but no Workload exhibit in 3F.

b. Refer to:

i. CCR Title 16, Division 11, § 1105.1(b)

"Program faculty" means an individual having a full-time or part-time agreement with the institution to instruct one or more of the courses in the educational program's curriculum. The individual shall hold a baccalaureate degree or higher from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation, and possess the following: (1) An active California dental or dental hygiene license or special permit with no disciplinary actions; or (2) A postsecondary credential generally recognized in the field of instruction; or (3) A degree in the subject being taught or evaluated. (4) All program faculty shall have documented background in educational methodology every two years, consistent with teaching assignments.

ii. CODA Standard 3-7

The full time faculty of a dental hygiene program must possess a baccalaureate or higher degree. Part-time faculty providing didactic instruction must have earned at least a baccalaureate degree or be currently enrolled in a baccalaureate degree program. All dental hygiene program faculty members must have: a) current knowledge of the specific subjects they are teaching. b) documented background in current educational methodology concepts consistent with teaching assignments. c) Faculty who are dental hygienists must be graduates of dental hygiene programs accredited by the Commission on Dental Accreditation.

c. Notification:

- i. On 12-4-17 WLA was notified of above Self Study deficiencies.
- ii. On 12-11-17 WLA provided documentation of correction of Self Study deficiencies.

d. Site Visit:

- i. Reviewed documentation and confirmed correction of Self Study deficiencies.

e. Compliance:

- i. In compliance.

You will be required to correct the above infection control deficiency no later than November 30, 2018. If you have any questions regarding this report, please contact me at adina.petty@dca.ca.gov or (916) 576-5002.

Sincerely,

Adina A. Pineschi-Petty DDS

Educational Program Specialist

Dental Hygiene Committee of California

Cc: James M. Limbaugh, Ph.D., President, West Los Angeles College

Anthony Lum, Executive Officer, Dental Hygiene Committee of California



Friday, November 16, 2018
Dental Hygiene Committee of California
Education Subcommittee Meeting

Agenda Item 9

**Discussion and Possible Action, and Recommendation
to the Full Committee on the Following Educational
Regulations:**

- a. 16 CCR §1103. Educational Programs Definitions.
- b. 16 CCR §1104. Approval of New RDH Educational Programs and Continuation of Approval for Approved RDH Educational Programs.
- c. 16 CCR §1104.1. Process for Approval of a New RDH Education Program.
- d. 16 CCR §1105. Requirements for RDH Educational Programs.
- e. 16 CCR §1105.1. Faculty
- f. 16 CCR §1105.2. Required Curriculum.
- g. 16 CCR §1107. RDH Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage.
- h. 16 CCR §1108. Remedial Education.



MEMORANDUM

DATE	November 16, 2018
TO	Dental Hygiene Committee of California Educational Subcommittee
FROM	Anthony Lum Executive Officer Dental Hygiene Committee of California
SUBJECT	Discussion and Possible Action, and Recommendation to the Full Committee Proposed Draft Educational Regulatory Language for 16 CCR §1107. RDH Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage.

Background:

Since the Dental Hygiene Committee of California (DHCC) began oversight of the Dental Hygiene Educational Programs (DHEP) in January 2016, oversight regulations have posed some challenges due to the clarity of the regulations, as well as to additional areas that require an update of references to remain current and applicable.

There have been several concerns raised by dental hygiene educators concerning the intent of the regulations, including requirements regarding the numbers, types, and technique of injections required for local anesthesia as well as nitrous oxide-oxygen analgesia.

A task force of dental hygiene educators was convened via teleconference meeting on October 24, 2018 to discuss the regulations and create recommendations to be brought before the Educational Subcommittee for consideration and approval. A subsequent recommendation will then be presented to the Full Committee for discussion and approval.

Staff Recommendation:

Staff recommends to the Educational Subcommittee to review the language in the attached to complete the draft for possible recommendation to the Full Committee.

Pros: The following educational regulatory language would provide clarity regarding educational regulations to dental hygiene educational programs and their faculty to allow the programs to follow regulations more accurately and consistently.

Cons: None.

I. Regulations

a. 1107

- i. (b)(9)(A) Local anesthetic agents curriculum must include at least thirty (30) hours of instruction, including at least fifteen (15) hours of didactic and preclinical instruction and at least fifteen (15) hours of clinical instruction. Preclinical instruction shall include a minimum of two (2) experiences per injection, which may be on another student. Clinical instruction shall include at least four (4) clinical experiences per injection on four different patients, to include two (2) experiences on the right side of a patient and two (2) experiences on the left side of a patient, of which only one (1) may be on another student. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltration, field blocks and/or nerve blocks to include anterior superior alveolar (ASA) nerve block (infraorbital), middle superior alveolar nerve block (MSA), anterior middle superior alveolar nerve block (AMSA), posterior superior alveolar nerve block (PSA), greater palatine nerve block, nasopalatine (P-ASA) nerve block, supraperiosteal, inferior alveolar nerve block (to include Gow-Gates technique), lingual nerve block, buccal nerve block, and mental/ nerve block, incisive nerve block and intraseptal injections. One clinical experience per injection shall be used to determine clinical competency in the course. The competency evaluation for each injection and technique must be achieved at a minimum of 75%.

ii. (b)(9)(B) Nitrous Oxide-Oxygen Administration time.

(B) Nitrous oxide-oxygen analgesia curriculum must include at least eight (8) hours of instruction, including at least four (4) hours of didactic and preclinical instruction and at least four (4) hours of clinical instruction. This includes at least two (2) preclinical experiences on patients, both of which may be on another student, and at least three (3) clinical experiences on patients, of which only one may be on another student and one of which will be used to determine clinical competency in the course. Each clinical experience shall include the performance of a dental hygiene procedure while administering at least twenty (20) minutes of nitrous oxide-oxygen analgesia, from the beginning of titration of nitrous oxide-oxygen to the discontinuation of nitrous oxide and beginning of final oxygenation. The competency evaluation must be achieved at a minimum of 75%.

iii. (b)(9)(B) Nitrous Oxide-Oxygen Administration Time.

The twenty (20) minute **preclinical** requirement in the chart will be removed, as the regulatory language does not have such a requirement and was added in error.

Nitrous Oxide-Oxygen Sedation Requirements	Didactic and Preclinical Instruction	Clinical Instruction	Required Preclinical Experiences	Required Clinical Experiences
Minimum 8 hours of instruction	Yes Minimum 4 hours instruction	Yes Minimum 4 hours instruction	<ol style="list-style-type: none"> 1. Minimum two experiences 2. Both experiences may be on another student 3. Minimum of 20 minutes of nitrous oxide-oxygen exposure for each experience 	<ol style="list-style-type: none"> 1. Minimum three experiences 2. One experience may be on another student 3. One experience must be used to determine competency 4. Minimum of 20 minutes of nitrous oxide-oxygen exposure for each experience



MEMORANDUM

DATE	November 16, 2018
TO	Dental Hygiene Committee of California Educational Subcommittee
FROM	Anthony Lum Executive Officer Dental Hygiene Committee of California
SUBJECT	Discussion and Possible Action, and Recommendation to the Full Committee Proposed Draft Educational Regulatory Language

Background:

Since the Dental Hygiene Committee of California (DHCC) began oversight in Dental Hygiene Educational Programs (DHEP) in January 2016, enforcement of regulations has posed some challenges due to the clarity of the regulations, as well as to additional areas that require an update of references to remain current and applicable.

Staff Recommendation:

Staff recommends to the Educational Subcommittee to review the language in the attached starting point document, determine whether additional information or language is required, and complete the draft of proposed regulatory language to be recommended to the Full Committee.

Please note: The bolded areas are the subject areas of laws to be addressed with highlighted areas as the proposed language.

Pros: To update language to the current CODA Standards and provide clarification to current regulations.

Cons: None.

I. Regulations

a. 1103

i. (a) Academic year needs clarification.

(a) "Academic year" means a period of education consisting of a minimum of thirty (30) weeks of instruction and constitute a minimum of forty-five (45) quarter units, thirty (30) semester units, or a duration deemed equivalent thereto by the Committee Board.

ii. (c) CODA accreditation standards reference needs to be updated as well as regulations should apply to all regulations.

(c) "Approved accreditation standards" means for the purposes of this section those standards contained in the Commission on Dental Accreditation's "Accreditation Standards for Dental Hygiene Education Programs (as last revised February 6, 2015 February 2, 2018)" which is hereby incorporated by reference and referenced throughout this article and shall apply to all regulations within article 3.

iii. Primary Responsibility Definition

Add (aj)

"Primary responsibility" means that a majority of time is spent devoted to the administrative duties of a dental hygiene program director that is required by the position to maintain the operation of the program.

iv. Enrichment Site Definition

Add (ak) Enrichment Site.

"Enrichment site" means an off-site clinical facility where additional patient care experiences may take place. The site may be supervised by non-program personnel according to predetermined program learning objectives and evaluation criteria. No major instruction or completion of program requirements may take place here.

b. 1104

i. (b)(1) CODA accreditation standards reference needs to be updated.

(1) All educational programs accredited by CODA, or an equivalent accrediting body, as determined by the Committee Board, shall submit to the Committee Board after each accreditation site visit an electronic copy of the Self-Study Report in accordance with the requirements specified in CODA's "Self-Study Guide for the Evaluation of a Dental Hygiene Education Program" (As Last Revised: January 1, 2016 February 2, 2018), which is hereby incorporated by reference, and a copy of the final report of the findings within thirty (30) days of the final report issuance.

c. 1104.1

i. **(b) CODA accreditation standards reference needs to be updated.**

(b) After approval of the feasibility study by the **Committee Board**, and at least twelve (12) months prior to the proposed date for enrollment of students, the educational program shall submit CODA's, or an equivalent accrediting body's required documents to the **Committee Board** in accordance with the requirements specified in the "Instructions". This includes a Self-Study Report that delineates how the proposed program plans to comply with the accreditation standards contained in CODA's "Accreditation Standards for Dental Hygiene Education Programs" (As Last Revised: **February 6, 2015 February 2, 2018**) which is hereby incorporated by reference.

d. 1105

i. **(b)(3) Two academic years is a minimum of 60 weeks (2 – 15 week semesters or 3 – 10 week trimesters) clarify & define.**

ii. **(b)(3) It should be 1800 clock hours as defined in 1103 (z-ad) (i.e. 15 weeks/semester, 15 hours/week, 2 semesters per academic year = 15 x 15 x 2 = 900 hours/academic year and therefore 1800 clock hours for two academic years).**

(3) The length of instruction in the educational program shall include two academic years of fulltime instruction at the postsecondary college level or its equivalent, and a minimum of **1,600 1800** clock hours.

iii. **(b)(5) Do we want to add "any license" that has no disciplinary action?**

(5) Instruction involving procedures that require direct supervision shall be supervised by a faculty dentist who possesses an active California license or special permit with no disciplinary actions **in any jurisdiction to practice dentistry.**

iv. **"Volunteer" definition/requirements should be expanded upon and lists of part time DDSs and RDHs should be retained.**

(I) When an individual not employed in the educational program participates in the instruction and **or** supervision of students obtaining educational experience, his or her **name and** responsibilities shall be described in writing and kept on file by the dental hygiene program **and shall have twenty-four (24) months of experience providing direct patient care as a registered dental hygienist or dentist.**

v. **Add 1105 (n)?**

"All requirements set forth below shall comply with approved accreditation standards, and state and national regulatory standards including, but not limited to, CODA, OSHA, and HIPPA."

e. 1105.1

i. **(a) Define “primary”**

(a) “Program Director” or “Interim Program Director” means a registered dental hygienist or dentist who has the authority and responsibility to administer the educational program in accordance with approved accreditation standards referenced in subsection (c) of section 1103 of this article. The educational program may have an Interim Program Director for a maximum of twelve (12) months. The director shall have a full-time appointment as defined by the institution, whose **primary responsibility is for the operation, supervision, evaluation and revision of the program.** The program director shall meet the following minimum qualifications:

ii. **(a)(1) Do we want to add “any license” that has no disciplinary action?**

(1) Possess an active, current dental or dental hygiene license issued by the **Committee Board** or the Dental Board of California (DBC), with no disciplinary actions **in any jurisdiction to practice dental hygiene or dentistry;**

iii. **(a)(3) Define 2 years. Two (2) academic or 24 months?**

(3) Documentation of two (2) **academic** years' **(or 24 months)** experience teaching in pre- or post-licensure registered dental hygiene or dental programs. This requirement may be waived for an Interim Program Director; and

iv. **“Program faculty”**

(b) “Program faculty” means an individual having a full-time or part-time agreement with the institution to **tutor or** instruct one or more of the courses in the educational program's curriculum. The individual shall hold a baccalaureate degree or higher from a college or university accredited by an agency recognized by the U.S. Department of Education or Council for Higher Education Accreditation, and possess the following: an active California dental or dental hygiene license or special permit with no disciplinary actions **in any jurisdiction to practice dental hygiene or dentistry;** or a postsecondary credential generally recognized in the field of instruction; or a degree in the subject being taught or evaluated. All program faculty shall have documented background in educational methodology every two years, consistent with teaching assignments.

v. **(b)(1) Clinical teaching faculty**

1. **How do they get the experience if can't be hired because they need to be out for 2 years? Teaching outside CA?**
2. **Dental hygiene educational programs are interpreting volunteer experience as an academic year of dental or dental hygienist level clinical teaching experience, hiring new graduates as paid volunteers and then hiring them as faculty after the one year.**

(1) Clinical teaching faculty shall have a minimum of twenty-four (24) months of experience providing direct patient care experience within the previous five (5) years in the dental hygiene area to which he or she is assigned, which can be met by either: two (2) years' experience providing direct patient care as a registered dental hygienist or dentist; or one (1) academic year of dental or dental hygienist level clinical teaching experience.

f. 1105.2

- i. (d)(1)(C) CODA 2-8b has changed it to “general and maxillofacial pathology and/or pathophysiology”.

(C) General and Maxillofacial Pathology and/or Pathophysiology

- ii. (d)(2) Add N as CODA 2-8 d has added “and the provision of oral health care services to patients with bloodborne infectious diseases”.

(N) Provision of Oral Health Care Services to Patients with Bloodborne Infectious Diseases.

- iii. (d)(3)(A)

(A) An educational program shall provide qualified faculty, staff, and infection control equipment according to the requirements of California Code of Regulations, Title 16, Division 10, Chapter 1, Article 1, Section 1005.

- iv. Add (d)(4)

(d)(4) Requirements for a Radiation Safety and Radiography Techniques Course.

Approved educational programs shall, at a minimum, specifically include instruction in radiation safety and radiography techniques and shall comply with the requirements in accordance with the provisions of this subdivision in order to secure and maintain approval by the Board. The course of instruction in radiation safety and radiography techniques offered by a dental hygiene educational program (DHEP) approved by the Board for instruction in dental hygiene shall be deemed to be an approved radiation safety course if the DHEP has submitted evidence satisfactory to the Board that it meets all the requirements set forth below.

(A) A DHEP shall provide infection control equipment and follow infection control procedures according to the requirements of California Code of Regulations (CCR) Title 16, Division 10, Article 4, §1005, in addition to all state and national regulatory statutes and regulations and all approved accreditation standards, including, but not limited to, the California Business and Professions Code (BPC), Health and Safety Code (HSC), Department of

Health Care Services (DHCS), and Occupational Safety and Health Administration (OSHA), and the Commission on Dental Accreditation (CODA)

(B) Facilities.

There shall be a sufficient number of safe, adequate, and educationally conducive lecture classrooms, radiography operatories, developing/processing facilities and/or digital equipment, and viewing spaces for mounting, viewing and evaluating radiographs. Adequate sterilizing facilities shall be provided and all disinfection and sterilization procedures shall comply with 16 CCR §1005 in addition to all applicable accreditation standards, and state and national regulatory statutes and regulations.

- (i) A radiographic operatory shall be deemed adequate if it fully complies with the California Radiation Control Regulations (17 CCR commencing with §30100), is properly equipped with supplies and equipment for practical work and includes for every five students at least one functioning radiography machine which is adequately filtered and collimated in compliance with DHCS regulations and which is equipped with the appropriate position-indicating devices for each technique being taught.
- (ii) The developing or processing facility shall be deemed adequate if it is of sufficient size, based upon the number of students, to accommodate students' needs in learning processing procedures and is properly equipped with supplies and equipment for practical work using manual, automatic, or digital equipment.
- (iii) (3) Radiology areas shall provide protection to patients, students, faculty, and observers in full compliance with all applicable state and national regulatory statutes and regulations.

(C) Program Content.

Sufficient time shall be available for all students to obtain laboratory and clinical experience to achieve minimum competence in the various protocols used in the application of dental radiographic techniques.

- (i) A detailed course outline shall be provided to the students which clearly states curriculum subject matter and specific instructional hours in the individual areas of didactic, laboratory, preclinical, and clinical instruction.

- (ii) General program objectives and specific instructional unit objectives shall be stated in writing and shall include theoretical aspects of each subject as well as practical application. The theoretical aspects of the program shall provide the content necessary for students to make judgments regarding dental radiation exposure. The course shall assure that students who successfully complete the course can expose, process and evaluate dental radiographs with minimum competence.
- (iii) Objective evaluation criteria shall be used for measuring student progress toward attainment of specific course objectives. Students shall be provided with specific unit objectives and evaluation criteria that will be used for all aspects of the curriculum including written, practical and clinical competencies and examinations.
- (iv) Areas of instruction shall include at least the following as they relate to exposure, processing and evaluations of dental radiographs:
 - (1) Radiation physics and biology;
 - (2) Radiation protection and safety;
 - (3) Recognition of normal anatomical landmarks and abnormal conditions of the oral cavity as they relate to dental radiographs;
 - (4) Radiograph exposure and processing techniques using manual, automatic, and computerized digital methods;
 - (5) Radiograph mounting and/or sequencing, and viewing, including anatomical landmarks of the oral cavity;
 - (6) Intraoral techniques and dental radiograph armamentaria, including holding devices;
 - (7) Interproximal examination including principles of exposure, methods of retention and evaluation;
 - (8) Intraoral examination including, principles of exposure, methods of retention and evaluation;
 - (9) Identification and correction of faulty radiographs;
 - (10) Infection control in dental radiographic procedures; and
 - (11) Radiographic record management.

(D) Radiation Safety.

Sufficient hours of didactic and laboratory instruction shall be provided to ensure that a student successfully demonstrates competency in radiation safety. Successful completion of a radiation safety competency must be achieved at a minimum of 75% and shall be required prior to utilization of radiographic techniques in laboratory and clinic.

(E) Laboratory Instruction.

Sufficient hours of laboratory instruction shall be provided to ensure that a student successfully completes on a radiology manikin at a minimum the procedures set forth below. A procedure has been successfully completed only if each radiograph is of diagnostic quality. There shall be no more than 5 students per instructor during laboratory instruction.

(i) Two full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings;

(ii) Two bitewing series, consisting of at least 4 radiographs each; and

(iii) Developing or processing and mounting of analog exposed radiographs, and/or computer digital exposure and sequencing may be utilized.

(iv) Student and instructor written evaluation of radiographs.

(F) Clinical Experience.

The course of instruction shall include sufficient clinical experience, as part of an organized program of instruction, to obtain clinical competency in radiographic techniques. There shall be no more than 5 students per instructor during clinical instruction. Clinical instruction shall include clinical experience on four different patients with one of the four patients to be utilized for clinical competency. Clinical experience shall include:

(i) Successful completion of a minimum of four full mouth periapical series, consisting of at least 18 radiographs each, 4 of which must be bitewings. Such radiographs shall be of diagnostic quality. All exposures made on human subjects shall only be made for diagnostic purposes and shall in no event exceed three (3) exposures per subject. If traditional film packets are utilized, they must be double film.

(ii) All clinical procedures on human subjects shall be performed under the general supervision of a licensed dentist in accordance with HSC §106975.

(iii) Developing or processing and mounting of analog exposed radiographs; and/or computer digital exposure and sequencing may be utilized.

(iv) Student and instructor written evaluation of radiographs.

(G) Clinical Facilities.

Clinical facilities shall have the necessary equipment and accessories appropriate for the procedures to be performed and that such equipment and accessories are in safe operating condition. Such clinical facilities shall be subject to the same requirements as those specified in subdivision (F).

(H) Length of Course.

The program shall be of sufficient duration for the student to develop minimum competence in the radiation safety techniques and shall in no event be less than 32 clock hours, including at least 8 hours of didactic instruction, at least 12 hours of laboratory instruction, and at least 12 hours of clinical instruction.

v. Add (e)

(e) An educational program shall provide for breadth of experience and student competency in patient experiences in all classifications of periodontal disease including mild, moderate, and severe involvement.

vi. Add (f)

(f) An educational program shall provide for breadth of experience and student competency in providing patient experiences in dental hygiene care for the child, adolescent, adult, geriatric, and special needs patients.

vii. 1105.2 (d)(E)(1-4) Out-of-State SLN

(E) Specific Curriculum Content.

Curriculum relating to the administration of local anesthetic agents, administration of nitrous oxide-oxygen analgesia, and performance of periodontal soft tissue curettage shall meet the requirements contained in Title 16, Division 11, section 1107 of the California Code of Regulations.

Out-of-state dental hygiene programs that are accredited by the Commission on Dental Accreditation or an approved accrediting body and who provide instruction according to this subdivision may be approved by the **Committee Board** to meet the requirements set forth in Business and Professions Code, section 1909.

An out-of-state applicant may be certified by the Board that they have met current California SLN requirements pursuant to 16 CCR §1107. In addition to all requirements required by the Board to be licensed as a dental hygienist in California, out-of-state applicants shall submit:

1. An "Application for Certification in Soft Tissue Curettage/Local Anesthesia/Nitrous Oxide-Oxygen Analgesia" DHCC OSLN-01 (9-2018) hereby incorporated by reference; and

2. A certified SLN course syllabus (to include individual SLN requirements) for the RDH educational program of which the applicant is a graduate; and
3. A "Certification of Completion of SLN Course Requirements" DHCC OSLN-2 (9-2018) hereby incorporated by reference, from the RDH educational program of which the applicant is a graduate; and
4. Payment of all applicable fees due to the Board pursuant to BPC §1944 (a)(11).

g. 1105.3
Clear

h. 1106
Clear

i. 1108

i. (a)(4) 50 hours sufficient? WREB requires 80.

(4) Each approved course shall consist of a combination of didactic, laboratory, and clinical instruction and provide a minimum of fifty (50) hours of remedial education.

ii. Add (a)(6) - Requirements of "breadth of experience" for remediation.

Each approved course shall provide for breadth of experience in mild, moderate, and severe periodontal involvement.

j. 1109 RDM/ITR Insertion



Application for Approval of an Out-of-State Course in Local Anesthesia, Nitrous Oxide-Oxygen Analgesia and Periodontal Soft Tissue Curettage

Business & Professions Code §1909, California Code of Regulations Title 16, Division 11 §§1105.2, 1107

Non-Refundable Fee: \$100
(Must accompany application)

Receipt	_____	RC	_____
Date filed	_____	\$	_____
Approved	_____	Denied	_____

Applicant Name			
Mailing Address			
City	State	Zip	Phone
Dental Hygiene Educational Program Name			
Dental Hygiene Educational Program Address			
City	State	Zip	Phone
Program Director Name		Program Director Email	

Requirements for Course Approval

- Did the course provide instruction in administration of local anesthetic agents limited to the oral cavity, administration of nitrous oxide-oxygen analgesia utilizing fail-safe type machines containing no other general anesthetic agents, and periodontal soft tissue curettage?
Include a copy of the dental hygiene educational program curriculum, including syllabi, clinical skills and competency assessment forms. (Label as Exhibit A)
Yes ☐ No ☐
- Did the course's duration allow the applicant to develop competence in administration of local anesthesia, administration of nitrous oxide-oxygen analgesia, and performance of periodontal soft tissue curettage?
Include a copy of didactic, pre-clinical and clinical schedules. (Label as Exhibit B)
Yes ☐ No ☐
- Was instruction in periodontal soft tissue curettage a total of at least six (6) hours including at least three (3) hours of didactic and pre-clinical instruction and at least three (3) hours of clinical instruction which included a minimum of three (3) clinical experiences on three (3) different patients of which only one (1) was allowed on another student?
Yes ☐ No ☐

4. Was instruction in the administration of local anesthetic agents a total of at least thirty (30) hours, including at least fifteen (15) hours of didactic and pre-clinical and at least fifteen (15) hours of clinical instruction which included a minimum of two (2) preclinical experiences per injection, which may be on another student and four (4) clinical experiences on four (4) different patients of which only one (1) was allowed on another student?
Yes ☐ No ☐
5. Was instruction in the administration of local anesthetic agents a total of at least thirty (30) hours, including at least fifteen (15) hours of didactic and pre-clinical and at least fifteen (15) hours of clinical instruction which included a minimum of two (2) preclinical experiences per injection, which may be on another student and four (4) clinical experiences on four (4) different patients of which only one (1) was allowed on another student?
Yes ☐ No ☐
6. Was instruction in the administration of nitrous oxide-oxygen analgesia a total of at least eight (8) hours, including at least four (4) hours of didactic and pre-clinical instruction and four (4) hours of clinical instruction which included a minimum of three (3) clinical experiences on three (3) different patients of which only one (1) was allowed on another student?
Yes ☐ No ☐
7. Specify the total number of hours for all three areas within the course that was taught in the categories listed below:
Didactic: _____ Pre-Clinical: _____ Clinical: _____

Acknowledgement

8. Did the applicant successfully complete the course after achievement of a minimum of 75% in each clinical competency and is deemed competent in each of the three (3) procedures?
Yes ☐ No ☐
9. Have you reviewed California Business & Professions Code §1909 and California Code of Regulations Title 16, Division 11 §§1105.2 and 1107?
Yes ☐ No ☐
10. Do you certify that the course you provided to the applicant meets all requirements of California Business & Professions Code §1909 and California Code of Regulations Title 16, Division 11 §§1105.2 and 1107?
Yes ☐ No ☐

The Committee may approve or deny approval of any course. If the Committee denies approval of a course, the reasons for denial will be provided in writing within 90 days.

Certification

I certify under the penalty of perjury under the laws of the State of California that the statements made in the application are true and correct.

Signature of Course Director

Date

INFORMATION COLLECTION AND ACCESS

The information requested herein is mandatory and is maintained by the Dental Hygiene Committee of California, 2005 Evergreen Street, Suite 2050, Sacramento, CA 95815, Executive Officer, 916-263-1978, in accordance with Business & Professions Code, §1900 et seq. The information requested will be used to determine eligibility. Failure to provide all or any part of the requested information will result in the rejection of the application as incomplete. Each individual has the right to review his or her own personal information maintained by the agency as set forth in the Information Practices Act unless the records are exempt from disclosure. Applicants are advised that the names(s) and address(es) submitted may, under limited circumstances, be made public.



CERTIFICATION IN ADMINISTRATION OF LOCAL ANESTHESIA, NITROUS OXIDE-OXYGEN ANALGESIA, AND PERFORMANCE OF PERIODONTAL SOFT TISSUE CURETTAGE (SLN)

PLEASE TYPE OR PRINT

APPLICANT NAME			
LAST	FIRST	MIDDLE	DATE OF BIRTH
ADDRESS			
CITY		STATE	ZIP
HOME PHONE ()	MOBILE PHONE ()		EMAIL
DENTAL HYGIENE PROGRAM			
DATES OF ATTENDANCE			DATE OF GRADUATION
ADDRESS			
CITY		STATE	ZIP
PHONE ()			
DENTAL HYGIENE PROGRAM DIRECTOR EMAIL ADDRESS			

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE COURSE APPLICANT ABOVE SUCCESSFULLY COMPLETED AND DEMONSTRATED CLINICAL COMPETENCY IN THE ABOVE LISTED DUTIES PURSUANT TO CALIFORNIA CODE OF REGULATIONS TITLE 16, DIVISION 11 §1107(b)(8-9).

PRINTED NAME OF PROGRAM DIRECTOR

SIGNATURE OF PROGRAM DIRECTOR

DATE

Out-of-State Soft Tissue Curettage/Local Anesthesia/Nitrous Oxide-Oxygen Sedation (SLN) Course Approval Checklist

Please utilize this checklist to assist you in submitting the Out-of-State SLN Application

RDH Educational Program: _____ Date: _____

- ☐ Out-of-State SLN Application Form
- ☐ Out-of-State SLN Certification Form
- ☐ SLN Syllabus to Include Course Hours and Hours Scheduled for Preclinical/Clinical Instruction
- ☐ Competency Documents for all Injections, Nitrous Oxide-Oxygen Sedation, and Curettage Experiences

	Yes	No	Complete
Application Documents Received			
Comments:			
Facility	Yes	No	Complete
Approved by the Commission on Dental Accreditation			
National or Regional Accreditation			
Postsecondary education level			
Comments:			
Syllabus	Yes	No	Complete
Course Learning Outcomes			
Titles of references used for course materials			
Content Objectives			
Grading Criteria includes:			
1. Competency Evaluations			
2. Clinic Rubrics to include problem solving and critical thinking skills that reflect course learning outcomes			
Remediation policy and procedures			
Comments:			
General Curriculum Content	Yes	No	Complete
Indications and contraindications for all patients of:			
1. Periodontal soft tissue curettage			
2. Administration and reversal of local anesthetic agents			
3. Nitrous oxide-oxygen analgesia agents			
Head and neck anatomy			
Physical and psychological evaluation procedures			
Review of body systems related to course topics			
Theory and psychological aspects of pain and anxiety control			
Selection of pain control modalities			
Pharmacological considerations such as action of anesthetics and vasoconstrictors, local anesthetic reversal agents and nitrous oxide-oxygen analgesia			

	Yes	No	Complete
Recovery from and post-procedure evaluation of periodontal soft tissue curettage, local anesthesia and nitrous oxide/oxygen analgesia			
Complications and management of periodontal soft tissue curettage, local anesthesia and nitrous oxide-oxygen analgesia emergencies			
Armamentarium required and current technology available for local anesthesia, nitrous oxide-oxygen analgesia and periodontal soft tissue curettage			
Techniques of administration of maxillary and mandibular local infiltrations, field blocks and nerve blocks, nitrous oxide-oxygen analgesia and performance of periodontal soft tissue curettage			
Proper infection control procedures according to the provisions of Title 16, Division 10, Chapter 1, Article 4, Section 1005 of the California Code of Regulations			
Patient documentation that meets the standard of care, including, but not limited to, computation of maximum recommended dosages for local anesthetics and the tidal volume, percentage and amount of the gases and duration of administration of nitrous oxide-oxygen analgesia			
Medical and legal considerations including patient consent, standard of care, and patient privacy			
Student course evaluation mechanism			
Comments:			
Specific Curriculum Content: Local Anesthetic Agents	Yes	No	Complete
At least 30 hours of instruction to include:			
1. At least 15 hours of didactic and preclinical instruction			
2. At least 15 hours of clinical instruction			
Preclinical instruction:			
1. Shall include a minimum of two (2) experiences per injection, which may be on another student.			
2. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltrations, field blocks and nerve blocks to include:			
a. Anterior superior alveolar (ASA)			
b. Middle superior alveolar (MSA)			
c. Anterior middle superior alveolar (AMSA)			
d. Posterior superior alveolar (PSA)			
e. Greater palatine (GP)			
f. Nasopalatine (NP)			
g. Supraperiosteal			
h. Inferior alveolar (IA)			
i. Lingual			
j. Buccal			
k. Mental/Incisive			
Clinical instruction:			
1. Shall include			
a. At least four (4) clinical experiences per injection.			
b. To include two (2) experiences on the right side of a patient and two (2) experiences on the left side of a patient.			
c. Only one may be on another student.			
2. Curriculum must include maxillary and mandibular anesthesia techniques for local infiltration, field block and nerve block to include:			
a. Anterior superior alveolar (ASA)			
b. Middle superior alveolar (MSA)			
c. Anterior middle superior alveolar (AMSA)			
d. Posterior superior alveolar (PSA)			
e. Greater palatine (GP)			
f. Nasopalatine (NP)			
g. Supraperiosteal			
h. Inferior alveolar (IA)			
i. Lingual			
j. Buccal			
k. Mental/Incisive			
One clinical experience per injection shall be used to determine clinical competency in the course			
Clinical competency evaluation for each injection and technique must be achieved at a minimum of 75%.			
Comments:			

	Yes	No	Complete
Specific Curriculum Content: Nitrous Oxide-Oxygen Analgesia	Yes	No	Complete
At least 8 hours of instruction to include:			
1. At least 4 hours of didactic and preclinical instruction			
2. At least 4 hours of clinical instruction			
Preclinical instruction shall include at least two (2) preclinical experiences on patients, both of which may be on another student			
Clinical instruction shall include:			
1. At least three (3) clinical experiences on patients			
2. Only one may be on another student			
3. One of which will be used to determine clinical competency in the course			
4. Clinical competency evaluation for this procedure must be achieved at a minimum of 75%			
5. Each clinical experience shall include the performance of a dental hygiene procedure while administering at least twenty (20) minutes of nitrous oxide-oxygen analgesia, from the beginning of titration of nitrous oxide-oxygen to the discontinuation of nitrous oxide and beginning of final oxygenation.			
6. Clinical competency evaluation for this procedure must be achieved at a minimum of 75%			
Comments:			
Specific Curriculum Content: Soft Tissue Curettage	Yes	No	Complete
At least 6 hours of instruction to include:			
1. At least 3 hours of didactic and preclinical instruction			
2. At least 3 hours of clinical instruction			
3. Education may include use of a laser approved for soft tissue curettage			
Clinical instruction shall include:			
1. At least three (3) clinical experiences on patients			
2. Only one may be on another student			
3. One of which will be used to determine clinical competency in the course			
4. Clinical competency evaluation for this procedure must be achieved at a minimum of 75%			
Comments:			
Competency Documents	Yes	No	Complete
All competency documents provided			
Rubrics provided			
Comments:			
School Certification	Yes	No	Complete
Out-of-State SLN Certification Form submitted, signed by Dental Hygiene Program Director and affixed with seal from institution			
All documentation submitted on official letterhead from the applicant's dental hygiene educational program			
Comments:			

Approved Yes ☐ No ☐

Reviewed by: _____ Date: _____



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 10

Future Agenda Items



Friday, November 16, 2018

Dental Hygiene Committee of California

Education Subcommittee Meeting

Agenda Item 11

Adjournment