

## Exhibit 7

# Competencies for Entry into the Profession of Dental Hygiene

(As approved by the 2003 House of Delegates)

## Foreword

The American Dental Education Association (ADEA), Section on Dental Hygiene Education, Competency Development Committee drafted the competency statements presented in this document. This committee had representation from both baccalaureate and associate degree dental hygiene programs. It also included representation from dental hygiene, clinical, social and basic sciences, and the American Dental Hygienists' Association. A separate committee, the Dental Hygiene Education Competency Draft Review Committee, further reviewed and provided feedback on the document once developed. Following these reviews, the competency statements were presented for public comment at the 1998 ADEA Annual Session, the 1998 Dental Hygiene Directors' Conference, and the ADEA Section on Dental Hygiene Education homepage on the World Wide Web.

The competency statements have been presented in five domains. These domains were defined during a consensus exercise that was conducted at the Section on Dental Hygiene Education program session at the 1997 ADEA Annual Session. Individuals representing various facets of dental hygiene and dental hygiene education participated in this exercise.

## Introduction

This document describes the abilities expected of a dental hygienist entering the profession. These competency statements are meant to serve as guidelines. It is important for individual programs to further define the competencies they want their graduates to possess, describing (1) the desired combination of knowledge, psychomotor skills, communication skills, and attitudes, and (2) the standards used to measure the hygienist's independent performance. The following should help to assess the competence of dental hygiene students and to improve the dental hygiene curriculum. Given the dynamic

nature of science and the health professions, these suggestions should be reviewed and updated periodically.

As a participating member of the health care team, the dental hygienist plays an integral role in assisting patients to achieve and maintain optimal oral health. Dental hygienists provide educational, clinical, and consultative services to individuals and populations of all ages, including the medically compromised, mentally or physically challenged, and socially or culturally disadvantaged.

As defined in this document, dental hygienists must exhibit competence in the following five domains:



- (1) The dental hygienist must possess, first, the *Core Competencies (C)*, the ethics, values, skills, and knowledge integral to all aspects of the profession. These core competencies are foundational to all of the roles of the dental hygienist.
- (2) Second, inasmuch as *Health Promotion (HP)/Disease Prevention* is a key component of health care, changes within the health care environment require the dental hygienist to have a general knowledge of wellness, health determinants, and characteristics of various patient/client communities. The hygienist needs to emphasize both prevention of disease and effective health care delivery.

- (3) Third is the dental hygienist's complex role in the *Community (CM)*. Dental hygienists must appreciate their role as health professionals at the local, state, and national levels. This role requires the graduate dental hygienist to assess, plan, and implement programs and activities to benefit the general population. In this role, the dental hygienist must be prepared to influence others to facilitate access to care and services.
- (4) Fourth is *Patient/Client Care (PC)*, requiring competencies described here in ADPIE format. Because the dental hygienist's role in patient/client care is ever-changing, yet central to the maintenance of health, dental hygiene graduates must use their skills to assess, diagnose, plan, implement, and evaluate treatment.
- (5) Fifth, like other health professionals, dental hygienists must be aware of a variety of opportunities for *Professional Growth and Development (PGD)*. Some opportunities may increase clients' access to dental hygiene; others may offer ways to influence the profession and the changing health care environment. A dental hygienist must possess transferable skills, e.g., in communication, problem-solving, and critical thinking, to take advantage of these opportunities.

### Core Competencies (C)

- C.1 Apply a professional code of ethics in all endeavors.
- C.2 Adhere to state and federal laws, recommendations, and regulations in the provision of dental hygiene care.
- C.3 Provide dental hygiene care to promote patient/client health and wellness using critical thinking and problem solving in the provision of evidence-based practice.
- C.4 Use evidence-based decision making to evaluate and incorporate emerging treatment modalities.
- C.5 Assume responsibility for dental hygiene actions and care based on accepted scientific theories and research as well as the accepted standard of care.
- C.6 Continuously perform self-assessment for life-long learning and professional growth.
- C.7 Promote the profession through service activities and affiliations with professional organizations.

- C.8 Provide quality assurance mechanisms for health services.
- C.9 Communicate effectively with individuals and groups from diverse populations both verbally and in writing.
- C.10 Provide accurate, consistent, and complete documentation for assessment, diagnosis, planning, implementation, and evaluation of dental hygiene services.
- C.11 Provide care to all clients using an individualized approach that is humane, empathetic, and caring.

### Health Promotion and Disease Prevention (HP)

- HP.1 Promote the values of oral and general health and wellness to the public and organizations within and outside the profession.
- HP.2 Respect the goals, values, beliefs, and preferences of the patient/client while promoting optimal oral and general health.
- HP.3 Refer patients/clients who may have a physiologic, psychological, and/or social problem for comprehensive patient/client evaluation.
- HP.4 Identify individual and population risk factors and develop strategies that promote health related quality of life.
- HP.5 Evaluate factors that can be used to promote patient/client adherence to disease prevention and/or health maintenance strategies.
- HP.6 Evaluate and utilize methods to ensure the health and safety of the patient/client and the dental hygienist in the delivery of dental hygiene.

### Community Involvement (CM)

- CM.1 Assess the oral health needs of the community and the quality and availability of resources and services.
- CM.2 Provide screening, referral, and educational services that allow clients to access the resources of the health care system.
- CM.3 Provide community oral health services in a variety of settings.
- CM.4 Facilitate client access to oral health services by influencing individuals and/or organizations for the provision of oral health care.

CM.5 Evaluate reimbursement mechanisms and their impact on the patient's/client's access to oral health care.

CM.6 Evaluate the outcomes of community-based programs and plan for future activities.

## Patient/Client Care (PC)

### Assessment

PC.1 Systematically collect, analyze, and record data on the general, oral, and psychosocial health status of a variety of patients/clients using methods consistent with medico-legal principles.

This competency includes:

- a. Select, obtain, and interpret diagnostic information recognizing its advantages and limitations.
- b. Recognize predisposing and etiologic risk factors that require intervention to prevent disease.
- c. Obtain, review, and update a complete medical, family, social, and dental history.
- d. Recognize health conditions and medications that impact overall patient/client care.
- e. Identify patients/clients at risk for a medical emergency and manage the patient/client care in a manner that prevents an emergency.
- f. Perform a comprehensive examination using clinical, radiographic, periodontal, dental charting, and other data collection procedures to assess the patient's/client's needs.

### Diagnosis

PC.2 Use critical decision making skills to reach conclusions about the patient's/client's dental hygiene needs based on all available assessment data.

This competency includes:

- a. Determine a dental hygiene diagnosis.
- b. Identify patient/client needs and significant findings that impact the delivery of dental hygiene services.
- c. Obtain consultations as indicated.

### Planning

PC.3 Collaborate with the patient/client, and/or other health professionals, to formulate a comprehensive dental hygiene care plan that is pa-

tient/client-centered and based on current scientific evidence.

This competency includes:

- a. Prioritize the care plan based on the health status and the actual and potential problems of the individual to facilitate optimal oral health.
- b. Establish a planned sequence of care (educational, clinical, and evaluation) based on the dental hygiene diagnosis; identified oral conditions; potential problems; etiologic and risk factors; and available treatment modalities.
- c. Establish a collaborative relationship with the patient/client in the planned care to include etiology, prognosis, and treatment alternatives.
- d. Make referrals to other health care professionals.
- e. Obtain the patient's/client's informed consent based on a thorough case presentation.

### Implementation

PC.4 Provide specialized treatment that includes preventive and therapeutic services designed to achieve and maintain oral health. Assist in achieving oral health goals formulated in collaboration with the patient/client.

This competency includes:

- a. Perform dental hygiene interventions to eliminate and/or control local etiologic factors to prevent and control caries, periodontal disease, and other oral conditions.
- b. Control pain and anxiety during treatment through the use of accepted clinical and behavioral techniques.
- c. Provide life support measures to manage medical emergencies in the patient/client care environment.

### Evaluation

PC.5 Evaluate the effectiveness of the implemented clinical, preventive, and educational services and modify as needed.

This competency includes:

- a. Determine the outcomes of dental hygiene interventions using indices, instruments, examination techniques, and patient/client self-report.
- b. Evaluate the patient's/client's satisfaction with the oral health care received and the oral health status achieved.

- c. Provide subsequent treatment or referrals based on evaluation findings.
- d. Develop and maintain a health maintenance program.

## Professional Growth and Development

- PGD.1 Identify career options within health care, industry, education, and research and evaluate the feasibility of pursuing dental hygiene opportunities.
- PGD.2 Develop practice management and marketing strategies to be used in the delivery of oral health care.
- PGD.3 Access professional and social networks to pursue professional goals.

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## Glossary

**Access.** This term refers to a mechanism or means of approach into the health care environment or system.

**Acquire.** *See* Obtain.

**ADPIE.** Process of dental hygiene care model incorporating assessment, diagnosis, planning, implementation, and evaluation of services.

**Assess.** *See* Assessment.

**Assessment.** Refers to the process of evaluation or appraisal of physical, written, and/or psychological data from a patient/client or a group in a systematic and comprehensive manner to make decisions about the oral and general health needs of the patient/client.<sup>1,2</sup>

**Care plan.** An organized presentation or list of interventions to promote the health or prevent disease of the patient's/client's oral condition; plan is designed by dental hygienist and consists of services that the dental hygienist is educated and licensed to provide.

**Client.** Refers to the recipient of health care, including oral health care regardless of the state of health; can be an individual or group depending upon the circumstances in which the care is delivered, i.e., individual or community setting.<sup>2,3</sup>

**Client-centered.** Approaching services from the perspective that the client is the main focus of attention, interest, and activity; the client's values, beliefs, and needs are of utmost importance in providing care.

**Critical thinker.** A habitually inquisitive individual, well-informed, trustful of reason, open-minded, flexible, fair-minded in evaluation, honest in facing personal biases, prudent in making judgments, willing to reconsider, clear about issues, orderly in complex matters, diligent in seeking relevant information, and persistent in seeking results that are as precise as the subject and circumstances of inquiry permit.<sup>4</sup>

**Community.** Group of two or more individuals with a variety of oral health needs including physical, psychological, cognitive, economic, cultural, educational, compromised/impaired persons. The community also includes consumers and health professional groups, businesses, and government agencies.

**Diagnosis (dental hygiene).** Translation of data gathered by clinical and radiographic examination into an organized, classified definition of the conditions present; the conditions of either health or disease are ones that the dental hygienist is licensed and educated to treat.<sup>3</sup>

**Dental hygienist.** A licensed health professional specializing in the prevention and treatment of oral diseases. Dental hygienists entering the profession must be graduates of an established institution of higher learning that has been accredited by an institutional accrediting agency.

**Evaluate.** Refers to the process of studying, classifying, or appraising procedures or programs for the prevention and management of oral diseases using measurable (quantifiable) standardized criteria (outcome measures).

**Evidence-based.** A paradigm for the delivery of health care that involves: defining the patients'/clients' problems; identifying the information required to solve the problem; conducting an efficient search of the literature; selecting the best of the relevant studies; applying the rules of evidence to determine validity; extracting the clinical message and presenting it to colleagues; and applying the information to the patient/client problem.

**Interventions (dental hygiene).** Dental hygiene services rendered to clients as identified in the dental hygiene care plan. These services may be clinical, educational, or health promotion related.

**Medico-legal.** “Pertains to both medicine and law; considerations, decisions, definitions, and policies provide the framework for many aspects of current practice in the health care field.”<sup>2</sup>

**Obtain.** Making data available through inspection, questioning, review of data, etc., or capturing data by using diagnostic procedures. Health histories, radiographs, casts, and consults are obtained. It is always assumed that the procedures for obtaining data are performed accurately so that no bias is introduced, are appropriate to the circumstances, are no more invasive than necessary, and are legal.

**Patient.** *See* Client.

**Practice.** To engage in the patient/client care activities of the dental hygiene profession.

**Refer.** Through assessment, diagnosis, and/or treatment it is determined that services are needed beyond the practitioner’s competence or area of expertise. It assumes that the patient/client understands and consents to the referral and that some form of evaluation will be accomplished through cooperation with professionals to whom the patient/client has been referred.<sup>1</sup>

**Risk factors.** Attributes, aspects of behavior, or environmental exposures that increase the probability of the occurrence of disease.

**Services.** The behaviors/actions of the dental hygienist in the provision of clinical therapies, health promotion, education, and research to benefit patients/clients.

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## REFERENCES

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