

**CHABOT COLLEGE DENTAL HYGIENE PROGRAM
EMPLOYER EVALUATION**

A. Please indicate the year your registered dental hygienist graduated from the Chabot College Dental Hygiene Program: 19__ 200__

B. Please place an "X" in the column that best describes the degree to which you feel your Chabot College graduate dental hygienist was prepared to meet the following:

		Well Prepared	Prepared	Not Prepared	Do Not Know
SECTION I: ETHICS AND CRITICAL THINKING					
1.	Apply ethical reasoning to dental hygiene practice				
2.	Serve all clients in the community without discrimination				
3.	Provide humane and compassionate care to all patients/clients				
4.	Maintain honesty in relationships with patients/clients, colleagues & other professionals				
5.	Ensure the privacy of the patient during hygiene treatment & confidentiality of patient/client records				
6.	Adhere to state and federal laws governing the practice of dentistry & dental hygiene				
7.	Solve problems & make decisions based on accepted scientific principles				
8.	Analyze published reports of oral health research & apply this information to the practice of dental hygiene				
9.	Evaluate safety & efficacy of oral health products & treatment				
10.	Communicate professional knowledge verbally & in writing to patients, colleagues & other professionals				
SECTION II: HEALTH PROMOTION & DISEASE PREVENTION					
A. Self-care Instruction					
12.	Promote the values of oral & general health & wellness to the patients				
13.	Identify the oral health needs of individuals & assist them in the development of appropriate & individualized self-care regimens which respect the goals, values, beliefs & preferences of the patient/client				
14.	Evaluate factors that can be used to promote patient/client adherence to disease prevention and/or health maintenance strategies				

		Well Prepared	Prepared	Not Prepared	Do Not Know
15.	Evaluate & utilize methods to ensure the health & safety of the patient/client & dental hygienist in the delivery of dental hygiene				
SECTION III: PATIENT CARE					
A. Assessment					
16.	Obtain, review & update vital signs, medical, family, social, & dental history while recognizing cultural differences in populations				
17.	Manage the patient chart as a legal document & maintain its accuracy				
18.	Determine medical conditions that require special precautions or consideration prior to or during dental hygiene treatment				
19.	Identify the patient at risk for a medical emergency & manage the patient/client care that prevents an emergency				
20.	Perform a comprehensive examination using clinical, radiographic, periodontal, dental charting, & other data collection procedures to assess the patient's/client's needs				
B. Planning					
21.	Determine priorities & establish oral health goals with the patient/client and/or guardian as an active participant				
22.	Establish a planned sequence of educational & clinical services based on the dental hygiene diagnosis which includes etiology, prognosis & treatment alternatives				
23.	Obtain the patient's/client's informed consent based on a thorough case presentation				
24.	Make appropriate referrals to other health care professionals				
C. Implementation					
25.	Use accepted infection control procedures				
26.	Obtain radiographs of diagnostic quality				
27.	Provide an environment conducive to health by applying basic & advanced principles of dental hygiene instrumentation without causing trauma to hard or soft tissue				
28.	Control pain & anxiety during treatment through the use of accepted clinical & behavioral management strategies				
29.	Select & administer the appropriate preventive and/or antimicrobial agent with pre- & post-treatment instructions				
30.	Provide adjunct dental hygiene services that can be legally performed in the State of California				

May 23, 2007

Dear Employer:

The purpose of this survey is to provide information about how you view the preparedness of your registered dental hygienist. We would like you to candidly respond on a questionnaire for each of the Chabot College Graduate registered dental hygienists that you currently employ.* Your responses will provide data used to evaluate the Chabot College Dental Hygiene Program.

Please complete and return the "Employer Survey" form in the enclosed self-addressed envelop by **June 30, 2007**. Any personal information will be kept confidential.

Thank you for your input!

Sincerely,

JoAnn Galliano MEd., RDH
Program Director

*If you employ more than one Chabot College Graduate registered dental hygienist, please photocopy the evaluation form and fill one out for each graduate. Additional forms can also be obtained by e-mail. Requests for additional forms can be made by e-mailing via the following address: jgalliano@chabotcollege.edu.

TO: All Dental Hygiene Faculty
FROM: JoAnn Galliano MEd., RDH
DATE: March 7, 2007
RE: Employer Survey

Please review the attached materials. As part of our accreditation self-study, we will need to survey employers to determine if the dental community that employs our graduates feel that Chabot College Graduates are prepared for their career.

The attached letter will be sent with the surveys to graduates from the years of 2004, 2000 and 1997. The graduates will be asked to give them to the employers to fill out. The employer will be asked to return the completed survey directly to the us.

The survey is based on our program competencies and is similar to the exit survey that we have the new graduates fill out upon completion of the program.

Please provide any feedback, edits, comments...to me by **March 30th**.

THANK YOU so very much ☺