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Proposed General Provisions Regulation Changes

Dental Board proposed language for §1070 is as follows:

§ 1070. General Provisions Governing All Dental Assistant Educational Programs and Courses.

(a) The criteria in subdivisions (b) to (j), inclusive, shall be met by all registered dental assistant (RDA) programs, registered dental assistant in extended functions (RDAEF) programs, radiation safety courses, pit and fissure sealant courses, coronal polish courses, 8-hour infection control courses, orthodontic ultrasonic scaling courses, orthodontic assistant permit courses, and dental sedation assistant permit courses, ~~a dental assisting program or course and all orthodontic assisting and dental sedation assisting permit programs or courses~~ to secure and maintain approval by the Board as provided in this Article.

- We need to reference courses as well throughout this section.

(1) The Board or its designee may approve, provisionally approve, or deny approval of any program or course for which an application to the Board for approval is required. All ~~Registered Dental Assistant (RDA) and Registered Dental Assistant in Extended Functions (RDAEF) programs and courses dental assisting educational~~ shall be re-evaluated approximately every seven years, but may be subject to re-evaluation and inspection by the Board at any time to review and investigate compliance with this Article and the Dental Practice Act (Act). Re-evaluation shall include written documentation and may include a site visit that ensures compliance with all regulations. ~~Re-evaluation may include a site visit or written documentation that ensures compliance with all regulations.~~ Results of re-evaluation shall be reported to the Board or its designee for final consideration and continuance of program or course approval, provisional approval or denial of approval.

- Programs/courses are required to be evaluated approximately every 7 years to ensure compliance with regulations. At a minimum, a **curriculum review** should be required, otherwise, what criteria would be used for the evaluation?

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- **The current structure of the sentence makes it seem that the site visit, as well as the curriculum review, is optional for the re-evaluation.**
- **It needs to provide clear direction for programs/courses that documentation is required, and a site visit may also be conducted.**

(2) Program and course records shall be subject to inspection by the Board at any time.

(3) The Board may withdraw approval at any time that it determines that a program or course does not meet the requirements of this Article or any other requirement in the Act.

(A) The board may withdraw its approval of a course at any time, after giving the course provider written notice setting forth its reason for withdrawal and after affording a reasonable opportunity to respond within 30 calendar days. Approval may be withdrawn for failure to comply with the provisions of the Dental Practice Act or the Boards regulations.

~~(4) The Board or its designee may approve, provisionally approve, or deny approval to any such program. Provisional approval shall not be granted for a period which exceeds the length of the program.~~ When the Board provisionally approves a program, it shall state the reasons therefore. Provisional approval shall be limited to those programs which substantially comply with all existing standards for full approval. A program given provisional approval shall immediately notify each student of such status. If the Board denies approval of a program, the specific reasons therefore shall be provided to the program by the Board in writing within 90 days after such action.

- **Removing the first sentence. Already in (1). Redundant to keep.**

- **Remove 2nd sentence.**

Prior staff input: Provisional approval is granted to programs/courses that are substantially in compliance with regulations, so that they may enroll students and begin instruction. A Full Approval requires a review of student records to ensure proper record keeping. Therefore, a Full Site visit will be conducted after at least one graduating class so there are student records

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for review. The timeframe for a full site visit can vary due to many factors, i.e. staff availability, budget issues, travel restrictions, etc. Provisional approval needs to be granted until the full site visit is conducted, whether it takes place right after the first graduating class or later.

Previous Staff input:

- **A Provision should be added that non-compliant programs shall be placed on a probation status. There's no middle ground right now. After a site-visit is conducted, if a program meets all the requirements, they get their approval letter. But if they are non-compliant, they don't get their approval letter and we let them know why. From that point on, it's left up to them to respond to the deficiencies. But they don't have approval, and they don't have denial of approval either. Being placed on a probation status would**
- **Question for the Council – Should provisions be added to address how a program or course may re-apply for Board approval? What would be required for re-approval (e.g. wait-time, application incorporated by reference, applicable fees, proof of re-accreditation, etc.)?**
- **Question for the Council – Should requirements be added to GP provisions for a program/course that voluntarily withdraws of Board approval upon closure or discontinuance of the program or course?**
- **Additionally, should provisions be added to address how the program or course shall apply for re-approval in the event the program or course re-opens or is re-established? What sort of notification requirements need to be included (e.g. notification to the Board, notification to students)?**
- **Need to add provisions regarding advertisement of programs and courses while pending Board approval.**

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- Need to add provisions for guidelines as to what a program shall do to re-issue a lost certificate to a student that attended the program but it was under a different name.
- There should be a reference to processing times of Program/Courses applications. There is currently no reference to processing time in Article 2 for educational programs. Staff recommends that CCR 1070 include a reference to CCR 1069, Processing Times, and that CCR 1069 be revised in conjunction with CCR 1070. Revisions should include a reference to all stand-alone courses. Currently only coronal polishing and ultrasonic scaler are listed.
- Students that are taking an RDA program, are not yet licensed RDA's. Therefore, there's the pending question: **Do RDA programs need to hire a supervising DDS?**
- All the duties that a DA, RDA, OA, DSA, and an RDAEF are allowed to perform in a dental office, require either the general or direct supervision of a DDS. (There are a few exceptions like the one highlighted above in blue, and listed under B&P, Section 1777)
Are programs or courses where students are performing these duties, exempt of the general or direct supervision of a DDS? I don't see a provision backing that up in our current regs.

(5) All programs and courses shall be established at the postsecondary educational level ~~or deemed equivalent thereto by the Board.~~

(b) The program or course director shall possess a valid, active, and current license issued by the Board or the dental hygiene committee, shall have been licensed for a minimum of 2 years, and possess the experience in the subject matter he or she is teaching. The program or course director shall provide guidance ~~actively participate in~~ and be responsible for the administration of the program or course. Specifically, the program or course director shall be responsible for the following requirements:

Comment [D1]: Would this prohibit ROP programs from applying for approval?

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(1) Provide guidance of didactic, laboratory and clinical assignments

(2) Calibrate faculty at least annually and when any of the following occurs:

(A) Changes in equipment

(B) Changes in course faculty

(C) Changes made to course curriculum, location, or facilities

(D) Still working on list. Need feedback

(3) Maintain~~ing~~ for a period of not less than ~~five~~ 7 years copies of

(A) curricula

(B) program or course content outlines and examination records

(C) Educational objectives or outcomes,

(D) grading criteria

(E) copies of faculty credentials, licenses, and certifications, and

(F) individual student records, including those necessary to establish satisfactory completion of the program or course.

(4) Inform~~ing~~ the Board of any substantive change undertaken by the program or course within ~~ten~~ thirty(~~10~~30) days of the change by submitting to the board a completed “Substantive Change to Course Notice” (New INSERT DATE) which is hereby incorporated by reference within 30 days of the change.

(A) The Boards definition of “substantive change” includes the following types of changes and required documents to submit to the Board:

- Need feedback on what else qualifies as a “substantive change”

(i) If program or course content has changed, the program director shall submit....

(ii) If the program or course facility relocates, the program director shall submit....

(iii) If a new faculty member is hired, the program director shall submit proof of their credentials.

(iv) If the program or course name changes, please submit....

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(5) Ensuring that, all ~~staff and~~ faculty involved in clinical instruction meet the requirements set forth in this Article, and has completed a 2-hour teaching methodology course in clinical instruction.

(6) Ensure that faculty receives course specific training related to their teaching responsibilities.

(7) Ensure that all staff and faculty involved in clinical instruction meet the requirements set forth in this Article.

- Adding part of (5), (6) and (7) to the list. Brought it over from the language we worked on for Courses

(8) Issue certificates of completion to each student who has successfully completed the program or course and maintain a record of each certificate of completion for at least 7 years from the date of issuance.

(c) Course faculty ~~and instructional staff~~ shall be authorized to provide instruction by the program or course director at the ~~educational~~ facility in which instruction is provided.

(d) No faculty or instructional staff member shall instruct in any procedure that he or she does not hold a license or permit in California to perform. Each faculty or instructional staff member shall possess a valid, active, and current license issued by the Board or the Dental Hygiene Committee of California, shall have been licensed or permitted for a minimum of two years, and possess experience in the subject matter he or she is teaching. An instructor who has held a license as a registered dental assistant or registered dental assistant in extended functions for at least two years, who then becomes a permit holder as an Orthodontic Assistant on or after January 1, 2010, shall not be required to have held such a permit for two years in order to instruct in the subject area.

- Provisions should be added that state an RDH licensed prior to January 1, 2016 may teach RDA duties, otherwise they must have an RDA license.

Current regulations require that faculty possess a valid, active and current license issued by the Board or the Dental Hygiene Committee.

B&P, Section 1907(b) states that an RDH licensed as of Dec 31, 2005 may perform the duties of an RDA. But an RDH licensed on or

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after January 1, 2006 must obtain an RDA license in order to perform RDA duties. It is important to make the date distinction regarding the RDH license.

(1)All faculty responsible for clinical evaluation shall have completed at least a 2-hour teaching methodology course in clinical evaluation.

- Should we add this sentence to the GP as well?

(e) Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties for which the program or course is approved to instruct.

(1) The location and number of general use equipment and armamentaria shall ensure that each student has the access necessary to develop minimum competency in all of the duties for which the program or course is approved to instruct. The program or course provider may either provide the specified equipment and supplies or require that the student provide them. Nothing in this Section shall preclude a dental office that contains the equipment required by this Section from serving as a location for laboratory instruction.

- The above paragraph states that a program/course “may” provide the necessary equipment/supplies, or require the student to provide them. However, Section 1070.2 (RDA program) requires programs to own their equipment.
- Most programs provide all equipment/supplies, however the Board has encountered situations where the program director felt CCR 1070 superseded CCR 1070.2. **The recommendation is to require programs/ courses to own their equipment, except the equipment for which there is an exception in 1070.2, to remove the confusion.**

(A) Each operatory shall contain functional equipment, including a power-operated chair for patient or simulation-based instruction in a supine position, operator and assistant stools, air-water syringe, adjustable light, oral evacuation equipment, work surface, handpiece connection, and adjacent hand-washing sink.

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(B) Each operatory shall be of sufficient size to simultaneously accommodate one student, one instructor, and one patient or student partner.

(2) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every ~~five~~ 6 students who are simultaneously engaged in clinical instruction.

- Above ¶ moved here, for better flow.

(A) Prior to clinical assignments, students must demonstrate minimum competence in laboratory or preclinical performance of the procedures they will be expected to perform in their clinical experiences.

(f) The program or course shall establish written clinical and laboratory protocols that comply with the Board's Minimum Standards for Infection Control (Cal. Code Regs., Title 16, Section 1005) and other federal, state, and local requirements governing infection control. The program or course shall provide these protocols to all students, faculty, and instructional staff to ensure compliance. Adequate space shall be provided for handling, processing, and sterilizing all armamentarium.

- Do we need to include Pre-clinical for written protocols here?

(g) A written policy on managing emergency situations shall be made available to all students, faculty, and instructional staff. All faculty and staff involved in the direct oversight of patient care activities shall be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program or course director shall ensure and document compliance by faculty and instructional staff. A program or course shall sequence curriculum in such a manner so as to ensure that students complete instruction in basic life support prior to performing procedures on patients used for clinical instruction and evaluation.

- Include here that certification for basic life support shall be through a provider that is approved by The American Red Cross, The American Heart Association or any other course approved by the board as equivalent?

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(h) All patient's or their guardian must complete a health history form with consent acknowledging the procedure is being performed by a student of the course. Such documentation shall be maintained in the student records

- New language. Discussed this at previous workshop. All agreed to place in the GP.

(i) A detailed program or course outline shall clearly state, in writing, the curriculum subject matter, hours of didactic, laboratory, and clinical instruction, general program or course objectives, instructional objectives, theoretical content of each subject, and, where applicable, the use of practical application. Objective evaluation criteria shall be used for measuring student progress toward attainment of specific program or course objectives. Students shall be provided with all of the following: Detailed program outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, preclinical, clinical, and externship instruction:

- Staff constantly gets asked: What does theoretical content mean? Need to define it or clarify the meaning.
- SMEs have told us that “theoretical content of each subject” means: *the materials that will be utilized by the instructor to instruct the course content from the course outline and lesson plans, such as “power point presentations” or “typed lectures”.*
- The Boards applications for RDA programs and all other courses ask to submit the following bulleted items for the curriculum. Our regulations need to reflect what we ask for.

RDA Application:

Attach as Exhibit 37, the following for each program course/module (each course/module should be tabbed with the appropriate course code):

✓ **Detailed program outline including subsections that clearly states curriculum subject matter and specifies instruction hours for each topic in the individual areas of didactic, lab, preclinical, clinical, and externship instruction**

✓ **General program objectives**

X **Specific objectives in the cognitive and psychomotor domain**

X **Criteria for all psychomotor skills**

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- X Minimum number of satisfactory performances for all psychomotor skills***
- X Lesson plans (including information sheets and procedure sheets when applicable)***
- X Process evaluation grade sheets***
- X Product evaluation grade sheets***
- X Practical and clinical examinations***
- X Written examination examples and keys – To be provided at Site Visit***

(1) Specific performance objectives and the evaluation criteria used for measuring levels of competence for each component of a given procedure including those used for examinations.

(2) Standards of performance that state the minimum number of satisfactory performances that are required for each performance-evaluated procedure.

(3) Standards of performance for laboratory, preclinical, and clinical functions, those steps that would cause the student to fail the task being evaluated, and a description of each of the grades that may be assigned during evaluation procedures.

(j) A Registered Dental Assisting educational program that includes instructional content for either the orthodontic assistant permit or dental sedation assistant permit, or both, shall provide a certificate or certificates of completion to the graduate. The certificate holder shall be deemed an eligible candidate for the permit examination process as having met all educational requirements for the permit examination.

- **New language. Discussed this at previous workshop. All agreed to place in the GP.**

(k) If an extramural dental facility is utilized, students shall, as part of an extramural organized program of instruction, be provided with planned, supervised clinical instruction. Laboratory and preclinical instruction shall be performed under the direct supervision of program or course faculty or instructional staff and shall not be provided in an extramural dental facility.

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(1) The program or course director, or a designated faculty member, shall be responsible for selecting extramural dental facility and evaluating student competence before and after the clinical assignment.

(2) Prior to student assignment in an extramural dental facility, the program or course all licensed dental healthcare workers who may provide instruction, evaluation, and oversight of the student in the clinical setting. Orientation shall include, at a minimum, the objectives of the program or course, the student's preparation for the clinical assignment, and a review of procedures and criteria to be used by the dentist or the licensed personnel in the extramural dental facility in evaluating the student during the assignment, which shall be the same as the evaluation criteria used within the program or course.

(3) There shall be a written contract of affiliation between the program and each extramural dental facility that includes written affirmation of compliance with the regulations of this Article.

- Add that the contract of affiliation shall reference compliance with "California Code of Regulations, Title 16, Division 10, Chapter 3, Article 2.
- The majority of affiliation agreements reviewed by the Board do not clearly state to what regulations they are affirming compliance. Many just include the word "regulations", others include "pertinent regulations", and most just include "Article 2. Adding this reference will clearly define to what each extramural dental facility must affirm.

(l) A certificate, diploma, or other evidence of completion shall be issued to each student who successfully completes the program or course and shall include the following: the student's name, the name of the program or course, the date of completion, and the signature of the program or course director or his or her designee.

- Above ¶ moved here, for better flow.
- Should we somewhat mimic the certificate language that will be added to the courses?

(l) Certificate of Completion. Program or course providers shall provide 2 original copies of a Certificate of completion on a form prescribed by the Board and incorporated by reference, to students within 30 days following their completion of the course. Certificates of completion shall contain an embossed seal impression that is not photographically reproducible.

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Providers shall retain records of course completion for 7 years from the date of completion and provide records of completion to the Board within 30 days, upon written request.

- The program or course **approval number** issued by the Board should be included on the certificate of completion, as well as the **location of the program or course** and the **birth month and day** of the student.
- The Board currently requires program/course providers to include their approval numbers on all certificates issued and on all correspondence to the Board. But there are no Regs to back it up.
- There are multiple students that bear the same name and attend the same program/course. The month and day of birth would help further identify the graduate, and yet would prevent programs/courses and the Board from violating any laws of age discrimination by requiring the full birth date. (Including the full birth date would be a cause for age discrimination for the certificate holder)
- Location of program/course is needed as well, for there are providers who are approved to offer programs/courses at multiple locations.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Sections 1750, 1750.2, 1750.4, 1752.1, 1752.4, 1752.6 and 1753, Business and Professions Code.

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Current Dental Board language for §1070 is as follows:

§ 1070. General Provisions Governing All Dental Assistant Educational Programs and Courses.

- (a) (1) The criteria in subdivisions (b) to (j), inclusive, shall be met by a dental assisting program or course and all orthodontic assisting and dental sedation assisting permit programs or courses to secure and maintain approval by the Board as provided in this Article.
- (2) The Board may approve, provisionally approve, or deny approval of any program or course for which an application to the Board for approval is required. All Registered Dental Assistant (RDA) and Registered Dental Assistant in Extended Functions (RDAEF) programs and dental assisting educational courses shall be re-evaluated approximately every seven years, but may be subject to re-evaluation and inspection by the Board at any time to review and investigate compliance with this Article and the Dental Practice Act (Act). Re-evaluation may include a site visit or written documentation that ensures compliance with all regulations. Results of re-evaluation shall be reported to the Board or its designee for final consideration and continuance of program or course approval, provisional approval or denial of approval.
- (3) Program and course records shall be subject to inspection by the Board at any time.
- (4) The Board may withdraw approval at any time that it determines that a program or course does not meet the requirements of this Article or any other requirement in the Act.
- (5) All programs and courses shall be established at the postsecondary educational level or deemed equivalent thereto by the Board.
- (6) The Board or its designee may approve, provisionally approve, or deny approval to any such program. Provisional approval shall not be granted for

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a period which exceeds the length of the program. When the Board provisionally approves a program, it shall state the reasons therefore. Provisional approval shall be limited to those programs which substantially comply with all existing standards for full approval. A program given provisional approval shall immediately notify each student of such status. If the Board denies approval of a program, the specific reasons therefore shall be provided to the program by the Board in writing within 90 days after such action.

(b) The program or course director shall possess a valid, active, and current license issued by the Board or the dental hygiene committee. The program or course director shall actively participate in and be responsible for the administration of the program or course. Specifically, the program or course director shall be responsible for the following requirements:

(1) Maintaining for a period of not less than five years copies of curricula, program outlines, objectives, and grading criteria, and copies of faculty credentials, licenses, and certifications, and individual student records, including those necessary to establish satisfactory completion of the program or course.

(2) Informing the Board of any major change to the program or course content, physical facilities, or faculty, within 10 days of the change.

(3) Ensuring that all staff and faculty involved in clinical instruction meet the requirements set forth in this Article.

(c) Course faculty and instructional staff shall be authorized to provide instruction by the program or course director at the educational facility in which instruction is provided.

(d) No faculty or instructional staff member shall instruct in any procedure that he or she does not hold a license or permit in California to perform. Each faculty or instructional staff member shall possess a valid, active, and current license issued by the Board or the Dental Hygiene Committee of California, shall have been licensed or permitted for a minimum of two years, and possess experience in the subject matter he or she is teaching.

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An instructor who has held a license as a registered dental assistant or registered dental assistant in extended functions for at least two years, who then becomes a permit holder as an Orthodontic Assistant on or after January 1, 2010, shall not be required to have held such a permit for two years in order to instruct in the subject area.

(e) A certificate, diploma, or other evidence of completion shall be issued to each student who successfully completes the program or course and shall include the following: the student's name, the name of the program or course, the date of completion, and the signature of the program or course director or his or her designee.

(f) Facilities and class scheduling shall provide each student with sufficient opportunity, with instructor supervision, to develop minimum competency in all duties for which the program or course is approved to instruct.

(1) The location and number of general use equipment and armamentaria shall ensure that each student has the access necessary to develop minimum competency in all of the duties for which the program or course is approved to instruct. The program or course provider may either provide the specified equipment and supplies or require that the student provide them. Nothing in this Section shall preclude a dental office that contains the equipment required by this Section from serving as a location for laboratory instruction.

(2) Clinical instruction shall be of sufficient duration to allow the procedures to be performed to clinical proficiency. Operatories shall be sufficient in number to allow a ratio of at least one operatory for every five students who are simultaneously engaged in clinical instruction.

(A) Each operatory shall contain functional equipment, including a power-operated chair for patient or simulation-based instruction in a supine position, operator and assistant stools, air-water syringe, adjustable light, oral evacuation equipment, work surface, handpiece connection, and adjacent hand-washing sink.

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(B) Each operatory shall be of sufficient size to simultaneously accommodate one student, one instructor, and one patient or student partner.

(C) Prior to clinical assignments, students must demonstrate minimum competence in laboratory or preclinical performance of the procedures they will be expected to perform in their clinical experiences.

(g) The program or course shall establish written clinical and laboratory protocols that comply with the Board's Minimum Standards for Infection Control (Cal. Code Regs., Title 16, Section 1005) and other federal, state, and local requirements governing infection control. The program or course shall provide these protocols to all students, faculty, and instructional staff to ensure compliance. Adequate space shall be provided for handling, processing, and sterilizing all armamentarium.

(h) A written policy on managing emergency situations shall be made available to all students, faculty, and instructional staff. All faculty and staff involved in the direct oversight of patient care activities shall be certified in basic life support procedures, including cardiopulmonary resuscitation. Recertification intervals may not exceed two years. The program or course director shall ensure and document compliance by faculty and instructional staff. A program or course shall sequence curriculum in such a manner so as to ensure that students complete instruction in basic life support prior to performing procedures on patients used for clinical instruction and evaluation.

(i) A detailed program or course outline shall clearly state, in writing, the curriculum subject matter, hours of didactic, laboratory, and clinical instruction, general program or course objectives, instructional objectives, theoretical content of each subject, and, where applicable, the use of practical application. Objective evaluation criteria shall be used for measuring student progress toward attainment of specific program or course objectives. Students shall be provided with all of the following:

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(1) Specific performance objectives and the evaluation criteria used for measuring levels of competence for each component of a given procedure including those used for examinations.

(2) Standards of performance that state the minimum number of satisfactory performances that are required for each performance-evaluated procedure.

(3) Standards of performance for laboratory, preclinical, and clinical functions, those steps that would cause the student to fail the task being evaluated, and a description of each of the grades that may be assigned during evaluation procedures.

(j)(1) If an extramural dental facility is utilized, students shall, as part of an extramural organized program of instruction, be provided with planned, supervised clinical instruction. Laboratory and preclinical instruction shall be performed under the direct supervision of program or course faculty or instructional staff and shall not be provided in an extramural dental facility.

(2) The program or course director, or a designated faculty member, shall be responsible for selecting extramural dental facility and evaluating student competence before and after the clinical assignment.

(3) Prior to student assignment in an extramural dental facility, the program or course director, or a designated faculty or instructional staff member, shall orient dentists and all licensed dental healthcare workers who may provide instruction, evaluation, and oversight of the student in the clinical setting. Orientation shall include, at a minimum, the objectives of the program or course, the student's preparation for the clinical assignment, and a review of procedures and criteria to be used by the dentist or the licensed personnel in the extramural dental facility in evaluating the student during the assignment, which shall be the same as the evaluation criteria used within the program or course.

(4) There shall be a written contract of affiliation between the program and each extramural dental facility that includes written affirmation of compliance with the regulations of this Article.

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Note: Authority cited: Section 1614, Business and Professions Code.
Reference: Sections 1750, 1750.2, 1750.4, 1752.1, 1752.4, 1752.6 and
1753, Business and Professions Code.