



INDIANA UNIVERSITY

SCHOOL OF DENTISTRY

Annual Assessment Report to the IUPUI Program Review and Assessment Committee

Doctor of Dental Surgery Program

Academic Year 2021-22

Contents

- Introduction.....2
- Overview of Assessment Activities.....2
 - Institutional Outcomes Assessment.....3
 - Curriculum Management Plan.....3
 - Assessment of Student Progress4
 - Assessment Data4
- Program Learning Outcomes.....4
- Assessment Measures6
 - Direct Measures of Student Learning.....6
 - Rationale for Competency Assessments6
 - Figure 1. Flow Chart for Institutional Reporting of Competency Outcomes.....6
 - Table 1. IUSD Institutional (Predoctoral Program) Competency Statements Mapped to Competency Assessments (direct measures)7
 - Indirect Measures of Student Learning..... 12
- Academic Year 2021-22 Assessment Findings and Actions..... 13
 - Assessment of Student Competency..... 13
 - Table 3. First-time Pass Rates for DDS Competency Assessments, Class of 2022..... 13
 - Institutional Outcomes Assessment..... 17
 - Domain: Teaching and Learning 18
 - Domain: Civic Engagement and Service 19
 - Curriculum Assessment 20
- Summary..... 22
- Appendix A: Outcomes Assessment Process..... 23
- Appendix B: Curriculum Management Plan Flowchart 24
- Appendix C: Curriculum Management Plan Course Director Review Forms 25

Introduction

Founded as the Indiana Dental College in 1879, the Indiana University School of Dentistry (IUSD) is the only dental school in the state. The concentration of its academic programs is located on the IUPUI campus. The Mission of the Indiana University School of Dentistry is to advance the oral and systemic health of the people of the state of Indiana and globally through excellence in teaching and learning, research and creative activities, patient care, civic engagement and service, with a Vision to be a global leader, advancing oral health as an essential component of overall health, through excellence and innovation in education, patient care, research, and community engagement and service, in Indiana and around the world.

At the IUPUI campus, in addition to the Doctor of Dental Surgery (DDS) degree, academic programs include undergraduate allied dental degrees in dental assisting and dental hygiene. Advanced dental education programs include seven discipline focused master's degree majors in dentistry and a Certificate in Oral and Maxillofacial Surgery. Graduates of international dentist programs who are seeking a license to practice in the U.S. are eligible to apply to the International Dentist Program (IDP), which awards a DDS degree. Lastly, two dual degree programs are offered, a DDS and MPH (MPH awarded from the IU Fairbanks School of Public Health) and a DDS and PhD in Dental Sciences.

On July 1, 2018, the IU Fort Wayne undergraduate dental education programs (dental hygiene, dental assisting, and dental laboratory technology) officially became a part of the IU School of Dentistry. At this time, the curricula of these programs are not integrated and are evaluated independently.

This PRAC Annual Assessment Report offers a program review for the IU School of Dentistry DDS program only. The IUSD undergraduate and advanced dental education programs are reported independently.

The DDS program is a four-year academic curriculum requiring 109 courses and 165.5 credit hours. Graduates of the DDS degree program will be ready for entry-level practice in general dentistry and competent to provide safe and effective patient care through demonstrated competency of the [program learning outcomes](#).

In September of 2021, the dental education programs of the IU School of Dentistry were evaluated by the Commission on Dental Accreditation (CODA), whereby all programs are required to demonstrate programmatic achievement of CODA Standards. The DDS program received no recommendations for program improvement and five program strengths, which included: (1) data analysis, (2) student learning outcomes evaluation, (3) curriculum assessment and management plan, (4) integration of biomedical sciences and clinical care, (5) support of faculty development within the school and across campus. All IUSD programs are on a seven-year accreditation cycle except for the Oral and Maxillofacial Surgery program, which is on a five-year cycle.

Overview of Assessment Activities

The United States Department of Education recognizes CODA as the sole accrediting body, responsible for programmatic assessment of quality and performance of dental, allied dental and advanced dental educational programs. Programmatic standards set by CODA, the Accreditation Standards for Dental Education, set minimum acceptable requirements but allow institutions flexibility to determine how to meet them through a competency-based education model aligned with dental education, patient care, research and service missions. The IUSD Institutional Competencies for the Dental Graduate, which are reviewed and approved by the IUSD Curriculum Committee and Faculty Council, are modeled after the CODA standards.

Within Indiana University School of Dentistry, the IUSD Institutional Outcomes Assessment (IOA) committee, DDS Curriculum and Assessment Committee (CAC), and DDS Student Progress Committee are key IUSD committees charged with the ongoing evaluation of the DDS program, curriculum, and individual student progress, respectively. The IUSD Office of Education and Academic Affairs provides administrative guidance for these committees and facilitates the routing of information to the appropriate faculty member, standing committees of the Faculty Council or administrative office in order to identify areas of strengths and opportunities for improvement.

Institutional Outcomes Assessment

Ongoing assessment of IUSD's progress toward its stated mission, vision and goals is overseen by the Executive Committee of the Faculty Council and the Institutional Outcomes Assessment (IOA) committee, a committee appointed by the Dean. Strategic goals encapsulate identified priority areas that center the institutional work and resources to fulfill its mission, align with the IUPUI campus, and contribute to Indiana and globally. A schedule exists to review these three items every five years at a minimum, for continued authenticity. However, any faculty member or student can make suggestions for revisions at any time. The most recent review and approval of the IUSD Goals by Faculty Council occurred in 2017, and the IOA Committee is undergoing a process to review, renew and revise our goals, objectives, metrics, and targets. IUSD Institutional Goals address 1) Teaching and learning, 2) Research and creative activities, 3) Patient care and 4) Civic engagement and service. The Institutional Outcomes Assessment Plan developed by academic and clinical deans and relevant faculty committees, identifies mission directed objectives and measures for assessment at both the school and DDS program levels. The IOA committee is chaired by the dean, managed by the assistant dean of curriculum development and assessment and guided by lead members of various constituencies. The committee members work in concert with the Faculty Council to define programmatic objectives reflective of strategic planning, identify meaningful measures, and assess the data to modify and improve the overall program. Eighteen objectives were assessed for Academic Year 2020-21 across the four broad domains. Our outcomes assessment process (Appendix A) informs the ongoing cycle of evaluating the objectives, performance measures and outcomes data to identify action plans for program improvement. Overall responsibility for the operational implementation and oversight of progress toward the mission and goals of the school rests with the Curriculum and Assessment and Quality Improvement committees.

Curriculum Management Plan

For the continuing oversight and assessment of the DDS curriculum, the DDS Curriculum and Assessment Committee (CAC) implements a multi-faceted review process. The Curriculum Management Plan (CMP) was approved by the Faculty Council in 1999 and serves as the foundation for IUSD's ongoing curricular review process (CMP Process Flowchart, Appendix B; Course Review by Course Director Form, Appendix C; CAC Course Review Form, Appendix D). The Office of Education and Academic Affairs (OEAA) houses the Associate Dean for Education and Academic Affairs who has oversight of the process and ensures that the findings and recommendations of the CAC are routed properly for study, action and follow-up. The Assistant Dean of Curriculum Development and Assessment in the OEAA provides day-to-day oversight of the process and supports the CAC by compiling and synthesizing review data, routing recommendations to the appropriate faculty, and assessing outcomes of curricular change.

The IUSD process of curricular review and assessment is ongoing, with a new portion of the DDS program selected for review each academic year. The process involves input from faculty, students, and administrators, which includes the following data: course directors' course review reports, student evaluations, student focus group reports, and course materials such as syllabi and lecture and/or topics outlines. If they wish, instructors

may provide exams, cases, or other materials. Additional data reviewed as part of the school's CMP are national board pass rates, clinical licensure pass rates, senior student exit surveys, and outcomes of competency assessments.

The OEAA and/or the CAC identify areas for curricular review, and the OEAA collects, compiles, and summarizes review data. Members of the CAC are responsible for reviewing courses and/or program years as part of their service to the committee. From this review, suggestions for improvement or revision are generated and appropriate action plans are outlined. Key to an effective CMP is the linking of action steps with the appropriate person (course director, department or division director, administrative office, or dean) for oversight. Periodically, the action plans are reviewed by the CAC and the OEAA, and progress toward the intended outcomes are documented.

Assessment of Student Progress

The DDS Progress Committee meets each semester, or more frequently as needed, to address the needs of students in the program. Individual student cases are presented for discussion. In addition to elected representatives, those individuals included in the discussion (as needed) are the following: course directors, student advocates, clinic directors of students under discussion, the Deans of Education and Academic Affairs, Student and Clinical Affairs and other faculty who would have knowledge about a particular student's situation. Progress Committee members are charged with making decisions concerning student promotions and reporting these outcomes to the Faculty Council. The findings of the DDS Progress Committee are evaluated by the IOA Committee through measures that include D1-D2 promotion and graduation rates.

Assessment Data

Evidence of student learning and development is captured and evaluated at both program and student levels. Direct measures of student learning outcomes are continuously tracked and compiled annually for use by faculty standing committees in planning and decision-making. Other student measures, including focus group data and senior exit surveys, inform program development, benchmarking, and curricular and advising assessment activities. The following data are reviewed annually, or more often, as part of our ongoing assessment activities:

- Analysis of student performance in courses, clinics, discipline competency assessments, and on national written and regional clinical boards
- D1 to D2 retention rate
- On-time graduation rate
- Outcomes of patient care
- Patient opinion surveys
- IUSD Standards of Care audit
- Course syllabi (reviewed against IUSD DDS approved syllabus template and University mandated policies)
- Course review reports (completed by course directors)
- Course evaluation surveys
- Student focus groups reports
- Senior exit interview surveys (IUSD and American Dental Education Association)

Program Learning Outcomes

To demonstrate successful completion of the curriculum, IUSD has established twenty (20) Institutional

Competency Statements for the Dental Graduate, which each student must achieve to be deemed competent for the beginning practice of general dentistry and to be eligible for graduation. Competency consists of complex behaviors or abilities that include knowledge, experience, critical thinking and problem-solving skills, professionalism, ethical values, and technical and procedural skills. The IUSD Institutional Competency Statements have been developed by the discipline, or disciplines working together, to measure student development across the program.

Most of the IUSD Institutional Competency Statements map to all four of the IUPUI Principles of Graduate and Professional Learning (PGPL):

- PGPL 1: Demonstrating mastery of the knowledge and skills expected for the degree and for professionalism and success in the field
- PGPL 2: Thinking critically, applying good judgment in professional and personal situations
- PGPL 3: Communicating effectively to others in the field and to the general public
- PGPL 4: Behaving in an ethical way both professionally and personally

The IUSD Institutional Competency Statements for the Dental Graduate and corresponding PGPLs are listed below:

The IUSD graduate must be competent in:

- patient assessment, diagnosis, and referral (PGPL 1,2,3,4)
- treatment planning (PGPL 1,2,3,4)
- communicating and collaborating with individuals and groups to prevent oral disease and promote oral and general health in the community (PGPL 1,2,3,4)
- control of pain and anxiety, clinical pharmacology, and management of related problems, including prescribing practices and substance use disorder (PGPL 1,2,3,4)
- prevention and management of dental and medical emergencies (PGPL 1,2,3,4)
- detection, diagnosis, risk assessment, prevention, and management of dental caries (PGPL 1,2,3,4)
- diagnosis and restoration of defective teeth to form, function and esthetics (PGPL 1,2,3,4)
- replacement of teeth including fixed, removable and dental implant prosthodontic therapies (PGPL 1,2,3,4)
- diagnosis and management of periodontal disorders (PGPL 1,2,3,4)
- prevention, diagnosis and management of pulpal and periradicular diseases (PGPL 1,2,3,4)
- diagnosis and management of oral mucosal and osseous disorders (PGPL 1,2,3,4)
- collecting and assessing diagnostic information to plan for and perform uncomplicated oral surgical procedures (PGPL 1,2,3,4)
- recognizing and diagnosing malocclusion and space management needs (PGPL 1,2,3,4)
- discerning and managing ethical issues and problems in dental practice (PGPL 1,2,3,4)
- understanding and application of the appropriate codes, rules, laws and regulations that govern dental practice (PGPL 1,2,3,4)
- behavioral patient management and interpersonal skills (PGPL 1,2,3,4)
- understanding the fundamental elements of managing a dental practice (PGPL 1,2,3,4)
- performing and supervising infection control procedures to prevent transmission of infectious diseases to patients, the dentist, the staff and dental laboratory technicians (PGPL 1,2,3,4)
- providing evidence-based patient care in which they access, critically evaluate, and communicate scientific and lay literature, incorporating efficacious procedures with consideration of patient needs and preferences (PGPL 1,2,3,4)
- recognizing the role of lifelong learning and self-assessment to maintain competency (PGPL 1,2,4)

Assessment Measures

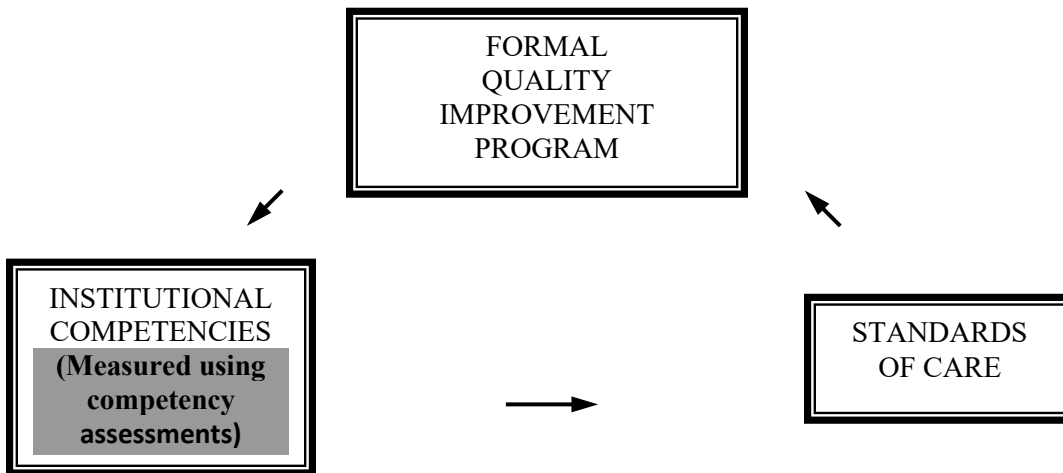
Direct Measures of Student Learning

The assessments used to evaluate student competence are outlined in the IUSD Competency Assessment Manual, which serves to guide faculty and students in the preparation for, and evaluation of, student competence. Each assessment is used as a direct measure of at least one of the twenty IUSD Institutional Competency Statements for the Dental Graduate. Students are tracked individually in their progress toward each of these competency statements (program learning outcomes). Student preparation for and evaluation of competence occurs as an integrated part of all aspects of the DDS program with multiple measures of student mastery of knowledge, skills, behaviors, and attitudes.

Rationale for Competency Assessments

The Competency Assessments are the direct measure used to assess the desired outcomes for students based on the parameters of the IUSD Institutional Competency Statements for the Dental Graduate. The Institutional Competency Statements are part of a triad of specifications that, along with the IUSD Standards of Care and a sound Quality Improvement Program, create a framework that fosters the development of competent beginning practitioners of dentistry. The Standards describe the proper care for the patient, the Institutional Competency Statements establish those skills expected of our graduates, and the Quality Improvement Program provides the mechanism that assures that the Standards are met.

Figure 1. Flow Chart for Institutional Reporting of Competency Outcomes



All IUSD students must successfully complete the competency assessments as a collective measure of overall competence. The discipline-specific faculty review the outcomes for their competency assessments and determine if any changes in the assessments are necessary, or, whether any didactic or clinical courses require evaluation and/or change. Any recommendations that involve course changes regarding time or curriculum placement are submitted to the DDS Curriculum and Assessment Committee. This plan follows the generation of outcomes through to their use in analyzing the curriculum to prepare graduates for beginning independent practice. The competency assessments are mapped to the IUSD institutional Competency Statements in the table below.

Table 1. IUSD Institutional (Predoctoral Program) Competency Statements Mapped to Competency Assessments (direct measures)

IUSD Institutional Competency Statements <i>Graduates must be competent in:</i>	Competency Assessments
1. patient assessment, diagnosis, and referral	<ul style="list-style-type: none"> • Caries Diagnosis Risk Assessment and Management • Dental Emergency Clinical • Endodontic Clinical • Endodontic Emergency • Operative Dentistry • Oral and Maxillofacial Surgery • Oral Diagnosis and Treatment Planning • Oral Mucosal and Osseous Disorders • Orthodontic Malocclusion • Outcomes of Treatment • Patients with Special Needs • Pediatric Behavior Guidance • Pediatric Comprehensive Patient Management • Periodontics D3-Diagnosis and Management of a Gingivitis or Successfully Stable Periodontitis Case • Periodontics D4-Comprehensive Treatment Planning and Management of a Stage-Grade Periodontitis Case • Radiology • Readiness to Practice • Screening and Risk Assessment for Head and Neck Cancer

IUSD Institutional Competency Statements <i>Graduates must be competent in:</i>	Competency Assessments
<p>2. treatment planning</p>	<ul style="list-style-type: none"> • Caries Diagnosis Risk Assessment and Management • Endodontic Clinical • Endodontic Emergency • Operative Dentistry • Oral and Maxillofacial Surgery • Oral Diagnosis and Treatment Planning • Oral Mucosal and Osseous Disorders • Orthodontic Malocclusion • Outcomes of Treatment • Pediatric Comprehensive Patient Management • Periodontics D3-Diagnosis and Management of a Gingivitis or Successfully Stable Periodontitis Case • Periodontics D4-Comprehensive Treatment Planning and Management of a Stage-Grade Periodontitis Case • Prosthodontic Restoration of Teeth-Crown PAC • Prosthodontic Restoration of Teeth-Crown VPAC • Prosthodontic Replacement of Teeth-Complete Denture PAC • Prosthodontic Replacement of Teeth Complete Denture VPAC • Prosthodontic Replacement of Teeth-Fixed Bridge SPAC • Prosthodontic Replacement of Teeth-Implant PAC (2021) • Prosthodontic Replacement of Teeth-Implant SPAC (2022) • Prosthodontic Replacement of Teeth-Implant VPAC • Prosthodontic Replacement of Teeth-Removable Partial Denture PAC • Prosthodontic Replacement of Teeth-Removable Partial Denture VPAC • Readiness to Practice • Screening and Risk Assessment for Head and Neck Cancer
<p>3. communicating and collaborating with individuals and groups to prevent oral disease and promote oral and general health in the community</p>	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part I • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part II • Caries Diagnosis Risk Assessment and Management • Patients with Special Needs • Pediatric Comprehensive Patient Management • Readiness to Practice • Standardized Patient Simulation

IUSD Institutional Competency Statements <i>Graduates must be competent in:</i>	Competency Assessments
4. control of pain and anxiety, clinical pharmacology, and management of related problems, including prescribing practices and substance use disorders	<ul style="list-style-type: none"> • Dental Emergency Clinical • Endodontic Clinical • Endodontic Emergency • Operative Dentistry • Oral and Maxillofacial Surgery • Pediatric Comprehensive Patient Management • Prosthodontic Restoration of Teeth-Crown PAC • Readiness to Practice • Screening and Risk Assessment for Head and Neck Cancer
5. prevention and management of dental and medical emergencies	<ul style="list-style-type: none"> • Dental Emergency Clinical • Endodontic Clinical • Endodontic Emergency • Oral Diagnosis and Treatment Planning • Pediatric Comprehensive Patient Management • Readiness to Practice • Screening and Risk Assessment for Head and Neck Cancer
6. detection, diagnosis, risk assessment, prevention, and management of dental caries	<ul style="list-style-type: none"> • Caries Diagnosis Risk Assessment and Management • Operative Dentistry • Oral Diagnosis and Treatment Planning • Pediatric Comprehensive Patient Management • Readiness to Practice
7. diagnosis and restoration of defective teeth to form, function and esthetics	<ul style="list-style-type: none"> • Operative Dentistry • Pediatric Case Selection & Space Maintainer • Pediatric Comprehensive Patient Management • Pediatric Operative Class II Restoration • Pediatric Operative Stainless Steel Crown • Pediatric Pulpotomy • Prosthodontic Restoration of Teeth-Crown PAC • Prosthodontic Restoration of Teeth-Crown VPAC • Prosthodontic Replacement of Teeth-Implant SPAC (2022) • Prosthodontic Replacement of Teeth-Implant VPAC
8. replacement of teeth including fixed, removable and dental implant prosthodontic therapies	<ul style="list-style-type: none"> • Prosthodontic Replacement of Teeth-Complete Denture PAC • Prosthodontic Replacement of Teeth Complete Denture VPAC • Prosthodontic Replacement of Teeth-Fixed Bridge SPAC • Prosthodontic Replacement of Teeth-Implant PAC (2021) • Prosthodontic Replacement of Teeth-Implant SPAC (2022) • Prosthodontic Replacement of Teeth-Implant VPAC • Prosthodontic Replacement of Teeth-Removable Partial Denture PAC • Prosthodontic Replacement of Teeth-Removable Partial Denture VPAC

IUSD Institutional Competency Statements <i>Graduates must be competent in:</i>	Competency Assessments
9. diagnosis and management of periodontal disorders	<ul style="list-style-type: none"> • Oral Diagnosis and Treatment Planning • Pediatric Comprehensive Patient Management • Periodontics D3-Diagnosis and Management of a Gingivitis or Successfully Stable Periodontitis Case • Periodontics D4-Comprehensive Treatment Planning and Management of a Stage-Grade Periodontitis Case • Readiness to Practice
10. prevention, diagnosis and management of pulpal and periradicular diseases	<ul style="list-style-type: none"> • Endodontic Clinical • Endodontic Emergency • Pediatric Comprehensive Patient Management • Radiology • Readiness to Practice • Screening and Risk Assessment for Head and Neck Cancer
11. diagnosis and management of oral mucosal and osseous disorders	<ul style="list-style-type: none"> • Oral Diagnosis and Treatment Planning • Oral Mucosal and Osseous Disorders • Readiness to Practice
12. collecting and assessing diagnostic information to plan for and perform uncomplicated oral surgical procedures	<ul style="list-style-type: none"> • Oral and Maxillofacial Surgery • Oral Diagnosis and Treatment Planning • Pediatric Comprehensive Patient Management • Readiness to Practice
13. recognizing and diagnosing malocclusion and space management needs	<ul style="list-style-type: none"> • Orthodontic Malocclusion • Pediatric Case Selection & Space Maintainer
14. discerning and managing ethical issues and problems in dental practice	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part I • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part II • Readiness to Practice • Standardized Patient Simulation
15. understanding and application of the appropriate codes, rules, laws and regulations that govern dental practice	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Outcomes of Treatment • Practice Administration
16. behavioral patient management and interpersonal skills	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part I • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part II • Pediatric Behavior Guidance • Pediatric Comprehensive Patient Management • Readiness to Practice • Standardized Patient Simulation
17. understanding the fundamental elements of managing a dental practice	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Practice Administration

IUSD Institutional Competency Statements <i>Graduates must be competent in:</i>	Competency Assessments
18. performing and supervising infection control procedures to prevent transmission of infectious diseases to patients, the dentist, the staff and dental laboratory technicians	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Endodontic Clinical • Oral and Maxillofacial Surgery • Readiness to Practice
19. providing evidence-based patient care in which they access, critically evaluate, and communicate scientific and lay literature, incorporating efficacious procedures with consideration of patient needs and preferences	<ul style="list-style-type: none"> • Standards Common to All Clinical Competency Assessments • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part I • Behavioral Science, Communication, Cultural Competence and Ethics OSCE Part II • Caries Diagnosis Risk Assessment and Management • Critical Thinking and Evidence-Based Dentistry • Outcomes of Treatment • Standardized Patient Simulation
20. recognizing the role of lifelong learning and self-assessment to maintain competency	<ul style="list-style-type: none"> • Caries Diagnosis Risk Assessment and Management • Dental Emergency Clinical • Endodontic Clinical • Operative Dentistry • Oral and Maxillofacial Surgery • Oral Diagnosis and Treatment Planning • Outcomes of Treatment • Pediatric Behavior Guidance • Pediatric Case Selection & Space Maintainer • Pediatric Operative Class II Restoration • Pediatric Operative Stainless Steel Crown • Pediatric Pulpotomy • Periodontics D3-Diagnosis and Management of a Gingivitis or Successfully Stable Periodontitis Case • Periodontics D4-Comprehensive Treatment Planning and Management of a Stage-Grade Periodontitis Case • Prosthodontic Restoration of Teeth-Crown PAC • Prosthodontic Replacement of Teeth-Complete Denture PAC • Prosthodontic Replacement of Teeth-Removable Partial Denture PAC • Radiology

In dentistry, clinical assessments are highly authentic and replicate the work required of a general dentist. As an example, a student's ability to diagnose, treatment plan, clinically prepare and evaluate the completed treatment for a patient requiring multiple dental procedures is done by direct evaluation of these skills (patient management and communication, diagnosing, treatment planning, clinically providing the needed treatment and then evaluating the outcomes of the treatment) within the context of an actual patient. Critical errors are incorporated into clinical assessments and result in an unsuccessful competency assessment. Students who are not successful on competency assessments are remediated as needed, given additional opportunities to master the skills, and then must attempt the assessment again. In addition to the successful completion of the required courses in the curriculum, students are not eligible to graduate until they have demonstrated achievement for all 20 IUSD Institutional Competencies.

In addition to the competency assessments, formative assessments, which measure student development toward achieving the IUSD Institutional Competency Statements, are embedded in all DDS courses. Types of formative and summative assessments are listed below:

Table 2. Formative Assessment Methods

Type	Description	Acronym
CATS/PICO	Assessment formats include Critically Appraised Topic Summaries (CATS) and Patient/Problem, Intervention, Comparison, Outcome (PICO) questions	PICO
Faculty Assessment by Observation: Longitudinal/Global	Longitudinal/global evaluation over extended periods	FA-LG
Faculty Assessment by Observation: Daily Clinical Evaluation	Formative assessment of procedural independence, professionalism, and infection control during discrete patient-care experience	FA-DCE
Faculty Assessment by Observation: Clinical Competency Assessment	High stakes patient-based assessment requiring students to perform independently (5 on the IUSD Procedural Independence Scale)	FA-CCA
Independent Assessment: Standardized Patient	Simulation assessment using standardized patient methods	IA-SP
Independent Assessment: Peer Assessment	Critical assessment of performance conducted by peer colleagues	IA-PA
OSCE	Objective Structured Clinical Examination	OSCE
Self-Assessment	Critical assessment of one's own performance and reflection on ways to enhance subsequent performance with feedback from external sources that may need to be reconciled with self-appraisal; includes standard rubrics	SELF
Simulation Assessment	Assessment formats include Virtual Reality, computer-based clinical scenarios, Typodont and peer patient	SIM-A
Work Sample	Assessment format includes portfolios and record reviews, chart simulated review, and case presentations	WS
Written Assessment	Assessment formats include multiple choice questions, short answer, structured essay, and research reports	WA

Indirect Measures of Student Learning

Indirect measures are used to evaluate student outcomes and programmatic effectiveness. Student focus groups are used to collect student feedback on a broad range of issues, including unplanned curricular redundancy, course sequencing, applicability of content in courses and the effectiveness of new curricular components incorporated into the program. IUSD also has a student-run Student Curriculum and Assessment Committee (SCAC) that meets regularly and provides input directly to the DDS CAC. Each DDS class has a non-voting representative on the CAC to provide the students with a voice on the committee.

Each DDS student completes the IUSD Senior Exit Interview Survey, and all students have the opportunity to complete the American Dental Education Association (ADEA) Senior Exit survey. These surveys provide

information about student satisfaction with advising, the curriculum, their sense of preparedness to practice and job placement. Additionally, all students have the opportunity to complete the IUSD Humanistic Culture and Learning Environment Survey (administered every 3 years), which assesses aspects of the learning environment such as student-student interactions, student-faculty interactions, curricular flexibility, emotional climate, student support, curricular organization, meaningful experiences and breadth of interest.

Academic Year 2021-22 Assessment Findings and Actions

Assessment of Student Competency

The Associate Dean of Education and Academic Affairs and Assistant Dean of Curriculum Development and Assessment regularly review the first-time pass rates of our Clinical Competency Assessments, which are the summative direct measures of the 20 IUSD Institutional Competencies. First-time pass rates are considered an important measure of program quality and student preparedness. Table 2 provides an example of the data reviewed.

Table 3. First-time Pass Rates for DDS Competency Assessments, Class of 2022

Competency Assessments (Direct Measure)	Year	Methods	IUSD Competencies (Program Learning Outcomes)	CODA Standards	First Time Pass Rate (n=118)	Final Pass Rate
Standards Common to All Clinical Competency Assessments	D3, D4	FA-CCA	3, 14, 15, 16	2-16, 2-17, 2-18, 2-21, 2-24a, 2-24d	96.6%	100%
Behavioral Science, Communication, Cultural Competence and Ethics OSCE – Part I	D2	IA-SP, OSCE, WA	3, 14, 16, 19	2-10, 2-16, 2-17, 2-20, 2-21, 2-22	82.2%	100%
Behavioral Science, Communication, Cultural Competence, and Ethics OSCE – Part II	D3	IA-SP, OSCE, WA	3, 14, 16, 19	2-10, 2-16, 2-17, 2-20, 2-21, 2-22	71.2%	100%
Caries Detection, Diagnosis, Risk Assessment, and Management Competency Assessment	D3	FA-CCA, SELF	1, 2, 3, 6, 19, 20	2-10, 2-11, 2-15, 2-16, 2-22, 2-24a, 2-24d, 2-24o	100%	100%
Critical Thinking and Evidence-based Dentistry Competency Assessment	D3	PICO, WS, WA	19	2-10, 2-22	44.9%	100%

Competency Assessments (Direct Measure)	Year	Methods	IUSD Competencies (Program Learning Outcomes)	CODA Standards	First Time Pass Rate (n=118)	Final Pass Rate
Dental Emergency Clinical	D4	FA-CCA, SELF	1, 3, 4, 5, 20	2-11, 2-15, 2-20, 2-24a, 2-24c, 2-24e, 2-24m	100%	100%
Endodontic Clinical	D4	FA-CCA, SELF	1, 2, 4, 5, 10, 18, 20	2-11, 2-24a, 2-24e, 2-24j, 2-24m	99.2%	100%
Endodontic Emergency	D3	WA	1, 2, 4, 5, 10	2-24a, 2-24e, 2-24j, 2-24m	95.8%	100%
Operative Dentistry	D3-D4	FA-CCA, SELF	1, 2, 4, 6, 7, 20	2-11, 2-24a, 2-24d, 2-24e, 2-24f	51.7%	100%
Oral and Maxillofacial Surgery	D3,D4	FA-CCA, SELF	1, 2, 4, 12, 18, 20	2-11, 2-15, 2-24a, 2-24e, 2-24l	D3 99.2% D4 99.2%	100%
Oral Diagnosis and Treatment Planning Part I and Part II	D3	FA-CCA, SELF, WS	1, 2, 3, 11, 20	2-11, 2-20, 2-24, 2-24a, 2-24b, 2-24c, 2-24k, 2-24o	98.3%	100%
Oral Mucosal and Osseous Disorders Competency Assessment	D3	WA, OSCE	1, 2, 11, 20	2-11, 2-23, 2-24k	82.2%	100%
Orthodontic Malocclusion	D2	WA	1, 2, 13	2-23, 2-24a, 2-24n	96.6%	100%
Outcomes of Treatment	D4	PICO, WS	1, 2, 3, 11, 15, 16, 19, 20	2-10, 2-11, 2-15, 2-16, 2-18, 2-20, 2-22, 2-24, 2-24a, 2-24b, 2-24c, 2-24d, 2-24o	99.2%	100%

Competency Assessments (Direct Measure)	Year	Methods	IUSD Competencies (Program Learning Outcomes)	CODA Standards	First Time Pass Rate (n=118)	Final Pass Rate
Patients with Special Needs	D4	OSCE, WS WA	1	2-24a, 2-25	98.3%	100%
Pediatric Behavior Guidance	D3-D4	FA-CCA, SELF	1, 16, 20	2-11, 2-16, 2-23, 2-24c, 2-24o, 2-25	99.2%	100%
Pediatric Case Selection & Space Maintainer Competency Assessment	D3-D4	SIM-A	13, 20	2-11, 2-23, 2-24g, 2-24n	100%	100%
Pediatric Comprehensive Patient Management	D 4	OSCE, WA	1, 2, 3, 4, 5, 6, 7, 9, 10, 12, 16	2-16, 2-17, 2-20, 2-23, 2-24, 2-24a, 2-24c, 2-24d, 2-24e, 2-24f, 2-24i, 2-24j, 2-24l, 2-24m, 2-24n	94.1%	100%
Pediatric Operative Class II Restoration	D3-D4	SIM-A	7, 20	2-11, 2-23, 2-24f	98.3%	100%
Pediatric Operative Stainless Steel Crown	D3-D4	SIM-A	7, 20	2-11, 2-23, 2-24f	99.2%	100%
Pediatric Pulpotomy	D3-D4	SIM-A	10, 4, 20	2-11, 2-23, 2-24e, 2-24j	100%	100%
Periodontics D3-Diagnosis and Management of a Gingivitis or Successfully Stable Periodontitis Case	D3	FA-CCA, SELF	1, 2, 9, 20	2-11, 2-24a, 2-24c, 2-24i, 2-24o	100%	100%
Periodontics D4-Comprehensive Treatment Planning and Management of a Stage-Grade Periodontitis Case	D4	FA-CCA, SELF	1, 2, 9, 20	2-11, 2-24a, 2-24c, 2-24i, 2-24o	99.2%	100%
Practice Administration	D3	WA	15, 17	2-18, 2-19	90.7%	100%
Prosthetic Restoration of Teeth-Crown PAC	D3-D4	FA-CCA, SELF	1, 2, 4, 7, 20	2-11, 2-24a, e, f	98.3%	100%
Prosthetic Restoration of Teeth-Crown VPAC	D4	WA	1, 2, 7	2-24a. f,	89.0%	100%

Competency Assessments (Direct Measure)	Year	Methods	IUSD Competencies (Program Learning Outcomes)	CODA Standards	First Time Pass Rate (n=118)	Final Pass Rate
Prosthodontic Replacement of Teeth-Complete Denture PAC	D3-D4	FA-CCA, SELF	1, 2, 8, 20	2-11, 2-24a, g, h	97.5%	100%
Prosthodontic Replacement of Teeth-Complete Denture VPAC	D4	WA	1,2 8	2-24a, g, h	72.0%	100%
Prosthodontic Replacement of Teeth-Fixed Bridge SPAC	D4	SIM-A	1,2 8	2-24g, h	29.7%	100%
Prosthodontic Replacement of Teeth-Implant SPAC	D4	SIM-A, SELF	1,2 8	2-24a, g, h	93.1%	100%
Prosthodontic Replacement of Teeth-Implant VPAC	D4	WA	1,2 8	2-24a, g, h	97.5%	100%
Prosthodontic Replacement of Teeth-Removable Partial Denture PAC	D3-D4	FA-CCA, SELF	1, 2, 8, 20	2-11, 2-24a, g, h	97.5%	100%
Prosthodontic Replacement of Teeth-Removable Partial Denture VPAC	D4	WA	1,2 8	2-24a, g, h	99.2%	100%
Radiology Interpretation	D3	WS	1, 2, 15, 20	2-11, 2-15, 2-18, 2-24a	100%	100%
Readiness to Practice	D4	FA-LG, SELF, WS	1, 2, 20	2-11, 2-24	100%	100%
Screening and Risk Assessment for Head and Neck Cancer	D3	WA	1, 11	2-23, 2-24b	81.4%	100%
Standardized Patient Simulation	D1	IA-SP, WA	3, 14, 16, 19	2-10, 2-16, 2-17, 2-21, 2-22	90.7%	100%

In addition to the first-time pass rates, the Associate Dean of Education and Academic Affairs, Assistant Dean of Curriculum Development and Assessment and DDS Progress Committee (as needed) review students' progress toward meeting the eligibility criteria (essential patient experiences) to challenge competency assessments. The Associate Dean of Education and Academic Affairs, Assistant Dean of Curriculum Development and Assessment, Department Chairs, Discipline Directors and the Progress Committee work collaboratively to modify the competency assessments based on the assessment data. Amendments to competency assessments are submitted to the DDS CAC for review and approval.

During the academic year 21-22, the following changes were made to our competency assessments:

Oral Diagnosis and Treatment Planning

In reviewing the competency assessments administered by the Department of Biomedical Sciences and Comprehensive Care, the clinic directors, vice chair of comprehensive care, and representatives from the Office of Education and Academic Affairs (OEAA) identified unplanned redundancy between the Oral Diagnosis and Treatment Planning II and Outcomes of Treatment competency assessments, in particular as it relates to assessing students on treatment planning, referral, and prognosis. As such, the Oral Diagnosis and Treatment Planning II Competency Assessment was eliminated, and six (6) items from the “treatment planning” section were moved to the “appropriateness of treatment plan” section of the Outcomes of Treatment Competency Assessment.

Oral and Maxillofacial Surgery

In reviewing the outcomes of the third-year (D3) Oral and Maxillofacial Surgery Competency Assessment, the predoctoral discipline director and representatives of the OEAA determined the D3 competency assessment should be eliminated, while maintaining the formative daily assessments students receive on each procedure. The change will provide more time for students to gain more experience prior to challenging the high-stakes summative assessment.

Institutional Outcomes Assessment

The IUSD institutional outcomes assessment (IOA) process is broad-based, systematic, continuous, and designed to promote achievement of our institutional goals:

Table 4. IUSD Goals

IUSD Goals
Teaching and Learning
1. Attract and support a well-prepared and diverse student population for all School of Dentistry oral health profession programs.
2. Enhance student learning and develop graduates who are competent clinicians, critical thinkers, lifelong learners who are ethical, socially aware, and culturally sensitive oral health professionals.
3. Attract and retain quality faculty and provide support to enhance effective teaching and learning in clinical, laboratory, classroom, and service-learning settings.
Research and Creative Activities
4. Excel in high quality, innovative research, and scholarly activities that engage faculty, students, and staff; attract external funding; increase our national standing, and lead to improvements in oral and systemic health.
Patient Care
5. Provide comprehensive, evidence-based, quality oral health services to individuals from any socioeconomic or cultural group.
Civic Engagement and Service
6. Serve local, state, national, and global communities through partnerships involving clinical care, service learning, and community-engaged scholarship in addition to serving the university and the profession.

The dean of IUSD and the IOA committee regularly review the objectives and progress toward intended outcomes at both program and student levels. Each objective identifies direct, indirect and proxy measures able to determine the degree of achievement or progress toward our intended outcomes. The measures related

to the assessment of student learning are summarized under each domain below.

Domain: Teaching and Learning

Objective: To retain and support students

Table 5. First-year retention rate, AY 21-22

Measure	Target	Findings AY 21-22	Objective Met
Retention rate D1-D4	98%	D1: 91.43% D2: 95.73% D3: 98.31% D4: 100%	Partially

Recommendations for Program Improvement:

1. Formalize school wide approach to study coaches/tutors.
2. Implement mid-semester progress checks to identify students experiencing academic difficulty.

Program Improvement and Action Steps:

1. The study coaches program is well-developed within the systems approach to biomedical sciences course structure and involves group and individual peer-led study sessions, with broad oversight by the course director. The study coaches program will be expanded to include the Fixed Prosthodontics courses for AY 22-23, with the intent to expand to other courses as well. As part of the program, student study coaches will receive formal tutor training and processes to award students with either academic or intramural credit are in development.
2. The Office of Education and Academic Affairs implemented a mid-semester progress report process, whereby course directors report to the office any students experiencing academic difficulty (i.e. in danger of failing the course). Students identified on the reports are referred to the Office of Student Affairs for follow-up and discussions about available resources.

Objective: To ensure students are well-prepared to pass NBDE Part I by June prior to D3 clinics

Table 6. National Board First-time Pass Rate

Measure	Target	Findings AY 21-22	Objective Met
First-time pass rate on national board exams	≥ 98%	NBDE II: 92/98 (93.90%) INBDE: 5/5 (100%) Total: 97/103 (94.2%)	No

Recommendations for Program Improvement:

1. Develop new D3 course focused on the integration of biomedical and clinical sciences to reinforce concepts taught earlier in the curriculum within a clinical context and to support student preparation for the INBDE.
2. Share annual reports from the Joint Commission with the CAC and other key stakeholders
3. Review INBDE preparation programs/technologies to support student success on the exam

Program Improvement and Action Steps:

1. New D710 Biomedical-Clinical Case Conference course implemented during Spring 2022 semester. The

course aims at further strengthening the predoctoral curriculum in the area of applying biomedical science knowledge in the delivery of patient care (CODA Standards 2-15). The course will reinforce biomedical and behavioral topics taught earlier in the curriculum and have students apply their knowledge to patient care scenarios using a case-based instructional mode and the patient box format seen on the integrated national board dental examination (INBDE). The course is intended to provide depth, breadth and clinical context to students' biomedical and behavioral knowledge. As a secondary purpose, the format and timing of this course will help to prepare students for success on the INBDE. Course evaluations for D710 will be reviewed prior to the spring 2023 term to guide course improvement. Additionally, OEAA will request feedback from the class of 2023 via survey/focus groups on the INBDE, resources used to study, and how the curriculum prepared them for success on the exam. These data will be used to inform D710 course development. OEAA to work with Office of DEI to develop information to support students who may need accommodations on the INBDE.

2. Beginning in AY 22-23 the CAC curriculum management subcommittee will be incorporating national board annual reports in its process to determine the committee's curriculum assessment plan for the year. Section d-value data will be shared with key stakeholders.
3. OEAA is reviewing the benefits of: (1) implementing a school wide approach to exam preparation in conjunction with the D710 course, (2) implementation of mock examinations, (3) facilitating opportunities for students to select preferred preparation materials. OEAA has reviewed Dental Mastery, Dental Decks, and Kaplan programs.

Objective: To ensure students are well-prepared to pass all sections of the clinical licensure board exam

Table 7. First-time pass rate CDCA, Class of 2022

Measure	Target	Findings AY 21-22	Objective Met
First-time pass rate on each section of the clinical licensure board exam	>90%	Diagnostic Skills: 100% Prosthodontics : 91.60% Endodontics: 80.67% Periodontics: 100% Restorative (ant): 93.28% Restorative (pos): 87.39%	Partially

Recommendations and action steps for program improvement based on AY21-22 outcomes are being considered by the Office of Clinical Affairs. A previous recommendation from AY20-21 to review the endodontics curriculum is currently ongoing.

Objective: To graduate students within 4 years of enrollment

Table 8. 4-year graduation rate, AY 21-22

Measure	Target	Findings AY 21-22	Objective Met
4-year graduation rate	>95%	94.28%	No

Of the original 105 students in the Class of 2022 cohort, four (4) students did not graduate in 4 years due to academic progress concerns, one (1) transferred, and one (1) withdrew from the program. The recommendations and action steps are similar to those outlined under the retention rate objective.

Domain: Civic Engagement and Service

Objective: To engage IUSD students in service learning or community-based dental experiences

Table 9. Students engaged in service learning or community-based dental education experiences

Measure	Target	Findings AY 20-21	Objective Met
Number of students engaged in service learning or community-based dental experiences	100%	100%	Yes

There were no recommendations for program improvement based on a review of the data associated with this objective.

Curriculum Assessment

The Curriculum Management Plan (CMP), which functions as the foundation of the IUSD curriculum assessment process, is on a four-year cycle and focuses on three key areas, as required by CODA standards:

- Elimination of unwarranted repetition and outdated and unnecessary material,
- Incorporation of emerging information and achievement of appropriate sequencing, and
- Incorporation of emerging didactic and clinical technologies to support the dental education program

In addition to the CMP, individual faculty and/or administrators are encouraged to make recommendations to CAC for course improvement or suggest portions of the curriculum to review.

In the AY 2021-22, the DDS Curriculum and Assessment (CAC) CMP subcommittee reviewed 30 courses and 26 recommendations were made to course directors for course-level improvement. Tables 10-12 summarize selected examples of recommendations, action steps and outcomes as a result of the school’s curriculum assessment process during academic year 2021-22.

Table 10. Recommendations, Actions Steps and Outcomes, D2 Prosthodontics Course, TA Calibration and Development of Course Materials

Recommendation	Action Steps	Response/Follow-up/Outcome
Consider strategies to increase communication and to set expectations between the course director, bench instructors/TAs, and students.	<p>2021</p> <p>Consider implementing daily huddles with bench instructors/TAs to reinforce calibration training, explain process, and provide instructions (areas of emphasis) for the daily project; consider adding a “lab briefing” at the end of the lecture portion of the course; consider creating a lab manual/student guides for the lab portion of the course</p>	<p>2021</p> <p>Regular calibration sessions are held prior to lab sessions in order to calibrate bench instructors. Since TA/bench instructors are unavailable due to rotations or other reasons, there may be a gap in communication and continuity.</p> <p>2022</p> <p>New course directors appointed. Course canvas site redesigned using modules feature to serve as a lab guide, with videos and photos. All TA/bench instructors have access to the new Canvas site in addition to regularly scheduled calibration sessions.</p>

Table 11. Recommendations, Action Steps and Outcomes, D3 Prosthodontics Course, Reinstating Lab Session

Recommendation	Action Steps	Response/Follow-up/Outcome
Evaluate the impact of the temporary removal of the laboratory component of the course on the student's ability to attain the intended course objectives	<p>2021 Provide rationale for removing the laboratory component of the course and whether there is a plan to reinstate it in the future based on the intended objectives of the course</p> <p>CAC Action: In conjunction with course directors, review the Advanced Occlusion, Orofacial Pain and Prosthodontics Seminar courses for unplanned redundancies and opportunities for consolidation</p>	<p>2021 The reason for removing the laboratory component of the course is to reduce the risk of COVID-19 transmitting especially during last year while most of our faculties and students have not been vaccinated. To compensate for the impact of the temporary removal of laboratory fabrication occlusal splint, Course Director added more step-by-step detail of fabricating an occlusal splint in the course lecture. We also implemented an essay assignment that requires students to discuss occlusal splint fabrication, indication, and evidence supporting clinical choice. The Course Director plans to reinstate the laboratory component in the spring semester of 2022.</p> <p>No further action needed.</p>

Table 12. Recommendation, Action Steps and Outcomes, D3 Pharmacology Course, Course Re-sequencing

Recommendation	Action Steps	Response/Follow-up/Outcome
Explore feasibility of re-sequencing the course, potentially dividing Pharmacotherapeutics into two courses, e.g. Fall/Spring D3, focusing first on the medications pertinent to new D3 students treating patients in the IUSD clinics.	<p>2021 Evaluate sequencing of course content across two semesters, with the intent to support the integration of biomedical and clinical sciences, student retention of knowledge, and success on the INBDE. Consider all instructional modes, online, hybrid, and in-person.</p> <p>2021 In collaboration with the course directors for Hospital Dentistry, Clinical Medicine, Pain and Anxiety Management, and Director of the IU Emergency Clinic, develop a course outline for the Fall (drugs pertinent to new D3 students) and Spring (systems approach to pharmacology; top 200 drugs) semester courses and opportunities</p>	<p>2021 Course director evaluated the sequencing of the Pharmacotherapeutics course and believes it to be feasible and a positive move in the curriculum to support student learning. The Fall course would include drugs immediately pertinent to new D3 students in clinics, with the second semester focusing on a systems approach to pharmacology with emphasis on the top 200 drugs prescribed in the US.</p> <p>2022 For academic year 23-24, the D3 pharmacology course will be re-sequenced in the curriculum, with 16 clock hours of instruction in the fall of D3 focusing on the most common medications in dentistry and 16 clock hours in the spring.</p>

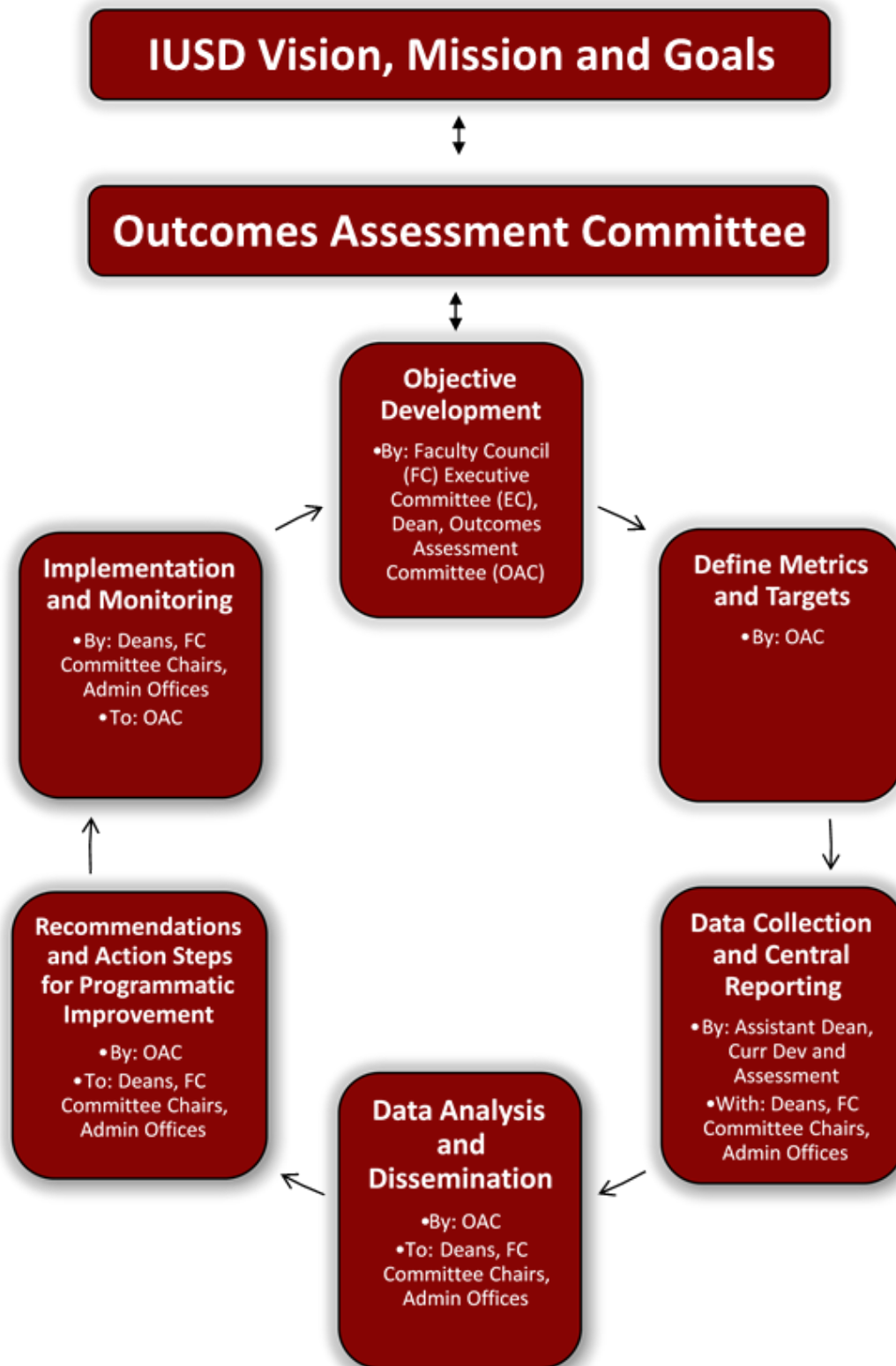
Recommendation	Action Steps	Response/Follow-up/Outcome
	for team-teaching. Timeline for implementation: Academic Year 2022-23.	

Summary

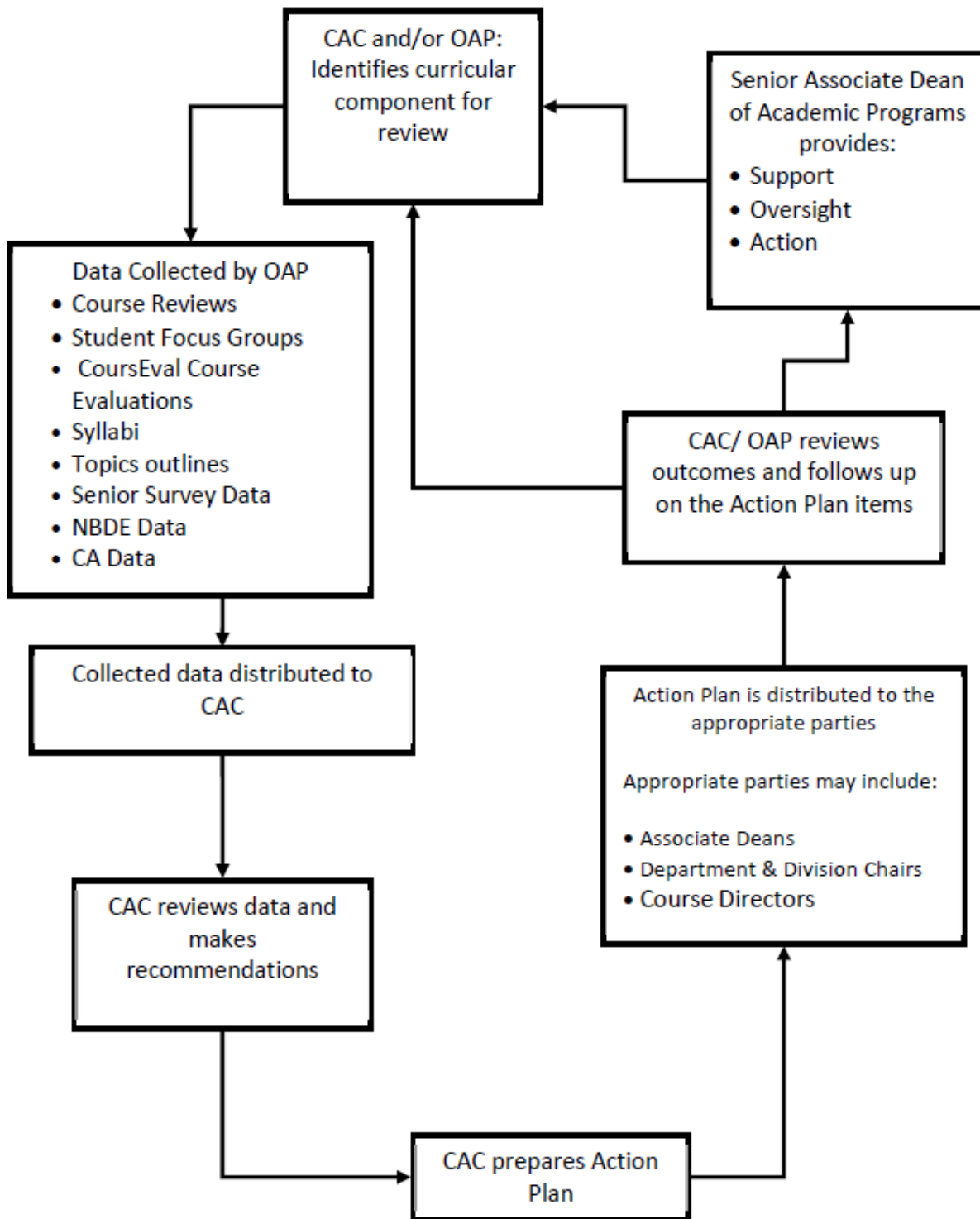
The IUSD Institutional Competencies define what a competent graduate will be able to do upon graduation. Multiple assessments are used to evaluate students across four years of the program and include the assessment of a broad range of attributes, aligning with both the IUPUI Principles of Graduate and Professional Learning and CODA Standards for Dental Education Programs. Competency assessments serve as the final measurement of the defined set of knowledge, values and skills that have been developed through the formative daily feedback process.

IUSD has multiple processes in place to evaluate the content of the DDS program, the measurement instruments used in student evaluation and the outcomes of those assessments which ensure that there is meaningful, ongoing evaluation of student learning. There are processes in place that provide for continuous evaluation of the program as a whole, which result in ongoing improvements in student learning.

Appendix A: Outcomes Assessment Process



Appendix B: Curriculum Management Plan Flowchart



Appendix C: Curriculum Management Plan Course Director Review Forms



INDIANA UNIVERSITY

SCHOOL OF DENTISTRY

IUPUI

February 1, 2023

Dear Course Directors,

Standard 2-8 of the Commission on Dental Accreditation's Standards for Dental Education Programs requires dental schools to have a curriculum management program that ensures:

- a. an ongoing curriculum review and evaluation process which includes input from faculty, students, administration and other appropriate sources;
- b. evaluation of all courses with respect to the defined competencies of the school to include student evaluation of instruction;
- c. elimination of unwarranted repetition and outdated and unnecessary material;
- d. incorporation of emerging information and achievement of appropriate sequencing;
- e. incorporation of emerging didactic and clinical technologies to support the dental education program curriculum.

The faculty and administration have constructed multiple measures to collect this information. One of these methods is a program of in-depth study of defined portions of the pre-doctoral curriculum each academic year by the faculty members of the Curriculum and Assessment Committee (CAC) and the Office of Education and Academic Affairs. The **[defined portion of the curriculum]** has been selected for evaluation by the committee.

As a course director in a **[defined portion of the curriculum]** course, you are being asked to participate in this ongoing process by completing the appropriate forms which are included in this electronic packet. If your course is currently running, or has yet to run, please assess its most recent running.

When you have completed the appropriate review forms, please submit them electronically to **[OEAA representative]**. **The CAC requests that all review packets are submitted by no later than [DATE].**

If you have questions regarding this process, please contact **[CAC Chair]**, Chairperson of CAC, or **[OEAA representative]** in the Office of Education and Academic Affairs.

Thank you for your dedication to excellence in dental education.

Sincerely,



CURRICULUM MANAGEMENT PROGRAM COURSE DIRECTOR REVIEW FORM

Directions for completing the form:

1. Please complete the form by typing your text responses in the designated gray response fields (the fields will expand as you type your text).
2. For the check boxes, please double click the box you would like to select and then choose "checked" from the list of options.

Course number:	
Course title:	
Course director:	
Date of review:	

1. Have students achieved the defined objectives/competencies for your course?

Yes

No

Unsure

a. What evidence do you use to support your conclusions?

2. How did you measure student achievement of the defined objectives/competencies?

3. Please summarize and discuss the student evaluations of your course.

4. Based upon the evaluations and student outcomes, what changes have you made to your course? What changes are you planning for the next academic year?

5. What difficulties or concerns do you have regarding your course? How can IUSD assist?

6. How is the use of best evidence incorporated in your course and how is it assessed?

7. How is critical thinking assessed in your course?

8. Do students self-assess in your course? If so, please describe the self-assessment process and how it is evaluated.

9. In your course, how are basic and behavioral sciences integrated with clinical practice?

10. Does your course support the core competencies of interprofessional education, which include: values/ethics for interprofessional practice, roles/responsibilities of the health care team, interprofessional communication, and interprofessional teamwork? If so, how are these aspects of IPE assessed?

Appendix D: Curriculum Management Plan Curriculum Committee Review Form



INDIANA UNIVERSITY
SCHOOL OF DENTISTRY
IUPUI

CURRICULUM MANAGEMENT PROGRAM COURSE REVIEW PACKET – CAC REVIEWER

Protocol:

1. Please use this packet to guide your review of the curriculum management documentation:
 - a. Course Review by Course Director Packet
 - b. Student focus group report
 - c. CoursEval course evaluations
 - d. Course syllabus
2. Please follow the instructions under each section.
3. Once you have completed the review packet, please submit it by following the instructions on the last page.

Course Information:

Instructions:

1. Please type the course number and title in the “Course for review” field.
2. Please identify the documents contained in the review packet for the course you are reviewing, and check them off in the “Items for Review” checklist by clicking on the check boxes.

CAC Reviewer:	
Course for review:	
Date of review:	

Items for review:	<input type="checkbox"/> Course Review by Course Director <input type="checkbox"/> Student Focus Group Report <input type="checkbox"/> CoursEval Course Evaluation <input type="checkbox"/> Syllabus
--------------------------	---

Summary of Syllabus

Instructions:

1. Please review the Course Syllabus of the course.
2. Please identify any concerns with course objectives, grading expectations or course policies.
3. Please provide a brief summary of your review in the field below.

Summary of Course Director Self-Study Packet Review

Instructions:

1. Please review the “Course Review by Course Director Packet” of the course you are reviewing.
2. Please identify any themes or notable comments that may emerge. These themes or notable comments may indicate strengths of the course or areas for improvement.
3. Please provide a brief summary of your review in the field below.

Summary of Focus Group Report

Instructions:

1. Please review the “Focus Group Report” of the course.
2. Please identify any themes or notable comments that may emerge. These themes or notable comments may indicate strengths of the course or areas for improvement.
3. Please provide a brief summary of your review in the field below.

Summary of CourseEval Course Evaluations

Instructions:

1. Please review the “CourseEval Course Evaluations” of the course.
2. Please identify any themes or notable comments that may emerge. These themes or notable comments may indicate strengths of the course/module or areas for improvement.
3. Please provide a brief summary of your review in the field below.

Summary of Recommendations:

Instructions:

1. Based on your comments made in the summary sections above, please record your recommendations for the course in the fields below.
2. There are fields for up to 5 recommendations. Please list each recommendation in a separate field.

Recommendation #1

Recommendation #2

Recommendation #3

Recommendation #4

Recommendation #5

Submission Instructions:

1. Please save this document with the course number, e.g. D501, in the title and email it to [OEAA Representative] in the Office of Education and Academic Affairs.