

Wayne Community College
Program Review and Outcome Assessments, 2019-20
(Previous Program Review Cycle, 2016-17)

Department Name:

Dental Hygiene

Section 1: Program Overview**Mission/Purpose:**

The philosophy of the Wayne Community College Dental Hygiene Program is to provide a strong academic and practical education in dental hygiene that will foster a desire to continue personal growth and maintain professional competence through life-long learning.

Degrees, Diplomas, and Certificates Offered: Utilizing the table below, list all degrees, diplomas, and certificates offered, along with program codes.

Program Type (Associate, Diploma, or Certificate)	Program Title	Program Code
Associate of Applied Science	Dental Hygiene	A45260

Describe how the program's mission aligns with the College's vision, mission, core values, and strategic goals. Identify which Institutional Goal(s) best aligns with your program and explain why.

Goal 1: Increase Student Access

Goal 2: Ensure Program Excellence

Goal 3: Improve Student Success

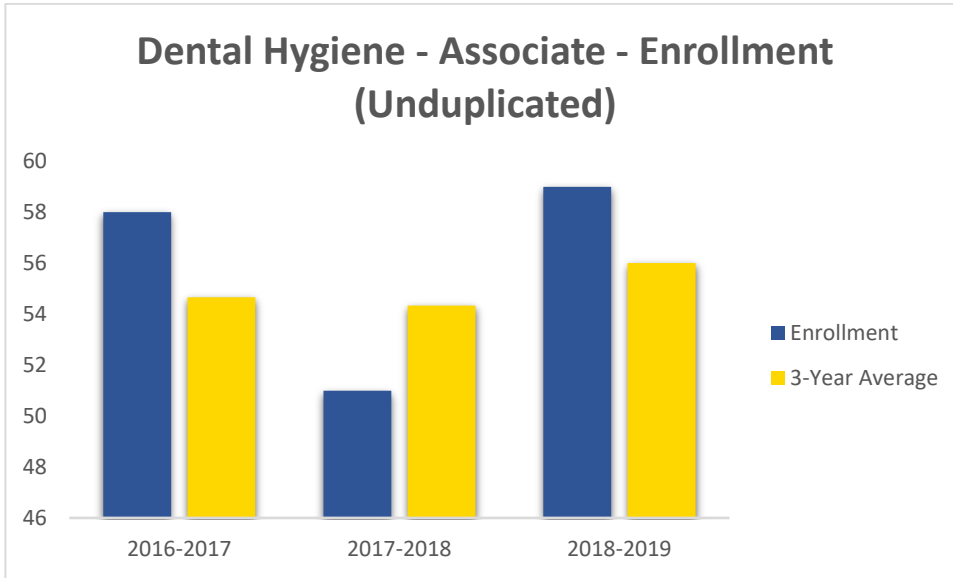
Goal 4: Ensure Institutional Quality

Goal 2: The dental hygiene department strives to ensure program excellence by maintaining high academic and professional standards in the classroom, laboratory, and the clinic. The department completes curriculum meetings each summer to ensure course overlap, evidence based teaching, and Commission of Dental Accreditation (CODA) standards are being met.

Goal 3: The department offers remediation to improve student success. Remediation is offered for all clinical courses. Peer tutoring is offered for didactic course work, as well as faculty being available to work with students during office hours to assist with didactic course work.

Program Enrollment (Academic Year - Fall, Spring, Summer) – for each degree level (Associate, Diploma, Certificate)

Program Enrollment (Specify Degree Level) (unduplicated)		
Academic Year (Fall, Spring, Summer)	Enrollment	3-Year Average
2016-2017	58	55
2017-2018	51	54
2018-2019	59	56



Provide narrative for analysis of program enrollment. *(Is enrollment increasing or decreasing? What possible reasons for increase/decrease? Describe how you plan to address program enrollment.)*

The dental hygiene program is a limited admissions program that accepts 30 students each fall semester. So, enrollment is stable and consistent. Courses are offered once per semester. Class size and capacity are adequate for the number of students. Thirty (30) students are admitted to the program each fall. We have students with certificates in cosmetology & nurse aide, diplomas from dental assisting programs, Associate degrees in arts, business administration & criminal justice/latent evidence as well as Bachelor’s degrees in business/marketing and elementary education.

Enrollment has remained consistent in 2016 and 2018, with a decrease in 2017. Several issues caused a decrease in the year 2017. The number of second year enrollment was low due to academic challenges.

Analysis of program budget full-time equivalent (BTFE) *(The number of full-time equivalent (FTE) student for which colleges are funded through State funding formulas. An amount of instruction that equates to an annual FTE student; one curriculum FTE equals 512 student hours.)*

The Dental Hygiene program generates an average of 64.5 Budget FTE annually.

Activities to ensure program changes (2016-17; 2017-18; 2018-19 – Academic Year, Fall, Spring, Summer)

List program curriculum changes, revisions, deletions in table.

Course Title	Date – Updated / Revised / Deleted
No program changes	N/A

Provide an overview of the significance of the program changes and improvements that occurred over the past three years. *(What were the program’s / discipline’s goals and rationale for expanding and improving student learning, including new courses, programs, and delivery methods?)*

The dental hygiene program has continued to make changes to the Calculus Detection and Removal (CD&R) clinical exam to assist in a board pass rates. The department has seen a decline in students passing the regional clinical exam. During clinical practice a student is only allowed a certain amount of errors during patient care in order for the patient to be considered a requirement. During clinical practice the student can request a tutorial session with a faculty. This was also implemented to assist with pass rates on clinical boards.

Advisory Committee: dates, summary of minutes, activities (2016-17; 2017-18; 2018-19 – Academic Year – Fall, Spring, Summer)

Summary of Advisory Committee Activities

Year	Meeting Dates	Recommendations / Activities
2016-2017	October 27, 2016 March 9, 2017	Discussed the activities of the students and the committee recommended silver diamine fluoride training and digital radiographs.
2017-2018	October 24, 2017 March 8, 2018	Discussed "Give Kids a Smile" sealant project (GKAS) and the progress of digital radiographs in the department. One member recommended encouraging our students to sit chairside. The department had obtained quotes.
2018-2019	October 25, 2018 March 21, 2019	Discussed activities of the students and the committee recommended more training for the DA students in orthodontics, pedodontics, and sizing of isolite mouthpieces.

Describe program's participation with Advisory Committee or external organizations that contribute to maintaining program relevance. *(File Advisory Committee Meeting Minutes for past three years in Program Review Attachment folder.)*

The dental department has an active advisory committee. Our advisory committee is comprised of dentists, assistants, and hygienists. This gives the department a diverse group. They have been very supportive and give recommendations on equipment and trainings that would help our students be more competitive in the job market. At each meeting faculty share what has been happening in the department, the number of students and graduates, and any activities to support the community.

Provide narrative for analysis of trends in the field or industry (emerging needs). *(Based on environmental scans, advisory committees, and other sources external to the program/discipline, how well is the program/discipline responding to the current and emerging needs of the community? Is there new technology/equipment that needs to be added to your program?)*

Based on Labor Market Data there is growth expected (+4.7%) in the field of dental hygiene. The dental department is meeting the needs of Wayne and surrounding counties. New technology has been added to allow our students to be proficient in digital technology. As we embark on the next several years we will work to become paperless.

Section 2: Faculty Profile

Have all the faculty credentials been verified? (*Verify required documents are in personnel files.*)

Yes No

List of Faculty and Status (2016-17; 2017-18; 2018-19 – Academic Year – Fall, Spring, Summer)

Faculty / Name	Full-Time / Part-Time	Total Years within Department/Program	Total Years at WCC
Janeil Marak	Full-time	18	22
Susan Smith	Full-time	2	2
Manoj Patel	Full-time	5	5
Debbie Heath	Full-time	20	20
Nancy Lee	Full-time	14	14
Penny Coates	Full-time	18	18
Dayna Artim	Part-time	1.7	1.7
Linda Chitty	Part-time	34	34
Millie Crain	Part-time	0.5	0.5
Sue Fowler	Part-time	33	33
Lynne Fulghum	Part-time	4	4
Betsy Hamilton	Part-time	13	13
Sharon Holder	Part-time	7	7
Betty Starling	Part-time	20	20
Virginia Stancil	Part-time	1.5	1.5
Carrie Wildman	Part-time	2	2
Kim Hatfield	Part-time	0.5	0.5
Wendy Royster	Part-time	0.5	0.5

Provide narrative for adequacy of faculty numbers. (*Do you have enough faculty to support your program?*)

The dental hygiene faculty includes 4.5 full-time and ten (10) part-time members. The department dean, department chair, and department dentist all teach in the dental hygiene and dental assisting programs. We have an adequate amount of faculty to support the program.

Faculty Contact and Credit Hours

Faculty / Name	Full-Time Part-Time	Fall 2016		Spring 2017		Summer 2017	
		Contact	Credit	Contact	Credit	Contact	Credit
Janeil Marak	Full-time	9	9	11	8	10	7
Manoj Patel	Full-time	20	18	20	9	19	7
Debbie Heath	Full-time	18	8	20	11	17.5	2
Nancy Lee	Full-time	17.5	10	20	10	16	3
Penny Coates	Full-time	18	10	19.5	12	16.5	3
Linda Chitty	Part-time	6	4	6	3	0	0
Sue Fowler	Part-time	6	4	6	3	0	0
Lynne Fulghum	Part-time	9	9	12	4	0	0
Betsy Hamilton	Part-time	6	6	3	3	0	0
Sharon Holder	Part-time	12	4	9	6	6	2
Betty Starling	Part-time	18	9	18	7	9	2
Kim Hatfield	Part-time	0	0	3	3	0	0

Wendy Royster	Part-time	0	0	9	6	0	0
Amanda Velie	Part-time	0	0	6	4	0	0

Faculty / Name	Full-Time Part-Time	Fall 2017		Spring 2018		Summer 2018	
		Contact	Credit	Contact	Credit	Contact	Credit
Janeil Marak	Full-time	4	3	10	11	9	7
Manoj Patel	Full-time	20	18	22	21	17.5	2
Debbie Heath	Full-time	20	18	20	11	17.5	2
Nancy Lee	Full-time	17.5	10	20	10	16	3
Penny Coates	Full-time	18	10	19.5	12	16.5	3
Linda Chitty	Part-time	6	4	6	3	0	0
Sue Fowler	Part-time	9	3	6	3	0	0
Lynne Fulghum	Part-time	6	4	15	7	15	2
Betsy Hamilton	Part-time	3	3	3	3	0	0
Sharon Holder	Part-time	12	4	15	7	15	2
Betty Starling	Part-time	15	9	12	7	15	2

Faculty / Name	Full-Time Part-Time	Fall 2018		Spring 2019		Summer 2019	
		Contact	Credit	Contact	Credit	Contact	Credit
Janeil Marak	Full-time	4	3	3	2	0	0
Susan Smith	Full-time	10	7	10	10	9	7
Manoj Patel	Full-time	20	18	22	22	17.5	2
Debbie Heath	Full-time	20	18	20	11	17.5	2
Nancy Lee	Full-time	17.5	10	20	5	16	3
Penny Coates	Full-time	18	10	19.5	12	16.5	3
Dayna Artim	Part-time	0	0	9	7	6	2
Linda Chitty	Part-time	6	4	6	3	0	0
Millie Crain	Part-time	9	3	0	0	0	0
Sue Fowler	Part-time	9	3	6	3	0	0
Lynne Fulghum	Part-time	9	4	15	7	9	2
Betsy Hamilton	Part-time	3	3	0	0	0	0
Sharon Holder	Part-time	15	7	15	7	9	2
Betty Starling	Part-time	15	9	12	7	12	2
Virginia Stancil	Part-time	0	0	6	3	6	2
Carrie Wildman	Part-time	9	3	15	7	6	2

Professional development activities of faculty (2016-17; 2017-18; 2018-19 – Fiscal Year – July 1-June 30)

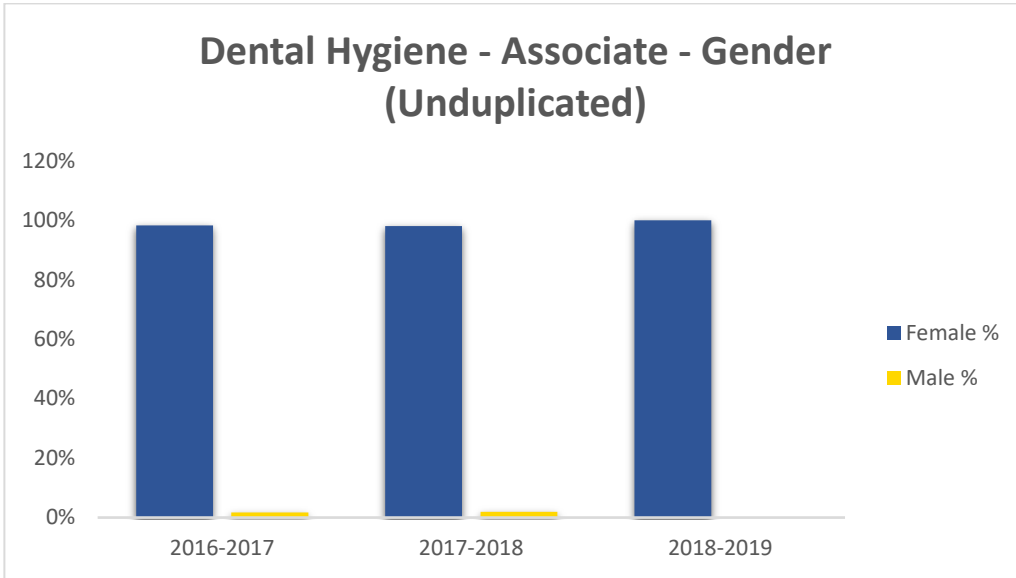
Verify departmental professional development (PD) tracking logs are completed and filed in Program Review Professional Development folder.

Yes No

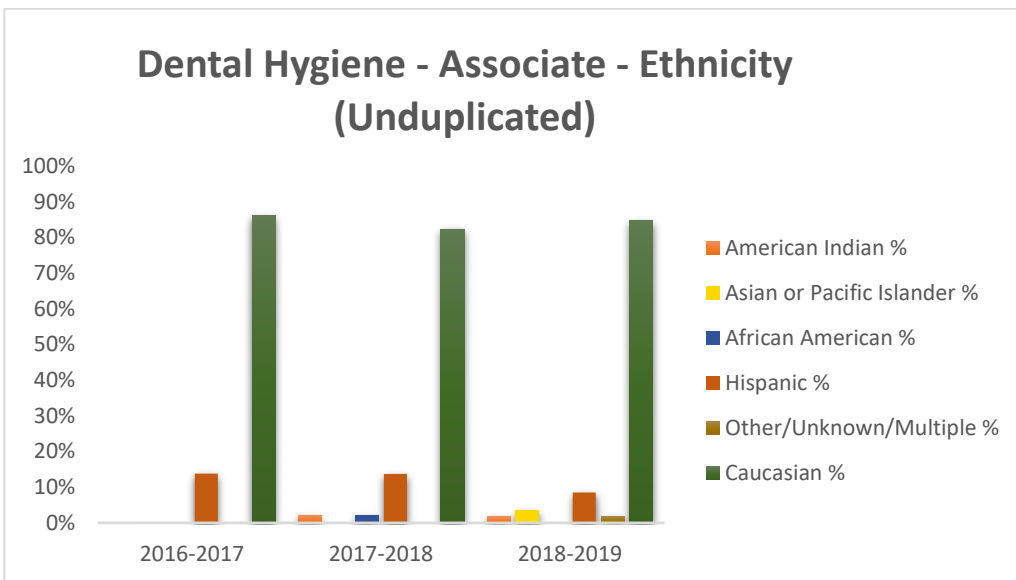
Section 3: Student Demographics - Parent program (highest level only) data is provided.

Gender (Specify highest level - unduplicated) Academic Year – Fall, Spring, Summer						
Academic Year	Female		Male		Total	
	N	%	N	%	N	%
2016-2017	57	98%	1	2%	58	100%

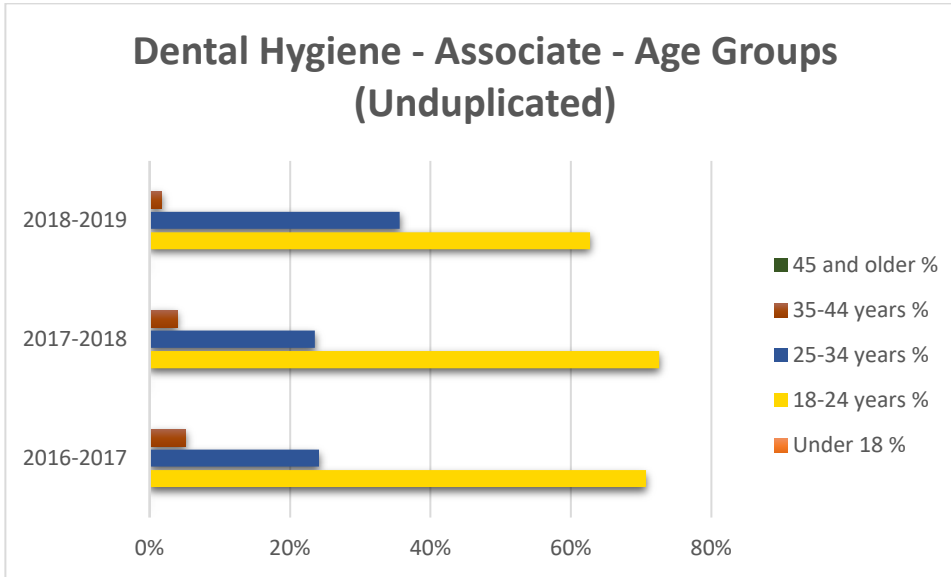
2017-2018	50	98%	1	2%	51	100%
2018-2019	59	100%	0	0%	59	100%



Ethnicity (Specify highest level – unduplicated) Academic Year – Fall, Spring, Summer						
Ethnicity	2016-17		2017-18		2018-19	
	N	%	N	%	N	%
American Indian	0	0%	1	2%	1	2%
Asian or Pacific Islander	0	0%	0	0%	2	3%
African American	0	0%	1	2%	0	0%
Hispanic	8	14%	7	14%	5	8%
Caucasian	50	86%	42	82%	50	85%
Other/Unknown/Multiple	0	0%	0	0%	1	2%
Total	58	100%	51	100%	59	100%



Age (Specify highest level – unduplicated) Academic Year – Fall, Spring, Summer						
Age	2016-17		2017-18		2018-19	
	N	%	N	%	N	%
Under 18	0	0%	0	0%	0	0%
18-24 years	41	71%	37	73%	37	63%
25-34 years	14	24%	12	24%	21	36%
35-44 years	3	5%	2	4%	1	2%
45 and older	0	0%	0	0%	0	0%
Total	58	100%	51	100%	59	100%



Provide narrative for analysis of student demographics. (What are you doing to recruit / retain a diverse student population? Do you have a diverse population of students?)

The majority of dental hygiene students are Caucasian females between the ages of 18-24. There is a slight increase in American Indian and Asian or Pacific Islander ethnic groups, and a slight decrease in the African American ethnic group enrollment. There is a slight increase in students between the ages 25-34 enrolled in the dental hygiene program.

The goal of the dental department is to recruit a diverse population of students. With this in mind, our department participates in recruitment activities that range from high schools, information sessions, career fairs, and meeting individually with interested students. Although recruitment events are in public schools and career fairs they are open to a variety of ages and ethnicities.

Section 4: Program Outcomes

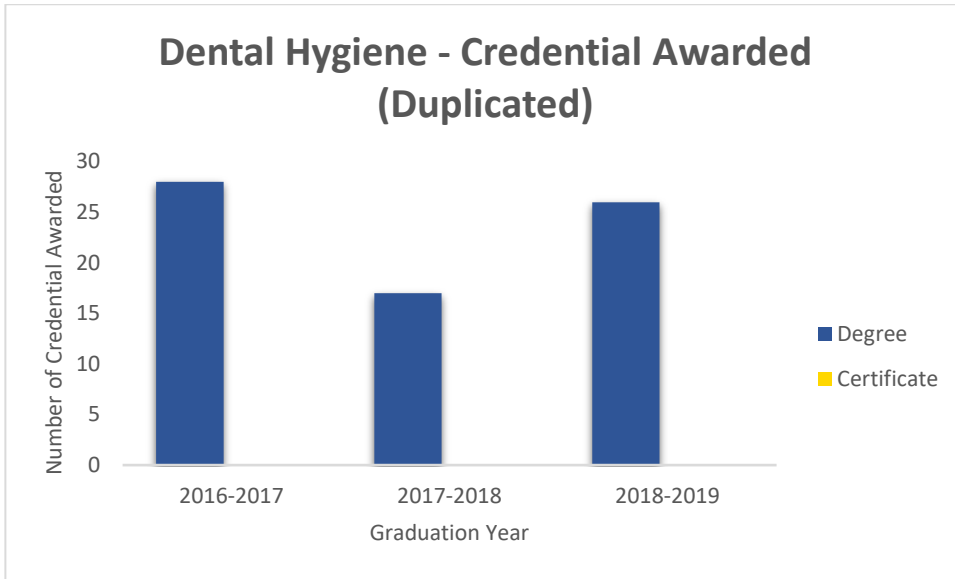
Outcome #1: Completers (unduplicated) (Degree level, highest level of attainment)

Baseline: 23 # (Average of total completers for the last three years – 2016-17; 2017-18; 2018-19)

Standard: 25 #

Target: 27 #

Number of Completers (unduplicated) – Graduation Year – Summer, Fall, Spring				
Graduation Year	Degree	Diploma	Certificate	Total
2016-2017	28	0	0	28
2017-2018	17	0	0	17
2018-2019	26	0	0	26



Provide narrative for analysis of completers. *How might you increase the number of completers in your program?*

The dental hygiene department is beginning to do more remediation with students who show deficiencies. We will continue to work with students prior to students receiving failing grades. Continuing to encourage peer and guided tutoring to assist students in need.

Provide narrative for analysis of completer standard/target. *(As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target?)*

New completer standard and target was set based on the three-year baseline data from 2016-17, 2017-18 and 2018-19. We set the standard at 25 and target at 27.

Identify Completer Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)

1	Peer tutoring with students	Spring 2021	Track number of students/hours and success rate.
2	Guided tutoring with faculty	Spring 2021	Track number of faculty/hours and success rate.

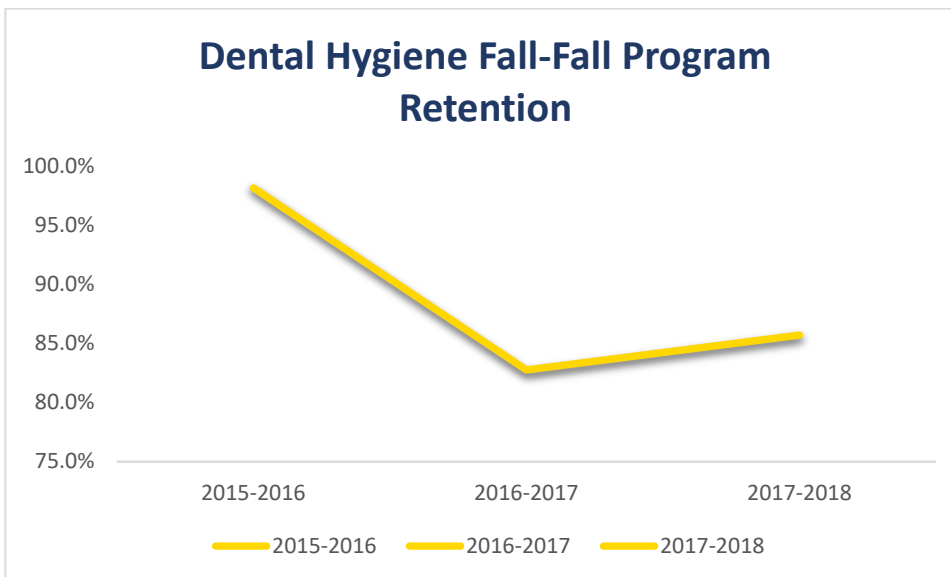
Outcome #2: Retention

Baseline: 88.3 % (Average of last three years – 2016-17; 2017-18; 2018-19; fall-to-fall program retention)

Standard: 90 %

Target: 92 %

Year (Fall to Fall)	Program Fall Enrollment Cohort	Program Completers	Program Returners	Program Non-Completers	Program Transfers	Program Retention
Fall 2016-Fall 2017	58	28	20	9	1	82.8%
Fall 2017-Fall 2018	49	17	25	6	1	85.7%
Fall 2018-Fall 2019	57	26	29	3	3	96.5%



Provide narrative for analysis of program retention. (Based on the data, provide a narrative of your analysis of fall to fall retention. Indicate factors that may have affected your retention. State any changes you plan to address for next year that may affect retention.)

Our retention rate has increased each year. Our department will use guided tutoring to assist in an increased retention.

Provide narrative for analysis of program retention standard/target. (As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target?)

New program retention standard and target was set based on the three-year baseline data from 2016-17, 2017-18, and 2018-19 fall to fall retention.

Identify Retention Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items <i>(Identify action items as a result of your program outcome assessment.)</i>	Target Date <i>(Identify your projected target date for completion of action items.)</i>	Assessment of Action Items <i>(State the method of assessment; how you plan to evaluate/assess the results of the action items.)</i>
1	Guided tutoring with faculty	Spring 2021	Track number of faculty/hours and success rate.
2	Peer tutoring with students	Spring 2021	Track number of students/hours and success rate.

Outcome #3: Job Placement / Employment (to be provided by program)

Baseline: 17 # *(Average number employed for the last three years – 2016-17; 2017-18; 2018-19)*

Standard: 18 #

Target: 19 #

Graduation Year – Summer, Fall, Spring	Completers (unduplicated)	# Employed (within 1 Yr)	Unknown
2016-2017	28	19	9
2017-2018	17	15	2
2018-2019	26	17	9

Provide narrative for analysis of student job placement. *(Are students finding jobs within the program of study?) (How can your program promote higher employment of students in the field?)*

Currently our students are finding jobs at a 71% rate. The dental department is utilizing the College Central Network and the WCC dental Facebook page to post jobs. We also send emails to recent graduates with jobs.

Provide narrative for analysis of standard/target. *(As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target)*

New job placement/employment standard and target was set based on the three-year baseline data from 2016-17, 2017-18, and 2018-19. The dental department has just recently started using the College Central Network to post jobs as potential employers notify the department. We have changed the WCC dental assisting page to the WCC dental page and are posting jobs there also. Personal email accounts are being gathered as students graduate to notify them of current availability.

Identify Job Placement / Employment Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)
1	College Central Network	Spring 2021	
2	Job Postings on WCC Dental Facebook page	Spring 2021	
3	Email recent graduates	Spring 2021	

Outcome #4: Labor Market Data

Provide narrative for analysis of Labor Market Data. (Review Labor Market Data provided in the audit data reports and provide an assessment of the data.)

There are 43 job openings in 2020 with an average salary rate of 35.89 per hour (or \$67,186 annually).

Outcome #5: Licensure and Certification Passing Rates (if applicable)

Baseline: 84% (Average of last three years NCCCS Reports; 2017, 2018, and 2019)
Standard: 85 %
Target: 86 %

Licensure / Certification Exam – Dental Hygiene

NCCCS Report	Exam Year	# Tested	# Passed	% Passing	Index Score
2016	2014-15	19	17	89%	
2017	2015-16	25	22	88%	
2018	2016-17	28	23	82%	
2019	2017-18	17	14	82%	0.95

Provide narrative for analysis of licensure / certification passing rates. (Are you satisfied with your program licensure rates?)

We are not satisfied with our pass rate as it has declined in the last three years.

Provide narrative for analysis of licensure and certification passing rates standard/target. (As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target?)

New licensure/certification passing rate standard and target was set based on the three-year baseline data from 2017, 2018, and 2019 NCCCS Performance Measures for Student Success Reporting Years.

Identify Licensure and Certification Passing Rates Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)
1	Revision of the CD&R exercise to more closely mirror the regional clinical board detection & removal component (8-5-3 criteria). Students will be required to complete the exercise in both the fall & spring semester of their final year.	Spring 2021	Look at % of pass rate
2	Continue implementation of CITA Mock Clinical Examination for DH2 students with use of Calculus Calibrators (DH Planning Objective) to increase calculus detection accuracy.		Look at % of pass rate.

Outcome #6: Third-Party Credentials (if applicable)

Baseline: _____ # (Average number credentials earned for the last three years – 2016-17; 2017-18; 2018-19)

Standard: _____ #

Target: _____ #

Third-Party Credentials

Academic Year Fall, Spring, Summer	Credentials for Program of Study	# Tested (duplicated)	# Passed
2016-2017	Not applicable.		
2017-2018			
2018-2019			

Provide narrative for analysis of third-party credentials. (Are there other industry-recognized credentials that need to be addressed for the program of study?) (What are other means to promote program third-party credentials?)

Not applicable.

Provide narrative for analysis of third-party credentials standard/target. (As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target?)

New third-party credential standard and target was set based on the three-year baseline data from 2016-17, 2017-18, and 2018-19.

Not applicable.

Identify Third-Party Credentials Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)
1	Not applicable.		
2			

Outcome #7: Program Success Rate (all delivery methods) (Program Success Rate tab)

Baseline: 95 % (Average program success students for the last three years – 2016-17; 2017-18; 2018-19)

Standard: 96 %

Target: 97 %

Academic Year Fall, Spring, Summer	Program Enrolled Students	Program Success Students	Program Success Rate
2016-2017	564	538	95%
2017-2018	424	397	94%
2018-2019	532	511	96%

Provide narrative for analysis of student success in program courses. (Ex – Are students more successful in program courses in face to face, online, hybrid, or blended methods of course delivery? In evaluating the methods of delivery, should certain methods of delivery be considered for deletion or modification?)

All dental courses are face-to-face and general education courses are offered in a variety of formats to include face-to-face, online, and hybrid.

Provide narrative for analysis of student success in program courses standard/target. (As a result of the data analysis, indicate changes to the standard or target. Did you meet your standard/target? If you met your standard/target, what percentage would you like to increase your standard/target?)

New program success rate standard and target was set based on the three-year baseline data from 2016-17, 2017-18, and 2018-19.

Identify Student Success in Program Courses Action Items

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)
1	Maintain the student success rate in face to face courses.	Spring 2021	Course success data.
2			

Section 5: Other Assessments

In addition to SACSCOC, is there an accrediting body specifically related to the program? If so, please name the professional organization, describe the program's current status, and most recent date of accreditation.

On-site visit was held March 11-13, 2020. We are awaiting final report from Commission of Dental Accreditation (CODA).

Analysis of other assessments. *(Have you performed other assessments to evaluate the effectiveness of your program, to include surveys, self-assessments, or other assessment used to evaluate the program. If so, please explain how information collected from the(se) assessments will be used to improve the program.)*

Performed a Dental Hygiene Self-Study prior to the on-site visit, Spring 2020. Curriculum Management workshop was performed June 2020.

Post-Graduate Surveys are conducted, along with Student Resource Assessments each Spring 2020.

Identify Other Assessment(s) Action Items (if applicable)

(Address program outcome assessments that fall below the established standard and/or target and additional recommendations resulting from the review.)

Item	Action Items (Identify action items as a result of your program outcome assessment.)	Target Date (Identify your projected target date for completion of action items.)	Assessment of Action Items (State the method of assessment; how you plan to evaluate/assess the results of the action items.)
1	Continue administering the post-graduate and student resource assessment surveys	Spring 2021	Analysis of post-graduate and student resources assessment surveys.
2	Update PLOs and cycle	Spring 2021	Streamline our PLOs to meet CODA recommendations. Update in PLO cycle and College Catalog.

Provide narrative for your program facility needs. If facilities are adequate, please confirm.

Convert our student resource room to a skills lab for guided tutoring. Converting our dark room to dim room for digital radiographs.

Provide narrative for academic / student support services. (Are services adequate for your program?)

Support is adequate.

Planning Objectives (2016-17; 2017-18; 2018-19 – Fiscal Year, July 1-June 30)

Provide a summary of planning objectives submitted for the last three years, including the use of results, of the planning objectives in the table provided.

Summary of Planning Objectives

Planning Year (Fiscal Year – July 1-June 30)	Objective(s) Submitted	Use of Results
2016-17	1) TalEval Grading System with In-Service Training to replace	1) Grading program was implemented in DEN 131 (DH Clinic I) Spring 2017. Additional

	<p>current grading system (approved)</p> <p>2) Fourteen (14) Dental Mobile Units (approved)</p> <p>3) Four (4) Cordless Curing Lights (approved)</p> <p>4) Six (6) Isolite Systems with accessory mouth pieces in different sizes (approved)</p> <p>5) Twelve (12) Frasco Periodontal hinged typodonts, Model A-PZ DA KLAR with clear gingiva (approved in 2015-16 Plan)</p>	<p>faculty training is being sought for July 18, 2017 to facilitate more efficient and accurate use of the program and to answer questions related to current use. 1) Competency requirements were tracked at mid-term and final conferences by DH students. 2) DH1 Student Resource Assessment Survey results- 95% of students generally agree to strongly agree to Instructional Resources: the amount and variety of equipment is sufficient for student performance. 3) 100% of DH students responded either satisfied or very satisfied on the DH Post Graduate Survey, PLO #2 (Perform dental radiographic procedures.....)</p> <p>2) Dental Hygiene students responded to the Student Resource Assessment Survey (SRAS) with 94% generally or strongly agree related to Instructional Resources: The amount of equipment is sufficient for student performance. Carts will continue to be used in the Dental Hygiene Clinic.</p> <p>3) Students responded with 82% either generally or strongly agree on the Student Resource Assessment Survey related to Instructional Resources: The equipment is sufficient for student performance. Curing lights will continue to be used in all DA and DH clinical courses and DEN 104.</p> <p>4) 1) Clinical competency sheet is being developed and will be implemented in Fall 2017 for use in DH clinical courses (DEN 221 and 231). 2) 94% of students responded either generally or strongly agree related to Instructional Resources: The equipment is sufficient for student performance on the Student Resource Assessment Survey. 3) 100% of students responded satisfied or very satisfied on the DH Post Graduate Survey, PLO#3 (Assess, plan, implement and evaluate the appropriate dental health prevention....) Continue to use in DA and DH clinical courses.</p> <p>5) (Carried forward to report use of results and assessment) 91.7% pass rate on the CITA clinical exam for 2016 DH graduates which is a 6% increase from 2015.</p>
2017-18	<p>1) Upgrade and transition from analog radiographs to digital technology as used in current dental offices. (approved)</p>	<p>1) Items have been ordered and partially installed 5/16/2018. Carried forward to 2018-19 plan to report on assessment. Use of this technology was implemented in the fall 2018 semester in DEN 112. Patient use was</p>

	2) Connex CVSM 64MTPX-B DS vital sign monitor for blood pressure, pulse and temperature, 4700-60 mobile stand w/ basket and Flexiport cuff only child (approved)	<p>implemented in spring 2019 in DEN 106, DEN 131 and DEN 231. It is currently being utilized in DEN 107 and 141 for the Summer 2019 term. 92.5% of dental students responded "Strongly Agree to Agree" on the SRAS (student resource assessment survey) to Laboratory equipment: The amount (#19) and variety (#20) of equipment is sufficient for student performance of required laboratory exercises. Faculty and students continue to use the technology.</p> <p>2) Vital Sign Monitor is currently being used in both the DA & DH Clinics. Dental Assisting Resource Assessment Survey results: 84% of DA students responded either generally or strongly agree to the amount & variety of equipment is sufficient for student performance of required lab/clinical exercises. Dental Hygiene Resource Assessment Survey results: 90% of DH students responded either generally or strongly agree to the amount & variety of equipment is sufficient for student performance of required lab/clinical exercises. We will continue to use the Student Resource Assessment Survey (SARS) to analyze dental equipment needs.</p>
2018-19	Upgrade and transition from outdated Panorex machine that uses traditional film to a Digital Panorex technology (not approved)	Not funded, no action required.

Provide narrative for analysis of the program's / discipline's strengths, weaknesses, and opportunities.

Strengths

WCC is one of the oldest dental hygiene programs in NC with a reputation for graduating excellent employees in the dental community. The program prepares students to be well-rounded team players through an understanding of all aspects of job responsibilities in a dental office. This is achieved through experience gained serving as receptionist/secretary assistant, clinic assistant, and sterilization assistant, as well as chairside assistant. The program is well supported by the college with excellent facilities and continued funding. The full-time and part-time faculty are experienced and committed to the student's educational process to become well-qualified dental professionals.

Weaknesses

The dental hygiene program weakness is not utilizing our computer software system for patient charts. We are also struggling with our ADEX Board scores.

Opportunity

The dental department would like to convert the student resource room for skills lab. We are currently converting the dark room into a DIM room for digital radiography.

Section 6: Outcomes Follow-Up and Approvals

Outcomes follow-up to be addressed spring semester following review year (2020-21 and 2021-22).

Review prepared and submitted by: *(Please list name(s) and titles)*

Susan R. Smith, CDA, RDH, MDH

Approvals

- Using DocuSign (electronic signature), appropriate Division Dean is asked to review and approve the Review and Outcome Assessment.
- Using DocuSign (electronic signature), the Office of Institutional Effectiveness (IE) will review the Program/Service Review and Outcome Assessments when completed by the responsible program/service personnel. The Office of Institutional Effectiveness will forward the review documents to the appropriate administrator (VP/AVP) upon completion.
- Using DocuSign (electronic signature), appropriate Vice President/Associate Vice President is asked to review and approve the Review and Outcome Assessments.

Dean Acceptance / Date: Janeil Marak 9/22/2020

IE Acceptance / Date: Dorothy Moore 9/22/2020

Administrator Approval / Date: Patty Pfeiffer 9/22/2020