



## One Year Periodic Program Review Report

Academic Programs

*Dental Programs*

*Certificate-Dental Assisting*

*AAS-Dental Hygiene*

### Statement of Collaboration

The program faculty, college staff, students, and community members listed below collaborated in an open and forthright dialogue to prepare this Periodic Program Review. Statements included herein accurately reflect the conclusions and opinions of this group.

### Participants in the review:

**Department Faculty:** Tracy Gift, Robbi Baleno, Tonya Wade

**Non-discipline Faculty:** None

**Associate Faculty:** None

**Student/Alumni:** First and Second Year Dental Hygiene Students

**Academic Support Staff:** Tess Fike

**Advisory Committee**

**Date Submitted to the Dean of Instruction**

### Authorization

After the document is complete, print just this page and submit it to the Office of Instruction for the Dean's signature.

**Signature of Dean** \_\_\_\_\_

**1. Mission and Goals**

The MCC Dental Programs mission and goals to the college-wide mission and goals.

<p style="text-align: center;"><b>Goals of Mohave Community College Dental Hygiene Program</b></p>	<p style="text-align: center;"><b>1. Educational</b></p>	<p style="text-align: center;"><b>2. Cultural</b></p>	<p style="text-align: center;"><b>3. Civic</b></p>	<p style="text-align: center;"><b>4. Resources</b></p>
<p>Provide the educational environment to support the core competencies of ethics, values, skills, and knowledge required for entry into dental hygiene practice.</p>	√	√		√
<p>Encourage students to take an active role in their education through self-evaluation and by self-monitoring of progress.</p>	√			√
<p>Provide quality oral health services utilizing the dental hygiene Process of Care.</p>	√	√	√	√
<p>Encourage an interest in life-long learning and professional competence through research and professional activities.</p>	√	√	√	√
<p>Provide an environment to support community service events and participation.</p>	√	√	√	√
<p><b>Goals of Mohave Community College The Institution</b></p>				
<p>1. To support an academic learning-centered college, serving all constituencies, inspiring excellence through innovation and empowering students to succeed.</p>				
<p>2. To become a conduit between businesses, organizations, foundations, and the arts to strengthen understanding of the world through education.</p>				
<p>3. To promote active citizenship within the college community.</p>				
<p>4. To provide resources needed to achieve the mission and vision.</p>				

**Certificates and Degrees**

AAS – Dental Hygiene

Certificate – Dental Assisting

**Mission and Goals**

MCC DENTAL PROGRAMS MISSION STATEMENT

Mohave Community College Dental Programs is dedicated to student success and learning by providing diverse educational opportunities, excellence in teaching and encouragement of lifelong learning and professional development.

#### MCC DENTAL PROGRAMS VISION STATEMENT

We believe that the educational experience is a life-long process. We vow to treat students with respect and as colleagues from day one. We will approach education in a timely, purposeful way. Further we agree to be attentive to any student who feels this philosophy is not being met. Our primary purpose is to provide the highest quality of education while recognizing and respecting the dignity of each individual. Students, while having the responsibility of their own learning are provided a physical and emotional atmosphere conducive to learning. Mutual respect between faculty, staff and students will be demonstrated in all endeavors. Students will be encouraged to attain their professional goals while realizing their individual potential as learners and newly licensed professionals

We believe our mission is to work effectively together, and with students, to provide an educational setting where students have the opportunity to become dental professionals who are personally, professionally, and socially effective.

Students will understand that serving the needs of the public who seek treatment in our clinic involves respecting the individuality, dignity, and rights of every person regardless of race, color, creed, national origin, sexual orientation, and socioeconomic or medical/dental status.

Graduates of our program will understand that dental hygiene is a multi-faceted health profession. As a member of that profession they are expected to serve humanity competently whether as a clinician, educator, consumer advocate, researcher, or change agent.

#### GOALS

The goals of the Dental Hygiene Program include:

1. Provide the educational environment to support the core competencies of ethics, values, skills and knowledge required for entry into dental hygiene practice.
2. Encourage students to take an active role in their education through self-evaluation and self-monitoring of progress.
3. Provide quality oral health services utilizing the dental hygiene Process of Care.
4. Encourage an interest in life-long learning and professional competence through research and professional activities.
5. Provide an environment to support community service events and participation.

## 2. Program Data and Trend Analysis

### 2.1. Data

2.1.1. Program Resources (Profit/Loss):

#### Dental Hygiene

	2012	2013	2014
Program (Prefix)	DEH	DEH	DEH
COUNTS			
Number of Sections	16	16	16

Unduplicated Student Headcount	32	32	37
Duplicated Student Enrollment	256	259	284
Credit Hours	888	893	1024
<b>REVENUE SOURCES</b>			
Tuition	<b>\$87,324.00</b>	\$96,096.00	88,640.00\$
Course_Fees (2014 includes Program Fees where applicable)	\$0.00	\$0.00	\$197,585.00
Program Fees: 2012 and 2013 only	\$91,200.00	91,200.00 \$	\$
Instructional Income: Tuition + Course Fees + Program Fees	\$	\$	\$
State Allocation based on hours	\$20,623.00	\$21,283.00	\$24,655.43
Revenues: Instructional Income + State Allocation	\$188,132.99	\$296,900.00	\$310,880.43
State Allocation as a % of Revenues	%	%	%
<b>EXPENSES</b>			
Expenses	248,825.08	240,321.04	\$434,456.71
Net: Revenues – Expenses	<b>178,227</b>	<b>151,241</b>	<b>(123,576.28)</b>
Non-Faculty Costs: Those not related to faculty wages or benefits			\$182,660.28
2nd Net: Net + Non-Faculty Costs			<b>\$59,084.00</b>

## Dental Assisting

	2012	2013	2014
Program (Prefix)	DAE	DAE	DAE
<b>COUNTS</b>			
Number of Sections	9	9	9
Unduplicated Student Headcount	15	22	12
Duplicated Student Enrollment	97	142	61
Credit Hours	261	401	173
<b>REVENUE SOURCES</b>			
Tuition	\$20,064.00	\$43,914.00	\$13,840.00
Course_Fees (2014 includes Program Fees where applicable)	\$11,060.00	\$18,420.00	\$9,350.00
Program Fees: 2012 and 2013 only	\$0.00	\$	\$
Instructional Income: Tuition + Course Fees + Program Fees	\$	\$	\$
State Allocation based on hours	\$6,061.00	\$8,334.00	\$4,165.42
Revenues: Instructional Income + State Allocation	\$34,764.91	\$71,028.00	\$27,355.42
State Allocation as a % of Revenues	%	%	%
<b>EXPENSES</b>			
Expenses	22,065.69	24,674.88	\$19,739.96
Net: Revenues – Expenses	<b>?</b>	<b>?</b>	<b>\$7,615.46</b>
Non-Faculty Costs: Those not related to faculty wages or benefits			\$1,356.00
2nd Net: Net + Non-Faculty Costs			<b>\$8,971.46</b>

The data received from IR is difficult to interpret, and the Office of Instruction was not able to provide other data sources. The program resources have been adequate to provide instruction for students. Office space, classroom and lab space, as well as clinic space meet the program needs. However, the clinic and its equipment have been in service for more than a decade making planning for future updates and replacements important. The use of Perkins funds has enabled the program to maintain a high level of clinical technology.

2.1.2. *Student Metrics*: It is believed that this data is inaccurate. However, the program actively seeks male students, into what are female-dominated fields. The DH class of 2015 graduated two males. The dental hygiene program seems to primarily attract white females in their twenties. While the dental assisting program is trending toward a higher percentage of non-white students, primarily Hispanic females. Attracting males to the dental assisting program is challenging.

**DEH**

**Dental Hygiene**

	2014
Demographic	Count
Ethnicity	
2 or more races	0
Asian	1
Black	0
Hispanic	4
Native American	0
Nonresident Alien	0
Pacific Islander/Hawaiian	0
Unknown	1
White	32
Age Group	
18-19	0
20-21	5
22-24	16
25-29	9
30-39	4
40-49	2
50-59	1
60-100	0
Gender	
Female	35
Male	2
Unreported	

Dental Hygiene	
Retention	
2013FA to 2014FA Retention Rate	100%
Graduation	
July 1, 2014 to June 30, 2015 Graduates (Count)	19

2013FA continued to 2014FA	19
2013FA Count of this major	19
Retained Count	19

## DAE

### Dental Assisting

	2014
Demographic	Count
Ethnicity	
2 or more races	0
Asian	1
Black	0
Hispanic	5
Native American	0
Nonresident Alien	0
Pacific Islander/Hawaiian	0
Unknown	1
White	7
Age Group	
18-19	2
20-21	1
22-24	1
25-29	6
30-39	2
40-49	0
50-59	0
60-100	0
Gender	
Female	11
Male	1
Unreported	

2.1.3.*Instructional Productivity*: The dental hygiene program is a lock-step program which does not allow any student course choice. Courses must be taken when offered, therefore, only one section of each course is offered biannually.

2.1.4.*Enrollment Trends*: Please provide commentary on the enrollment trends for the program(s). The dental hygiene program has focused on ensuring that the fall semester year one begins with a full cohort of students. As a result declining applications, several students have been accepted who did not meet minimum standards. Unfortunately, this has resulted in a decrease in board pass rates.

2.1.5.*Faculty Data Points*: Program years 2012-13 and 2013-14 had no change in program faculty and fairly consistent board exam results. The 2<sup>nd</sup> year dental hygiene coordinator retired at the end of the spring 2014 semester. The start of the 2014-15 academic year had significant change in Dental Programs. A new resident faculty position was added for dental assisting and a new 2<sup>nd</sup> year dental hygiene coordinator was hired. The addition of the resident dental assisting faculty member has had an impact on success in the dental assisting program. However, the new hire 2<sup>nd</sup> year dental hygiene coordinator has negatively

impacted board results. This person is no longer employed by MCC, with the duties being taken over by the dental programs director for 2015-16.

2.1.6. *Other Data Points:* The dental assisting program had a 100% pass rate in radiology certification. The 2015 dental hygiene program graduates while the largest graduation class to date, has struggled with passing board examinations. Six (6/19) students failed the NBDHE on the first attempt, and of those two failed a second attempt and third attempt. In addition, the WREB DH Clinical exam resulted in 14 successes on the first attempt; two successes on the second attempt; two successes on a third attempt; and one success on a fourth attempt after the required remediation.

## **2.2. Strengths, Weaknesses, Opportunities, Threats (SWOT)**

The following information was collected through meetings with students, the advisory committee and faculty and staff.

2.2.1. What are the strengths of your program as indicated in the above data?

- Convenience
- Experienced program leadership
- Instructor knowledge and experience
- Team-oriented atmosphere
- Availability of instructional technology
- Small class size
- Good reputation in the dental hygiene community
- Accessibility/open door policy
- Increase employment rates
- Collaboration
- Programs are the gold standard
- Externships enable real world experience
- Curriculum

2.2.2. What are the weaknesses of your program as indicated in the above data?

- Newer generations of students are less prepared for college
- Slow computers
- Difficulty controlling temperatures in the clinic and classroom
- Professional support-Lack of dentist availability
- Equipment malfunction
- Parking
- Operatories are too small
- Number of DH program applicants

2.2.3. What opportunities exist for your program based on the above data?

- Healthcare jobs survive economic difficulties
- Laser certification
- Use of chemotherapeutics
- Community outreach
- Working with various dentists
- Various educational resources
- Writing extensive curriculum improves student writing
- Ability to attract students from outside the area
- Career/college fairs
- Advisory committee
- Develop a working dental clinic
- Transferability to degree complete
- Continuing education

2.2.4. What threats exist for your program based on the above data?

- Increased competition from new dental hygiene programs
- Disease transmission
- Injury
- More DH graduates makes job placement more difficult
- Patient availability
- Tobacco is permitted on campus
- Dental community vision for DA could be OTJ trained could be good enough
- DH job market
- Amount of required credit hours

### 3. Assessment of Student Learning

3.1. What percentage of courses have identified student learning outcomes (SLOs)?

Over the last several years, the dental hygiene and dental assisting programs have participated in the college's assessment process, including the following courses: DEH 110, DEH 202, DEH 203, and DAE 106.

3.2. What percentage of courses have ongoing SLO assessment? (comment on progress/lack of progress)

Four (4/17) dental hygiene courses have participated in SLO assessment projects, or 18%. One dental assisting course (1/9) has participated in SLO assessment, or 11%.

3.3. How has assessment of course level SLOs led to improvements in student learning and achievement?

The Process of Care (POC) process has been modified due to feedback from SLO assessment. Modifications include introducing the POC earlier in the curriculum, utilizing real patients in the POC and updating of clinic forms. Dental programs have updated the radiography courses to one combined course for dental assisting and dental hygiene student which resulted in a stronger academic pathway. Research Strategies (DEH 110) was developed and then eliminated due to the results of SLO.

3.4. How has assessment of program-level SLOs led to improvements in transfer or certificate/degree awards?



A stronger pathway has been developed between the dental assisting and dental hygiene programs.

3.5. What challenges remain to make course and program level SLOs more effective?

Ensuring that adequate attention is paid to both programs is a challenge.

#### **4. Evaluation of Progress Toward Previous Goals**

4.1. Evaluate steps taken to achieve goals established in the last periodic program review.

The dental hygiene program continues to maintain CODA accreditation without reporting requirements.

4.2. In cases where resources were allocated towards goals, evaluate the efficacy of that spending.

N/A

#### **5. Program Goals and Plan**

5.1. Short-term Goals (two year cycle):

Goal 1: Ninety percent of graduates will pass clinical boards on the first attempt.

Measurable Outcome: Success will be determined by WREB Dental Hygiene Clinical board exam results.

Plan: Provide faculty calibration training at the beginning of each semester. Whenever possible pair a full-time faculty member with a clinical faculty member. Provide detailed feedback to students after the mock board.

Responsible Party(ies): Tracy Gift

Goal 2: Ninety-five percent of graduates will pass the National Board Dental Hygiene Examination (NBDHE) on the first attempt.

Measurable Outcome: Success will be determined by NBDHE board results.

Plan: Provide ongoing practice of board type questions by sharing HygienistPrep daily questions to second year dental hygiene students. Determine if a correlation exists between entrance requirements and pass rates by only accepting students who meet the stated minimum standards. Prohibit students from taking the NBDHE board until after graduation.

Responsible Party(ies): Tracy Gift, Robbi Baleno

What specific aspects of these goals can be accomplished without additional financial resources?

Both goals can be accomplished without additional financial resources, assuming there are adequate applicants to fill the DH program. If there are insufficient numbers of applicants, and less than 18 students are accepted, there would be a decrease in tuition.

5.2. Long-term Goals (four year cycle):

Goal 1: Ninety percent of dental hygiene students will pass the WREB Anesthesia exam before graduation.

Measurable Outcome: Success will be determined by WREB Anesthesia exam results.

Plan: Provide ample practice injection opportunities for students during summer session. Schedule the mock anesthesia board exam for earlier in the semester to allow enough time to register for the WREB. Begin discussing the opportunity to take WREB early in the program.

Responsible Party(ies): Tracy Gift, Steve Smith

Goal 2: Twenty percent of dental assisting students will continue into the dental hygiene program within five years.

Measurable Outcome: Success will be determined by comparing students accepted into the dental hygiene program with graduates of the dental assisting program.

Plan: Provide additional opportunities for integration between the programs. Discuss alternate dental careers with dental assisting students.

Responsible Party(ies): Tracy Gift, Tonya Wade

What specific aspects of these goals can be accomplished without additional financial resources?

These goals should be able to be accomplished without additional resources.

**6. Requests for Resources N/A**

**7. Executive Summary**

- Both programs benefit from instructor knowledge and experience, teamwork and collaboration. In addition, ongoing assessment and curriculum develop keep the programs on the cutting edge. Both programs and the dental hygiene clinic have excellent reputations in the community.
- Please list 3 – 5 areas of enhancement for the program(s). Both programs would be enhanced by a facilities modification to enable more seamless use of the retro-fitted technology for electronic health records and digital radiography. Dentist supervision has been a recurrent challenge; patient scheduling modifications have alleviated some of the concern but the solutions often make it more difficult to attract patients. The number of dental hygiene program applicants has been averaging approximately 20 applicants per year. Reaching out to other rural areas outside of the Phoenix area is a priority. The academic strength of program applicants is a challenge.
- Please identify ways the department will address student learning (assessment efforts, curricular redesign, etc.). Returning to an emphasis on learning not just dental skills but employability skills, such as professionalism, attendance and respect is required. A student contract is being developed which will require students to demonstrate understanding of graduation requirements. Early identification of student difficulties has been an ongoing focus, with those students being offered tutoring both within and outside the program.
- Based on programmatic analysis, please list 2 – 3 specific questions or areas which you would like the program reviewers to comment on or make recommendations. What resources are available to assist instructors who are struggling with students who don't take responsibility for learning? What budget planning assistance is available should the program have less than 18 students? How can we plan for a clinic upgrade?
- Identify any requests for resources that result from this review.

**Who to Call?**

Questions about any report sections, resource allocations/budget requests.	Office of Instruction	Jill Loveless, Dean of Instruction ext. 1918
Questions about assessment of student learning.	Office of Instruction	Jen Shumway, Director of Curriculum and Assessment
Need more data?	Institutional Research	Bob Faubert, IR Director ext. 1140