PROGRAM NAME: Dental Hygiene

INSTRUCTIONAL PROGRAM REVIEW

The timeframe of program review is five years, including the year of the review. Data being reviewed for any item should go back the previous four years, unless not available. Questions regarding forms, calendars & due dates should be addressed to the I.E. Department.

I. PROGRAM RELATIONSHIP TO THE COLLEGE MISSION & STRATEGIC PLAN

A. Describe how the program supports the college mission and core values.

1. The mission of the Collin County Community College District is a "student and community-centered institution committed to developing skills, strengthening character, and challenging the intellect." The Dental Hygiene program supports the mission by providing a supportive and enrichment learning environment through lifelong learning and individual growth for each dental hygiene student. Faculty members assure the success of students by providing one-on-one mentoring and assistance in a program that maintains a high-rigorous curriculum, utilizing didactic, research-based, and practical learning strategies. The Dental Hygiene program organizes lifelong activities that benefit the students and faculty alike, including John R. Roach Juvenile Detention Center and The Samaritan Inn Oral Health prevention programs and continuing education, respectively. Providing the highest standards of care, within the resources available, the program meets individual and community needs. The Dental Hygiene Clinic at the Central Park Campus serves approximately 500 community patients/clients each year, providing excellent oral care services at deeply discounted rates. In partnership with North Texas Dental Society, the program also provides free oral and preventive care services worth $75,000-100,000 through the "Give Kids a Smile" program annually.

2. The philosophy of the Dental Hygiene program is to achieve its mission by promoting the facilitation of learning in a positive and supportive manner and offer open involvement and active participation in the learning and decision-making process based on logical, ethical, and legal judgment. Positive and supportive learning in the dental hygiene program includes a focus on problem-based learning in entry level courses during the first year of the curriculum and case-based learning and the application of critical thinking skills during the second year of the curriculum. Student participation in the decision-making process is exhibited through data compilation from student surveys, including Senior Curriculum Evaluation, Senior Clinic Evaluation, Achievement of Dental Hygiene Program Goals for First and Second Year Students and Faculty, and Clinical/Field Instruction. Professional judgment that concentrates on ethical and legal issues for dental hygiene students is gained through an exposure to a variety of experiences, including legal lectures focused on dental hygiene litigation case scenarios and ethical dilemmas, Texas Dental Practice Act and Occupation Codes, Ethic and Jurisprudence education, and current legislative issues related to the dental profession. Further, the
program promotes pride and commitment to the profession, an appreciation of the roles of the individual members of the healthcare team and the importance of cooperation and sharing within the team. Coordinated, planned, and facilitated regular faculty meetings and planned advisory committee meetings illustrate sharing within the team. Additionally, dental hygiene team cooperation is demonstrated by the coordination, evaluation, and refinement of the Dental Hygiene Competency/Service Learning Portfolio. Finally, the Dental Hygiene program recognizes dignity and worth in all individuals by utilizing employer surveys that evaluate students' ability to maintain confidentiality, respect the dignity of patients/clients, and actively improve skills through professional development.

3. The goals of the dental hygiene program support the college core value of learning by creating an active learning environment that integrates the principles of evidence-based research while promoting critical thinking, self-evaluation, innovation, creativity, and lifelong learning. Annual table clinic research projects and oral presentations at the Annual Texas Dental Hygienists' Association and Greater Collin County Dental Hygienists' Association Meetings illustrate evidenced-based learning activities that support the core values of learning, service and involvement, and academic excellence. The program provides clinical experiences with community clinical partners that promotes a commitment to community service and civic involvement. Community partners with expertise in periodontology, pathology, pharmacology, and oral medicine provide students with the knowledge and clinical competence required to provide current, comprehensive dental hygiene services in a variety of settings for individuals of all ages and stages of life, including those with special needs. Competence in all areas of the curriculum is validated through completion of the Dental Hygiene Portfolio which demonstrates critical thinking skills by showing individual competence in each of the program competencies. Lastly, the Dental Hygiene program supports the college core values of dignity and respect, academic excellence, learning, and creativity and innovation by treating each patient/client with dignity and respect, by creating an environment that promotes the importance of wellness in both students and patient/clients, and by understanding the relevance and integration of preventive dental hygiene services in an evolving health care system.

B. Describe how the program supports the college strategic plan.

4. The Dental Hygiene program supports the college Strategic Goal #1: to improve academic success by implementing strategies for completion through sequencing and distributing dental hygiene didactic and clinical courses throughout the program. Each level builds on the previous one, and increases in difficulty and complexity. Courses are arranged in progressive order and clinical courses are graded with a progressive weight system that reflects the increasing level of competency expected of each student. Strategic Goal #2: to provide access to innovative higher education programs that prepare students for constantly changing academic, societal, and career/workforce opportunities by providing technical programs leading to associate degrees and certificates designed to develop marketable skills, and promoting economic development through transferable college credits which enable students to continue their studies at the baccalaureate level. An articulation degree completion agreement with
Texas Woman's University's dental hygiene program and forty-four dental hygiene online degree completion programs illustrate innovative higher education programs available to students. Strategic Goal #3: to engage faculty, students, and staff in improving a district-wide culture of adherence to the Collin College Core Values through learning, service and involvement, academic excellence, dignity and respect, and creativity and innovation. Engaging faculty, students, and staff in learning is demonstrated by creating an active learning environment that integrates the principles of evidence-based research while promoting critical thinking, self-evaluation, innovation, creativity, and lifelong learning. Clinical experiences that promote a commitment to community service and civic involvement represents the core value of service and involvement. Academic excellence is demonstrated by providing comprehensive dental hygiene services in a variety of settings for individuals of all ages and stages of life including those with special needs. The dental hygiene program promotes dignity and respect by emphasizing the importance of treating each patient/client courteously. Finally, providing integrated preventive dental hygiene services to a diverse community in an evolving health care system displays creativity and innovation.  

Strategic Goal #4: to enhance the College's presence in the community by increasing awareness, cultivating relationships, building partnerships, and developing resources to respond to current and future needs are upheld by the dental hygiene program by providing workforce, economic, and community development initiatives designed to meet local and statewide needs. Community partnerships and relationships are developed by participation in multiple community rotations, including: Plano Headstart; Allen Senior Center; Plano Senior Center; Texas Scottish Rite Hospital for Children; John R. Roach Juvenile Detention Center; Frisco Early Childhood School-Head Start-Parent Education; Allen Outreach-Head Start-Parent Education; Colonial Lodge Assisted Living; Hunter's Glen Baptist Church; The Samaritan Inn; and Meadows Elementary School.

II. PROGRAM CURRICULUM
Sections A, B & C apply only to workforce programs.

A. Attach all course syllabi with SCANS included. (Workforce Programs only)

B. Show evidence that the THECB standards listed below have been met. For any standard not met, describe the plan for bringing the program into compliance. (Workforce Programs only)
   
   1. Credit Hour Standard: There are no more than 60 credit hours in the program plan.

   Number of semester credit hours (SCH) in the program plan: Currently 72.

   If there are more than 60 SCH in the plan, show revision of curriculum. Work with the program’s curriculum coordinator
to bring the revised program plan to the Curriculum Advisory Board (CAB).

At the November 2013 Curriculum Advisory Board meeting, the letter of justification related to the (19 TAC 9. 182-9.184) Texas Higher Education Coordinating Board (THECB) recommendations for reducing credit hours for all associate degree programs in Texas from 72 hours to a minimum of 60 was discussed. At the annual Director's meeting, the Directors unanimously voted to draft the letter of justification to keep the 72 credit hours for all dental hygiene programs. The letter will be presented to the THECB and if approved, no credit hours will be changed. If the letter of justification is not approved, the dental hygiene curriculum will need to have revisions to meet the state recommendations. The advisory committee members were in favor of keeping the 72 hours, but understand if the letter of justification is not accepted, the dental hygiene curriculum will need revisions to meet state recommendations. (See Appendix A: Letter of Justification)

2. Completers Standard: Average 25 completers over the last five years or five completers per year.

   Number of completers:  
   2009- 15 students
   2010- 16 students
   2011- 15 students
   2012- 16 students
   2013- 16 students

   If below the state standard, attach a plan for raising the number of completers by addressing barriers to completion and/or by increasing the number of student enrolled in the program. Definition of completer—Student has met the requirements for a degree or certificate (Level I or II)

7. Licensure Standard: 90 % of first time test takers pass the Licensure exam.

   If applicable, include the licensure pass rate: 2009- 100%

8. 2010- 100%
9. 2011- 100%
10. 2012- 100%
11. 2013- 100%

For any pass rate below state standard, attach a plan for raising the pass rate.
n/a

C. Current Curriculum (Workforce Programs only)

1. Is the program curriculum up-to-date? Please review Collin College’s program curriculum at the following levels:
   a. Compared to similar programs at peer schools,
   b. Compared to the first two years of baccalaureate requirements in related fields at Collin College’s top ten transfer institutions or existing articulation agreements, and
   c. Any professional association standards or guidelines that may exist relevant to the program.

If the program curriculum differs significantly from these benchmarks, explain how the Collin College curriculum benefits students and other college constituents.
The Dental Hygiene program was updated and reviewed as part of an accreditation review in fall 2013.

2. Advisory Committee
   a. How many employers does your Advisory Committee have? Five employers: Dr. Brad Dean; Dr. David McCarley; Dr. John Wise; Dr. Mila Davis; and Dr. Henry T. Liao
   b. The Advisory Committee members include: Dr. E. T. Boon; Dr. Brad Dean; Cathy Nobles, RDH, (Chair); Dr. David Canfield; Dr. John Wise; Lana Crawford, RDH; Dr. Mila Davis; Mary Manos; Dr. Henry T. Liao; and Ex-Officio Members Susan Moss, RDH; Joanne Fletcher, RDH; Christine McClellan, RDH; Tammy Hale, RDH; Emily Henderson; Raul Martinez (Associate Dean Health Sciences); and Dr. Sherry Schumann (Vice President/Provost)

How many attended the last two meetings? Three employers attended Advisory Committee meeting in April 2013 and three employers attended in November 2013.
Have they contributed any resources to the program (time, equipment, supplies, money, co-op spots)?

☐ Yes  ☐ No  If Yes, briefly describe contributions in Table V.

c. Status of Advisory Committee curriculum recommendations:

Briefly summarize the curriculum recommendations made by the Advisory Committee over the last five years. Advisory Committee members are judges who evaluate student table clinics/research projects. No curriculum revisions have been recommended by advisory members due to the success of the current program outcomes. In November 2013, the Advisory Committee members recommended to submit a letter of justification to the Texas Higher Education Coordinating Board (THECB) that supported keeping the current number of credit hours to 72 for dental hygiene programs. The THECB decision is currently pending.

Briefly explain why any Advisory Committee recommendations were not followed (budget limitations, prohibited by accrediting bodies or regulations, not feasible, not appropriate for college mission, lack of qualified faculty, etc.).

All recommendations have been adopted.

How might these barriers to implementation be overcome, if appropriate?

n/a

3. Provide the program-level SCANS matrix or a curriculum map that shows every program outcome is supported by at least two courses and every course supports at least one program outcome to demonstrate that the program curriculum sufficiently addresses the acquisition of the foundational skills and knowledge required for students to achieve competency in the program outcomes? DHYG 1331:  I. Professionalism and Professional Growth and Development

4.  1. Ethics:

5.  1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

6.  1.2 Serve all patients and the community without discrimination.

7.  1.3 Provide humane and compassionate care to all patients.
8. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.
9. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.
10. 1.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.
11. 2. Information Management and Critical Thinking:
12. 2.1 Solve problems and make decisions based on accepted scientific principles.
13. 2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.
14. 2.3 Commit to self-assessment and life long learning in order to provide contemporary clinical care.
15. 3. Professional Identity:
16. 3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.
17. 3.2 Promote the values of the profession outside of dentistry.
18. II. Health Promotion/Disease Prevention/Service Learning
19. 4. Self-Care Instruction:
20. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.
21. III. Patient Care
22. 6. Assessment:
23. 6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.
24. 6.2 Determine medical and oral conditions and behaviors and patients at risk for medical emergencies that require special precautions or considerations prior to or during dental hygiene treatment.
25. 6.3 Perform an extraoral and intraoral examination and accurately record the findings.
26. 6.4 Accurately perform and record an examination of the teeth and determine the need for referral to the appropriate health care professional.
27. 6.5 Evaluate the periodontium, and identify conditions and behaviors that compromise periodontal health and function.

28. 8. Implementations:

29. 8.1 Provide an environment conducive to health by applying basic and advanced principles of dental hygiene instrumentation without causing trauma to hard or soft tissues while controlling pain and anxiety utilizing acceptable clinical techniques.

30. 8.2 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

31. DHYG 1301: I. Professionalism and Professional Growth and Development

32. 2. Information Management and Critical Thinking:

33. 2.1 Solve problems and make decisions based on accepted scientific principles.

34. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

35. DHYG 1227: I. Professionalism and Professional Growth and Development

36. 1. Ethics:

37. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

38. 2. Information Management and Critical Thinking:

39. 2.1 Solve problems and make decisions based on accepted scientific principles.

40. 2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.

41. 2.3 Employ the principles of scientific writing.

42. 2.4 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

43. 3. Professional Identity:
45. 3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.

46. II. Health Promotion/Disease Prevention/Service Learning

47. 4. Self-Care Instruction:

48. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

49. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

50. DHYG 1261: I. Professionalism and Professional Growth and Development

51. 1. Ethics:

52. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

53. 1.2 Serve all patients and the community without discrimination.

54. 1.3 Provide humane and compassionate care to all patients.

55. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

56. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

57. 1.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

58. 1.7 Use peer assistance and peer review programs when confronted with the incompetent, impaired or unethical colleague.

59. 2. Information Management and Critical Thinking:

60. 2.1 Solve problems and make decisions based on accepted scientific principles.

61. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

62. 2.3 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

63. 3. Professional Identity:
64. 3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.
65. 3.2 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.
66. 3.3 Promote the values of the profession outside of dentistry.
67. II. Health Promotion/Disease Prevention/Service Learning
68. 4. Self-Care Instruction:
69. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.
70. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.
71. 4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.
72. 5. Community Involvement and Service Learning:
73. 5.1 Use screening, referral and education to bring consumers into the health care delivery system.
74. III. Patient Care
75. 6. Assessment:
76. 6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.
77. 6.2 Determine medical and oral conditions and behaviors and patients at risk for medical emergencies that require special precautions or considerations prior to or during dental hygiene treatment.
78. 6.3 Perform an extraoral and intraoral examination and accurately record the findings.
79. 6.4 Accurately perform and record an examination of the teeth and determine the need for referral to the appropriate health care professional.
80. 6.5 Identify the need for radiographs and distinguish normal from abnormal anatomical findings.
81. 6.6 Evaluate the periodontium, and identify conditions and behaviors that compromise periodontal health and function.

82. 6.7 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

83. 7. Planning:
84. 7.1 Determine priorities and establish oral health goals with the patient/family and/or guardian as an active participant and obtain written consent based on a thorough case presentation.

85. 7.2 Acknowledge cultural differences in populations when planning treatment.

86. 7.3 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

87. 7.4 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine it’s congruence with over-all plan for the oral health.

88. 8. Implementations:
89. 8.1 Obtain radiographs of diagnostic quality.

90. 8.2 Provide an environment conducive to health by applying basic and advanced principles of dental hygiene instrumentation without causing trauma to hard or soft tissues while controlling pain and anxiety utilizing acceptable clinical techniques.

91. 8.3 Select and administer the appropriate chemotherapeutic agents (e.g., preventive, antimicrobial, desensitizing) and provide pre- and post-treatment instructions.

92. 8.4 Provide adjunct dental hygiene services that can be legally performed in the State of Texas.

93. 8.5 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

94. 9. Evaluation:
95. 9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule and referral.
96. 9.2 Determine the patients satisfaction with the dental hygiene care received and the oral health status achieved.

97. DHYG 1304: I. Professionalism and Professional Growth and Development

98. 1. Ethics:
99. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

100. 1.2 Serve all patients and the community without discrimination.

101. 1.3 Provide humane and compassionate care to all patients.

102. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

103. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

104. 1.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

105. 2. Information Management and Critical Thinking:
106. 2.1 Solve problems and make decisions based on accepted scientific principles.

107. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

108. III. Patient Care
109. 6. Assessment:
110. 6.1 Accurately perform and record an examination of the teeth and determine the need for referral to the appropriate health care professional.

111. 6.2 Identify the need for radiographs and distinguish normal from abnormal anatomical findings.

112. 6.3 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

113. 7. Planning:
114. 7.1 Acknowledge cultural differences in populations when planning treatment.
115. 7.2 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

116. 7.3 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine it’s congruence with over-all plan for the oral health.

117. 8. Implementations:

118. 8.1 Obtain radiographs of diagnostic quality.

119. 8.2 Provide adjunct dental hygiene services that can be legally preformed in the State of Texas.

120. 8.3 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

121. DHYG 1235: I. Professionalism and Professional Growth and Development

122. 1. Ethics:

123. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

124. 2. Information Management and Critical Thinking:

125. 2.1 Solve problems and make decisions based on accepted scientific principles.

121. DHYG 1207: I. Professionalism and Professional Growth and Development

127. 1. Ethics:

128. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

129. 1.2 Serve all patients and the community without discrimination.

130. 1.3 Provide humane and compassionate care to all patients.

131. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

132. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

133. 2. Information Management and Critical Thinking:

134. 2.1 Solve problems and make decisions based on accepted scientific principles.
135. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

136. 2.3 Employ the principles of scientific writing.

137. II. Health Promotion/Disease Prevention/Service Learning

138. 4. Self-Care Instruction:

139. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

140. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

141. 4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.

142. 5. Community Involvement and Service Learning:

143. 5.1 Identify services and agencies that promote oral health and prevent oral disease and related conditions.

144. III. Patient Care

145. 6. Assessment:

146. 6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.

147. 6.2 Identify patients at the risk for nutritional deficiencies using assessment data.

148. DHYG 1319: I. Professionalism and Professional Growth and Development

149. 1. Ethics:

150. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

151. 1.2 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

152. 2. Information Management and Critical Thinking:

153. 2.1 Solve problems and make decisions based on accepted scientific principles.
154. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

155. II. Health Promotion/Disease Prevention/Service Learning

156. 4. Self-Care Instruction:

157. 4.1 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

158. 7. Planning:

159. 7.1 Determine priorities and establish oral health goals with the patient/family and/or guardian as an active participant and obtain written consent based on a thorough case presentation.

160. 7.2 Acknowledge cultural differences in populations when planning treatment.

161. 7.3 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

162. 7.4 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine its congruence with over-all plan for the oral health.

163. 8. Implementations:

164. 8.1 Provide adjunct dental hygiene services that can be legally preformed in the State of Texas.

165. 8.2 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

166. DHYG 2361: I. Professionalism and Professional Growth and Development

167. 1. Ethics:

168. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

169. 1.2 Serve all patients and the community without discrimination.

170. 1.3 Provide humane and compassionate care to all patients.

171. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.
172. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

173. 1.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

174. 1.7 Use peer assistance and peer review programs when confronted with the incompetent, impaired or unethical colleague.

175. 2. Information Management and Critical Thinking:

176. 2.1 Solve problems and make decisions based on accepted scientific principles.

177. 2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.

178. 2.3 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

179. 2.4 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

180. 3. Professional Identity:

181. 3.1 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.

182. 3.2 Promote the values of the profession outside of dentistry.

183. II. Health Promotion/Disease Prevention/Service Learning

184. 4. Self-Care Instruction:

185. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

186. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

187. 4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.

188. 5. Community Involvement and Service Learning:
189. 5.1 Use screening, referral and education to bring consumers into the health care delivery system.

190. III. Patient Care

191. 6. Assessment:

192. 6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.

193. 6.2 Determine medical and oral conditions and behaviors and patients at risk for medical emergencies that require special precautions or considerations prior to or during dental hygiene treatment.

194. 6.3 Perform an extraoral and intraoral examination and accurately record the findings.

195. 6.4 Accurately perform and record an examination of the teeth and determine the need for referral to the appropriate health care professional.

196. 6.5 Identify the need for radiographs and distinguish normal from abnormal anatomical findings.

197. 6.6 Evaluate the periodontium, and identify conditions and behaviors that compromise periodontal health and function.

198. 6.7 Identify patients at the risk for nutritional deficiencies using assessment data.

199. 6.8 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

200. 7. Planning:

201. 7.1 Determine priorities and establish oral health goals with the patient/family and/or guardian as an active participant and obtain written consent based on a thorough case presentation.

202. 7.2 Acknowledge cultural differences in populations when planning treatment.

203. 7.3 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

204. 7.4 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine its congruence with over-all plan for the oral health.

205. 8. Implementations:
206. 8.1 Obtain radiographs of diagnostic quality.

207. 8.2 Provide an environment conductive to health by applying basic and advanced principles of dental hygiene instrumentation without causing trauma to hard or soft tissues while controlling pain and anxiety utilizing acceptable clinical techniques.

208. 8.3 Select and administer the appropriate chemotherapeutic agents (e.g., preventive, antimicrobial, desensitizing) and provide pre- and post-treatment instructions.

209. 8.4 Provide adjunct dental hygiene services that can be legally preformed in the State of Texas.

210. 8.5 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

211. 9. Evaluation:

212. 9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule and referral.

213. 9.2 Determine the patients satisfaction with the dental hygiene care received and the oral health status achieved.

214. DHYG 2201: I. Professionalism and Professional Growth and Development

215. 1. Ethics:

216. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

217. 2. Information Management and Critical Thinking:

218. 2.1 Solve problems and make decisions based on accepted scientific principles.

219. 2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.

220. 2.3 Employ the principles of scientific writing.

221. 2.4 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

222. 3. Professional Identity:
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<td>3.1</td>
<td>Advance the profession through leadership, service activities and affiliation with professional organizations.</td>
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<td>II.</td>
<td>Health Promotion/Disease Prevention/Service Learning</td>
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<td>III.</td>
<td>Patient Care</td>
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<td>7.</td>
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<td>236.</td>
<td>8.2</td>
<td>Provide adjunct dental hygiene services that can be legally performed in the State of Texas.</td>
</tr>
<tr>
<td>237.</td>
<td>DHYG 2153: I. Professionalism and Professional Growth and Development</td>
<td></td>
</tr>
<tr>
<td>238.</td>
<td>1.</td>
<td>Ethics:</td>
</tr>
<tr>
<td>239.</td>
<td>1.1</td>
<td>Apply ethical reasoning to dental hygiene and practice with professional integrity.</td>
</tr>
<tr>
<td>240.</td>
<td>2.</td>
<td>Information Management and Critical Thinking:</td>
</tr>
</tbody>
</table>
241. 2.1 Solve problems and make decisions based on accepted scientific principles.

242. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

243. 2.3 Employ the principles of scientific writing.

244. 2.4 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

245. 3. Professional Identity:

246. 3.1 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.

247. 7. Planning:

248. 7.1 Acknowledge cultural differences in populations when planning treatment.

249. DHYG 1311: I. Professionalism and Professional Growth and Development

250. 1. Ethics:

251. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

252. 2. Information Management and Critical Thinking:

253. 2.1 Solve problems and make decisions based on accepted scientific principles.

254. 2.2 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

255. II. Health Promotion/Disease Prevention/Service Learning

256. 4. Self-Care Instruction:

257. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

258. DHYG 1339: I. Professionalism and Professional Growth and Development

259. 1. Ethics:

260. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

261. III. Patient Care
Assessment:

6.1 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

DHYG 1215: I. Professionalism and Professional Growth and Development

Ethics:

1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

1.2 Serve all patients and the community without discrimination.

1.3 Provide humane and compassionate care to all patients.

1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

1.5 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

1.6 Use peer assistance and peer review programs when confronted with the incompetent, impaired or unethical colleague.

Information Management and Critical Thinking:

2.1 Solve problems and make decisions based on accepted scientific principles.

2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.

2.3 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

2.4 Employ the principles of scientific writing.

Professional Identity:

3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.

3.2 Expand and contribute to the knowledge base of dental hygiene.
280.  3.3 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.

281.  3.4 Promote the values of the profession outside of dentistry.

282.  II. Health Promotion/Disease Prevention/Service Learning

283.  4. Self-Care Instruction:

284.  4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

285.  4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

286.  4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.

287.  5. Community Involvement and Service Learning:

288.  5.1 Identify services and agencies that promote oral health and prevent oral disease and related conditions.

289.  5.2 Influence the public (consumer groups, business and government agencies) to support health care issues.

290.  5.3 Use screening, referral and education to bring consumers into the health care delivery system.

291.  5.4 Evaluate factors that can be used to promote patient adherence to disease prevention and/or health maintenance strategies.

292.  III. Patient Care

293.  6. Assessment:

294.  6.1 Identify patients at the risk for nutritional deficiencies using assessment data.

295.  6.2 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

296.  7. Planning:
297. 7.1 Acknowledge cultural differences in populations when planning treatment.

298. 7.2 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

299. 7.3 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine its congruence with over-all plan for the oral health.

300. 8. Implementations:

301. 8.1 Provide adjunct dental hygiene services that can be legally performed in the State of Texas.

302. 8.2 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

303. 9. Evaluation:

304. 9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule and referral.

305. DHYG 2363: I. Professionalism and Professional Growth and Development

306. 1. Ethics:

307. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

308. 1.2 Serve all patients and the community without discrimination.

309. 1.3 Provide humane and compassionate care to all patients.

310. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

311. 1.5 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

312. 1.6 Comply with state and federal laws governing the practice of dentistry and dental hygiene.

313. 1.7 Use peer assistance and peer review programs when confronted with the incompetent, impaired or unethical colleague.

314. 2. Information Management and Critical Thinking:
2.1 Solve problems and make decisions based on accepted scientific principles.

2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

2.3 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

3. Professional Identity:

3.1 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.

3.2 Promote the values of the profession outside of dentistry.

II. Health Promotion/Disease Prevention/Service Learning

4. Self-Care Instruction:

4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.

5. Community Involvement and Service Learning:

5.1 Use screening, referral and education to bring consumers into the health care delivery system.

III. Patient Care

6. Assessment:

6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.

6.2 Determine medical and oral conditions and behaviors and patients at risk for medical emergencies that require special precautions or considerations prior to or during dental hygiene treatment.

6.3 Perform an extraoral and intraoral examination and accurately record the findings.
333. 6.4 Accurately perform and record an examination of the teeth and determine the need for referral to the appropriate health care professional.

334. 6.5 Identify the need for radiographs and distinguish normal from abnormal anatomical findings.

335. 6.6 Evaluate the periodontium, and identify conditions and behaviors that compromise periodontal health and function.

336. 6.7 Identify patients at the risk for nutritional deficiencies using assessment data.

337. 6.8 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

338. 7. Planning:

339. 7.1 Determine priorities and establish oral health goals with the patient/family and/or guardian as an active participant and obtain written consent based on a thorough case presentation.

340. 7.2 Acknowledge cultural differences in populations when planning treatment.

341. 7.3 Establish a planned sequence of educational and clinical services, including referrals, based on the dental hygiene diagnosis using the problem-based approach.

342. 7.4 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine it’s congruence with over-all plan for the oral health.

343. 8. Implementations:

344. 8.1 Obtain radiographs of diagnostic quality.

345. 8.2 Provide an environment conductive to health by applying basic and advanced principles of dental hygiene instrumentation without causing trauma to hard or soft tissues while controlling pain and anxiety utilizing acceptable clinical techniques.

346. 8.3 Select and administer the appropriate chemotherapeutic agents (e.g., preventive, antimicrobial, desensitizing) and provide pre- and post-treatment instructions.

347. 8.4 Provide adjunct dental hygiene services that can be legally preformed in the State of Texas.
348. 8.5 Identify policies and implement procedures for student, employee and patient safety in the dental environment.

349. 9. Evaluation:

350. 9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule and referral.

351. 9.2 Determine the patients satisfaction with the dental hygiene care received and the oral health status achieved.

352. DHYG 2231: I. Professionalism and Professional Growth and Development

353. 1. Ethics:

354. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.

355. 2. Information Management and Critical Thinking:

356. 2.1 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

357. 2.2 Employ the principles of scientific writing.

358. 2.3 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

359. 3. Professional Identity:

360. 3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.

361. II. Health Promotion/Disease Prevention/Service Learning

362. 4. Self-Care Instruction:

363. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

364. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

365. III. Patient Care
366. 6. Assessment:
367. 6.1 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

368. 7. Planning:
369. 7.1 Acknowledge cultural differences in populations when planning treatment.

DHYG 1275: I. Professionalism and Professional Growth and Development

370. 1. Ethics:
371. 1.1 Apply ethical reasoning to dental hygiene and practice with professional integrity.
372. 1.2 Serve all patients and the community without discrimination.
373. 1.3 Provide humane and compassionate care to all patients.
374. 1.4 Maintain honesty in relationships with patients, colleagues and other professionals.

376. 2. Information Management and Critical Thinking:
377. 2.1 Solve problems and make decisions based on accepted scientific principles.
378. 2.2 Critically analyze published reports of oral health, and evaluate the safety and efficacy of oral health products and/or treatments.
379. 2.3 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.
380. 2.4 Employ the principles of scientific writing.

381. 3. Professional Identity:
382. 3.1 Advance the profession through leadership, service activities and affiliation with professional organizations.
383. 3.2 Expand and contribute to the knowledge base of dental hygiene.
384. 3.3 Assume the roles of the profession (clinician, educator, researcher, consumer advocate, administrator) as defined by the ADHA.
385. 3.4 Promote the values of the profession outside of dentistry.

386. II. Health Promotion/Disease Prevention/Service Learning

387. 4. Self-Care Instruction:

388. 4.1 Promote preventive health behaviors by personally maintaining optimal and general health.

389. 4.2 Identify the health needs of individuals and assist them in the development of appropriate and individualized self-care regimens.

390. 4.3 Encourage patients to assume responsibility for their health and promote adherence to self-care regimens.

391. 5. Community Involvement and Service Learning:

392. 5.1 Identify services and agencies that promote oral health and prevent oral disease and related conditions.

393. 5.2 Assess the oral health needs of the community-based oral health programs.

394. 5.3 Influence the public (consumer groups, business and government agencies) to support health care issues.

395. 5.4 Use screening, referral and education to bring consumers into the health care delivery system.

396. 5.5 Evaluate factors that can be used to promote patient adherence to disease prevention and/or health maintenance strategies.

397. III. Patient Care

398. 7. Planning:

399. 7.1 Acknowledge cultural differences in populations when planning treatment.

400. 7.2 Communicate the plan for dental hygiene services to the dentist or other interdisciplinary health team members to determine it’s congruence with over-all plan for the oral health.

401. 9. Evaluation:
402. 9.1 Determine the clinical outcomes of dental hygiene interventions using indices, instruments, examination techniques, and determine the appropriate maintenance schedule and referral.

403. DHYG 1375: I. Professionalism and Professional Growth and Development

404. 1. Ethics:

405. 1.1 Ensure the privacy of the patient during hygiene treatment and counseling and the confidentiality of patient records.

406. 2. Information Management and Critical Thinking:

407. 2.1 Solve problems and make decisions based on accepted scientific principles.

408. 2.2 Communicate professional knowledge/HIPPA verbally and in writing to patients, colleagues and other professionals.

409. 2.3 Employ the principles of scientific writing.

410. 2.4 Commit to self-assessment and life long learning in order to provide contemporary clinical care.

411. III. Patient Care

412. 6. Assessment:

413. 6.1 Obtain, review and update a complete medical, family, psychological, and dental history including an assessment of vital signs while maintaining accuracy and consistency within the legal document.

414. 6.2 Identify patients at the risk for nutritional deficiencies using assessment data.

415. 6.3 Analyze and interpret the assessment data to formulate a dental hygiene diagnosis related to and congruent with the diagnosis of the dentist and other health professionals.

D. What are the completion barriers in the program curriculum? (*All instructional programs*)

Go to the Program Review page on CougarWeb and select the program course history for each of the program awards. Links to the Program Review page are found on both the Institutional Effectiveness and Teaching & Learning pages.

1. Review the course retention rate, course success rate, course enrollment and periodic scheduling to identify barriers to program completion.
a. Program course retention rate: Attach print out and identify any courses that have a retention rate below the state standard.

b. Is there sufficient course enrollment to support a stable cycle of required course offerings?

☐ Yes  ☐ No

Show course enrollment for technical or field of study courses.
16 students

For any required program courses with enrollment below 15, explain a plan to grow enrollment or revise the curriculum.

n/a

c. Are the required courses in the program offered at intervals appropriate to enable students to complete “on time” if a student was enrolled full-time and followed the degree plan?

☐ Yes  ☐ No

d. Identify any required program courses which frequently require course substitutions to enable students to complete an award.

n/a

2. Considering the course retention information gathered from step 1 above, explain program changes planned to remove or mitigate any observed barriers.

n/a

III. Program Information: Are the program literature and electronic sites current and do they provide an accurate representation?

A. Provide program website url: http://www.collin.edu/dentalhygiene

B. List all program literature (course descriptions, degree plans, catalog entries, etc.) in the table III below.

Revised 9/11/13 3:10 pm
C. Provide the review date (within the last three months) in Table III below that shows the elements of information listed on the website and in brochures were checked and updated for accuracy (current academic calendars, grading policies, course syllabi, program handouts, program tuition costs and additional fees, description of articulation agreements, availability of courses and awards, and local job demand in related fields) are accurate and available to the public.

Table III-Program Literature Review

<table>
<thead>
<tr>
<th>Title</th>
<th>Type</th>
<th>Date Last Reviewed and Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental Hygiene Website</td>
<td><a href="http://www.collin.edu/dentalhygiene">http://www.collin.edu/dentalhygiene</a></td>
<td>Nov 2013</td>
</tr>
<tr>
<td>Dental Hygiene Program Information</td>
<td>Brochure</td>
<td>Nov 2013</td>
</tr>
<tr>
<td>Collin College Catalog</td>
<td>On-line Catalog</td>
<td>Aug 2013</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.collin.edu/academics/catalog.html">http://www.collin.edu/academics/catalog.html</a></td>
<td></td>
</tr>
<tr>
<td>Degree Plans and Program</td>
<td>Web Site</td>
<td>Aug 2013</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.collin.edu/academics/programs/index.html">http://www.collin.edu/academics/programs/index.html</a></td>
<td></td>
</tr>
<tr>
<td>Health Sciences and Emergency Services (HSES)</td>
<td>HSES Printed Color Brochure</td>
<td>Fall 2013</td>
</tr>
</tbody>
</table>

IV. Employment for Program Graduates

Some relevant data is available on Career Coach.

A. Provide evidence of local demand for program graduates.

25 dental hygiene jobs posted
If there is low current demand, as evidenced by few AAS-level job postings, explain why and show evidence that near-term future demand will improve local demand for graduates of this program.

n/a

B. What percent of graduates secure employment in the field. 100%

If the employment rate is below 75% within 12 months of graduation, explain the plan to increase employment of the program’s graduates through relationship building.

n/a

C. Average salary of program graduates. $36.44/hour or $71,000./yr

If average salary is at or below minimum wage plus 15%, explain how the program will be modified to add economic value for graduates.

n/a

D. Average number of months to employment. Within 1-6 months of graduation

If the average time to employment exceeds six months after graduation, describe the plan to support employment searches for upcoming (and recent) graduates.

n/a

E. What actions do the program personnel take to assist the college in obtaining the information required by Title IV and Gainful Employment so that students enrolled in this program are able, if otherwise eligible, to receive federal financial aid? Financial Aid is reviewed in dental hygiene advising sessions, and on school website.

F. What additional actions, if any, are needed to improve the quality of this programs’ information needed for college federal reporting requirements?
Program Data:
Unduplicated, actual, annual enrollment data;
Definitions of data elements can be found on CougarWeb under Teaching & Learning/Program Review/Institutional Research Files for Program Review

- Student/Faculty Ratios
- Average Class Size
- Course Enrollment History for all program courses (workforce programs may exclude reporting core course enrollments)
- Grade Distributions
- Contact Hours Taught by Full-Time and Part-Time Faculty

V. PROGRAM RESOURCES SINCE LAST PROGRAM REVIEW

A. Partnerships and Relationship Building: List all university/business and industry partnerships. Include co-op or internship sites, visiting class presenters, tours of facilities’ use, equipment donors, dedicated program scholarship donors, mentors.

Table V-A: Partnership Resources

<table>
<thead>
<tr>
<th>University/Business &amp; Industry</th>
<th>Partnership Type</th>
<th>Estimated Market Value, if any</th>
</tr>
</thead>
<tbody>
<tr>
<td>North Texas Dental Society</td>
<td>Program Agreement</td>
<td>$50,000.</td>
</tr>
<tr>
<td>North Texas Dental Hispanic Society</td>
<td>Program Agreement</td>
<td>$50,000.</td>
</tr>
<tr>
<td>Advisory Committee Members</td>
<td>Program Agreement</td>
<td></td>
</tr>
</tbody>
</table>
### B. Employees: List program employees (full-time and part-time), their role, credentials, and known professional development activity since the last program review.

**Table V-B: Employee Resources**

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Role in Program</th>
<th>Credentials</th>
<th>Professional Development since last Program Review</th>
</tr>
</thead>
</table>
| Susan Moss                         | Program Director/Community Dental Health Coordinator | RDH, BS     | • Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter  
• Dental Hygiene Educational   |
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>9/11/13 3:10 pm</td>
<td>Methods: Fall Camp 2011, Cindy Biron, November 11-13, 2011</td>
</tr>
<tr>
<td></td>
<td>- A Guide for Teaching Ultrasonic Instrumentation August 16, 2011, Marie George</td>
</tr>
<tr>
<td></td>
<td>- Member of CPC Service Learning Committee</td>
</tr>
<tr>
<td></td>
<td>- Decisions regarding community service learning projects for the community and/or health fairs</td>
</tr>
<tr>
<td></td>
<td>- WECM team facilitator: 6/22/2011</td>
</tr>
<tr>
<td></td>
<td>- Represent all faculty who teach courses in this discipline</td>
</tr>
<tr>
<td></td>
<td>- Review existing WECM, local need and special topics</td>
</tr>
<tr>
<td></td>
<td>- Review CIP Codes 51.0601 and 51.0602</td>
</tr>
<tr>
<td></td>
<td>- Greater Collin County Dental Hygiene Component SCADHA Liaison for Student Chapter</td>
</tr>
<tr>
<td></td>
<td>- Educate and encourage students</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
</tr>
<tr>
<td>-------------------</td>
<td>---------------------------------</td>
</tr>
</tbody>
</table>
| Christine McClellan | 2nd Year Clinical Coordinator | RDH, BS            | • Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter  
• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 11-13, 2011  
• A Guide for Teaching Ultrasonic Instrumentation August 16, 2011, Marie George  
• DATF (Disciplinary Appeals Task Force) Committee  
  ○ Review student appeals for not following student code of conduct policies at Collin College  
• WREB Examiner  
  ○ Member of WREB Examiner team for dental hygiene licensure  
• COAT (Core Objective
<table>
<thead>
<tr>
<th>Assessment Team) committee member</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Review rubrics and student objectives</td>
<td></td>
</tr>
<tr>
<td>• President/Program Chair for Greater Collin County Dental Hygiene Component</td>
<td></td>
</tr>
<tr>
<td>• Facilitates Component meetings</td>
<td></td>
</tr>
<tr>
<td>• Coordinates CEU opportunities for members and dental professionals</td>
<td></td>
</tr>
<tr>
<td>• Search Committee Chair</td>
<td></td>
</tr>
<tr>
<td>• Search Committee Member</td>
<td></td>
</tr>
<tr>
<td>• DH Advisory Board Committee</td>
<td></td>
</tr>
<tr>
<td>• SACS sub-committee</td>
<td></td>
</tr>
<tr>
<td>• Collin College Vision 2016 committee</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tammy Hale</th>
<th>1st Year Clinical Coordinator</th>
<th>RDH, BS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 11-13, 2011</td>
<td></td>
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</tr>
</tbody>
</table>

Revised 9/11/13 3:10 pm
Emily Henderson: Full-Time Faculty, RDH, BS

- A Guide for Teaching Ultrasonic Instrumentation August 16, 2011, Marie George
- Faculty Search Committee Chair
- Greater Collin County Dental Hygiene Society (GCCDHS) Board member
- GCCDHS Mentor Chair
- GCCDHS Institute of Oral Health Chair
- Faculty/Staff Scholarship Fund Campus Representative
- GCCDHS Nominating Committee

- Strategies for Developing a Quality Course: Teaching Methodologies/Faculty Development: P&G February 20, 13, Cynthia C. Gadbury-Amyot, MSDH, EdD
- Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter
- Dental Hygiene Educational
<table>
<thead>
<tr>
<th>Joanne C. Fletcher</th>
<th>Faculty</th>
<th>RDH, BS, MS</th>
</tr>
</thead>
</table>

Methods: Fall Camp 2011, Cindy Biron, November 11-13, 2011
- A Guide for Teaching Ultrasonic Instrumentation August 16, 2011, Marie George
- Simulation committee
  - Collaboration with other departments for emergency training
- Greater Collin County Dental Hygiene Society Mentor Committee Member
  - Assist with coordinating mentorship for students and hygienists
- IT representative
  - Provide support system for continuing education courses
- Member of Collin College Faculty Search Committee
- Surg. Tech Program Review Committee
- Dental Hygiene Educational Methods: Fall Camp 2011,
<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Position</th>
<th>Credentials</th>
<th>Presentations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jennifer Swetmon</td>
<td>Faculty</td>
<td>RDH, BS, MS</td>
<td>• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 12, 2011</td>
</tr>
</tbody>
</table>
| Jennifer Perez    | Faculty   | RDH, BS     | • Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter  
                         • Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 11, 2011 |
| Dennis Garcia     | Faculty   | RDH, BS     | • Strategies for Developing a Quality Course: Teaching Methodologies/Faculty Development: Proctor and Gamble, Cynthia C. Gadbury-Amyot, MSDH, EdD, Spring 2013  
                         • Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter |
<p>| Kandice Roan      | Faculty   | BS          | • Strategies for Developing a Quality Course: Teaching                         |</p>
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Credentials</th>
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<tbody>
<tr>
<td>Deborah Testerman</td>
<td>Faculty</td>
<td>RDH, BS, MS</td>
<td>• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 12, 2011</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• A Guide for Teaching Ultrasonic Instrumentation August 16, 2011, Marie George</td>
</tr>
<tr>
<td>Dr. Michele Johnson</td>
<td>Faculty</td>
<td>DDS</td>
<td>• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 11, 2011</td>
</tr>
<tr>
<td>Dr. Doris Woodruff</td>
<td>Faculty</td>
<td>DDS</td>
<td>• Faculty Orientations and Policy Review Spring 2013, January 11, 2013: “What the Evidence Shows with Respect to How We Learn” Susan Moss, Presenter</td>
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<td></td>
<td></td>
<td></td>
<td>• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 12, 2011</td>
</tr>
<tr>
<td>Dr. Celeste Abraham</td>
<td>Faculty</td>
<td>DDS</td>
<td>• 2012 Faculty Calibration Workshop: Baylor College of Dentistry “Evaluation Evidence: Transitioning</td>
</tr>
</tbody>
</table>
Celeste McClatchy  
Faculty  
RDH, BS  
• Dental Hygiene Educational Methods: Fall Camp 2011, Cindy Biron, November 11-12, 2011

<table>
<thead>
<tr>
<th>Room/Office Location and Designation</th>
<th>Size</th>
<th>Type</th>
<th>Special Characteristics (i.e. permanent like ventilator hood)</th>
<th>Meets current needs: Y or N</th>
<th>Will meet needs for next five years: Y or N</th>
<th>Describe additional needs for any “N” answer in columns 5 or 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>A119 Reception Area</td>
<td>760 sq ft</td>
<td>Waiting room for patients</td>
<td>Chairs, end tables, computers, printer, &amp; cabinets</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A119A Administrative Asst. Office</td>
<td>95 sq ft</td>
<td>Office</td>
<td>Computer, printer, book shelves, desk, chair</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A114B</td>
<td></td>
<td>Storage</td>
<td></td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A126</td>
<td>429 sq ft</td>
<td>Storage</td>
<td></td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A125</td>
<td>171 sq ft</td>
<td>Locker Room</td>
<td>Lockers</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A114</td>
<td>142 sq ft</td>
<td>Office</td>
<td>Desk, chair, computer, printer, book shelf, file cabinets</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>A114A</td>
<td>142 Office</td>
<td>Desk, chair, computer,</td>
<td></td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
</tr>
<tr>
<td>Room</td>
<td>Sq Ft</td>
<td>Description</td>
<td>Has Printer</td>
<td>Has Desk</td>
<td>Additional Equipment</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>----------------------------------</td>
<td>-------------</td>
<td>----------</td>
<td>----------------------</td>
<td></td>
</tr>
<tr>
<td>A114D</td>
<td>142 sq ft</td>
<td>Office Desk, chair, computer, printer, book shelf, file cabinets</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A128</td>
<td>135 sq ft</td>
<td>Compressor Room Compressor, air dryer</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A120</td>
<td>121 sq ft</td>
<td>Office Desk, chair, computer, printer, book shelf, file cabinets, scanner</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A123</td>
<td>284 sq ft</td>
<td>Radiology Lab Radiology units, view box, computer</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A124</td>
<td>30 sq ft</td>
<td>Radiology Dark Room Radiology processor</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A127</td>
<td>60 sq ft</td>
<td>Restroom Sink, commode</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A121</td>
<td>152 sq ft</td>
<td>Conference Room Table, chairs, book shelves</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A122</td>
<td>51 sq ft</td>
<td>Locker Room Lockers</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>A118</td>
<td>390 sq ft</td>
<td>Clinical Area Computers, operator chairs, patient chairs, assistant chairs, radiology units</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>B107</td>
<td>925</td>
<td>Classroom Desks, chairs, computer,</td>
<td>Y</td>
<td>Y</td>
<td>n/a</td>
<td></td>
</tr>
</tbody>
</table>
### Table V-C-2: Equipment, Supplies, Maintenance/Repairs List

**all equipment required by the program that you do not consider supplies**

<table>
<thead>
<tr>
<th>Current Equipment Item or Budget Amount</th>
<th>Meets current needs: Y or N</th>
<th>Will meet needs for next five years: Y or N</th>
<th>For any no in columns 2 or 3, justify needed equipment or budget change</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 portable dental chairs located in radiology and dental materials area</td>
<td>Y</td>
<td>N</td>
<td>Replacement equipment</td>
</tr>
<tr>
<td>1 digital Sirona panoramic unit to be installed in radiology lab spring 2014 semester</td>
<td>Y</td>
<td>N</td>
<td>Upgrade equipment</td>
</tr>
<tr>
<td>2 intraoral cameras located on radiology cart in radiology lab</td>
<td>Y</td>
<td>N</td>
<td>Replacement equipment</td>
</tr>
<tr>
<td>New furniture for reception area, dental hygiene conference center and offices for staff, administrative assistant and director</td>
<td>Y</td>
<td>N</td>
<td>Replacement equipment</td>
</tr>
<tr>
<td>5 collimators located in radiology lab and clinical area</td>
<td>Y</td>
<td>N</td>
<td>Replacement equipment</td>
</tr>
<tr>
<td>1 vacuum form machine located in dental materials lab</td>
<td>Y</td>
<td>N</td>
<td>Replacement equipment</td>
</tr>
<tr>
<td>8 SWERV ultrasonic units located in clinical area</td>
<td>Y</td>
<td>N</td>
<td>Upgrade equipment</td>
</tr>
</tbody>
</table>

### Table V-C-3: Financial Resources

<table>
<thead>
<tr>
<th>Source of Funds</th>
<th>Meets</th>
<th>Will meet</th>
<th>For any no in columns 2 or 3, identify</th>
</tr>
</thead>
</table>

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<table>
<thead>
<tr>
<th>i.e. college budget, grant, etc.</th>
<th>current needs: Y or N</th>
<th>needs for next five years: Y or N</th>
<th>3, explain why</th>
<th>expected source of additional funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>State support</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local support</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student tuition</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinic revenue</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VI. PROGRAM PLANNING

A. Link or attach the last two CIPs. Continuous Improvement Plan: Program-Level Student Learning Outcomes: Collin College Dental Hygiene Fall 2010-11:

B. Program Level Student Learning Outcome: 1. The application and integration of knowledge about research, pharmacology, periodontology, pathology, emergency care, ethics, nutrition, dental radiology, and clinical courses that are necessary to provide the highest quality of care for each patient

C. Assessment: The Dental Hygiene Competency/Service Learning Portfolio that provides documented evidence that each dental hygiene competency is successfully completed

D. Results/Findings: 1. Portfolio required by each student 2. Course completion rates* (* All dental hygiene students passed each dental hygiene course since the inception of the Program [fall 1999]. Three students left the program due to medical reasons and one student left due to a parent's terminal illness) 3. Job placement rates: 100% placement within first 12 months of graduation 4. Survey instruments 5. Written and clinical board examination results 100% pass rate

E. Standard Met, Partially Met, or Not Met: Met

F. Action Plan: Continue annual evaluation of competency/portfolio assessment tool

G. Continuous Improvement Plan: Program-Level Student Learning Outcomes: Collin College Dental Hygiene Fall 2012-13
H. Program Level Student Learning Outcome: 1. Discuss the dental management of clients with systemic pathologies (Relates to Program Goal #3: To provide students with the knowledge and clinical competence required to provide current, comprehensive dental hygiene services for individuals of all ages and stages of life including those with special needs

I. Assessment(s): 1. National Board Dental Hygiene Examination Performance Report Subject Area: H 2. Successful case study completion of presentation/written outline

J. Results/Findings: Student scores 75 or above met standard. However, the subject area H was slightly lower than the national average. The overall average was significantly above the national board average

K. Standard Met, Partially Met, Not Met: Partially Met

L. Action Plan: Annual evaluation of content area by curriculum committee to increase student performance score from current level. Will continue to add current case studies to support successful outcomes

M. Program Level Student Learning Outcome: 2. Demonstrate understanding of professional liability and ethics (Relates to Program Goal #4: To treat each patient/client with dignity and respect

N. Assessment(s): National Board Dental Hygiene Examination Performance Report Subject Area: L 2. Ethical dilemma case studies presented in class

O. Results/Findings: Students overall National Board Performance Report indicates 0.5 points above National Board Performance Report. This is a significant improvement

P. Standard Met, Partially Met, Not Met: Met

Q. Action Plan: Ethical dilemma case study presentations/class discussions will continue and student will be required to attend a professional meeting approved by the professor and write a reflection paper on their experience

R. Program Level Student Learning Outcome: 3. Describe various dental pathologies (Relates to Program Goal #3: To provide students with the knowledge and clinical competence required to provide current, comprehensive dental hygiene services in a variety of settings for individuals of all ages and stages of life including those with special needs

S. Assessment: National Board Dental Hygiene Examination Performance Report Subject Area: D

T. Results/Findings: Student scores 75 or above met standard

U. Standard Met, Partially Met, Not Met: Met
V. Action Plan: Annual evaluation of content area by curriculum committee to increase student performance score from current level. Will continue to add current information and case studies to support successful outcomes

W. Program Level Student Learning Outcome: 4. Identify pharmacological agents for the appropriate use in Dental Hygiene Practice (Relates to Program Goal #1: To create an active learning environment that integrates the principles of evidence-based research while promoting critical thinking, self-evaluation, innovation, creativity, and lifelong learning

X. Assessment: National Board Dental Hygiene Examination Performance Report Subject Area: E

Y. Results/Findings: Student scores 75 or above met standard

Z. Standard Met, Partially Met, Not Met: Met

AA. Action Plan: Annual evaluation of content area by curriculum committee to increase student performance score from current level

BB. This year the National Board Dental Hygiene Examination format was changed. The Joint Commission on National Dental Examinations (Joint Commission) provides monthly reports including the d-value representing the standardized difference between the program's average standard score and the national average standard score

CC. A d-value representing the standard difference between the program's average raw score (i.e. average number correct) and the national average for each of the disciplines covered on the examination

DD. Next CIP

1. Attach the next CIP with the data and findings on which it is based. Note: Revisions may be made to the CIP to reflect feedback from the Steering Committee or the Leadership Team. Continuous Improvement Plan: Program-Level Student Learning Outcomes: Collin College Dental Hygiene 2014-15

2. Program Level Student Learning Outcome: 1. Discuss the dental management of clients with systemic pathologies (Relates to Program Goal #3: To provide students with the knowledge and clinical competence required to provide current, comprehensive dental hygiene services in a variety of settings for individuals of all ages and stages of life including those with special needs.


4. Results/Findings: Student scores 75 or above met standard. However, the subject area H was slightly lower than the national average. The overall average was significantly above the national board average
5. Standard Met, Partially Met, Not Met: Met

6. Program Level Student Learning Outcome: 2. Demonstrate understanding of professional liability and ethics (Relates to Program Goal #4: To treat each patient/client with dignity and respect

7. Assessment(s): National Board Dental Hygiene Examination Performance Report Subject Area: L 2. Ethical dilemma case studies presented in class

8. Results/Findings: Students overall National Board Performance Report indicates 3 points above National Board Performance Report. This is a significant improvement from 2012 and a very strong outcome


10. Program Level Student Learning Outcome: 3. Describe various dental pathologies (Relates to Program Goal #3: To provide students with the knowledge and clinical competence required to provide current, comprehensive dental hygiene services in a variety of settings for individuals of all ages and stages of life including those with special needs

11. Assessment: National Board Dental Hygiene Examination Performance Report Subject Area: D

12. Results/Findings: Student scores 75 or above met standard. Continues to increase outcomes significantly above the national average

13. Standard Met, Partially Met, Not Met: Met

14. Program Level Student Learning Outcome: 4. Identify pharmacological agents for the appropriate use in Dental Hygiene Practice (Relates to Program Goal #1: To create an active learning environment that integrates the principles of evidence-based research while promoting critical thinking, self-evaluation, innovation, creativity, and lifelong learning

15. Assessment: National Board Dental Hygiene Examination Performance Report Subject Area: E

16. Results/Findings: Student scores 75 or above met standard. Exceptional outcome in Pharmacology. Significantly higher than the national average

17. Standard Met, Partially Met, Not Met: Met

18. In 2012 the National Board Dental Hygiene Examination format was changed. The Joint Commission on National Dental Examinations (Joint Commission) provides monthly reports including the d-value representing the standardized difference between the program's average standard score and the national average standard score

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19. A d-value representing the standard difference between the program’s average raw score (i.e. average number correct) and the national average for each of the disciplines covered on the examination.

20. The outcomes for Class of 2013 for National Board Exam showed strengths in Pharmacology; Pathology; Professional Responsibility; and Supportive Treatment.

21. Areas of weakness were: Anat/Sci; Phy-Bio-Nutr; Micro-Immun; Pt. Assess.; Radiology; DH Care; Perio; Prev Agts; CDH; and Case-Based sections.

22. Based on the program data and the results and finding in the past two CIPs, explain how the program action plans logically flow from the data presented.

Action Plan: 1. Continue annual evaluation of content area by curriculum committee to increase student performance score from current level. Will continue case studies to support successful outcomes.

2. Ethical dilemma case study presentations/class discussions will continue and student will be required to attend a professional meeting approved by the professor and write a reflection paper on their experience.

3. Annual evaluation of content area by curriculum committee to increase student performance score from current level. Will continue to add current information and case studies to support successful outcomes.

4. Annual evaluation of content area by curriculum committee to increase student performance score from current level. Continue with current curriculum and methodologies.

EE. Within the program’s base budget, what are the plans to do one or more of the following within the next five years? Check all that apply.

- Increase and retain enrollment
- Increase completes
- Develop resources
- Update facilities
- Expand curricular opportunities
- Partner to increase post-graduation employment opportunities
- Increase transfers to related baccalaureate institutions
- Increase effectiveness and/or efficiency
- Improve student performance levels
- Expand services
- Transform services
- Anything else? Briefly describe

Enter response here.
FF. What continuous improvement plans do you have, if any, that require additional resources beyond the program’s base budget? Briefly describe what resources you will develop to secure these funds.

Student Scholarships

VII. PROGRAM REVIEW REPORT PATHWAY

Completed Program Review Reports will be evaluated by the appropriate deans and Program Review Steering Committees. Following approval by the Steering Committee, Program Review Reports will be evaluated by the Leadership Team who will approve the reports for posting on the intranet. At any point prior to Intranet posting, reports may be sent back for additional development.

Leadership Team members will work with program supervisors to incorporate Program Review findings into program planning and program activity changes during the next five years.