

PET FORM  
Planning and Evaluation Tracking  
(2012-2013 Assessment Period)

Division of: Health Sciences

Person Responsible for this Division: Mark Rowh

Department of: Dental Hygiene

Primary Person Responsible for this Form: Donna Cleere

Purpose Statement (With Last Updated Date): The Dental Hygiene Program is Committed to providing local, regional, and Texas statewide employers with much needed and qualified entry-level dental hygienists through a comprehensive didactic, laboratory and clinical curriculum that complies with all Commission on Dental Accreditation Standards for dental hygiene education programs and in doing so, enhance the quality of life for all of Texas. (Revised June, 2011)

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**Goal Statement #1:** (new goals as of 2011-12. Data will begin in 2012-13)

Align AC learning outcomes with THECB outcomes which emphasize 21<sup>st</sup> century skills (AC Strategic Plan through 2015: Strategy 1.4).

**Outcome/Objective Statement**

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

Students will demonstrate the skills and knowledge sets as stated in the WECM learning outcomes for each DHYG course. Learning outcomes will be measured during and at the end of each course with a written exam which includes case studies and practical demonstration competencies. Data will be assessed and tracked through WIDS. 100% of students will complete the learning outcomes with a score of no less than 75% (Strategic Plan through 2015: Task 1.4.1.3).

- Results (If Applicable, Provide Numbers and Percentages for Quantitative Data)  
Not applicable – New goal/outcome
  - Analysis  
Not applicable – New goal/outcome
  - Improvements  
Not applicable – New goal/outcome
  - Recommendations/Actions for 2012-2013
    - Person Responsible (Who will complete the action?): Donna Cleere
    - Action Plan: Develop a tool to measure (written exam or case study) learning outcomes as stated in the WECM learning outcomes for each DHYG course.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date): Data will begin in 2012-13.
    - What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details): Not applicable
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## Goal Statement #2: Monitor Program Effectiveness

### Outcome/Objective Statement

- 1) Students will complete the dental hygiene program within 24 months. No less than 75% of students will complete with a grade of C or better in all required courses. (No excuses Goal V and III/ATD goal: earn a certificate, degree or transfer)
- 2) Upon completion of the program, students will demonstrate the ability to comprehend, apply and evaluate information relevant to their role as an entry-level registered dental hygienist by successfully completing Dental Hygiene National Board Exam (Cognitive Domain). No less than 75% of the students will successfully complete the Dental Hygiene National Board Exam on the first attempt.
- 3) Upon completion of the program, students will demonstrate the technical proficiency in all skills necessary to fulfill their role as an entry-level registered dental hygienist by successfully completing a clinical regional board. (Psychomotor Domain) No less than 75% of the students will successfully complete the Dental Hygiene Clinical Regional Board Exam on the first attempt.

### • Results ( Provide Numbers and Percentages for Quantitative Data)

- 1) Completion with "C" or Better Results  
**2010 – 2011 Data:** Numbers = 27 out of 28 and percentage = 96.2%  
**2011 – 2012 Data:** Numbers = 25 out of 28 and percentage = 89.2%
- 2) National Board Exam First Attempt Pass Rate Results  
**2010 – 2011 Data:** Numbers = 27 out of 27 and Percentage = 100%  
**2011-2012 Data:** Numbers = 25 out of 25 and Percentage = 100%
- 3) Regional Board Exam First Attempt Pass Rate Results  
**2010 – 2011 Data:** Numbers = 27 out of 27 and Percentage = 100%  
**2011 - 2012 Data:** Numbers = 22 out of 25 and Percentage = 88%

### • Analysis

- 1) Results from May 2011 Graduates: 96.4% of the original 28 students did complete the program within 24 months of being accepted into the program. 100% of the students passed the Dental Hygiene National Board on the 1<sup>st</sup> attempt. 100% of the students passed the Dental Hygiene Clinical Regional Board on the 1st attempt.
- 2) Results from May 2012 Graduates: 89.2% of the original 28 students did complete the program within 24 months of being accepted into the program. 100% of the students passed the Dental Hygiene National Board on the 1<sup>st</sup> attempt. 88% of the students passed the Dental Hygiene Clinical Board Exam on the 1st attempt.

### • Improvements

#### **Completion Rates**

- List any Improvements Made in the 2011-2012 (Last Academic) Year:  
As a result of the analysis of the data on completion rates the following improvement plan was implemented:
  1. The first year course DHYG 1301 Orofacial Anatomy, Histology and Embryology was re-evaluated to determine if competencies were being met.
  2. A Study Skill: How to Read a Textbook video was shown to all first year dental hygiene students.
- Evaluate Why Improvements Were Successful/Were Not Successful:  
A plan to give examinations more frequently and over fewer chapters in the first year DHYG 1301 Orofacial Anatomy, Histology and Embryology should prove to help attrition rates in this course.
- What Budget Implications Were Involved with this Improvement: This action requires no adjustment to the budget

### **National Board Exam First Attempt Pass Rate**

- List any Improvements Made in the 2011-2012 (Last Academic) Year:  
Again, the program has enjoyed 100% pass rates on the National Board in 2011 and 2012. The Program did implement the following changes:
  1. Internet Assignments were incorporated in the dental hygiene courses.
  2. Faculty worked with students who needed extra instruction during “Lunch and Learn” Sessions.
- Evaluate Why Improvements Were Successful/Were Not Successful:  
Improvements were successful. In May 2011, the pass rate for graduates taking the Dental Hygiene National Board Exam was 100%. In May 2012, the pass rate for graduates taking the Dental Hygiene National Board Exam was 100%.
- What Budget Implications Were Involved with this Improvement:  
This action requires no adjustment to the budget

### **Regional Board Exam First Attempt Pass Rate**

- List any Improvements Made in the 2011-2012 (Last Academic) Year:
  1. Students are now able to take the Clinical Regional Board at “home” in the Amarillo College Dental Clinic because of the new state of the art dental clinic. Familiarity of facilities may improve results.
  2. Mock clinical exams are now administered early in the semester to target students who are weak in clinical skills.
  3. An instrumentation practical is now being implemented earlier in the semester to target students with weak clinical skills.
- Evaluate Why Improvements Were Successful/Were Not Successful:  
Improvements are showing success based on 100% pass rate for the clinical boards in 2011 on the 1st attempt and 88% pass rate for the clinical boards in 2012 on the 1st attempt.
- What Budget Implications Were Involved with this Improvement:  
This action required no adjustment in the budget.

### • Recommendations/Actions for 2012-2013

- Person Responsible (Who will complete the action?): Donna Cleere and all faculty
- Action Plan:
  - Dental Hygiene National Board Exam score results will be reviewed yearly as part of an ongoing curriculum management plan to assess areas of weakness in the curriculum.
  - Continue to monitor scores on the clinical board exam and make adjustments to curriculum as needed. Administer instrumentation practical earlier in the semester to target students who are weak in clinical skills. Encourage students to take the clinical exam at Amarillo College if possible.
- Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):
  - Curriculum is reviewed in June/July of each year after National Board results are available as part of an ongoing curriculum management plan required by the Commission on Dental Accreditation.
  - All curriculum and board score results are analyzed in June/July of each year at a scheduled curriculum management meeting.
- What Budget Implications Are Involved with this Action? (Please Provide Cost Estimate/Details):
  - Faculty need funding to support travel to keep current on educational methodology specific to dental hygiene and changes in accreditation standards.
  - Continued support for technology including dental software and updates. Monetary support for faculty travel for WREB and CRDTS clinical educational meetings to keep current with changes in accreditation standards.