



Dental Assisting Program Review

October 30, 2015

The Portland Community College Dental Assisting Program offers students a quality dental assisting education encompassing the broadest possible scope of patient care, education and service to the community in a learner-focused environment. The aspects of the dental assisting program are continually assessed to provide on-going excellence and continuing improvement.

- PCC Dental Assisting Mission Statement

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I. Program Overview

Portland Community College's Dental Assisting Program began in 1965 at the Failing Hall Building by the Ross Island Bridge. Since its move in 1969 to the Sylvania Campus, many changes have taken place within dentistry and specifically in the dental assisting profession. What has stayed constant over the years is the quality education that each cohort of 45 students receive when enrolled in the nine month program. Proudly, the PCC DA program's reputation is stellar within the dental community and our graduates are highly sought after.

The program is fully accredited by the Commission on Dental Accreditation (CODA). In 2010, at its most recent self-study review and site-visit, the Commission report offered no suggestions or recommendations to the program for improvement. The primary purpose of the self-study process is to assess the effectiveness of the educational program in meeting 1) the program's stated goals and objectives and 2) the Commission's Accreditation Standards for Dental Assisting Education Programs. The next Accreditation Self-Study and Site-visit will take place in February 2017. Providing information for the PCC Program Review will be of great value when developing the report needed for Accreditation.

A. What are the educational goals or objectives of this program/discipline? How do these compare with national or professional program/discipline trends or guidelines? Have they changed since the last review, or are they expected to change in the next five years?

The following program goals have been set by the faculty, director and staff to ensure the students' educational needs are being met:

- Goal 1 Access - We will provide access to quality dental assisting education through the use of scientific evidence based instruction and technology that meets current industry standards.
- Goal 2 Student Success - We will promote success for all dental assisting students through outstanding teaching by faculty who act as mentors and professional role models and who provide instructional methodology that prepares the student to successfully complete national, regional and/or state examinations required for certification and entry into the workforce.
- Goal 3 Diversity - We will enrich the dental assisting student's educational experience by providing and promoting cultural awareness that acknowledges each individual's worth and uniqueness and enhances effective interactions, communications and/or provision of care with all individuals or groups.

- Goal 4 Continuous Improvement - We will develop faculty and students who continuously seek to enhance knowledge as life-long learners by seeking peer support in professional associations, fulfilling evidence based continuing education and applying self-assessment and reflection skills.
- Goal 5 Cultivating Partnerships - We will create partnerships that effectively link students with practicing oral and other health care professionals who will provide advising, mentoring and enrichment experiences in preparation for employment upon graduation.
- Goal 6 Community - We will serve as a key resource to the community by comprehensively preparing competent students who assist and provide service during treatment of patients at the onsite PCC clinic or while participating in enrichment experiences in the community or during externship rotations.
- Goal 7 Ethics and Responsibility - We will prepare the student to practice ethically and responsibly as a Certified Dental Assistant.

The program goals have been designed to reflect the college's core themes of *Access and Diversity, Student Success, Quality Education, Economic Development and Sustainability*. Additionally, the theme of *Ethics and Responsibility* demonstrate the important governance of the Oregon State Board of Dentistry State Practice Act. Other National Guidelines that are followed include:

The Commission on Dental Accreditation (CODA) Standards which state:

“The program must demonstrate its effectiveness through a formal and ongoing planning and outcomes assessment process that is systematically documented and annually evaluated. This process must include the following:

- *Dental assisting program goals that include, but are not limited to student outcomes that are consistent with the goals of the sponsoring institution and appropriate to dental assisting education;*
- *time-table for implementation that indicates roles and responsibilities of all participants;*
- *methods to assess goals and provide outcomes that include, but are not limited to, measures of student achievement;*
- *review and analysis of compiled data obtained from assessment methods, and related conclusions;*
- *findings and conclusions are used for program improvement, and for revisions to the overall planning and outcomes assessment process.”*

- CODA Standard 1-1

The Compendium of Curriculum Guidelines developed by the American Dental Education Association (ADEA):

“The guidelines are intended as a curriculum development aid. They are not official policy statements of ADEA; nor should they be construed as recommendations for restrictive requirements or as a mechanism to standardize allied dental education programs. While accreditation standards have moved to a competency based curriculum model and assessment of outcomes as a means to determine whether a program is achieving its goals, program directors have indicated there is a need for more specific guidelines.....These guidelines are intended for entry-level educational programs, regardless of level (Certificate, AS or BS) or institutional setting (community college, university dental school or academic health center).....Graduate competencies that should be imbedded.....include.....but are not limited to:

- *Problem solving*
- *Critical thinking*
- *Health and safety concerns/concepts*
- *Regulatory concerns*
- *Health promotion*
- *Professionalism*
- *Ethics*
- *Cultural diversity*
- *Self-assessment skills*
- *Evaluation of current scientific literature*
- *Interpersonal communication skills*
- *Evidence -based decision making*

- ADEA Compendium of Curriculum Guidelines, Feb. 2005

The dental assisting program goals reflect and support the PCC Institution and the national accreditation commission as well as the American Dental Education Association. They have not changed since the previous 2010 program review, but will be reviewed and revised this year so that they more accurately represent the newly developed PCC Strategic Plan and the Outcomes Revisions and College Mission Statement changes that will be taking place. The revised program goals will be presented in the 2017 CODA Accreditation Self-Study Document.

B. Briefly describe changes that were made as a result of SAC recommendations and/or administrative responses from the last program review:

Many changes have occurred based on SAC recommendations and/or administrative responses following the 2010 DA Program Review. They are presented in the following table:

SAC Recommendation	Administrative Response	Action Taken	Implementation Year
Purchase new dental radiology film processor	Recommended immediate purchase	A donation was received from a private practice of a Processor in fair condition. The extra processor has extended the life of original one.	Not Purchased
Implement electronic patient records and digital imaging	Encouraged the program to participate in the 2011 Bond planning meetings	Electronic patient records and digital sensors are currently being installed	Sept. 2015
Add two additional radiology rooms with digital imaging capabilities	Incorporate into the Bond planning	Due to the program remaining in its current space, two new rooms are not being added in the radiology lab	Computers and digital sensors were purchased August 2015
Send DXTR Manikins in on a regular basis for repair	Support through margin money revenue	DXTRs sent For Repair annually 2 new DXTRs purchased.	(2) refurbished '11 (1) New purchase '12 (1) refurbished '14
Increase dental operatory space/ reconfigure labs/ add 6-7 dental units in the clinic/ replace cabinetry and student chairs in dental materials lab	Bring these items forward to the 2011 Bond planning meetings	Unable to gain additional clinic space to add additional clinic chairs, unable to reconfigure lab space or put in new cabinetry	Summer 2015: New dental units were purchased to replace the existing 23 dental units. Computers and electronic patient charting included. Operator chairs from old units were kept to replace the previous 40

SAC Recommendation	Administrative Response	Action Taken	Implementation Year
			year old stools in the dental materials lab. Renovation in lab occurred to allow students to be seated with legs under the counter.
Pay for staff and faculty training that will have to occur when electronic charting and paper records are implemented	Recommended margin money support this	Bond dollars Summer 2015	Two day training in August 2015 occurred with the front office staff. The instructors will receive training during Fall Term.
Provide funding for development of dental radiology videos or purchase already developed videos.	Recommended use of margin money to support this	Purchased Rad. Dental Prof. Video. Instructor developed videos with Camtasia / Utube	2011 2014/15
Discuss the possibility of compensating Dentists at a higher rate than Step 1 on the salary table	This needs to be addressed through Federation and Human Resources. Until permanent solution is achieved, work with Division Dean and DOI on salary placement	Director is starting new dentists at step 2 when hiring	New Dentist hires in 2011, 2012, 2013, 2014, 2015.

II. Outcomes and Assessments: Reflect on learning outcomes and assessment, teaching methodologies, and content in order to improve the quality of teaching, learning, and student success.

A. Course-Level Outcomes: The College has an expectation that course outcomes, as listed in the CCOG are both assessable and assessed, with the intent that SAC's will collaborate to develop a shared vision for course-level learning outcomes.

i. What is the SAC process for review of course outcomes in your CCOGs to ensure they are assessable?

The dental assisting program utilizes a comprehensive curriculum and program review process annually to assess all aspects of program goals, course outcomes and learning experiences (**See Appendix #1 for Curriculum and Program Management Plan [CPMP]**). SAC members meet weekly to discuss programmatic topics. Once each month the meeting is devoted to issues specifically listed on the CPMP. For topics needing more in depth discussion, the SAC utilizes the October and April SAC Inservice days.

Specifically, the process for review of course outcomes in the CCOGs to ensure they are assessable, is a three step process. During the current term the SAC reviews the CCOG's and Syllabi for the upcoming term. It is important that both CCOG's and Syllabi are reviewed at the same time in order to ensure that instructors are quoting the *Course Descriptions* and *Intended Outcomes* accurately as approved by the Curriculum Committee and stated in the CCOG's. Any minor changes within the course are stated in the Appendix for the course and a decision is made regarding major changes that need to be brought forward to the Curriculum Committee for the next year. Additionally, at the end of each term each instructor completes the **End of Term Report (See Appendix #2)** and submits it to the Director. This report maps the course with the Certificate Outcomes and allows the instructor to reflect on teaching methods, what went well with the course that term, and intended changes for the next offering. Further, specific course activities are chosen each year to assess whether they meet the course intended outcome as well as the certificate outcome and college core outcome they are mapped to. The in depth study is presented in the annual Learning Assessment Council (LAC) Report. Findings from the LAC Reports have been instrumental in determining improvements needed either in learning activity design or teaching methodology in order to improve student learning.

This three-pronged approach allows for thorough assessment by the SAC to ensure the course description, intended outcomes and topics are appropriate for student learning prior to the term offered and then also assessed at the end of the term for improvement of the course prior to its next offering. The in-depth LAC reporting allows

for focus specifically on certain aspects of learning activities to ensure the outcomes are being met in an assessable and effective way. The process that is currently being practiced satisfies both the college assessment requirements as well as the national CODA accrediting requirements.

ii. Identify and give examples of changes made in instruction to improve students' attainment of course outcomes, or outcomes of requisite course sequences that were made as a result of assessment of student learning.

Since the 2010 Dental Assisting Program Review, the program has incurred many changes. Two long-time faculty members retired and Jill Lomax and Magda D'Angelis Morris were hired to teach the Clinical and Radiology/Basic Sciences Courses respectively. In the few short years of their joining the team, major changes in curricula have occurred based on assessment information gained from the CPMP, the End of Term Review and the LAC Reports. The SAC has worked very hard to implement the changes listed below:

- DA 140 (Integrated Basic Science) was divided into two courses (DA 140A *Integrated Basic Science I* and 140B *Integrated Basic Science II*). The purpose of this change was to allow students who had previously taken a college level A&P Course, waive (DA 140B) which was a repeat of information that they had previously learned in their A&P Course.
- DA (160) Pharmacology and DA 156 (Ethics) were inactivated so that a new course DA 116 *Introduction to Dental Assisting* could be developed. This course encompasses important introductory pharmacology and ethics/jurisprudence information and is taught in the first term of the program rather than at the end where it had been previously taught. This change had been a long standing goal of the program, and one that has been of great benefit to students in their sequence of learning.
- Dental Assisting students completed rotations to the OHSU School of Dentistry in the past, but these rotations had been discontinued due to changes in philosophy by both entities. For the 2015 school year both OHSU and PCC DA collaborated together once again to reinstate the DA rotation experiences. The collaboration will be discussed in greater detail throughout the report.

B. Addressing College Core Outcomes

- i. **Update the Core Outcomes Mapping Matrix** - For each course, choose the appropriate Mapping Level Indicator (0-4) to match faculty expectations for the Core Outcomes for students who have successfully completed the course.

Mapping Level Indicators:

- 0: Not Applicable.
- 1: Limited demonstration or application of knowledge and skills.
- 2: Basic demonstration and application of knowledge and skills.
- 3: Demonstrated comprehension and is able to apply essential knowledge and skills.
- 4: Demonstrates thorough, effective and/or sophisticated application of knowledge and skills.

Core Outcomes:

- 1. Communication.
- 2. Community and Environmental Responsibility.
- 3. Critical Thinking and Problem Solving.
- 4. Cultural Awareness.
- 5. Professional Competence.
- 6. Self-Reflection.

Course #	Course Name	CO1	CO2	CO3	CO4	CO5	CO6
DA 110	Clinical Procedures I	0	2	2	0	0	1
DA 111	Clinical Procedures I (lab)	2	2	2	1	2	2
DA 112	Clinical Procedures II	0	3	3	0	3	2
DA 113	Clinical Procedures II (lab)	3	3	3	2	3	3
DA 114	Clinical Procedures III	2	0	4	3	0	3
DA 115	Clinical Procedures III (lab)	4	4	4	4	4	4
DA 116	Introduction to Dental Assisting	2	0	0	2	0	2

DA 118	Expanded Duties I	3	3	3	3	3	3
DA 119	Expanded Duties II	4	4	3	4	4	4
DA 120	Dental Radiology I	2	2	2	2	2	2
DA 121	Dental Radiology I (lab)	2	2	2	2	2	2
DA 122	Dental Radiology II	3	3	3	3	3	3
DA 123	Dental Radiology II (lab)	3	3	3	3	3	3
DA 125	Dental Radiology III (lab)	4	4	4	0	0	4
DA 130	Dental Materials I	3	1	1	1	0	2
DA 131	Dental Materials I (lab)	3	1	0	0	0	2
DA 132	Dental Materials II	3	1	2	1	0	3
DA 133	Dental Materials II (lab)	3	2	2	1	3	3
DA 135	Dental Materials III (lab)	3	2	3	1	4	4
DA 140A	Integrated Basic Science I	0	0	3	0	0	2
DA 140B	Integrated Basic Science II	0	0	3	0	0	2
DA 142	Integrated Basic Science III	0	0	3	0	0	3
DA 150	Dental Office Procedures I	3	2	2	1	1	2
DA 152	Dental Office Procedures II	4	2	2	1	2	3
DA 9406	Dental Assisting Practicum	0	0	0	0	0	0
Course #	Course Name	CO1	CO2	CO3	CO4	CO5	CO6

C. For Career and Technical Educational Programs: Degree and Certificate Outcomes

i. Briefly describe the evidence you have that students are meeting your Degree and /or Certificate Outcomes

Since 2010, with the help of Kendra Cawley (Dean of Academic Affairs) and Susan Wilson (Academic Support Coordinator), the program has been able to assess the students' ability to meet certificate outcomes in a much more streamlined process. Previously, the program was required by the institution to have certificate outcomes and the CODA Accrediting body required skill competencies. Kendra and Susan met with the program director and SAC chair in 2013, and together, we were able to design certificate outcomes that would meet both institutional and program accrediting requirements. Additionally, it was determined at that time that the results from national/regional testing could be used for Learning Assessment Report analysis. Their guidance was of great assistance to not only the DA program, but also the DH and DT programs as well.

The dental assisting certificate outcomes now encompass the core outcomes of the College and meet the skill competencies expected of the Commission on Dental Accreditation, and the State of Oregon Board of Dentistry's standard of care for the profession. Evidence that students are meeting the Dental Assisting *Certificate Outcomes* is listed below according to the course where the outcome is met and the degree of competency that it is met at (Introductory, Developing or Competent). Also included are the certification exams taken by our students and the pass rate since 2010:

Please Note: For a complete list of Course Titles and Course Sequencing, See Appendix 3

Certificate Outcome	Mapped to Core Outcome	Course/s	Meet Through	Competency Level	National Certification Exam /State Cert.obtained	Ntl. Certi. Pass Rate
Apply the knowledge and skills required to systematically collect diagnostic data	Critical Thinking & Problem Solving	DA 110, 111, 120, 121, 150, 130	Assignments, Projects, Written Paper, Quizzes, Midterm, Final Exam, Lab/Clinical Skill Activities, Self-Evals, Online CE	Introductory	DANB General Chairside (GC), Radiation Health and Safety (RHS) Exams Certified Dental Assistant (CDA) (DANB), Oregon Radiation	GC 2014= 84% 2013 = 94% 2012 = 91% 2011 = 93% 2010 = 93% RHS 2014= 94% 2013 = 90% 2012 = 85% 2011 = 94% 2010 = 97%
		140A, 140B, 112, 113, 118, 122, 123, 132, 133, 142		Developmental		
		DA 114, 115, 119,, 125, 135, 152		Competent		

					Proficiency	
Function as an effective and efficient member of the dental team by performing a variety of clinical supportive treatments	Professional Competency	DA 111	Assignments, Projects, Lab/Clinical Skill Eval, Self-Evals, Final Exam Journals	Introductory	DANB GC. Infection Control (ICE), and RHS Exams Oregon Expanded Functions Dental Assisting Certificate (EFDA) and Radiation Proficiency Cert.	GC (see above %) ICE 2014= 88% 2013 = 97% 2012 = 89% 2011 = 82% 2010 = 86% RHS (see above %)
		DA 120, 121, 122, 123, 133,		Developmental		
		DA 113, 118, 115, 119, 125, 135, 152, 133		Competent		
Utilize the most current infection control and safety	Community & Environmental Responsibility	DA 111	Assignments, Projects, Lab/Clinical Skill Eval, Self-Evals, Final Exam	Introductory	DANB ICE Exam	ICE (see above %)
		DA 120, 121, 122,		Developmental		
		DA 113, 118, 123, 133, 115, 119, 125, 135,		Competent		
Communicate effectively both verbally and in writing with the dental team members and patients	Communication Cultural Awareness	DA 111, 116, 130, 131	Assignments, Projects, Lab/Clinical Skill Eval, Self-Evals, Final Exam, Group Activities, Online Discussion	Introductory	NA	NA
		DA 120, 121, 122, 123, 132, 133, 150,		Developmental		
		DA 113, 118, 114, 115,135, 119, 125, 152		Competent		
Function in a responsible, professional and ethical manner	Community & Environmental Responsibility Professional Competence	DA 110, 111, 116, 130, 131	Assignments, Projects, Written Paper, Quizzes, Midterm, Final Exam, Online Discussion, Group Activites	Introductory	NA	NA
		DA 120, 121, 140A, 140B, 122, 123, 132, 133, 142, 150		Developmental		
		DA 112, 113, 118, 114, 115, 125, 152,		Competent		

Demonstrate the clinical skills needed to perform direct patient care as stated in Division 42 in the Oregon Practice Act	Professional Competence	DA 111	Assignments, Projects, Lab/Clinical Skill Eval, Self-Evals, Final Exam	Introductory	DANB GC. ICE, and RHS Exams	GC (see above %)
	Critical Thinking & Problem Solving	DA 120, 121, 113, 118, 122, 133,		Developmental	DANB CDA Cert.	
		DA 123, 115, 119, 125, 135		Competent	Oregon (EFDA) and Radiation Proficiency Cert.	
Address and respond appropriately to the issues that may arise from cultural and socioeconomic differences in both a dental and community environment	Cultural Awareness	DA 116, 120, 121, 130	Assignments, Group Activities, Written Paper, Quizzes, Midterm, Final Exam, Service Learning Project, Online Discussion	Introductory	NA	NA
		140A, 140B, 122, 123, 132, 133, 142, 150		Developmental		
		DA 113, 114, 115, 125, 152		Competent		

(Results gathered from End of Term Reports)

- ii. **Reflecting on the last five years of assessments, provide a brief summary of the one or two of your best assessment projects, highlighting efforts made to improve students’ attainment of your Degree and Certificate Outcomes.**

In reflecting on the past five years of assessments, one of the best assessment projects was submitted in the spring of the 2013-2014 school year. These reports received an “Exemplarity Report Award” from the Learning Assessment Council and assessed the following program outcomes:

Program Outcome	PCC Core Outcome
Outcome #1: Apply the knowledge and skills required to systematically collect diagnostic data.	Critical Thinking and Problem Solving
Outcome #3: Utilize the most current infection control and safety precautions in all laboratory clinical settings.	Community and Environmental Responsibility

For the Dental Assisting National Board (DANB), dental assisting students take 3 external national exams throughout the dental assisting program. Although the exams are pass/fail, each exam has multiple sub-content categories that have been mapped to the PCC core outcomes.

While the desired level and benchmark for the Dental Assisting program is for each student to successfully pass each of the three exams, it is possible for the students to still score lower than the state and/or national averages in certain sub-content areas of the exam. If the dental assisting program can alter its curriculum to strengthen the sub-content areas where the students scored lower than the average, it is likely that the overall exam scores of future students will be higher all together, thus increasing the pass rate.

For outcome #1, the report found:

49 students attained the desired level

5 students did not attain the desired level

For outcome #3, the report found:

65 students attained the desired level

8 students did not attain the desired level

Efforts were made to improve students' attainment for degree outcomes that included the following:

1. Compare PCC scores to both national and state averages. In general, the Dental Assisting SAC found that PCC's scores were slightly below the Oregon average, but either slightly or moderately above the national average.
2. Identify the content in the weakest sub-content areas of the exam and make academic changes that strengthen the curriculum in that area.
3. Perform formative assessments by creating mock board exams to monitor student attainment and prepare students for the national exams. Mock board exams were conducted throughout the following (2014-2015) school year.

For the full report, click on following link:

<http://www.pcc.edu/resources/academic/CTEArchiveEOY.html>

iii. Do you have evidence that the changes made were effective (by having reassessed the same outcome)? If so, please describe briefly.

Reassessments for these outcomes have not yet occurred. Since DANB sends out the exam results once a year that covers the time period between Jan. 1st-Dec. 31st, results will be re-assessed in the spring of 2016 after getting the DANB report for Jan1st-Dec. 31, 2015.

iv. Evaluate your SAC's assessment cycle processes. What have you learned to improve your assessment practices and strategies?

The Dental Assisting SAC's cycle process includes reporting on two program outcomes per year as noted on the multi-year plan. Discussions regarding the assessment cycle and reports take place in a face-to-face meeting and occasionally over email.

To improve assessment practices and strategies, the SAC has received peer review feedback from previous reports and have learned how to create meaningful assessments (i.e. creating proper rubrics that support specific analysis and inter-rater reliability; not "averaging away" meaningful data). In addition, the main writer for the reports for the past two years has been a Peer Reviewer for the Learning Assessment Council allowing for insight in ways to improve assessment practices, strategies, and writing of reports. As stated previously, the DA SAC was awarded the "Exemplary Report Award" in 2013/2014. Most recently at the 2015 SAC Chair Inservice it was once again announced that the DA SAC had earned the "Exemplary Report Award". Being given this award two years in a row validates the hard work of the DA SAC and acknowledges efforts that have taken place to listen to the past peer reviewers' feedback and utilize it for improving student assessment and the evaluation of its success in DA student achievement of outcomes.

v. Are any of the PCC'S Core Outcomes difficult to align and assess within your program? If yes, please identify and explain.

While all PCC's Core Outcomes have been successfully mapped to the Dental Assisting Program Outcomes, *Cultural Competency* is more difficult to assess. Currently students receive the majority of their cultural competency training while enrolled in DA 116, Introduction to Dental Assisting. This course includes the topics of ethics in healthcare and dental radiology. Students learn how to address patients of different cultures (particularly the Latino and Asian cultures) and how to identify cultural issues as it comes to accepting or not accepting suggested care. For this coming year the SAC is very excited to add to this course the "30 Minute Speed Talking" offered by the International Students Department. It is hoped that international students will come to the DA 116 course and discuss with the class the topic of *Oral Health within Their Culture*. Rotating in a "speed dating" type format will allow students to exchange thoughts and ideas between cultures and will ultimately be of great benefit to both groups of students. This collaborative event is scheduled to take place Dec. 1st, 2015.

Please Note: The following table provides a brief review of the outcomes assessed for the LAC Reports by the DA program since the last program review:

Year	Outcome Assessed	Assessment Activity	Change made based on findings
2014/15	Professional Competence Critical Thinking & Problem Solving	DANB National Board Testing: General Chair-side Exam Scores and Radiation Health and Safety Scores.	Increase instruction in sub content areas where low scores received.
2013/14	Refer to Detailed Summary Above in Section ii of report		
2012/13	Professional Competence	DA 123 Radiology Lab Mock Board Exam	Add more mock boards and timed exercises into earlier terms; Add flowcharts to help organize process.
2011/12	Communication Self-Reflection	Service Learning Project/ Presentation(DA112, 114) Externship Journal Reflections weeks 3, 6, 9	Include info on permission for photographs. Improve instructions and rubric
2010/11	Community and Environmental Responsibility	Documentation of Med Emerg and Haz Waste Protocols in Extern Offices	Improved Rubric to include more critical thinking

III. Other Curricular Issues

- A. Which of your courses are offered in a Distance Learning modality (online, hybrid, interactive television, etc.), and what is the proportion of on-campus and online? For courses offered both via DL and on-campus, are there differences in student success? If so, how are you addressing or how will you address these differences? What significant revelations, concerns, or questions arise in the area of DL delivery?**

All program classes have a level of distance learning modality ranging from complete online (DA 130) to using D2L for providing quizzes and recorded lectures. There are many advantages to utilizing distance learning within the program. Distance learning enhances students understanding of complex material which then can be clarified and enhanced in the weekly laboratory and clinical sessions that are offered face-to-face on campus.

The program is no longer limited by the class / lecture schedule. Students are able to complete or review the material online at their convenience. Example: Many lectures are scheduled on Tuesday and Thursday and do not match with the lab rotation of M, W, F. The Monday group may not have the lecture until after they have already completed the assigned lab on Monday. Lectures posted online can be accessed by students prior to their attendance in lab courses, allowing the didactic knowledge to be transferred easily as the skill is practiced.

One of the other many advantages is that the online format promotes self-direction in education. Students must learn to take responsibility for their learning and schedules to complete assignments. This is difficult at first as the students want the instructors to provide 100% leadership. The instructors help the students assimilate to online learning and time management/organizational skill enhancement through many supportive tools and activities.

Additionally, the program is able to address all learning styles. Students are able to review recorded lectures and/or watch videos to enhance their understanding of a particular subject. The use of technology addresses the students varied interests and promotes curiosity. Instructors know how to help students access the information and resources online and are available to support or point them in the direction when necessary.

Discussion forums allows each student to have a voice. It promotes peer to peer learning and encouragement. As an instructor, LeeAnn Redifer responds to each student for each assignment. Coaching about content or class participation can be addressed in a thoughtful manner and the student who never voices their opinion in a face-to-face class can now be heard in a safe, accepting environment. Courses taught by Magda D'Angelis Morris are taught in a hybrid F2F and online formats. Dropbox is used for reflections. This provides immediate feedback to determine if students are on track or if they need didactic or advising help.

DA courses are not taught in a format where some sections are taught face-to-face and other sections are taught on-line, so comparisons cannot be made in this area. Comparisons can be made however between the learning differences of DA 130 previously taught face-to-face and now changed to an online format. LeeAnn has learned that once the students learn online learning strategies to maneuver through the course and process, they enjoy the fact that they can be self-paced and have the ability to review material as often as necessary to gain a deeper understanding of the subject concepts.

- B. Has the SAC made any curricular changes as a result of exploring/adopting educational initiatives (EG community based learning, internationalization of the Curriculum, inquiry-based learning, honors, etc.). If so, please describe.**

Beginning in 2011, the Dental Assisting program expanded the Service Learning Project to better explore educational initiatives. The Service Learning project aligns with the PCC Core Outcome of “Cultural Awareness” and also the Program Outcome of “Address and respond appropriately to the issues that may arise from cultural and socioeconomic differences in both a dental and community environment.”

The goal of the service learning project is to provide more involvement with our local community by having students present meaningful oral health presentations at different locations and to varied audiences (i.e. schools, community programs, and senior living facilities). The idea behind the project is to help the audiences involved understand the importance of and the best methods for obtaining an optimal level of oral health.

After presenting their project out in the community, the group of students then presents their project to the class by giving a brief synopsis of their project and by answering 8 key questions (i.e. what were the overall thoughts/attitudes about this experience? Did they change throughout the assignment? How did/do you relate this experience to your professional dental assisting responsibilities?). Of all the groups, a few groups are selected to then present their project to the Dental Assisting Advisory Board during the spring meeting.

Collaborative efforts have also resulted in something that was once “old and lost” becoming something “new and relevant.” The instructors have coined this collaboration as: *OHSU: New Facility = New Attitudes = New Partnership.*

OHSU’s prior Dental School site was old, cramped and difficult to function in for the staff and dental students. The dental clinic floor was at capacity with the dental students and did not facilitate 4-handed dentistry or correct positioning for our students. There simply was not enough room for the PCC Dental Assisting Students. With the space limitations, it became evident OHSU had become less than an ideal learning environment for the PCC DA students. Completion of the new OHSU School of Dentistry building on the South Waterfront brought an invitation from the Dental School Dean to revisit a collaborative effort between both schools.

In Fall Term of 2014, staff and faculty from both the PCC DA Program and the School of Dentistry supported a collaborative effort by developing a “Dental Team Experience” for students from both schools. The desired outcomes of the experience were to introduce Junior and Senior Dental Students to the utilization of chairside dental auxiliary (DA Students) during patient care. Working together, both student groups would be better prepared to assimilate into the “real world” of dental practice upon graduation.

In addition, PCC students would learn to assist during procedures performed by the dental students that were not practiced in the PCC Clinic, while also utilizing a variety of other more advanced dental materials

Extremely important to the PCC students were rotations through OHSU's specialty clinics. These rotations allowed them to observe, and in many instances assist in procedures such as oral surgery, endodontic (root canal), periodontal (gum/implant), prosthodontic (crown and bridge) and orthodontic treatment. Experiences such as these prepared PCC students to rotate to externship sites Spring Term with a higher level of confidence and skill ability and ultimately be competent at an advanced level upon graduation.

The outcomes of the project were completely met and both programs are eager to continue collaboration in the future. To enhance and better prepare the DA students in the 2015/16 school year, PCC Instructors will develop and implement an OHSU orientation both in written form and through learning modules prior to the rotation experience. Additionally, PCC DA and DH programs have been approached by the School of Dentistry to collaborate in a new pilot project with fourth year dental students. This project will mimic "private practice" through IPE and is in the planning stages. Implementation will take place Winter and Spring Terms 2016.

C. Are there any courses in the program offered as Dual Credit at area High Schools? If so, describe how the SAC develops and maintains relationships with the HS faculty in support of the quality of instruction.

A long term goal has been finally realized. Since the director began her tenure in 2005, discussions occurred many times with Pav-tech personnel concerning the possibility of creating dual credit with area high schools. Benson High School was the logical choice to begin these discussions with since the school had a dental assisting pathway in their Health Careers Program. Through the years faculty at Benson changed and the dual credit conversation was tabled. In 2013/2014 the director was invited to serve on the Instructor Approval Committee to evaluate and recommend Ms. Janae Jamison for HS CTE credentialing to teach Dental Assisting in the Benson Program. A relationship began and dual credit possibilities were once again revisited. In December 2014, Ms Jamison and Magda D'Angelis-Morris, the PCC DA Radiology instructor were able to compare both programs' radiology courses and determined they should be presented for dual credit. Happily, Karen Jones, PCC Dual Credit, CTE Specialist, reported in January 2015 that nine PCC dental assisting radiology credits were approved to articulate with Benson High DA course material. Karen wrote *"This will show great progress towards meeting the 40-40-20 achievement compacts in helping students earn 9 free college credits by the time they graduate."*

The courses that were approved for articulation are:

- DA 120 – Dental Radiology I, (2 credits)
- DA 121 – Dental Radiology I Lab, (2 credits)

- DA 122 – Dental Radiology II, (1 credit)
- DA 123 – Dental Radiology II Lab, (2 credits)
- DA 125 – Dental Radiology III Lab, (2 credits)

D. Please describe the use of Course Evaluations by the SAC. Have you developed any SAC specific questions? Has the information you have received been of use at the course/program/discipline level?

The information collected from course evaluations have been used and reviewed on a personal basis and are not historically shared among the SAC. In the spring of 2015, the DA program discussed adding SAC specific questions to the course evaluations starting in the Fall of 2015. The additional questions are:

1. The instructor made connections between the course material and employment in the dental community.
2. This course provided the opportunity for self-reflection.
3. The instructor used learning tools and strategies to enhance classroom engagement.
4. Technology in this class (if/when used) was used appropriately and effectively.
5. This class was appropriately challenging for academic growth (not too easy, not too hard).
6. I studied the recommended amount of hours for this course outside of class.

Feedback from previous course evaluations have resulted in the following changes:

1. Portfolio Assignments were created in DA 133 (Dental Materials) and 150/152 (Office Procedures) to allow students to identify areas of individual focus, become more self-directed and track success in reaching their goals.
2. DA 110, 112 and 114 (Clinical Procedures Theory) incorporated more interactive classroom activities to compliment the didactic material presented, as well as revised group projects so that part of class time could be used for group member meetings.
3. DA 122 and 125 (Dental Radiology Theory) implemented use of iclickers for immediate feedback to students and instructor regarding student learning; for practice test taking in a technology format expected when sitting for certification exams; and to appeal to multiple learning styles. Use of online “Evolve” textbook resources enables students to use interactive tools during study of material.

E. Identify and explain any other significant curricular changes that have been made since the last review.

- OHSU (already discussed in section B above)
- Service Learning Project (already discussed in section B above)

- DA 116 “Intro to Dental Assisting” Course developed to include: Ethics, Oregon Board of Dentistry Division 42, Medical Emergencies and Pharmacology.
- New faculty resulted in bringing forth new ideas for curricular changes
- Changes made based on new CODA standards (inclusion of medical emergencies into intro curriculum and instructional assistant replaced with PT faculty member during pre-clinical and clinical radiology sessions.
- DA/DH Restorative Clinic: Pilot program introduced in 2012-2013 to create collaboration between the two departments. DH students learn to utilize a dental assistant during restorative procedures and DA students gain more experience assisting prior to externship rotations and graduation.

Future changes expected during the 2015/16 school year include implementation of inter-professional education through:

- Implementation of CAD/CAM between DA and Dental Laboratory Technology
- Collaboration with Nursing, Medical Imaging and the Dental Sciences Programs in design of IPE student learning experiences
- Advanced collaborative efforts with Pilot Project between OHSU fourth year dental students, PCC DH and PCC DA.

IV. Needs of Students and the Community

A. Have there been any notable changes in instruction due to changes in the student populations served?

Today's college students are connected with their world through the use of technology. The incoming dental assisting student may not know how to dial a phone number and actually verbally talk to a patient to confirm an appointment, but they could text, email, instant message, tweet, or “like them on face-book” with ease and at a high level of competence. Similarly, they may not be able to measure water and dental stone to ounces or cc's, but they could U-tube the procedure in an instant to have someone demonstrate the process to them.

Technology, with all of its advantages, presents us with a new set of challenges. The profession of Dental Assisting requires multiple skill sets to be successful. We are observing each year that students come into the program with less “hands on” experiences and less creativity using hand eye coordination. Simple tasks that may have been taken for granted in the past, must now be taught and practiced. Both students and instructors must be patient with the “new normal” of our incoming students and the “reality of what is” in private practice. The student of today wants more technology,

faster and available all the time....they want to be engaged and challenged in ways that utilize the highest level of technology possible.....what used to be scary to a student.....is now scary to an instructor when having to learn the new technology teaching methods students prefer. The instructors are up for the challenge and are going (or at least trying) to go boldly forward. An extensive amount of time is spent contacting and visiting offices to keep the program current with the technology being used in today's dental practice. PCC wants to be the leader in providing the best trained Dental Assistants to meet the current job market needs in the area of technology.

Changes in instruction that are occurring within the program to address changes in the DA student population and also changes in dental practice include:

- The use of audience response systems (i>clickers). Since many college level students in general are more technologically advanced than in past years, i>clickers have been implemented in many of the DA courses to provide both, a more engaging learning environment and foundation for formative assessment.
- Audio taping and posting of lectures: Instructors are currently working on audio taping their live lectures to enhance student learning, specifically, auditory learner. Students will be able to review the material at home at their own leisure
- D2L is used solely as an online platform for some of our courses and as a adjunct to other classes. Instructors use it for posting lectures and immediate grading/feedback
- Instructional videos made with Camtasia. In order to implement some “flip-classroom” instructional strategies, instructors have made instructional videos for students to watch on their own time so that the time in class could be better utilized for learning activities. This also serves as a platform for students to refresh their memory on topics throughout the school year.
- Collaboration with the Roots Program to increase student success: Prior engagement with the ROOTS Program to help first-time College students succeed. This collaboration was particularly important for Latino students. The ROOTS Program coordinator provided an extra resource that our students could tap into to help them succeed in our rigorous program.
- Training of faculty and staff in Eaglesoft Electronic Health Records, Digital Imaging and Intra-Oral Cameras recently installed will take place Fall Term of 2015. Student training and use during patient care is slated to begin Winter Term 2016.
- Future CAD/CAM collaboration between the DA and DLT programs will be developed through the help of the Ed and Betty Duvall Scholarship Award presented to Instructor Jill Lomax for study of this important technology method of scanning and milling dental crowns.
- The rapidly growing, large group dental practice in the Portland area has changed the current job market for PCC graduates. PCC has addressed this by forming partnerships and expanding the student practicum externship sites to increase opportunities for students to experience practice in these larger practice settings.
- Portfolio Projects in Dental Materials and Office Procedures have been designed to develop critical thinking and self-assessment.

The following statistical information reveals other important data regarding the students served in the Dental Assisting Program:

- PCC Institutional Effectiveness demographic statistics for the last three years reveal the program’s students represent a race/ethnicity diversity range of 35.7 – 37.5%. This percentage range closely mirrors race/ethnicity data reported by Institutional Effectiveness for Winter 2015 college-wide credit earning students:

White	17,780	65.2%
Asian	2,034	7.5%
Pacific Islander	164	0.6%
Hispanic	3,040	11.1%
Black	1,628	6.0%
American Native	286	1.0%
Multiracial	1,595	5.8%
Foreign National	760	2.8%

http://www.pcc.edu/ir/factsheet/credit/factsheet_201501_wk04.pdf

- Typically, females dominate the field of dental assisting, but males have been showing increasing interest over the past several years. During the current year the program has two males enrolled.
- The following table exhibits that dental assisting is a career that appeals to newly graduated high school students, as well as the more mature adult returning for a change of career or re-entry into the work force.

Dental Assisting

COLLEGEWIDE TABLES (Excl Campus 6 & HS dual credit): Age Distribution							
		18-20	21-25	26-30	31-40	41-50	51-60
		N	%	%	%	%	%
Collegewide, Excl Campus 6							
	2012-2013	43	18.6	41.9	14.0	18.6	7.0
	2013-2014	42	19.0	45.2	16.7	16.7	2.4
	2014-2015	45	24.4	33.3	17.8	20.0	4.4

The PCC Dental Assisting Program attempts to meet each student “*where they are*” when they enroll and guide them along the way to becoming a competent DA. Whether language, financial or study skill barriers exist, the faculty work hard to find the most effective resource available at the college to help.

B. What strategies are used within the program/discipline to facilitate success for students with disabilities? What does the SAC see as particularly challenging in serving these students?

Accepted students in our program have to be able to perform certain technical standards essential to performing functions as a dental assistant. **Please see Appendix 4 for a list of Dental Assisting Technical Standards.**

Typically students have been able to perform all of the technical standards, however, we recently had a student with a hearing impairment enter the program. Within the first week the student was connected with Disability Services, and with an advisor's help, the student was supplied with a hearing aid device that helped her successfully complete the program. She not only was able to graduate and work in the field as a dental assistant, but has currently been accepted into a dental hygiene program.

Students with learning disabilities are encouraged to seek help through the college at large. Occasionally students require additional time testing. In these instances, students are directed to Disabilities Services and with appropriate documentation, arrangements are made to allow for appropriate testing time in the testing center.

Dental Assisting requires skills based on particular types of daily duties. The program will explore accommodations for a student with a physical disability, but may realistically not be able to accommodate all physical limitations. Students with learning disabilities might have difficulties passing his/her certificate exams, as DANB exams do not accommodate for sensory and learning disabilities.

<http://www.danb.org/About-DANB/~media/Files/Forms/Request%20Forms/Reasonable%20Accommodations%20Form.ashx>

C. Has feedback from students, community groups, transfer institutions, business, industry or government been used to make curriculum or instructional changes? If so, please describe (if this has not been addressed elsewhere in this document).

Student feedback is continuously used for improvements of individual courses (through course evaluations) and the program as a whole (exit surveys). Employer surveys and Alumni surveys are also distributed with less helpful information due to low response rates.

Of great importance to the program is the feedback generated from the dental assisting advisory committee members, as well as that of the externship site partners.

The DA Program has an advisory committee formed of industry and public members. Membership consists of: dental assistants, dental hygienists, dentists and high school instructors in the health professions. The Advisory Committee meets 2-3 times per year (see section VII A. for a more complete description of the impact the advisory committee has had on program improvement).

Externship partners provide feedback by communicating with an instructor liaison assigned to the student placed in their office. This communication occurs when the instructor visits the Externship site to observe the student personally and also through email or phone communication whenever feedback needs to be given by either parties. Visits to the office by the instructor allow staff to experience the local dental community first hand. These visits create a partnership with dental office staff and students to discuss what skills are necessary to transition from student to employee. Coaching and or remediation often occur in the form of observation and or team meetings to provide the necessary feedback to both the instructor and the student. Additionally, formal feedback is provided by the office supervisor at three, six and 9 weeks of the externship.

We are very proud of the positive feedback we receive about the students who complete externship rotations in dental offices throughout the Tri-County area and beyond. One student revealed the following in a journal reflection:

“I have been told by almost everyone at my practicum that I am the most productive extern that has been at their office, and to not change a step of what I have been taught, because I was taught well. They are really impressed with my production, and thank Portland Community College for having such an informative dental assisting program that is benefiting me throughout my journey as a dental assistant.”

Accolades such as this result in a definite “win” for the program; they validate to the instructors that what they are doing is valued by the dental community and reinforce to the student that they made the right career choice, as well as educational institution choice.

Please See Appendix #5 for Complete List of Externship Site Rotations for 2014/15

Additionally, examples of other industry support includes:

- Presentations and donations by local dental supply companies on topics such as:
 - Patterson Dental/Cerec Milling Machine
 - Ultradent Whitening Tray Instruction with Materials
- Willamette Dental Field Trip: professionals completed “mock interviews” with the students prior to graduation
- Board of Dentistry: Presentations from the executive director regarding chart documentation and professional expectations
- Group Practice Presentations Employment Opportunities
- Extern Rotation sites

Maintaining collaborative efforts between the dental community and the dental assisting program is extremely important to ensure that we are teaching at the highest standard possible. Communication is key in establishing and maintaining relationships

with all stakeholders. In an effort to inform and update the community about the program and department, DA Instructor, Jill Lomax designed the first Department Newsletter in spring of 2015 entitled “*Mirror & Explorer*”. This publication was mailed to all community partners and will continue to be published on a semi-annual basis (End of Fall and Spring). *Copies will be available to Administrators and Guests at the Program Review Presentation.*

V. Faculty Reflect on the composition, qualifications and development of the faculty.

Provide information on:

A. How the faculty composition reflects the diversity and cultural competency goals of the institution.

The dental assisting faculty is comprised of three FT faculty members:

- LeeAnn Redifer (Hire 09/1997) - Teaches Dental Materials, Office Procedures
- Magda D’Angelis-Morris (Hire: 08/2009) Teaches Radiology, Basic Sciences
- Jillian Lomax (Hire Date 09/2013) Teaches Clinical Theory/Skills, Expanded Functions

Part Time Faculty include:

- Peggy Lewelling – Teaches Intro Basic Science, clinical and expanded function skills
- Sandy Crawshaw – Teaches Radiology Lab Skills
- Dr. Robert Jones – Clinical Dentist
- Dr. Daniel Blickenstaff – Clinical Dentist
- Dr. Tuan Truong – Clinical Dentist

The faculty composition reflects diversity and cultural competence through their own cultural diversity, bi-lingual speaking ability (Spanish, Vietnamese), gender diversity, dental practice in culturally diverse settings, variety of continuing education training courses in cultural awareness, treatment of patients of all ages and medically compromised as well as special needs patients.

B. Changes the SAC has made to instructor qualifications since the last review and the reason for the changes. How do the qualifications differ /compare between FT and PT. Is it difficult to find PT faculty (talk about these things)

The current dental assisting instructor qualifications were revised and approved in November of 2013. Revision occurred to reflect CODA Standards for dental assisting faculty and also certifications required by the Oregon Board of Dentistry. The new qualifications are:

“Instructor must have current CDA (Certified Dental Assistant), Oregon Radiology Proficiency, Oregon EFDA and Sealant Certificates; Bachelor’s Degree required; Clinical Experience of five years in a FT position either as a general chair-side assistant or as a dental assisting instructor. A dental hygiene license or dentist license could substitute for the dental assisting certificates.”

It can be difficult to find part-time clinical and radiology faculty who have the required Bachelor’s Degree due to the fact that a dental assistant can sit for DANB CDA tests and gain all other certificates required by either graduating from a certificate program or receiving approved State Board of Dentistry training. The department has been fortunate to hire part-time instructors who either have earned a bachelor’s degree or are working towards a bachelor’s degree and have demonstrated competence.

Qualifications for related instruction remain the same as they were in the last program review:

Related Instruction:

- *Five (5) years recent clinical experience in the dental office setting (computation, communication)*
- *Experience in curriculum design, teaching or training (human relations)*
- *Recent continuing education in the dental field (human relations)*

Per email conversation with Sally Earl (Curriculum Coordinator), related instruction information will be reviewed and revised to address college accreditation requirements. This work will be taking place in winter 2016.

C. How have the professional development activities of the faculty contributed to the strength of the program/discipline? If such activities have resulted in instructional or curricular changes, please describe.

- Jill:
 - Betty and Richard Duvall Faculty Professional Development Award (This award will help the instructor integrate CAD/CAM technology into the dental assisting program and provide a platform for interdisciplinary collaboration)
 - Peer Reviewer for PCC’s Learning Assessment Council (2014, 2015) (This experience has provided the instructor an inside look into how PCC reviews the college’s core outcomes and provided opportunities to make connections within the college)
 - Inter-professional Education Faculty Taskforce Member (This collaboration is intended to provide a platform for inter-professional education by allowing dental, nursing, and radiography students to experience healthcare in a holistic approach)

- Volunteer Dental Assistant at Salem Free Clinic- Salem, OR (This experience has allowed the instructor to keep current with chair side dental assisting)
- Magda:
 - Dale Foundation Contribution – worked in the development of a Head and Neck course for Dental Assistants. This course will be used as a learning source for national students preparing for their certificate exams. Working with this group of professionals enhanced the instructor’s insight into what the Dale Foundation/DANB expects our students to learn to prepare for their national exams.
 - Inter-professional Education Faculty Taskforce Member – This collaboration provided more insight into the team approach of care delivery which translates into better teaching to benefit our students.
 - Member of EAC – involved in the global discussions of degree completion, general studies and CTE conversations.
 - Volunteer for the OHSU Center for Diversity & Inclusion. I analyze research data, trends and help write recommendations to increase recruitment and retention at different stages of the minority pipeline, beginning in middle school. I also look at research on cultural teaching models for health professionals and have begun to incorporate these topics into my classes.
 - SAC chair – Provides opportunities to enhance our curriculum, courses, etc...
- LeeAnn
 - Volunteer Creston Children’s Dental clinic
 - Keeping current in chairside dental assisting
 - Academic Integrity Task Force Member (PCC)
 - SAC chair
 - Peer Reviewer for PCC’s Learning Assessment Council
 - Make connections in the PCC Culture and environment
 - Helping Adults Learn (Marylhurst)
 - Gauging Performance, Assessment and Evaluation (Marylhurst)
 - Designing Effective Assessments (PCC)
 - Instructor Effectiveness (PCC)
 - Portfolio Projects in Dental Materials and Office Procedures (reflection and critical thinking)
 - QM rubric Update Training Certificate QM Peer Reviewer Certification
 - QM Applying the QM Rubric Certificate workshop
 - QM Choosing and Using Media Effectively Certificate workshop
 - QM Improve Your Online Course Certificate Workshop
 - Successful Online Outcomes: Improved Discussions Workshop. (Sloan-C)
 - Enhance online teaching strategies
 - Institute for Instructional Excellence (Chemeketa)

VI. Facilities and Academic Support

A. Describe how classroom space, classroom technology, laboratory space, and equipment impact student success.

Many changes have occurred since August of 2015 to improve laboratory and clinical space, as well as technology. The following changes will be instrumental in impacting student success by providing the updating technology students will experience upon graduation:

- HT 204 Dental Materials Lab
 - re-arranged/remodeled cabinetry to allow for improved student seating and better access for lab activities
 - Installation of large monitor screen for presentation of power point material and visual presenter abilities
- HT 208 Radiology Lab
 - Installation of computers, digital sensors for dental imaging
 - Installation of Mondo “Smart Board” for interactive teaching methodology during laboratory sessions.
- HT 202 and HT 2013 Dental Clinic
 - Installation of new A-dec Dental Chairs and Dental Operating Units to include Computers/Monitors for Electronic Health Records, Intra-Oral Cameras and Ultrasonic Scaling Machines.

While implementation of the new technology certainly improves student competency upon graduation, challenges still remain due to the limited space that is available in the clinic. Clinical space between dental units is far less than industry standards, especially when considering that each dental unit must accommodate an operator, patient, assistant and many times an instructor. Cramped space leads to problems related to patient confidentiality, infection control and safety challenges during movement in the less than ideal available space.

Additionally, a dedicated classroom for class lectures would be an ideal situation for delivery of lectures. Constantly travelling with demonstration material to classrooms throughout the campus is challenging for instructors, but is understandable given the current classroom assignment structure.

B. Describe how students are using the library or other outside-the classroom information resources.

Over the last several years the department has noticed that students are much more prepared to research information needed to be successful in class. It is no longer necessary for sessions to be held in the library to demonstrate how to search for topics

or how to use the various resources. Instead of shelves lined with hard copies of books to use as resources, the dental assisting student is able to research information through a variety of other tools. In the past students who did not have home computers were more likely to use the library computers, but more recently, students are less likely to utilize the library for this purpose. The DA SAC have stated as one of its 2015/16 goals is to establish a renewed relationship with Jen Kludinyi (the new library specialist assigned to their program) in the hopes of finding innovative ways to increase library usage for learning.

Additional web-based resources utilized by DA students include sites such as Dentalcare.com, a website created by Proctor and Gamble that provides CE Courses and end of course assessments on current dental topics. Other examples are the educational webinars for Eaglesoft dental database and dental specific YouTube videos.

C. Does the SAC have any insights on students' use of Advising, Counseling, Disability Services, Veterans Services, and other important supports for students? Please describe as appropriate.

Counseling Center: A representative from the counseling center presents information to our students on topics such as individual learning styles, time management and study skills. The students also learn about the advisors availability to help students during the duration of our program. This presentation typically occurs at the beginning of fall term.

Students are also informed that they have 8 free hours of counseling at PCC. This information is provided at the first orientation in a video format and during advising.

Health Admissions Advising: Due to the large number of applicants interested in the Dental Assisting Program, the Health Admissions Advisors play an instrumental role in preparing potential students for application to the program. Providing information sessions, developing advising guidelines and application materials all create a seamless process for entry into the program as possible. Additionally, the HAO Advisors communicate and collaborate with the Director to ensure that the Website and brochure for the program is updated annually.

Jobs/Internships Office: Diane Jantze has been extremely valuable by presenting job search strategies, marketing approaches with their resumes and interviewing skills.

Testing Center: The testing center is utilized for make-up exams and students requiring additional testing time.

VII. For CTE Programs:

To ensure the curriculum keeps pace with changing employer needs and continues to successfully prepare students to enter a career field:

- A. Evaluate the impact of the Advisory Committee on curriculum and instructional content methods, and/or outcomes. Please include minutes from the last three Advisory Committee meetings in the Appendix.**

The Advisory Committee asks clarifying questions, provides input to current market trends and suggest program improvements. As an example: the advising members suggested to the DA program that candidates to the program should job shadow for “12” hours as a pre-requisite for admission. This gives the candidates an opportunity to learn about what it means to be a dental assistant. With the help of the Health Admissions Office, this has now been implemented. The class of 2015-2016 is the first class to meet these requirements and data will be collected at the end of the year to evaluate student retention/attrition rates and quality of applicants.

One of the most important contributions made by advisory committee members is the volunteering of their time each quarter to be “Study Buddies” for the students. The Study Buddies are a group of dedicated dental assistants who share their passion and commitment with PCC by tutoring or coaching DA students in the clinical setting. These sessions have become very popular with students, especially by allowing additional practice of more difficult skills prior to demonstrating competency in the clinic.

Please see Appendix # 6 for a list of DA Advisory Members and Appendix # 7 for Advisory Committee Minutes from the past three meetings.

- B. Describe current and projected demand and enrollment patterns. Include discussion of any impact this will have on the program.**

According to most recent data in the Occupational Outlook Handbook, *“Employment of dental assistants is projected to grow 25 percent from 2012 to 2022, much faster than the average for all occupations.”* (US Bureau of Labor Statistics). The following reasons for increase in demand were cited:

- Research linking oral health and general health increases the demand for preventive services.
- Dentists will continue to hire more DA’s to complete routine tasks, allowing the dentist to see more patients and attend to more complex treatment.
- The aging baby-boomer population is keeping their teeth longer and will continue to increase the need for maintenance and treatment.

- Federal health legislation has expanded the number of patients who have access to health and dental insurance enabling more people to visit the dentist more often.

We experience the high demand for dental assistants daily through phone calls from interested dentists who either want to hire one of our graduates, or are wanting to be an externship site for our students in training. All interested hiring employers are referred to Diane Jantze in the Jobs and Internships Office. Diane reports that:

“Out of the seven CTE programs I serve at Sylvania, I consistently get the most calls from dental offices seeking to hire Dental Assistants; more than any other program I serve for Jobs and internships. On average, over the past 6 terms, 50% of all the jobs I forward to students are in the Dental Assisting Program.” (D. Jantze, Sept 2015)

The table below illustrates the number of jobs Diane forwarded from interested employers to each of the seven programs she serves from Spring Term of 2014 to Summer of 2015:

DA 40 61%	DH 5	DLT 0	Nur 4	Rad 1	Am 13	Mch 2	Total 65	Summer 2015
DA 34 45%	DH 9	DLT 6	Nur 6	Rad 1	Am 16	Mch 4	Total 76	Spring 2015
DA 18 46%	DH 3	DLT 3	Nur 3	Rad 0	Am 7	Mch 5	Total 39	Winter 2015
DA 20 35%	DH 1	DLT 5	Nur 4	Rad 1	Am 19	Mch 7	Total 57	Fall 2014
DA 16 40%	DH 3	DLT 1	Nur 4	Rad 1	Am 12	Mch 3	Total 40	Summer 2014
DA 36 69%	DH 4	DLT 0	Nur 1	Rad 0	Am 7	Mch 4	Total 52	Spring 2014

C. Explain how students are selected and/or prepared (e.g., prerequisites) for program entry.

Current DA Program Requirements:

1. High school diploma or college transcripts showing a minimum 2.0 GPA, or GED.
2. Completion of the following courses or their equivalents, with a C or better, is required to be considered for application to the Dental Assisting Program.
 - i. [WR 115](#) or higher level writing course (Placement into [WR 121](#) can substitute for the [WR 115](#) course)
 - ii. Approved college level health or nutrition course. Recommended classes include [HE 250](#), HE 295 and PE 295, or [FN 225](#).
 - iii. Placement into [MTH 20](#) or higher.
 - iv. Approved college level Psychology course. [PSY 101](#) is recommended.
 - v. 12 hours of shadowing in a dental office or clinic facility that is documented by dentist signature on office letterhead.
 - vi. Pass Criminal Background Check and Drug Screen Test

The Advisory Committee has also suggested the program consider changing the acceptance of DA students from a “Lottery” type acceptance to one that is point based

according to academic success in prior courses. Prior to considering this suggestion, the program would like to evaluate if the institution of the job shadowing requirement has had an impact on increased student retention and academic success.

D. Review job placement data for students over the last five years, including salary information where available. Forecast future employment opportunities for students including national and state forecasts if appropriate.

Job placement data is difficult to obtain from graduates/alumni due to low return rates. Attempts are made annually to survey students when exiting the program as to whether they already have a job. 2015 exit surveys revealed that 19 students out of 35 had already been offered employment (54%). An electronic survey was recently sent to see if we could obtain more accurate data, but the low response rate did not supply useful data.

Please refer to B. above for previous information detailing the forecast for future employment opportunities.

The following information describes Oregon Employment statistics related to the Dental Assisting Profession:

Occupational Employment Statistics

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BROWSE OES
OES HOME
OES OVERVIEW

May 2014 State Occupational Employment and Wage Estimates Oregon

Occupation code	Occupation title (click on the occupation title to view its profile)	Level	Employment	Employment RSE	Employment per 1,000 jobs	Location quotient	Median hourly wage	Mean hourly wage	Annual mean wage	Mean wage RSE
31-9091	Dental Assistants	detail	4,570	6.7%	2.717	1.17	\$19.02	\$19.67	\$40,920	1.9%
31-9092	Medical Assistants	detail	9,380	4.7%	5.570	1.29	\$16.49	\$16.49	\$34,310	1.1%

The most recent data available from Institutional Effectiveness regarding employment of PCC DA Graduates is shown below:

2012 CY Employment Outcomes of 2010-11 AY Degree-Attainers at PCC with Career/Technical Majors (Excludes Graduates who Continued with their Postsecondary Studies)

Career/Tech Major	Degree Cohort (excludes continuing students): AY 2010-11 Deg/Cert Graduates*	2012 CY Average Weekly Hours Employed (may include graduates with multiple jobs and jobs not related to PCC major)			Median Hourly Wage Rate (may include graduates with multiple jobs and jobs not related to PCC major)
		Percent Employed Full-Time (at least 35 hrs/wk)	Percent Employed 20-34 hrs/wk	Percent Employed < 20 hrs/wk, or No Wage Record**	
Dental Assisting (DA)	17	35.3%	47.1%	17.6%	15.67

Comparing the median hourly wage of \$15.67 in 2012 with the May 2014 reported median hourly wage of \$19.02 indicates that there is indirect evidence that wage and employment prospects have likely improved for dental assisting graduates since the recession.

E. Please present data on the number of students completing Degree(s) /Certificate(s) in your program. Analyze any barriers to degree or certificate completion that your students face, and identify common reasons that students may leave before completion.

The following table represents the number of applicants, fall term enrollment and spring term completion data for the Dental Assisting Program over the past five years:

Year	Number of qualified Applicants	Number Enrolled Fall Term	Number Completed Spring Term	Retention Rate to Completion	Reason for Attrition
2015/2016	67	44	TBA	TBA	TBA
2014/2015	93	45	35	.77	(2) Financial (2) Unprepared/ESOL (5) Personal Reasons (1) Prof. Conduct Dismissal
2013/2014	80	44	36	.82	(3) Financial (1) Personal Reason (1) not right career fit (2) Academic Withdraw
2012/2013	82	42	38	.90	(1) Financial (2) Personal Reason (1) Personal Reason
2011/2012	88	49	43	.88	(1) Financial (2) Personal Reason (2) Academic Withdraw
2010/2011	99	51	45	.88	(4) Financial (1) Defer to next yr (1) Bk Gr. Ck. Denial

During the years when the economy experienced the downturn, applicant numbers to enroll in the dental assisting program increased. Historically a high number of applicants express interest and even acknowledge their intent to enroll, but then change their minds for one reason or another. When no notification is given by the student that

they won't be enrolling, the program suffers by having less than capacity # of students. During the 2010/11 and 2011/12 year, the decision was made to accept sixty student in an attempt to end the year graduating the desired capacity of 45. Those cohorts started the school year out with 51 and 49 student respectively. The large number was indeed a hardship on instructors who had to teach the bigger class size of students in cramped lab space. For the past three years, due to new FT instructor hiring, it was decided to accept only fifty students which resulted in a much more manageable class size at the beginning of the year.

Various reasons occur for student attrition from the program ranging from unpreparedness due to financial constraints or not being able to handle the academic rigor that is expected. Students who are not quite ready the year they enroll, but want to work on academic study skills, improving their language and comprehension skills, or working towards financial readiness, are offered a deferment of their acceptance to the next year. Each year the class is usually comprised of at least one deferred student who is able to successfully complete the program the following year.

To help students understand the financial responsibilities necessary to complete the program, a representative from the financial aid office attends the orientation offered during the summer. Students are able to have their financial aid questions answered and understand the *Registration and Drop for Non-payment Policies*.

Other improvement attempts aimed at reducing attrition include posting information on the program website and in advising guides concerning the technical standards that are required, the type of skills the students will be performing in the dental rotations, and the link to finding out more about background check and drug screen requirements. Additionally, this year students were invited to two separate orientations prior to the start of Fall Term so that more detailed information could be presented (rather than the brief overview that was presented when only one orientation was held).

F. Describe opportunities that exist or are in development for graduates of this program to continue their education in this career area of profession.

Dental Assisting is a very rewarding career with many career path options within the profession, such as: becoming a lead assistant or trainer within the office or organization; becoming an office manager or obtaining additional specialty practice certifications. Many choose to change careers within the dental profession and return to school to become a dental hygienist (can attend either an associate's degree program or a bachelor's program), or go onto dental school to become a dentist. Each year the PCC dental hygiene program has several past dental assistants who have either graduated from a dental assisting program or had been trained on the job. All dental assisting skills can be transferred during the learning process as more advanced treatment skills required of a hygienist or dentist are learned. Additionally, many bachelor completion programs exist for assistants interested in getting a Bachelor's

Degree in Health Science. Pacific University has one such on-line program that has opened in the last two years.

VIII. Recommendations

A. What is the SAC planning to do to improve teaching and learning, student success, and degree or certificate completion?

We will continue to utilize feedback from students and the advisory committee, in conjunction with industry standards to improve our teaching and learning. The implementation of the electronic records system and newest digital imaging and chairside technology will be “priceless” in providing a seamless transition for graduates entering their new workplace home.

Discussion between SAC members has resulted in the following recommendations to the administration for improvement of the program:

1. Faculty will continue to maintain their professional development in the field of dentistry, in seeking educational methodology workshops, and in serving on college committees where they are able to offer input and also bring back key information to the department for program improvement. Several factors however, challenge the faculty to stay abreast of the rapidly changing technology, procedures and evidence based information that is being utilized currently in the field of dentistry. As they are attempting to incorporate new technology, materials and procedures into the curriculum, they also must keep pace with instructional delivery methods preferred by today’s students. The instructors find themselves being spread so thin that they are unable to adequately address all of the legal facets of also operating the PCC Dental Clinic where patients receive care from their students.

Over the past several years it has become more and more evident that the Dental Department as a whole is in need of a Clinic Coordinator position. The person in this position would facilitate the daily operations of the clinic and monitor compliance with State Board of Dentistry and Oregon Health Authority requirements. With the upcoming installation of the Eaglesoft electronic patient records software now available at the chair- side for training, we are entering the world of digital HIPAA compliance and the complexities that are involved with compliance, teaching and training. It also brings a complexity of needing someone who is trained to problem-solve the day to day software technical difficulties. Due to the specialty area and HIPAA, this is not something TSS will be able to support in terms of problem-solving the daily technical

issues that arise. It is crucial that the clinic coordinator also be the designated Eaglesoft technician during the multiple daily clinic sessions. This Clinic Coordinator and Eaglesoft Specialist would be shared by both the Dental Assisting and Dental Hygiene Program and would have the following responsibilities:

- Be a licensed Dental Hygiene professional (to match instructor qualifications, as well as the licensure needed for patient record management in the clinic)
- Plan, train, and implement the use of Eaglesoft Electronic Records for use during patient care.
- Trouble shoot software/computer problems with PCC TSS and Patterson Tech Support.
- Supply, Equipment and Inventory Control
- Coordinate and track the maintenance and repair needed for the clinic chairs and equipment
- Coordinate the daily scheduling and assignment of patients
- Tracking patients for completion of treatment
- Corresponding with patients to inform them of incomplete treatment
- Chart note auditing for legal accuracy
- Facilitation of tracking students and staff Immunizations and certifications
- Updating clinic forms and disseminating information
- Coordination of in-service trainings relative to operational updates in the clinic
- Liaison between clinical providers and the receptionist regarding individual patient needs
- Assist the director in gathering statistical data needed for CODA Accreditation concerning clinical care

These duties are responsibilities that the current faculty are having to address in addition to their regular teaching assignments. The result is inconsistent policies and insufficient tracking of accurate chart documentation. Annually, we serve 2000 patients between the Dental Assisting and Dental Hygiene programs. We are at risk of legal and HIPAA violations due to gaps that exist by not having one person track, be responsible for and follow-up in the critical aspects of the clinic.

The department is requesting A Clinic Coordinator/Eaglesoft Specialist Position be developed at the full-time AP Level 6, Step 12. It is vital that this position be hired at a pay rate that compares to a Dental Hygienist salary, or we will not be able to obtain someone with the licensure that is trained to be responsible for the patient-care auditing and compliance pieces of the job. A dental hygienist holds a license through the Oregon Board of Dentistry and would be able to address the appropriate practice act rules necessary for the clinic as a whole to abide by.

It is equally important that this person meet the Instructor Qualifications to teach in both Dental Assisting and Dental Hygiene. While the majority of their role will be to indirectly support our instruction in the clinic, they must be able to fill in and cover for

faculty in emergent situations. We rely on several part-time faculty to work in the clinic, so having this flexibility will be vital to avoiding instructional interruption when needed.

2. A critical missing link for collaborative learning within all of the dental programs is the need for CAD/CAM Technology. This technology will be instrumental in creating real world working activities between the DA and the DLT programs. The DT program has implemented a CAD CAM course to begin Spring of 2015 and Jill Lomax has been awarded the Ed and Betty Duvall Grant to study the CAD CAM process for integration between the two programs. While a used CAD/CAM machine was donated from a retired lab owner, we are learning that its capabilities are limited for integration of teaching between the two programs. We appreciate the intent of practicing professionals who donate equipment to our programs, but find that limitations often come with successful use of the donation. The CAD/CAM machine that was donated was designed for a one doctor practice who wanted to create a crown for a patient within the office. Due to the volume of students we serve in both the DA and DLT programs (69) this machine, that is also outdated, will be of limited use. To adequately teach this technology it is necessary to purchase updated equipment that would include a chairside scanner to connect with multiple computers and software in HT 301. Scanning and design purposes could take place chairside or in the computer lab and the milling machine could complete the process in the DLT lab. The cost of the equipment is \$80,000 and would be used between both programs. The DLT Program will also be placing this as high priority in their upcoming February Program Review.
3. An additional recommendation is one that the program continually needs on an annual basis. While teaching DA and DH students how to expose dental radiographs, DXTR human skull manikins are utilized. These manikins operate on mechanisms that need maintenance every few years. The program has one extra DXTR so that each year a broken DXTR can be sent to the Kodak Rinn Camp to be refurbished. The cost of the "make-over" is typically about \$4,000. This money is not accounted for in the department budget and must be specially funded through other resources. The program would like to request permanent budget funding in the Dental Assisting budget for this annual maintenance cost.
4. The program and Dental Department are extremely appreciative of the new equipment and technology that has been installed over the last few months. The Bond Team, TSS and Howard S. Wright have worked diligently to complete the project in a timely manner and were always ready to listen to our questions and ideas in order to meet our needs.

While these wonderful improvements bring new technology to the department, they do not address critical shortcomings that the clinic still has. The original bond proposal also included remodel or relocation of the clinic to bring each dental

operatory up to the industry standard for space, privacy and safety. In the current space, students and patients are so crowded together that safe movement when working with sharp instruments and needles is truly a safety hazard. Additionally, the tight quarters do not allow for private health history review and personal conversations with patients, as well as for privacy when patient records are being viewed on the new monitors.

Other previous bond proposal considerations that have not been able to be addressed due to the department staying in the same place include:

- a. The dental materials lab has not been remodeled and contains 1969 cabinetry.
- b. The clinic space does not allow for the six additional dental chairs to be installed that would allow DA and DH clinic sessions to be scheduled at the same time. Currently the DH first year students are split into two groups Winter Term and scheduled for four sessions when the dental assisting students are also scheduled in the clinic. The addition of six additional chairs would allow the full twenty students to be scheduled together in two sessions rather than four. Needing to operate two extra clinic session requires 3 faculty to be hired for 12 additional hours every week. In one term, this creates an additional \$16,000 each term being paid from the PT faculty budget
- c. The dental radiology lab also contains cabinetry from 1969. Additionally the previous bond proposal included adding two new X-ray rooms to the lab and one extra X-ray tube placed in the clinic. These additional X-ray units would reduce the disruption to the dental assisting students working in the lab from dental hygiene students needing to use rooms for patient X-rays. Having one X-ray tube located in the clinic would allow for efficient patient management when it is found a patient needs an immediate X-ray.

B. What support do you need from the administration in order to carry out your planned improvements? For recommendations asking for financial resources, please present them in priority order. Understand that resources are limited and asking is not an assurance of immediate forthcoming support, but making the administration aware of your needs may help them look for outside resources or alternative strategies for support.

- Hire a Clinic Coordinator/Eaglesoft Specialist to facilitate clinical services and provide daily technical support at the chair-side. This is estimated at the FT AP Level 6, Step 12 for \$72,600 Salary + Benefits.
- Support the DA and DLT programs through purchase of CAD/CAM: \$80,000
- Fund DXTR Refurbishing Annually through permanent budget allocation: \$4,000
- Include the previous bond proposal clinic enhancements in any new initiatives for the Health Professions.

APPENDIX 1

Program and Curriculum Management Plan

Term to Complete	Activity	Who is Responsible
Fall Term	<p>Program Management</p> <ul style="list-style-type: none"> • Review Block Schedule/rooms for Winter • Review College wide decisions affecting Program • Implement changes from program review • Plan/Attend Advisory Meeting • Update faculty/student certifications, training, licenses <p>Curriculum Management</p> <ul style="list-style-type: none"> • Plan/Attend SAC meeting • Review Outcomes Assessment Results • Review Advisory Committee Suggestions • Review Course Syllabi/content for Winter Term • Begin process required to make minor/major course changes • Submit changes to admin/Curriculum/Degrees Committees • Review End of term Faculty Course Assess. from Previous Term • Review Demographic, Exit, Alumni, Employer, Patient Surveys 	<p>Faculty Faculty/Dir. Faculty/Dir. Faculty/Dir. Director</p> <p>Faculty Faculty/Dir. Faculty Faculty Faculty/Dir SAC Chair Faculty/Dir Faculty/Dir</p>
Winter Term	<p>Program Management</p> <ul style="list-style-type: none"> • Review Library holdings/ submit requests • Review Block Schedules/rooms for Spring Term • Review/revise brochure, catalog, website information • Plan/Attend Advisory Committee Meeting (If needed for Winter) <p>Curriculum Management</p> <ul style="list-style-type: none"> • Review End of term Faculty Course Assess. from Previous Term • Review Course Syllabi Content for Spring Term • Review DANB Exam Results • Review Outcomes Assessment Plan, Develop LAC Report • Update/distribute assessments as necessary • Plan for OHSU and other Extern Rotation Activities 	<p>Faculty Faculty Faculty/Dir Faculty</p> <p>Faculty/Dir Faculty Faculty/Dir Faculty/Dir Faculty/Dir Faculty</p>
Spring Term	<p>Program Management</p> <ul style="list-style-type: none"> • Review Applicants for Fall Term • Review Equipment, Supplies and Facility Needs • Develop Proposals for Equipment Acquisition/Maintenance • Recommend Changes in Procedures and Policies • Plan/Attend Advisory Meeting • Plan for End of Year Faculty Retreat <p>Curriculum Management</p> <ul style="list-style-type: none"> • Review End of term Faculty Course Assess. from Previous Term • Review Course Syllabi Content for Fall term • Review Program Goals and Methods for Assessment • Review Methods of Instruction for Effectiveness • Textbook and Estimated Expenses Review • Plan for Summer Orientation 	<p>Faculty/Dir Faculty/Dir Director Faculty/Dir Faculty/Dir Faculty</p> <p>Faculty/Dir Faculty Faculty/Dir Faculty Faculty Faculty</p>

APPENDIX 2

End of Term Curriculum Review Form DA Program

Date of Review _____ Course Taught _____ Instructor _____ Term _____

1. Check the competencies that are taught in this course and indicate level of proficiency expected of student (I= Introductory, D= Developing, C= Competent)

- ✓ Level Following all state and federal regulations the student will:
- I D C 1. Apply the knowledge and skills required to systematically collect diagnostic data;
 - I D C 2. Function as an effective and efficient member of the dental health team by performing a variety of clinical supportive treatments;
 - I D C 3. Utilize the most current infection control and safety precautions in all laboratory and clinical settings;
 - I D C 4. Apply the knowledge and skills required for basic business office procedures;
 - I D C 5. Communicate effectively verbally and in writing with dental team members and patients;
 - I D C 6. Function in a responsible, professional and ethical manner;
 - I D C 7. Demonstrate the clinical skills needed to perform direct patient care as stated in Division 42 in the Oregon Practice Act.

2. Teaching Format _____ Lecture _____ Online _____ Hybrid _____ Lab _____ Clinic _____

3. Evaluation Methods Used:

Assignments/Projects _____	Oral Presentation _____	Quizzes _____
Group Activities _____	Lab/clinic skill eval _____	Midterm _____
Research _____	Self Evaluations _____	Final Exam _____
Written paper _____	Table Clinic _____	Journals _____
Portfolios _____	Comm. Rotations _____	Other _____

4. List courses in the DA Program that Review/Enhance material presented in this course:

Topic _____	Other Course/s _____	Review	Enhance
Topic _____	Other Course/s _____	Review	Enhance
Topic _____	Other Course/s _____	Review	Enhance
Topic _____	Other Course/s _____	Review	Enhance

5. How do you coordinate instruction with the other course instructors?

6. What emerging information/technology/text/evidence or research do you plan on incorporating into this course in the future?

7. Based on your answer to # 6 what resource support will you need to help you?

8. Is there any subject material that is outdated and should be removed?

List:

Why:

9. What changes will you make to the course based on student evaluations, exit/alumni surveys, board results, advisory committee comments, employer surveys or self-assessment?

10. If you were not able to cover everything included in the course content, what provisions have you made to assure students will receive the information?

Topic:

Plan for Info presentation to students:

11. Describe any factors (positive or negative) that had an impact on your ability to achieve your teaching goals for this course:

Final Grade Distribution

Grade	A	B	C	D	F	I	W
# Students				Remediation Offered Y N	Remediation Offered Y N	Plan Developed Y N	Personal Program

Please Return this Course Review to the Program Director by End of Finals Week

Appendix 3

Dental Assisting Course of Study

First Term		Credits
DA 110	Clinical Procedures I	3
DA 111	Clinical Procedures I (Lab)	2
DA 116	Introduction to Dental Assisting	2
DA 120	Dental Radiology I	2
DA 121	Dental Radiology I (Lab)	2
DA 130	Dental Materials I	1
DA 131	Dental Materials I (Lab)	2
DA 140A	Integrated Basic Science I	2
DA 140B	Integrated Basic Science II	1
Second Term		
DA 112	Clinical Procedures II	1
DA 113	Clinical Procedures II (Lab)	3
DA 118	Expanded Duties I	1
DA 122	Dental Radiology II	1
DA 123	Dental Radiology II (Lab)	2
DA 133	Dental Materials II (Lab)	2
DA 132	Dental Materials II	1
DA 142	Integrated Basic Science III	2
DA 150	Dental Office Procedures I	2
Third Term		
DA 114	Clinical Procedures III	1
DA 115	Clinical Procedures Lab III	5
DA 119	Expanded Duties II	1
DA 125	Dental Radiology III (Lab)	2
DA 135	Dental Materials III (Lab)	2

45 Total Credits

APPENDIX 4

Technical Standards for the Dental Assistant

The Dental Assistant student must be able to meet the following technical standards:

- Hear under normal conditions with or without hearing device
- Communicate both verbally and in writing in an effective manner to explain procedures and give instructions.
- Ability to work independently and manage a variety of tasks in a short amount of time.
- Possess eyesight capable of viewing small visual images with or without glasses, and distinguish between black, white, and subtle shades of gray.
- Understand and react quickly to verbal instruction.
- Demonstrate finger dexterity and eye/hand coordination to perform large and small motor coordination in a small working area (a patient's mouth).
- Stand in place for long periods of time.
- Not prone to psoriasis, dermatitis, or other chronic skin disorders with open lesions or allergic responses to dental materials and agents.
- Lift up to 10 pounds.
- Operate dental radiology equipment, which could require pushing, pulling or moving.
- Handle stressful situations related to technical and procedural standards of patient care situations.
- Provide physical and emotional support to the patient during dental procedures.
- Follow directions effectively and work closely with members of the dental team.
- Perform skills (such as CPR) related to emergency procedures required in a dental office.
- Demonstrate effective interpersonal relation skills.
- Stoop to retrieve dental supplies.
- Sit for prolonged periods of time on the dental stool and occupy a small space opposite the dentist in the operator (approximately 3'x3').
- Reach to overhead radiographic equipment and dental operating light (approximately 5' above the floor)
- Possess tactile sense for examining teeth and oral tissues.

APPENDIX 5 2014/15 DA Externship Sites

DENTAL ASSISTING THANKS YOU!

We want to offer a big **THANK YOU** to all of the dental offices that graciously hosted a dental assisting student this spring for their externship! You all are an extension of Portland Community College and we are so thankful for all the wonderful and valuable learning experiences you have provided our students! Here is a list of office that participated in this year's externship collaboration!

2nd and Madison Dental
Advanced Endodontics
Alder Dental
BeaverBrooke Family Dental
Burlingame Dental Arts
Cornelius Dental Clinic
Cornelius Dental Clinic
Dental Care Today (4 locations)
Dr. Aaron Haskett
Dr. Allan Pike
Dr. Cynthia Layport
Dr. Ingrid Viljak
Dr. Wenyi Jia
Ensley Orthodontics
Freedman Orthodontics
Garfinkle Orthodontics
Gentech
Gentle Dental (9 locations)
Head and Neck Surgical Associates
Kaiser Permanente (6 locations)
Leslie A. Mitchell, DMD, PC
Multnomah Dental (2 locations)
Oregon Health Science University
Portland State University
Raleigh Hills Orthodontics
Sherwood Old Town Dental
Summit Dental
Tualatin Modern Dentistry
V2 Family and Cosmetic Dentistry
Veterans Dental Clinic
Willamette Dental (2 locations)
World of Smiles Pediatric Dentistry

APPENDIX 6

Dental Assisting Advisory Committee Members

Name	Affiliation	started
Lani O'Brien	Dental Assistant, Dental Hygienist	2006
Kandra Luna	Dental Assistant	2012
Mary Harrison	Dental Assistant	2006
Robert Jones	Dentist, Private Practice and PT Faculty, PCC	2006
Cindy Phillips	Dental Assistant, Kaiser Permanente	2013
Shelly Land	Dental Assistant	2012
Dan Matthews	Dental Assistant	2011
Matt Bayha	Beaverton HS, Instructor Medical Magnet	2006
Kristina Petersen	Dentist, Private Practice	2011
Molly Roberson	Dental Assistant	2012
Lynn Schmidt	Dental Assistant, Kaiser Permanente	2010
Lillian Harewood	Dentist	2013
Cindy O'Loughlin	Dentist	2013
Joseph Young	Dentist	2013
Dawn Harris	Dental Assistant, 2013 grad	2013
Yvonne Robles	Dental Assistant, 2013 grad	2013
	Dental Assistant, Kaiser Permanente	
Debra Porter	Manager	2013
Heather Tappert	DA, Willamette Dental	2014
JaNae Jamison	Benson HS	2015
Sheila Seevers	DA Grad 2015	2015
Lee Ann Redifer	FT Instructor, Dental Mat, Office Procedures	
Magda D'Angelis Morris	FT Instructor, Radiology, Basic Sciences	
Jill Lomax	FT Instructor, Clinical, Expanded Functions	
Josette Beach	Director, Dental Sciences	

APPENDIX 7

Dental Assisting Advisory Committee Minutes

Portland Community College Dental Assisting Program Advisory Meeting Minutes May 26th, 2015

In Attendance: Lani O'Brien, Dawn Harris, Kandra Luna, Dr. Robert Jones, Matt Bayha, Heather Tappart, Mary Harrison, Josette beach, Jill Lomax, Magda D'Angelis-Morris, LeeAnn Redifer

Topic: Service Learning Presentations

Two Groups presented their projects to the committee

Committee suggestions:

- Possibly contact local Dental Societies for donations for next year projects
- Dan Mathews offered support for donations of tooth brushes and floss for next year.
- Willamette may be able to donate also

Topic: Recap of Fall Meeting by Mary Harrison

- Mary questioned the # of study buddy sessions held last year. Jill reported that there were 3 scheduled sessions.

Topic: Department Updates

- 77 applicants - 61 applicants sent Acceptance Letters
- All potential students completed 12 hours of observation per advice of our DA Advising Committee. The incoming year will be the first year data will be collected on attrition rates and a caliber of applicants.
- Committee brought up effectiveness of the lottery system for entry in the DA Program. Discussed waiting to see if the 12 hours of observation will make a difference and then revisit the lottery issue later. Josette mentioned that the lottery system supports PCC's goals of equal opportunity.
- The DA Program Review is scheduled in October. The Review provides documentation and a presentation to College Administrators about the program. The presentation will include Guest speakers, such as Diane Jantze, Student employment specialist, OHSU staff and possibly a committee member.
- The formal CODA Accreditation is scheduled for 2017

Topic: Clinic Updates:

- Welcome Packets are sent to all new patients prior to their scheduled appointments.
- It has been 6 years since the current equipment has been purchased. New chairs and units will be installed in August. Old equipment will be donated as it is still in good condition..
- Electronic Health Records (EHR) and Digital Equipment will be installed in August also. Eaglesoft will be the database PCC uses. Our projected start will be Winter term. Staff will be trained first then roll out to students.
- Josette surveyed committee members on the use of hard copy vs. electronic copy of health histories in their offices.

Topic: Student Updates

- ReinaRose Rosario is the recipient of the ADA Scholarship and was photographed with Dr. Asai for the newsletter. Discussion: Mary questioned the # of students that applied for the ADAA

scholarships Mary nominated (sort of) Kandra from Portland Metro to come and talk to the students next year as a guest speaker

- Students are currently testing for their Radiology Certificates with a projected 100% pass rate.
- The Spring Term Practicum placement process was reviewed with the committee. The process is very similar to past years.
- Outlook for employment is strong in the Portland area. Many students have already secured positions prior to graduation.
- Heald Dental Assisting Program abruptly closed. The dental community has stepped up to help the students that were abandoned when the school closed.
- The department partnered with Beaverton High School Health Careers Program to have students shadow both DA students and Hygiene students in both lecture and clinic.
- Dental Assisting students completed a Winter and Spring term rotation at OHSU. PCC students assisted dental students and rotated through Specialty Clinics. The rotation proved to be a win-win success for both PCC and OHSU. PCC staff will meet with OHSU to plan for next year.
- Willamette Dental Group is hosting an employment fair field trip for the PCC students. They will provide transportation (Double Decker Bus), tour the new Beaverton facility and provide mock interviews for students.
- 36 students to Graduate June 8th.
- Students have planned the ceremony, food and possibly a photo booth.

Topic: Current Trends in the dental community

Who is standing during procedures?

- Some hygienists, some assistants, but not many dentists during restorative procedures.
- Ergonomic recommendations are providers should stand 50% of the time.
- If the trend continues the program may need to provide more training for assistants.

Technology: Cerec milling machines, intraoral scanners and cameras. Our DT Department currently has a scanner and milling machine that will be used in collaboration with the DA's in the future.

More medically compromised and elderly patients- we need to provide more exposure and training to our students on this topic.

Amalgam is alive and well in the community. Amalgam is still highly regarded at OHSU.

Next meeting: November 2015.

Fall 2014 Advisory Committee Meeting

First Hour was Combined Dental Department DA, DH, DLT Advisory Committees

DA Breakout Session 11/4/2014

In Attendance:

Advisory Members (DA): Mary Harrison, Matt Bayha, Cindy Phillips, Kandra Luna, Robert Jones, Lani O'Brien, Shelly Land, Dan Matthews

Topic: Update on past Advisory Committee recommendations:

Dental Office Observations

- Dental Office Observations are in full swing.
- Program Website has been updated with the required 16 hours added.

Admission to the DA Program

- Committee questions the current Lottery system of accepting applicants.
 - Suggestions, develop point system, written essays, using date program receives completed application.

Prerequisites and Requirements Concerns

- See website for full information <http://catalog.pcc.edu/programsanddisciplines/dentalassisting/>
- Current DA Program Requirements:
 3. High school diploma or college transcripts showing a minimum 2.0 GPA, or GED.
 4. Completion of the following courses or their equivalents, with a C or better, is required to be considered for application to the Dental Assisting Program.
 1. [WR 115](#) or higher level writing course (Placement into [WR 121](#) can substitute for the [WR 115](#) course)
 2. Approved college level health or nutrition course. Recommended classes include [HE 250](#), HE 295 and PE 295, or [FN 225](#).
 3. Placement into [MTH 20](#) or higher.
 4. Approved college level Psychology course. [PSY 101](#) is recommended.
 5. 12 hours of shadowing in a dental office or clinic facility that is documented by dentist signature on office letterhead.

Topic: Student Retention:

- Committee questions how to better prepare students for the program rigors, how to meet the current demand for well qualified dental assistants, with the addition of program prerequisites and preparation for the program.
 - Suggestions, requirement of a study skills class, a dental terminology/introduction orientation, free CE courses such as Crest Dentalcare.com.
 - Kaiser has a dental orientation (video?) that is used to educate newly hired front office staff.
 - The committee recommended that a list of resources were available to students prior to entrance into the program (perhaps a link on our website) to help eliminate those who decline admittance or drop out the first few weeks due to financial reasons.
- Mary suggested to table the discussion and requested members to give the topic more thought and e-mail their ideas,

Topic: Study Buddies

- Scheduled dates 11/12 & 11/17
- 35 students are signed up
- 6 members have agreed to participate
- Topics to include: Suctioning, bur identification, instrument identification
- Jill will provide activity guides
- Members will provide feedback per student.

Class participation:

- Dr. Jones voiced frustration on planning lunch and learns for the DA student last year with low interest and attendance. The DA staff will improve process and communication for more success in the future.

Topic: DANB Exam changes:

- Brief discussion on the changes for the 2015 exam changes.
- Mary explained that the changes for administrative only. She suggested contacting DANB. Magda will call DANB for clarification on the changes.

Topic: Past and Future Meetings

- Mary questioned why there was no meeting this past Spring term.
 - Jill explained it was cancelled due to a lack of interest in the proposed Study Buddy session
- Dawn requests that future meetings need to be informative and relevant as the members have busy schedules.
 - Many members agreed that communication of topics could also be covered in e-mails if a meeting is not scheduled.

Meeting Adjourned at 8:45 pm

Dental Sciences Advisory Committee Meeting

11/13/2013

Dental Assisting

Location: Ht 317

In attendance: Kristina Peterson, Lynn Schmidt, Dr. Cindy O'Loughlin, Dr. Lillian Harewood, Yvonne Robles, Dawn Harris, Shelly Land, Ginny Jorgenson, Mary Harrison, Kandra Luna, Dr. Magda D-Angelis-Morris, Jill Lomax, Lani O'Brien, Debra Porter, LeeAnn Redifer, Josette Beach

Welcome: The meeting began with introductions as many new members were Present.

Topic: Job Shadowing for DA applicants/Josette Beach

Following the request from the Advisory Committee the DA Program has added the recommendation of 12 hours of job shadowing prior to applying to the program. The applicant may observe for three hours in the PCC Dental Department, but must complete the remainder in another dental location. This will become a required step in the application process in 2015. The updated website will reflect this change and provide information on documentation necessary to fulfill this new requirement.

Topic: CAD-CAM update/Jill Lomax

Information was presented about the preliminary discussions between the Dental Lab Tech and Dental Assisting to facilitate group learning projects. Input was requested from the Committee and the feedback was unanimously positive, in regards to both the collaboration between the programs and the need for CAD/Cam training in the dental field.

Both Dr Harewood and Dr O'loughlin gave specific examples of processes, equipment and the advantage of training in the future. Dawn Harris and Yvonne Robles are working in offices that utilize the technology.

Topic: Dental Office Software/Axium/Magda D'Angelis-Morris/LeeAnn Redifer

Information was presented about the status of updating the dental clinic with a dental software program, specifically AXIUM. The limitations and advantages of AXIUM mainly with the grading component were explained.

Many concerns were voiced from the committee. Kandra Luna, Debra Porter and Lynn Schmidt work with Axium on a daily basis and did not recommend the software. Their experience is, Axium is difficult and not user friendly as other software they have used. Kandra Luna mentioned the intensive training that is needed with the software. Ginny Jorgensen asked to review the CODA Standards and questioned how and why the program would want to initiate in-depth training necessary for the software.

Dr. O'Laughlin felt the best solution would be to introduce more common software used in offices, specifically Dentrax and Eaglesoft in a "play in a sandbox" method. The students would at least recognize the software used in offices.

Many members questioned why the program would teach with software that is only used in group practices which would be of little help to those going to private practices.

Topic: DA Curriculum changes/Magda D'Angelis-Morris

Magda shared the current updates with the committee: DA 156 Ethics move from Spring to Fall this year. DA 156 Ethics will evolve to Introduction to Dental Assisting to include Ethics, Division 42, Pharmacology, and Medical Emergencies. The IBS series will evolve to DA 140 a, 140 b and DA 142 with a reorganization of current topics to include the addition of pathology in DA 142.

Topic: Radiology

Mary Harrison asked how many students had their Radiology certificates upon graduation, Digital curriculum and if there were any plans to change from the three terms to two terms of Radiology. Magda explained the current term process and the FMX requirements. She addressed the limited on campus digital curriculum and that students receive experience in their extern placements. The need for Spring was covered with the need of DA students exposing radiographs for the 1st year hygiene students. Both Yvonne Robles and Dawn Harris said they appreciated the practice taking radiographs Spring term.

Topic: Student Scholarships

Mary Harrison shared information about two scholarships, (Schein Excellence Award and ADAA?) for students and CODA accredited schools. Instructors will confirm PCC students have the opportunity to apply.

Topic: Dale Foundation/Ginny Jorgenson

Ginny shared that Dale Foundation will be reviewing school pricing to make it more affordable for students. She will forward the new pricing to instructors. Dawn Harris shared that she and other students shared the cost for Dale Foundation test prep courses and found them very valuable.

Study Buddies: Winter 2014 Study Buddy sessions will take place. Instructors will send out date and request for Advisory Committee Volunteers.

Meeting Adjourned at 8:05