Cerritos College
Instructional Program Review

Instructional Program Review Submittal Form (Appendix B)

This form is completed and submitted as a cover sheet for the self-study report.

Name of the Program  
Dental Hygiene  

Date Submitted  
9-1-09  

Scheduled Presentation Date  
External Accreditation site visit  
Sept 30 - Oct 2, 2009  

All courses in the program have been reviewed by the Curriculum Committee within the last six year cycle.  

Yes  
No  

The Program is in compliance with guidelines established by the Student Learning Outcomes task force.  

Yes  
No  

Explain any exceptions for non-compliance with Curriculum or SLO requirements:  

Self-Study Prepared by:  

Adelle Krayer, Dani Carroll, Kathy Ninomiya  

Diane Loeya  

Reviewed by (Division Dean):  

Signature
<table>
<thead>
<tr>
<th>Goals</th>
<th>Action to be taken</th>
<th>Timeline</th>
<th>Person Assigned</th>
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<tr>
<td>Mid-range goals (next 3 years)</td>
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<tr>
<td>1. Create an additional clinical rotation to comply with new accreditation standards</td>
<td>Establish additional clinical site and hire an additional faculty member</td>
<td>1-3 years</td>
<td>Arielle Krayer</td>
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<tr>
<td>2. Complete Dental Simulation lab</td>
<td>Procure funding</td>
<td>1-3 years</td>
<td>Adelle Krayer</td>
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<td>Long Term Goals</td>
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<tr>
<td>1. Build new pre-clinical lab to allow Dental Hygiene and Dental Assisting additional space to more efficiently meet all student needs</td>
<td>Procure funding</td>
<td>3-5 years</td>
<td>Adelle Krayer</td>
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Conclusions and Summary of the Self-Study Report

Note: This summary culminates the self-study report in a qualitative appraisal and analysis of the program’s strengths and weaknesses.

STANDARD 1 - INSTITUTIONAL EFFECTIVENESS

1. Assess the effectiveness of the program’s planning and assessment process and how this has contributed to the betterment of the program.

The Dental Hygiene faculty is proud of the program’s planning and assessment process. The department utilizes a series of assessment measures to determine formal outcomes thereby continually providing data to maintain what is appropriate to the educational process or to modify and, thus, improve that which is in need of revision.

2. To what extent have results of the evaluation processes or outcomes assessment been used to modify the curriculum?

Results of the assessment process are used to evaluate program effectiveness. This process is on-going and systematic. As a result of the evaluation process we are pleased to say that we are meeting our expectations. Minor course adjustments have been made as a result of the assessment process. Specifically, clinical observation of dental health instruction by our students revealed the need for additional requirements for the intra-oral camera to enhance student communication skills. In addition, clinical observation and exit surveys revealed the need for students to better link the presence of subgingival calculus with clinical signs of disease. As a result, a requirement was developed for the use of the Perioscope on selected patients. Further, evaluation of Clinical Tracking data revealed that program improvement would result if students had the opportunity to provide dental hygiene services to more periodontally involved patients. Consequently, an additional clinical facility where periodontal patients would be seen was acquired.

3. Evaluate the extent to which the program goals are met.

The Dental Hygiene program outcomes data demonstrate the program has been successful in educating its graduates and is meeting stated objectives and competencies. Data from national boards, state boards, outcomes, graduate and alumni surveys and employer demand for graduating students all indicate that the program is successful.

4. Assess the adequacy and stability of the program’s fiscal support as anticipated over the next several years.

Despite financial difficulties in the State supported school system, the Cerritos College administration has always demonstrated a commitment to the financial integrity of the dental programs. The academic reputation of the dental hygiene curriculum contributes to the strong belief that the program will continue to be operational and receive the fiscal
support need to continue to be a viable and successful program.

5. **Assess the degree to which current financial support permits or inhibits achievement of program goals.**

Current financial support allows the program to achieve its basic goals and objectives. Annual budget allocations for resources, facilities maintenance and capital outlay expenditures for upgrading equipment have been funded from either Perkins or the college general fund. Although not all requests are achieved in a single fiscal year; careful planning has allowed us to modernize facilities and stay technologically current.

6. **Evaluate the effectiveness of the professional community in providing assistance to faculty in meeting the objectives of the dental hygiene program on a continuing basis.**

The professional community has been very generous in time and interest in our program. Members of professional associations and community professionals have served on our advisory board, have been guest speakers and have provided support through dental hygiene constituent and component activity. Through community activities and school programs the dental hygiene program has woven valuable experiential activities into the curriculum that benefits both the students and the community.

7. **Evaluate the effectiveness of the liaison mechanism in providing information on dental and dental hygiene practice and employment needs.**

The Dental Hygiene Advisory Board consists of members of varied professional backgrounds and provides a great resource on dental hygiene practice and employment needs. One member, who is a hygienist, owns an employment placement service and has a pulse on employment needs. Other members continue to inform us of changes in practice and employment. Additionally, a program faculty member is our liaison to our component dental hygiene association which offers a direct link to the association’s professional activities.

**STANDARD 2 - EDUCATIONAL PROGRAM**

1. **Evaluate the admission criteria in terms of its ability to identify students with the potential for completing the curriculum and performing dental hygiene services with competence and efficiency.**

The emphasis on academic quality and completion of the prerequisite courses in the admission process appears to be justified in that there is a very low attrition rate. The extremely high pass rate on both the National and State Board examinations demonstrate the admission criteria used by the dental hygiene department is highly effective in identifying students with the potential for successful completion of the program and
performing dental services with competence and efficiency.

2. Appraise the policies and methods used to ensure that students exempted from courses in the dental hygiene curriculum have met achievement standards which equal or exceed those expected of students who complete courses in the usual manner.

The dental hygiene program does not admit students with advanced standing. Further, the program does not admit transfer students. Consequently, there is not a need for policies to evaluate and monitor students who have been exempted from courses in the dental hygiene curriculum.

3. Assess the population resources to provide a broad range of population characteristics.

Cerritos College is a community oriented institution that embraces diversity. Enrollment in the dental hygiene program reflects the representation of the population that is served by the institution. Every year there is a significant number of applications which represent minority groups. Although the program is committed to equal opportunity the program is also committed to selecting the best qualified applicant regardless of minority status.

4. Do enrollment statistics reveal any trend which the institution is concerned? If so, describe those concerns.

The size of the applicant pool has remained consistent over the last few years. There appears to be a greater interest by male applicants; however, there has been no significant increase in the number of male dental hygiene students. There is definitely an increase in students who have English as a second language, many of which have been accepted into the program. Many applicants have been identified as having baccalaureate degrees prior to admission into the program; however, this only serves to reduce the general education requirements and has no direct effect upon completion of courses in the program. There is no identifiable enrollment trend that is of concern at this time.

5. Evaluate the extent to which the program goals and objectives provide for the ongoing inclusion of scientific advancement and innovations in dental hygiene practice and health care systems.

Life-long learning and an appreciation and understanding of scientifically based literature are inherent in the programs goals and competencies. All course outlines contain activities to stimulate and develop critical thinking and problem-solving skills. In many courses in the curriculum, students learn to research scientific literature for information regarding scientific advances and innovations in dental hygiene diagnosis, practice and health care systems.
The program goals and subsequent curriculum were developed on the premise that graduates would bring to the professional work force competent, if not expert, dental hygiene skills; an expansive and current scientific foundation for the delivery of dental hygiene care; and an appreciation for the professional responsibility of life-long learning. The dental hygiene faculty collectively provide the students a wide range of expertise and experience. Faculty keep current by reviewing the most recent dental and dental hygiene literature; attending continuing education programs, professional organization meetings and conferences, educational methodology courses; and participating in faculty meetings where current and timely information and technology is shared.

The curriculum is reviewed on a regular basis by individual faculty, the department chairperson, the division and the College Curriculum Committee to ensure currency of content consistent with professional philosophy and technology.

The students are kept informed of the latest innovations in dentistry and dental hygiene through seminar courses each semester where guest speakers who are practitioners in the industry, present current information and technology. Additionally, written and presentation assignments, which require research reviews, including a table clinic presentation are interwoven into the curriculum.

Knowledge of the community health domain is gained through rotational assignments to various community comprehensive health care centers, a course in Dental Health Education and Research and experiential delivery of health education to special populations within the community.

6. **Assess the extent to which course descriptions and objectives reflect the content delineated in the respective topical outlines.**

Course descriptions and objectives are designed by the department based on the content to be taught and specific student behavioral outcomes to be achieved. Evaluation and subsequent approval of course outlines require inclusion of a relevant course description, goals and objectives which match course content, appropriate teaching methodology, evaluation procedures and evidence of required reading and critical thinking. Existing course outlines are reviewed every three years within the instructional division. Substantial revisions must be approved by the Cerritos College Curriculum Committee.

7. **Explain the rationale/philosophy for the overall curriculum sequence.**

Courses are scheduled in a logical sequence, presenting basic concepts and theories in dental sciences followed by application of theory and practice in specific dental hygiene functions. Clinical dental hygiene courses are supported by a didactic component designed to build on the basic science information, increasing breadth and depth of knowledge. The student progresses in technical ability by mastering skills in a logical sequence. Factors which are considered in sequencing include faculty and classroom availability, clinical facility utilization patterns, student and advisory committee input, National Board Examination content and comparison with other dental hygiene
programs, both within California and nationally. Relevance of dental hygiene courses to
the real world of work, ethical considerations in dental hygiene practice and applicable
research is integrated throughout the two-year curriculum.

8. **Appraise students’ ability to evaluate the outcome of dental hygiene care through
experience with maintenance or continuing care appointments for clinic patients.**

Students are rotated through each clinical facility in 4 week blocks of time to facilitate
completing multiple patient appointments by the same student clinician. However, due to
the overwhelming need for dental hygiene services in each clinical facility, scheduling
patients with the same student clinician is not always possible. However, every
appointment includes an assessment of not only treatment to be completed, but results of
treatment already completed. Consequently students have numerous opportunities to
evaluate care provided by peers in cases where more than one student has provided
treatment. Additionally, many patients return for recare where students can evaluate and
monitor success of treatment and plan and implement appropriate therapy based on
patient need.

**STANDARD 3 - ADMINISTRATION, FACULTY AND STAFF**

1. **To what extent does the program administrator have authority commensurate with
his/her responsibilities to support the goals and objectives of the dental hygiene
program?**

The program administrator is responsible for the day-to-day operations of the program.
These responsibilities include: curriculum development, evaluation and revision; faculty
recruitment; and staffing assignments. Additionally, the director is responsible for
budget preparation and is involved in fiscal administration. Admission criteria and
procedures are determined by the director after appropriate consultation. All duties and
responsibilities of the program director support the philosophy, mission and goals of the
program.

2. **What activities during the past year demonstrate that the program administrator
has assumed responsibility for continuous coordination, evaluation and
development of the dental hygiene program?**

Some of the various activities that demonstrate how the program administrator assumed
responsibility for continuous coordination, evaluation and development of the program
include:
   a. Coordinated advisory committee meetings
   b. Reviewed the class selection process and had input on candidate selection
   c. Met with counselors to make recommendations regarding the application process
   d. Coordinated orientation for newly selected candidates
   e. Reviewed and modified curriculum to reflect current practice
   f. Reviewed library collection

5
g. Reviewed program goals and competencies
h. Revised and updated Student Handbook
i. Served as chair and interviewed faculty for the full-time position
j. Coordinated faculty meeting
k. Observed, evaluated and composed performance evaluations for faculty
l. Reviewed faculty evaluations and discussed findings with faculty
m. Wrote in-house IPPI grant for Simulation Lab
n. Reviewed outcome data for continuous program review
o. Reviewed affiliate contracts
p. Developed priority list for capital outlay items
q. Served as chair and interviewed faculty for part-time pool
r. Completed ADA yearly survey

3. **Evaluate the adequacy of the number of program faculty, and scheduling flexibility to achieve program goals.**

The Dental Hygiene department maintains a 66% full-time to part-time teaching ratio. Program objectives are accomplished with the aid of well-qualified part-time instructors. Individualized instruction by both full-time and part-time faculty offer the student sound educational experiences. It should be noted, that with very few exceptions, the part-time clinical and laboratory faculty members have a history of longevity. Although many faculty are teaching on a part-time basis, they are an extremely committed and dedicated group of professionals.

4. **Assess the extent to which provisions for faculty appointments ensure that faculty will have non-teaching time to evaluate the program and institute changes on a continuing basis.**

All full-time faculty have adequate time for constant program evaluation. Weekly meetings assure time for full-time faculty input to review, evaluate and affect change if needed. Part-time faculty have access to the director via an open door policy. There is excellent communication and frequent interchanges between all faculty. Program review occurs on a continuing basis.

5. **To what extent do faculty/student ratios during laboratory, preclinical, and clinical sessions provide individualized instruction, provide for maximum protection of patients and allow evaluation of the process as well as the end result?**

Beginning in January 2009, the program changed the faculty to student ratio to 1:5 for pre-clinic, clinic and radiology. The Management of Pain lab section has a 1:6 ratio and the Dental Materials course has a 1:10 ratio. The faculty are able to observe student performances during each session, provide assistance as needed and monitor the quality of patient care including record keeping. The current ratio is effective in providing maximum protection of patients and allows evaluation of the process as well as the end result.
6. To what degree do faculty workloads allow for effective supervision of exceptional and/or slow students?

The low faculty/student ratios in dental classes allows for effective supervision of slower students. The computerized feedback system in the clinical courses, coupled with continuous evaluation and competency tests, quickly identifies students in need of assistance. Remediation is subsequently given to attempt to correct the deficiency. Peer evaluation on an individualized basis has proven effective for both spectrums of the learning curve. Exceptional students who have met their requirements may assist the slower learner or have additional learning activities. Although a very full workload does not allow a great deal of additional time to tutor or supervise students outside of scheduled classes, dedicated faculty have made the time, and continue to have student success as their priority.

7. Assess the effectiveness of the current arrangements for the dentist(s) who provide(s) supervisory, diagnostic, consultative and referral services for the dental hygiene clinic.

The strength of the dental hygiene program is predicated on the strong support of the attending dentists and staff at all the outside facilities where clinical instruction takes place. The association with outside facilities for clinical instruction has been in place for 35 years. This arrangement has proven to be highly effective and has served the Cerritos College dental hygiene student well.

8. Assess the effectiveness of the faculty evaluation system.

The effectiveness of faculty evaluation for both full and part-time faculty is adequate. Teaching weaknesses and strengths are easily identified and communicated to the evaluatee. Peer evaluation and student evaluation are frequent and comprehensive.

9. Compare the program faculty’s opportunities to continue professional development with those of other institutional faculty in terms of release time and financial support.

There is no distinction between the Dental Hygiene Department and other departments on campus. Reassigned time and funding for attending workshops has traditionally been supported by the college. Professional Growth Week programs are extensive with interesting and varied subjects being offered. The opportunities for dental hygiene full-time faculty to attend continued professional development off campus are the same as for all other faculty. Travel and accommodations money is equally and fairly distributed within the division.

10. Evaluate the adequacy of support services available to the program.

Support services available to the program are more than adequate. Several areas such as counseling, instructional media and staff development have enhanced teaching
effectiveness for both part-time and full-time faculty. Student services such as financial aid and Student Health and Wellness Center have been extensively utilized by the dental hygiene students.

STANDARD 4 - EDUCATIONAL SUPPORT SERVICES

1. **Assess the adequacy of the program’s clinical, laboratory and radiography facilities (on-campus and extended campus), i.e., storage, safety, provision of adequate learning experiences.**

Dedicated space in rooms HS 304, 307 and 308 and our soon to be completed simulation lab at Cerritos College coupled with dental care facilities at outside locations have proven very satisfactory to support the programs need for learning experiences and safety.

2. **Evaluate the adequacy of the facilities and scheduling flexibility to achieve program goals and objectives.**

Rooms HS 304, 307 and 308 are shared with the dental assisting department. Excellent communication between the directors has rendered a very workable schedule at Cerritos College. With the addition of our simulation lab, fewer issues with room conflicts will occur. The arrangement with the outside clinical sites for clinical instruction has provided a great deal of flexibility in both scheduling and patient encounters to ensure that the program goals and objectives are adequately met.

3. **Assess the advantages and disadvantages of the capacity, design and scheduling of the clinical facility and equipment in relation to the attainment of program goals and provision of adequate clinical practice experiences for all dental hygiene students.**

**Advantages:**
The pre-clinical dental hygiene clinic capacity and design is adequate to meet the needs of beginning skill attainment. Students are arranged in small groups acting as either patient or operator. The classroom work stations allow for close supervision and individualized instruction. All students are able to perform skills immediately after instruction.

The design and scheduling options available with the various outside clinical sites are more than adequate to meet the goal of clinical skill attainment.

**Disadvantages:**
Dental chairs are physically arranged too close to the classroom work stations and counter/sink areas. Additionally, the open atmosphere does not allow for maximum student privacy during instruction.
The dental clinic area is a workable one for classroom instruction. This area is extensively used as a laboratory and not for dental hygiene treatment services.
With our outside clinical sites there are no known disadvantages that interfere with adequate clinical practice experiences.

4. **Evaluate the comprehensiveness, diversity, currency and quality of the texts and periodicals pertaining to dentistry and dental hygiene that are available for use.**

A moderate number of updated books and periodicals are maintained in the Learning Resource Center at Cerritos College. Because our students have access to the Veteran’s Hospital Library and the CSULB Library the choice to maintain a modest collection of books at the main campus is a prudent decision. The computer on-line services available at all library sites results in an unlimited resource of texts and periodicals for student use.

5. **Assess the budget available to purchase instructional aids and equipment.**

The program does not have a separate budget designated specifically for the purchase of instructional aids and equipment. Most items have been funded through Perkins funds. The department possesses a plethora of instructional aids that support course objectives. A “wish list” is maintained by the program director and when additional monies become available items are purchased. Digital radiography equipment and software, intra-oral cameras with monitors, an instrument washer/dryer and Isolite systems are examples of new equipment purchased to maintain technological currency in dental hygiene subject matter.

**STANDARD 5 - HEALTH AND SAFETY PROVISIONS**

1. **Assess the effectiveness of the institution’s policies and procedures in ensuring a safe environment for patients, students, faculty and staff: a) infectious diseases; b) ionizing radiation; and, c) sterilizing and disinfecting equipment and procedures in relation to practicing current infection and hazard control.**

   a. The program follows Standard Precautions for infection control for all students, faculty and staff. This policy is clearly stated in the Student Handbook and addressed at length in DH 111. Infection control is a core competency that is evaluated with each patient encounter throughout the program.

   b. The program’s policy on the use of ionizing radiation is thorough and appropriate. It is adequate for the following reasons:

      1. Meets current recommended state and federal standards and regulations on the use of ionizing radiation.
      2. There is an instructor assigned for every five students in Radiology Lab (DH 112), thus allowing for maximum supervision and interaction.
      3. All radiographs taken on patients in the lab setting must be requested in writing by a licensed dentist.
4. No radiographs are exposed on patients or students merely to meet student requirements.
5. No retakes are permitted without approval and supervision by an instructor.
6. Radiation safety is addressed at length in DH 112.

c. The sterilizing and disinfecting procedures used at Cerritos College and all outside clinical sites comply with OSHA standards relating to current infection and hazard control protocols. The equipment available for these procedures is adequate. With the addition of the instrument washer/dryer, the sterilization area at Cerritos College is state-of-the-art with a dedicated contaminated area and clean area.

2. **Evaluate the adequacy of the emergency equipment and materials in relation to instruction in managing dental emergencies. Assess the effectiveness of the program’s policy to manage emergencies which might occur.**

The dental hygiene department’s policies for managing emergencies are adequate. Patient medical histories are routinely reviewed and evaluated prior to treatment. The emergency procedures, equipment and materials are evaluated by each clinical site and are supported by the institution’s medical resources and personnel. All clinical sites, except Children’s, are supported by a medical emergency “code blue” team of responders.

**STANDARD 6 - PATIENT CARE SERVICES**

1. **Evaluate the extent to which the program provides quality dental hygiene care.**

The scheduling coordinator at each off-site clinical facility monitors dental hygiene treatment schedules. Faculty review all SOAP notes (acronym for Subjective findings; Objective findings; Assessment, the documented analysis and conclusions concerning the findings; and Plan for further diagnostic or therapeutic action) which includes a “next visit” notation in the documentation. This system adequately prevents incomplete dental hygiene care for patients; however, treatment for advanced periodontal cases may be provided by more than one hygiene student clinician. This is a result of the clinical rotation schedule and the numbers of patient appointments. In order to complete hygiene services in a timely manner, the patient’s treatment may be completed by another student.

2. **Assess the program’s effectiveness in ensuring the continuous basic life support recognition of all students, faculty and staff who are involved in the direct provision of patient care.**

The program has been effective in ensuring the continuous Basic Life Support recognition of students and faculty. The students and faculty understand their valuable role in basic life support as it relates to the dental hygiene program’s curriculum content and potential complications associated with the care of special needs patients, administration of local anesthesia and nitrous oxide sedation during patient care. The
requirement for continuing education in basic life support by the California Dental Practice Act further instills a professional responsibility as to the mandated value of CPR training and retention of skills at a proper level of performance through repeated recertification for licensure.