

## Section 1 – Program Mission and Educational Objectives

**Extensive hands-on dental clinic experience right on-campus – and opportunities for off-campus rotations** -- provide students with high quality learning and practice of dental hygiene skills. Students work right alongside licensed practitioners and dentists in state-of-the-art facilities, treating their own patients using the latest technology, such as digital radiography, laser cavity detection, OralDNA salivary diagnostic testing (cost-effective clinical tests that drive the detection and prognosis of disease at an earlier, more treatable stage), CariScreen (cavity susceptibility test), and oral cancer exams using light fluorescence

- **Active involvement in planning and managing community oral health programs** — such as designing and implementing oral health promotion programs for under-served communities – prepare Oregon Tech students with four terms of valuable, real-world experiences, three times what most programs offer.
- **International externships provide exciting options for seniors** to provide life-saving care for 2 weeks in countries such as Peru, Jamaica, Granada, Ukraine and Viet Nam
- **Oregon Tech students earn enough clinical hours to be a licensed dental hygienist with an *Expanded Practice Permit*** when they graduate. Graduates are prepared for entry into the dental hygiene profession, eligible for state, regional and national exams leading to licensure as a registered dental hygienist, and/or an expanded practice dental hygienist in Oregon

### Jobs and Careers in this degree

Oregon Tech Dental Hygiene students have several professional practice advantages that make them stand out to organizations hiring new graduates. These include:

- **Four terms of community health outreach;** most programs offer less than half of this level of direct experience;
- Graduates who have opted to study restorative dental procedures at Oregon Tech have a skill set that prepares them for the **endorsement in restorative function**. This allows graduates to work alongside a dentist, placing fillings and bringing additional skills that are in-demand in the workplace.
- **Clinical rotations at many community facilities** in our students' senior year add even more real-world learning and practice experiences in off-campus settings.
- **Options for international experiences** that test students' skills in challenging settings, making them even more prepared when they graduate to excel in professional practice.
- The graduate has the career opportunity of and is provided core courses to expose students to business management, education, public health, and evidence-based decision making.

### Two Campus Sites Gives Options

Oregon Tech offers its BS in Dental Hygiene at its Klamath Falls, and in collaboration with Chemeketa Community College in Salem (45 miles south of Portland). Both programs prepare the dental hygiene student for entry into the dental hygiene profession and have the same pre-dental hygiene requirements and application process. Upon successful completion of the program, the graduate is eligible to apply for the National Dental Hygiene Board Examination, regional clinical exams, and state licensure in every state in the U.S.

#### Career Paths:

- Dental Hygienist (Clinician)
- Dentist (with additional education)
- Dental Hygiene Educator
- Public Health Clinician or Administrator
- Researcher
- Dental Practice Administrator
- Corporate Sales/Educator

#### Mission Alignment:

The purpose of the Bachelor of Science in Dental Hygiene program is to prepare students for entry into the dental hygiene profession and additional careers such as public health, administration, education, research, and marketing. The graduate will be prepared to enter master's degree programs in dental hygiene and related programs.

#### Educational Objectives:

The dental hygiene program fulfills the following educational objectives.

#### **COURSE OUTCOMES**

Upon completion of the dental hygiene program at Oregon Tech the student will be able to:

1. Collect data, record and assess a comprehensive health history, including social history.
2. Perform and record extraoral and intraoral examinations, clinical and radiographic assessment of the periodontium and dentition and assessment of occlusion.
3. Assess the need for, expose, develop, evaluate and interpret dental radiographs/images.
4. Expose, assess and transmit intraoral photography.
5. Formulate a dental hygiene diagnosis and supportive dental hygiene treatment plan.
6. Assess, plan, implement and evaluate a dental hygiene treatment plan for the prevention and/or treatment of oral diseases.
7. Assess the need for and perform a periodontal risk assessment, initial and supportive periodontal therapies.
8. Assess the need for and perform therapeutic manual and ultrasonic/sonic periodontal debridement therapies.
9. Perform care and maintenance of procedures for dental implants.
10. Assess the need for and perform extrinsic stain removal procedures.
11. Assess the need for and apply adjunctive topical chemotherapeutic and controlled released agents.
12. Assess the need for and apply pain and anxiety management strategies.
13. Assess the caries risk and plan appropriate interventions and therapies.
14. Assess the need for and application of professional topical fluorides and/or self-applied fluoride.
15. Apply principles of nutritional and/or tobacco cessation counseling to the management of oral and systemic health.
16. Perform re-contouring and polishing of existing restorations.

17. Take impressions for, pour and trim study models.
18. Assess the need for and place pit and fissure sealants.
19. Assess, plan and perform patient oral self-care education.
20. Apply standard precautions for the prevention of disease transmission.
21. Follow all state and federal regulatory requirements when rendering patient care.
22. Apply principles of comprehensive record keeping.
23. Apply principles of professional and ethical behavior.
24. Apply principles of evidence-based decision-making.
25. Demonstrate critical thinking and problem-solving skills when providing patient care.
26. Demonstrate professional communication skills in all aspects of patient care that includes interacting with diverse populations and other members of the health care team.
27. Demonstrate concern and understanding of a variety of patient needs based on overall health, oral health, cultural, social and economic circumstances.

*ADEA Compendium of Curriculum Guidelines for Allied Dental Education Programs May 2015–2016*

*Additional Clinical Dental Hygiene Skills as described in the ADEA Compendium of Curriculum Guidelines for Allied Dental Education Programs May 2015-2016*

5. Performing block and infiltration anesthesia.
6. Administering and monitoring nitrous oxide/oxygen analgesia.
7. Performing closed soft tissue curettage.
18. Performing salivary diagnostics

1. Provides the dental hygiene student the opportunity to gain the necessary knowledge, skills, and values to assume the American Dental Hygienists' Association (ADHA) and to enter the practice of dental hygiene.
2. Prepare the dental hygiene student to sit for all eligible licensing exams.

## Section 2 – Program Description and History

### Program History

The Oregon Tech Dental Hygiene program began in 1970 as an Associate of Applied Science (AAS) program. Beginning in 1985, students had the option of completing a Bachelor of Science (BS) degree, and in 2003 the program began awarding the BS degree only.

In 2005, Oregon Tech entered a partnership with ODS to provide a Dental Hygiene AAS program in La Grande. The partnership ended in 2017. In total X# of students graduated from the program.

Oregon Tech entered an agreement with Chemeketa Community College to offer a DHBS program in Salem. The program opened in 2011.

All students must complete prerequisite courses to be eligible for application to the program. Acceptance to the program is selective. Applicants are accepted each spring and begin course work fall term. Seating is limited to 22 students at Klamath Falls and 20 at Salem.

### Program Enrollment and Graduation Rates: DHAAS, La Grande

ENROLLMENT					
Fall 2009	Fall 2010	Fall 2011	Fall 2012	Fall 2013	5 Year Difference
25	26	21	23	26	Maximum = 26 Minimum = 21
GRADUATES					
2011	2012	2013	2014	2015	Average

21 (84%)	24 (92.31%)	18 (85.71%)	23 (100%)	21 (80.77%)	88.43%
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**Program Enrollment and Graduation Rates: DHBS, Klamath Falls and Salem**

<b>ENROLLMENT</b>					
Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016
KF = 24	KF = 24	KF = 23			KF =
SLM = 20	SLM = 21	SLM = 21	SLM = 20	SLM = 20	SLM = 20
<b>Total = 44</b>	<b>Total = 45</b>	<b>Total = 44</b>	<b>Total =</b>	<b>Total =</b>	<b>Total =</b>
<b>ENROLLMENT</b>					
Fall 2017	Fall 2018	Fall 2019			
KF = 20	KF = 20	KF = 18			
SLM = 20	SLM = 20	SLM = 20			
<b>Total = 40</b>	<b>Total = 40</b>	<b>Total = 38</b>			
<b>GRADUATES</b>					
2014	2015	2016	2017	2018	2019
KF = 22	KF = 18	KF = 23	KF = 20	KF = 20	KF = 17
SLM = 20	SLM = 19	SLM = 20	SLM = 18	SLM = 19	SLM = 20
<b>95.5%</b>	<b>82%</b>	<b>97.7%</b>	<b>95%</b>	<b>97.5%</b>	<b>97.4%</b>

**Board and Licensure Exam Results**

<b>National Board Dental Hygiene Examination</b>					
Class, 2014	Class, 2015	Class, 2016	Class, 2017	Class, 2018	Class, 2019
KF = no data	KF = 100%	KF = 100%	KF = 92%	KF = 100%	KF = 100%
SLM = 100%	SLM = 100%	SLM = 100%	SLM = 94%	SLM = 100%	SLM = 95%
<b>WREB Anesthesia (CRDTS-KF only-2019 and after)</b>					
Class, 2014	2015	2016	2017	2018	Class, 2019
KF = 100%	KF = no data	KF = no data	KF = no data	KF = 100%	KF = 100%
SLM = 100%	SLM = no data	SLM = 100%	SLM = no data	SLM = 100%	SLM = 95%
<b>WREB DH Clinical Examination (CRDTS-KF only-2019 and after)</b>					
Class, 2014	Class, 2015	Class, 2016	Class, 2017	Class, 2018	Class, 2019
KF = 100%	KF = 100%	KF = 96%	KF = no data	KF = 100%	KF = 100%
SLM = 100%	SLM = 100%	SLM = 100%	SLM = 100%	SLM = 100%	SLM = 100%
<b>WREB Restorative Examination (CRDTS-KF only-2019 and after)</b>					
Class, 2017	Class, 2018	Class, 2019			
KF = no data	KF = 75%	KF = 100%			
SLM = no data	SLM = 100%	SLM = 100%			

**Employment Rates and Salaries:**

Employed	Continuing Education	Looking for Work	Not Seeking	Median Salary	Success Rate
90%	5%	3%	2%	\$65,000	100

**Industry Relationships**

**Our graduates work for:**

**Willamette Dental Group**  
**Precision Dental**

## Dental Professionals

Advantage Dental

Capitol Dental

Community Health Centers such as: La Clinica; Salem Free Clinic; Klamath Open-Door Clinic; Klamath Tribal Health, Boys and Girls Club

Many private practice dental offices

### Oregon Tech Dental Hygiene Advisory Board Meeting, Klamath Falls

Date: 10/15/2018

#### Committee Members

- Deborah K. Bishop, RDH,
- Susan Daniels, RDH
- Traonna Larson, RDH,
- Brenna Chavarin, BS, EPDH
- Daniel Gailis, DMD
- Tonia Henderson BS
- Jeff Pardy, MBA, RRT
- Amanda Blodgett, MBA
- Erin Shulten, MS

#### Notes on Discussion of Assessment Results

- Commission on Dental Accreditation Report and Progress Reports: The program anticipates that all previous recommendations and aligning courses between the campuses has been satisfied.

### Oregon Tech Dental Hygiene Advisory Board Meeting, Salem

- Lynn George
- Nol Cobb
- Others, no data available

### Showcase Learning Experiences

Compassion Connect-Free Dental Clinic: Students were able to provide free dental hygiene services to patients during a community outreach program. They were also able to assist with the dentist who provided extractions. The students also gave local anesthesia.

Gervais Elementary School-health screenings (420 children): dental screenings, oral hygiene instruction, fluoride varnish placement all while collaborating with OHSU nursing students from Monmouth campus

### Success Stories – Descriptions of Successful Graduates (potentially including quotes from students highlight the programs' effective preparation)

#### Program Changes – What recent changes have occurred within the program (e.g. new faculty, new facilities, curriculum changes)

- The program has a new part-time adjunct clinical instructor who is fluent in Spanish.
- There was a change in instructors of the restorative position in Salem to Barbara Sigurdson.
- There was a change in instructors in Klamath to Elizabeth Wells.
- The program changed their junior capstone to move away from a single type of patient the students work with on the Capstone to include several different types of patients and learning styles to include volunteerism and interprofessional collaboration.

## Section 3 – Program Student Learning Outcomes

**Origin and External Validation:** The current set program student learning outcomes (PSLOs) originated from our accrediting body, Commission on Dental Accreditation (CODA) and American Dental Education Association (ADEA) *Compendium of Curriculum Guidelines for Allied Dental Education Programs May 2015–2016*. The Program Student Learning Outcomes are reviewed annually at in September (2019) at Convocation. The information as to the program student learning outcomes last review by the program’s industry advisory board is unavailable.

**Changes:** The PSLOs have changed. **CODA Standard 2-19 was added:** Graduates must be competent in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care and practice management.

### PSLO that was from

**2018:**

**Definition**

**CODA Standard**

**1 – Communicate  
Standard 2-15**

The dental hygiene graduate will be competent in communication and collaborating with other members of the health care team to support comprehensive patient care.

Previously this read: “Graduate’s must be competent in interpersonal and communication skills to effectively interact with diverse population groups and other members of the health care team” and was assessed with ESLO Diverse Perspectives.”

**2 – Critical Thinking  
Standard 2-23**

The dental hygiene graduate will be competent in critical thinking and problem solving related to comprehensive care and management of patients.

**3 – Professionalism,  
Ethical Practice  
Standard 2-20**

The dental hygiene graduate will be competent in applying ethical, legal, and regulatory concepts in the provision and and/or support of oral health care services.

**4- Lifelong Learning  
Standard 2-21**

The dental hygiene graduate will demonstrate competent knowledge and self-assessment skills necessary for life-long learning.

**5- Provision of Oral  
Health Care  
Standard 2-12- 2-14**

The dental hygiene graduate will be competent in providing the dental hygiene process of care for a wide range of patient profiles and all types of classifications of periodontal diseases.

**6- Community Health  
Standard 2-16**

The dental hygiene graduate will be competent in assessing, planning, implementing, and evaluating community based oral health programs, including health promotion and disease prevention activities.

**7 – Disease  
Prevention  
ADEA HP.5**

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

Outcome seven was added because faculty observed weakness in students’ performance of disease and prevention/maintenance strategies.

Dental hygiene faculty met on September 18, 2019 to review the program student learning outcomes, which are based on the Commission on Dental Accreditation Standard 2, Dental Hygiene Educational Program. The following is a list and definitions of the outcomes, and explanation of changes made during the meeting. These are the new changes in the CODA Standards with the updated language as seen below:

<b>PSLO</b>	<b>Definition</b>
<b>CODA Standard</b> <b>1 – Communicate</b> <b>Standard 2-15</b>	Graduates must be competent in communicating and collaborating with other members of the health care team to support comprehensive patient care.
<b>2 – Critical Thinking</b> <b>Standard 2-23</b>	Graduates must be competent in problem solving strategies related to comprehensive patient care and management of patients.
<b>3 – Professionalism, Ethical Practice</b> <b>Standard 2-19, 2-20</b>	Graduates must be competent in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care and practice management. Graduates must be competent in applying legal and regulatory concepts to the provision and/or support of oral health care services.
<b>4- Lifelong Learning</b> <b>Standard 2-21</b>	Graduates must be competent in the application of self-assessment skills to prepare them for life-long learning.
<b>5- Provision of Oral Health Care</b> <b>Standard 2-12-2-14</b>	Graduates must be competent in providing dental hygiene care for the child, adolescent, adult and geriatric patient. Graduates must be competent in assessing the treatment needs of patients with special needs. Graduates must be competent in providing dental hygiene care for all types of classifications of periodontal diseases including patients who exhibit moderate to severe periodontal disease.
<b>6- Community Health</b> <b>Standard 2-16</b>	Graduates must demonstrate competence in a) assessing the oral health needs of community-based programs b) planning an oral health program to include health promotion and disease prevention activities c) implementing the planned program, and, d) evaluating the effectiveness of the implemented program.
<b>7 – Disease Prevention</b> <b>ADEA HP.5</b>	Graduate will value factors that can be used to promote patient adherence to disease prevention and/or health maintenance strategies
	Outcome seven was added because faculty observed weakness in students’ performance of disease and prevention/maintenance strategies.

Oregon Tech Dental Hygiene BSDH

Pre-Dental Hygiene Freshman Year					
OIT			CHEMEKETA		
Course #	Course Name	Credit	Course #	Course Name	Credit
<b>FALL</b>					
BIO 231	Human Anatomy & Physiology I	4	BI 231	Human Anatomy & Physiology	4
CHE 101	Intro to Chemistry	3	CH 110	Chemistry for Allied Health	5
CHE 104	Intro to Chemistry Lab	1			
DH 100	Introduction to Dental Hygiene	2	DHE 100	Introduction to Dental Hygiene--online	2
BIO 200	Medical Terminology	2	HM 120	Medical Terminology I	3
<b>Total credits</b>		<b>12</b>			<b>14</b>
<b>WINTER</b>					
BIO 232	Human Anatomy & Physiology II	4	BI 232	Human Anatomy & Physiology	4
BIO 105	Microbiology	4	BI 234	Microbiology	4
SOC 204	Sociology	3	SOC 204	General Sociology--Introduction	4
WRI 121	English Composition	3	WRI 121	English Composition--Exposition	4
<b>Total credits</b>		<b>14</b>			<b>16</b>
<b>SPRING</b>					
BIO 233	Human Anatomy & Physiology III	4	BI 233	Human Anatomy & Physiology	4
BIO 205	Nutrition	3	NFM 225	Nutrition	4
SPE 111	Public Speaking	3	COMM 111	Fundamentals of Public Speaking	4
WRI 122	Argumentative Writing	3	WRI 122	English Composition--Logic & Style	4
<b>Total credits</b>		<b>13</b>			<b>16</b>
Professional Courses--Sophomore Year					
OIT			CHEMEKETA		
Course #	Course Name	Credit	Course #	Course Name	Credit
<b>FALL</b>					
DH 221	Dental Hygiene Clinical Practice I	4	DH 221	Dental Hygiene Clinical Practice I	4
DH 225	Head & Neck Anatomy, Histology, Embryology	3	DH 225	Head & Neck Anatomy, Histology, Embryology	3
DH 240	Prevention I	3	DH 240	Prevention I	3
DH 366	Dental Anatomy	2	DH 366	Dental Anatomy	2
CHE 360	Clinical Pharmacology	3	PHM 230	Pharmacology	3
<b>Total credits</b>		<b>15</b>			<b>15</b>
<b>WINTER</b>					
DH 222	Dental Hygiene Clinical Practice II	4	DH 222	Dental Hygiene Clinical Practice II	4
DH 241	Prevention II	3	DH 241	Prevention II	3
DH 275	Ethics	2	DH 275	Ethics	2
DH 252	Oral Radiology I	3	DEN 164	Dental Radiology I	3
DH 244	General & Oral Pathology	3	DH 244	General & Oral Pathology (b)	3
SPE 321	Small Group & Team Communication	3	COMM 219	Fundamentals of Small Group Communication	3



<b>Total credits</b>		<b>18</b>			<b>18</b>
<b>SPRING</b>					
DH 223	Dental Hygiene Clinical Practice III	3	DH 223	Dental Hygiene Clinical Practice III	3
DH 254	Introduction to Periodontology	1	DH 254	Introduction to Periodontology	1
DH 253	Oral Radiology II	2	DH 253	Oral Radiology II	2
DH 242	Prevention III	3	DH 242	Prevention III	3
DH 380	Community Dental Health I	2	DH 380	Community Dental Health I	2
DH 267	Emergency Procedures	3	DH 267	Emergency Procedures	3
SSc	Social Science elective	3	SSc	Social Science elective	3
<b>Total credits</b>		<b>17</b>			<b>17</b>

**2018-2019 CATALOG**

Chemeketa Notes:

- Communications elective: Choose from SP115; SP218; WR123; BA 214
- HUM electives may only include one activity based course
- (b) = blended course

Professional Courses–Junior Year					
OIT			CHEMEKETA		
Course #	Course Name	Credit	Course #	Course Name	Credit
<b>FALL</b>					
DH 321	Dental Hygiene Clinical Practice IV	4	DH 321	Dental Hygiene Clinical Practice IV	4
DH 354	Periodontology	3	DH 354	Periodontology	3
DH340	Prevention IV	3	DH340	Prevention IV	3
DH 381	Community Dental Health II	2	DH 381	Community Dental Health II	2
BUS 317/215	Healthcare or Princ. of Manage.	3	BA 206	Business Management	4
PSY	Psychology elective	3	PSY	Psychology elective	3
<b>Total credits</b>		<b>18</b>			<b>19</b>
<b>WINTER</b>					
DH 322	Dental Hygiene Clinical Practice V	3	DH 322	Dental Hygiene Clinical Practice V	3
DH 382	Community Dental Health III	2	DH 382	Community Dental Health III	2
DH 341	Prevention V	3	DH 341	Prevention V	3
DH 351	Pain Management I	3	DH 351	Pain Management I	3
	Humanities Elective	3		Humanities elective	3
WRI 227	Technical Report Writing	3	WR 227	Technical Writing	3
<b>Total credits</b>		<b>17</b>			<b>17</b>
<b>SPRING</b>					
DH 323	Dental Hygiene Clinical Practice VI	5	DH 323	Dental Hygiene Clinical Practice VI	5
DH 344	Advanced General & Oral Pathology	3	DH 344	Advanced General & Oral Pathology (b)	3
DH 383	Community Dental Health IV	1	DH 383	Community Dental Health IV	1
DH 352	Pain Management II	2	DH 352	Pain Management II	2
DH 363	Dental Materials	4	DEN 163	Dental Materials 2	4
DH 370	International Externship (optional)	1	DH 370	International Externship (optional)	1
<b>Total credits</b>		<b>15/16</b>			<b>15/16</b>
Professional Courses–Senior Year					
OIT			CHEMEKETA		
Course #	Course Name	Credit	Course #	Course Name	Credit
<b>SUMMER</b>					
DH 421	Dental Hygiene Clinical Practice VII	4	DH 421	Dental Hygiene Clinical Practice VII	4
AHED 450	Instructional Methods	3	AHED 450	Instructional Methods	3
DH 461	Restorative Dentistry I	2	DH 461	Restorative Dentistry 1	2
BUS 331	Personal Finance	3	BA 218	Personal Finance	4
MATH 243	Introductory Statistics	4	MTH 243	Probability & Statistics I	4
DH 370	International Externship (optional)	1	DH 371	International Externship (optional)	1
<b>Total credits</b>		<b>16/17</b>			<b>17/18</b>
<b>FALL</b>					
DH 422	Dental Hygiene Clinical Practice VIII	5	DH 422	Dental Hygiene Clinical Practice VIII	5
DH 475	EBDM in Healthcare I	3	DH 475	EBDM in Healthcare I (b)	3
DH 462	Restorative Dentistry II	2	DH 462	Restorative Dentistry II	2
	Humanities Elective	3		Humanities elective	3
	Communications Elective	3		Communications elective	3
DH 372	International Externship (optional)	1	DH 372	International Externship	1
<b>Total credits</b>		<b>16/17</b>			<b>16/17</b>
<b>WINTER</b>					
DH 423	Dental Hygiene Clinical Practice IX	5	DH 423	Dental Hygiene Clinical Practice IX	5

DH 476	EBDM in Healthcare II	3	DH 476	EBDM in Healthcare II (b)	3
DH 454	Dental Practice Management	3	DH 454	Dental Practice Management	3
DH 463	Restorative Dentistry III	2	DH 463	Restorative Dentistry III	2
PSY	Psychology Elective	3	PSY	Psychology elective	3
	Humanities Elective	3		Humanities elective	3
<b>Total credits</b>		<b>19</b>			<b>19</b>
<b>Total Program Credits</b>		<b>190</b>	<b>Total Program Credits</b>		<b>199</b>

**Transfer Equivalencies:** DH 252, Oral Radiology I = DEN 164, Dental Radiology 1      DH 363, Dental Materials = DEN 163, Dental Materials 2

KEY

<b>PSLO Definitions</b>	<b>The dental hygiene graduate will be competent in:</b>
<b>Communicate</b>	Communicate
<b>CT/PS</b>	Critical thinking/Problem Solving
<b>Ethics</b>	Professionalism and ethical practice
<b>CH</b>	oral health programs
<b>OHC</b>	Provision of oral health
<b>LLL</b>	Self-assessment and life-long learning
<b>F</b>	Foundation
<b>P</b>	Practice
<b>C</b>	Capstone/Competency
<b>ESLO Definitions</b>	
<b>I&amp;A</b>	Inquiry and Analysis
<b>Comm</b>	Communication
<b>Ethics</b>	Ethical Reasoning
<b>Team</b>	Teamwork
<b>QL</b>	Quantitative Literacy
<b>DivP</b>	Diverse Perspectives

	PSL O- Com	ESL O- Com	PSLO - CT/P S	ESL O- I&A	PSLO - Ethic s	ESLO - Ethic s	PSL O- CH	ESLO - Tea m	PSL O- OHC	PSL O- LLL	ESL O- QL	ESL O- DivP
BIO200												

BIO231				F								
BIO232				F								
BIO233				F								
CHE				F								
DH100												
BIO105				F								
SOC204				F			F					
WRI121	F	F										
BIO205				F								
SPE111	F	F										
WRI122	F	F		F								
CHE360												
DH221					F	F				F		
DH222			F		P	P				F/P		
DH223			P		P	P				P		
DH225				P								
DH240										F		
DH241										F		
DH242										F		
DH244										F		
DH252	F	F										
DH266	F	F										
DH253	P	P	P							P		
DH275	F	F			F	F						
SPE321							F	F				
DH254										F		
DH267							P	P				
DH380									F			
Elective												
DH321	P	P	P		P	P	P	P		P		
DH322	P	P	P		P	P	P	P		P		
DH323	P	P	P		P	P	P	P		P		
DH340										p		
DH341										p		
DH354												
DH381									P			
DH382									P			
DH383									C			
DH351										F		
DH352										P		
WRI227		P										
DH344										F		
DH363	P	P		F					P	F		
AHED450												
Elective												
DH421	P	P	P		P	P	P	P				
DH422	C	C	C		C	C	C	C				

DH423	C	C	C		C	C	C	C				
DH461										F		
DH462										P		
DH463										C		
MATH2 43								F				
DH475					F	F						
DH476				P	P	P						
DH 454					C	C					P	

**Section 5 –  
Assessment Cycle**

Dental Hygiene B.S. Cycle for PSLOs and ESLOs						
Outcome	2017-18	2018-19	2019-2020	2020-2021	2021-2022	2022-2023
PSLO 1 Com			• DH-423 Capstone (direct) (direct) Grad survey (indirect)			•
PSLO 2 C thinking	•			•		
PSLO 3 Ethics		• DH-275 Faculty eval (direct) (direct)			•	
PSLO 4 LLL		• DH-463 Faculty eval (direct) (direct) Grad survey (indirect)			•	
PSLO 5 OH care			• DH-423 Capstone (direct) (direct) Grad survey (indirect)			•
PSLO 6 Com Health	•			•		
PSLO 7 Prevention					•	

ESLO 1 Com						♦
ESLO 2 Inquiry/Analysis	♦					
ESLO 3 Ethics		♦				
ESLO 4 Teamwork			♦ DH-383 Peer Survey (indirect) Faculty eval (direct) (direct)			
ESLO 5 Quant lit				♦		
ESLO 6 Diversity					♦	

DH 461, Restorative Dentistry I = DEN 153, Dental Materials 1



#2			
#3			
#4			
#5			
#6			

**4. Identify the ethical Values for each alternative**

(Beneficence, Nonmaleficence, Veracity, Autonomy, Justice, Confidentiality, Societal Trust) that are either being **upheld or threatened** for each option. In this step, identify the ethical values you think are most important for *this situation*. How does each core value apply to the situation? If you don't think that a core value applies, say 'not applicable'.

Value	Alternative 1	Alternative 2	Alternative 3	Alternative 4
Veracity				
Beneficence				
Nonmaleficence				
Autonomy				
Justice				
Confidentiality				



Societal Trust				
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**5. Choose the Best Solution**

Propose a tentative resolution to the case, selection one of your alternatives and defending it based on your application of relevant values. This step involves evaluation of your alternatives (Step 4) using the relevant values (Step 3). You are looking for the alternative that respects the broadest array of values and interests. *In order to resolve this and any other case, you have to use your critical thinking, integrate your values, and defend your proposal to your peers.*

Use the matrix below to help you weigh each alternative based on ethical values. For each alternative, judge the level at which the values are ethically acceptable on a scale of 1-4, with 1 being *not acceptable* and 4 being *ethically preferable*. Total the scores for each alternative.

Values	Alternatives			
	(1)	(2)	(3)	(4)
Veracity				
Beneficence				
Nonmaleficence				
Autonomy				
Justice				
Confidentiality				
Societal Trust				
Total Score				

**6. Justification**

- Which of your alternatives are acceptable, and which are unacceptable? Explain.

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- Among the acceptable alternatives, which is ethically preferable? Why?

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- Is your preferable alternative practically feasible?

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- **Rubric:** How is the activity to be scored/evaluated? (Especially if scoring to assess the outcome is different from course grading). Describe in enough detail to makes it clear the rubric or scoring approach is a reasonable way to assess the outcome. Where a rubric is used, attach the rubric as an appendix. (Archiving the rubric is critical for consistent reassessment.)
  - **Scoring:** The activity was scored by the instructor alone using the attached rubric. The students were able to list all the pertinent facts to determine what is known and what is not known. They were to state the problem and possible choices that would need to be made in the decision. The core values were to be described and correctly stated. Alternative choices were to be given for the problem that was at hand. Then the students were to justify their solution and explain why they chose their answer.

**Ethical Decision Making Process: Worksheet Evaluation**

NAME:	Project Name:			Date:			Faculty:		
	Excellent	Score	Average	Score	Poor	Score	Feedback		
<b>Facts</b>	3 (20%) All Pertinent Facts are ID'd; *Questions asked to ID unknown info.		2 (16.6%) All pertinent facts are ID'd. Not all unknown info considered.		1 (14.8%) Generally a repeat of the case. Includes non-significant facts. No thought given to info not known.				
<b>Problem Statement</b>	3 (20%) Problem is stated clearly & possible choices are ID'd.		2 (16.6%)		1 (14.8%) Problem is incomplete or inaccurate.				
<b>Ethical Values ID'd</b>	3 (20%) All core values that are applicable are ID'd & correctly described as upheld or threatened.		2 (16.6%) Not all core values that apply are described or are incorrectly applied.		1 (14.8%) Core values applicable to case not described or incorrect application or those identified.				
<b>Alternatives</b>	3 (20%) Alternatives beyond "do it" or "don't do it"; Considered if the core ethical values are feasible and practical.		2 (16.6%) Alternatives are described. The best alternative in this case is not ID'd.		1 (14.8%) Alternatives are described, best alternative for the case is not ID'd.				
<b>Justification</b>	3 (20%) Able to ID most acceptable solution & explain why.		2 (16.6%) The most ethically acceptable solution is ID'd, no clear reason why.		1 (14.8%) Unable to ID most ethically acceptable solution.				
	<b>100%-92% = A</b>		<b>83% = B</b>		<b>74% = Fail</b>				

**ID'd = Identified**

- **Sample:** This assignment was given to sophomore students during winter term. There were five student group artifacts that were assessed. The population was representative of the program as a whole. There were not any special or unusual characteristics of the student population that should be noted.

- **Reliability:** The instructor was involved in the scoring. The rubric was used with each of the artifacts that were scored. Single faculty was involved in the scoring process.
- **Multiple Sites:** Both the Klamath and Salem sites used the same method to carry out this assessment outcome. Both sites used the same rubric and assignment with the worksheet.
- **Performance Target:** The target performance level was 100% since they had a group to work with together and they also had a worksheet to use for information.
- **Performance Level:** Both sites scored 100% because they had a group of students working together and they all used their worksheet to help them apply their knowledge.
- **History of Results:** Is there data from the previous assessment of this outcome, particularly if conducted with comparable methods? What trend(s) are seen in student performance over time? Since this activity was done for the first time by the pair of instructors, the data is not available at this time.
- **Faculty Discussion:** How and when were results presented to and discussed by program faculty? The results were presented to the faculty in September 2019 during convocation when both groups were together. The results revealed that the assignment did not meet what the university rubric required. When the university rubric was presented the year before, it was specifically stated that the assignment should not be changed to accommodate the university rubric. This was disappointing after seeing the results of the faculty scoring. The instructors from the two different campuses discussed changing the assignment and having students memorized the American Dental Hygienists Association (ADHA) Core Values so that they will have the muscle memory to pull from when they write their papers.
- **Interpretation:** What meaning or take-aways can be gleaned from this data? The assignment should reflect what the university rubric states. The design of the assignment will need to be upgraded. There will need to be multiple graders in the faculty who are willing to participate in the grading. The worksheet had many of the answers on it and did not convey what the students knew or did not know as far as the ethical rubric was looking for this assignment.

## Section 7 – Data-driven Action Plans: Changes Resulting from Assessment

- **Action Driver:** What assessment data prompted or supports action? The ESLO rubric is the main data that prompts action for change for this particular assessment. First, our students were able to demonstrate a developed knowledge of different ethical theories and codes and provided rationale for their preferred theory or code. The second, they were able to successfully recognize decisions requiring ethical judgments, but because they had a worksheet to use for their answers, this gave them prompting. They were able to clearly explain to others why they required ethical reason. Third, with the help of the worksheet, the students could formulate and test plausible moral principles and apply them to a case to derive a course of action. Finally, the students were able to apply ethical reasoning to novel situations and provide detailed support for their decisions as well as refuting other possible decisions.
- **Action Specifics:** The needed action is to have the students learn well enough to recall all the ethical reasons without the help of a worksheet which is considered “prompting.” The two instructors plan to have students memorize the ADHA Core Values so that they will have this in their memory bank when they write their papers. The specific deficiencies found in assessment data were mainly because the students had “prompting?”

- **Accountability:** In the DH 275, sophomore dental hygiene ethics course, the group Ethical Decision Making assignment will need to be practiced first with the worksheet because it is vital for students to learn all the reasons ethical decisions are made. Then, students will have their assignment without the worksheet to present their reasoning in their assignment as well as to their peers. They will need to recall from memory the core values. With practice this activity, this will give the students time for reflection on what all goes into their ethical decisions. Stacie Neely and Tonja Willey will be responsible for implementation of these actions. These changes will be implemented during winter term when DH 275 is taught? As a department we plan to discuss this assessment at our December 12, 2019 full department meeting.
- **Planning and Budgeting:** There will not be financial, or resource needs required for implementation of these changes.
- **Improvements in Assessment Process:** The improvements that are needed to the assessment process are the rubric and a clear understanding how this assessment falls under the department's assessment leadership. Communication and planning will be the keys to success in the future. I will mark the calendar for time to work with the instructors that are implementing the next assessment. This should yield a better more actionable information.
- **Reassessment:** This outcome or measure be re-assessed to see if student learning has improved and, to determine if these changes have resulted in improved performance at the end of winter term during our spring meeting, March 19, 2020. This is where we work up our course effectiveness assessment between the instructors and the department director and department chair.

## Section 8 – Closing the Loop: Evidence of Improvement in Student Learning.

If this is an outcome being assessed following improvement activity, did you have past results from this outcome? I am unaware of past results from this particular outcome. No data is available.

The changes that were recommended for the last assessment were the following:

- A more chronological arrangement of your curriculum mapping to outcomes would help show how each outcome is scaffolded throughout the curriculum (especially for those less familiar with the particulars of OIT's program).
- Include the assignment prompt and rubric as attachments to your report to support continuity in assessment practices.
- Since your performance hit your target of 100%, consider how you might articulate some more aspirational goals above and beyond the minimum performance expectations.

Were those changes implemented? The recommendations were given after the assessment was performed (August 2019), not prior to the latest assessment. I will need to make improvements this coming school year.

- I have attempted to follow the examples in the assessment report guide. This was very helpful to have a concrete illustration to glean information.
- The rubrics were helpful to know what exactly is wanted and needed in the assessment report.
- If so, was improvement seen? At the conclusion, we should see improvement in student performance in not only DH 275, but in each of their classes with their improved knowledge and skills in ethical reasoning. This skill of ethical decision making will serve them in school now, in their future career, personal life, and in their communities.