



Dental Hygiene Bachelor Degree Completion Program Assessment Report 2019-20

Section 1 – Program Mission

The mission of the Bachelor of Science in Dental Hygiene *degree-completion* program is to provide an opportunity for licensed dental hygienists at any stage in their career to complete a bachelor's degree for professional growth, current and future employment options, and/or entry into a graduate program.

The mission, goals, objectives, and student learning outcomes for the program are reviewed annually by the program faculty at the fall meeting during convocation.

Section 2 – Program Goals

The goals were designed to help our diverse population of working professional students achieve our Program Mission.

Our Commitment to our Students:

- Provide a quality bachelor-degree completion program that recognizes the achievement of passing the dental hygiene national board exam and state or regional clinical exams.
- Recognize the growth in career opportunities and provide core courses to expose students to business management, education, public health, and evidence-based decision making.
- Build positive relationships between core dental hygiene faculty and students to mentor and help students achieve degree goals.
- Help students plan a course schedule that ensures academic success by factoring in professional goals and personal commitments.
- Allow students to explore further areas of interest by offering elective choices.
- Prepare students for graduate-level courses.

Section 3 – Program Description and History:

Oregon Tech (OT) has offered a dental hygiene degree at the Klamath Falls campus since 1970. Although the program started as an Associate of Applied Science (AAS) degree, beginning in 1985 students had the option of completing a Bachelor of Science (BS) degree by extending their studies one more year. In 2003 the program transitioned to a BS degree only. In 2011 Oregon Tech began a second BS dental hygiene program at Chemeketa Community College in Salem, Oregon.

The licensing requirements are the same whether students graduate with an AAS or BS degree in dental hygiene. In the United States (US), all dental hygienists with an AAS degree have at least three years of undergraduate courses. During the freshman year, pre-dental hygiene students complete required prerequisites and then apply for acceptance into an accredited dental hygiene program. Once admitted, students continue for two more years. In the United States there are approximately 230 AAS and 60 BS accredited dental hygiene programs. (dentalcareersedu.org)

In 1996, OT was one of the first colleges in the US to offer dental hygienists with AAS degrees an opportunity to complete their BS degree through 'distance education'. The student's prerequisite courses (one academic year) are reviewed for credit transfer. The student's dental hygiene courses (two academic years) are transferred as 'block credits' through documentation of passing the Dental Hygiene National Board Exam.

Oregon Tech’s Bachelor of Dental Hygiene Outreach (BDHO) was designed to allow dental hygienists the flexibility to plan their course schedules to meet the demands of their professional and personal lives. Depending on credits transferred to our institutions, students’ course plans can all look different. All students must complete a minimum of 45 credits from OT to complete their bachelor’s degree. All courses are offered 100% online. Students may begin any term and choose whether to take one or several courses a term.

Students are exposed to a variety of career opportunities, including business, management, education, and public health. Besides options for general education requirements, students also have dental hygiene elective choices to further explore and learn skills in their area of interest. The BDHO program includes:

- Six required dental hygiene core courses
- Three dental hygiene elective choices from a list approved by the department
- OT general education and elective requirements needed for a bachelor’s degree

In the US we now have approximately 50 BS dental hygiene completion programs ([ADEA degree completion programs](#)). Even with the increased competition, OT has managed to keep a steady enrollment. Because students begin any term and plan the pace of their course schedule, students might graduate after completing four terms or take several years to complete the program. The BDHO has students graduating at the end of every term.

Actively enrolled Spring term:		Graduate totals from Su-F-W-Sp Terms:	
2020	57	2020	17
2019	54	2019	19
2018	51	2018	10
2017	50	2017	27
2016	68	2016	22
2015	59	2015	25

Employment rates and salaries are not quantifiable for our BDHO students. Before students enter our bachelor degree completion program they are already licensed, working dental hygienists. Work settings include clinical dental hygiene, education, public health, management, corporate sales, and/or entrepreneur. Graduates might continue in their place of employment, branch out into a new field, begin a graduate program, or a combination of the various options. Currently OT employs several BDHO graduates who teach in clinics, labs, and/or didactic in our Klamath Falls and Salem dental hygiene programs.

Best Online Colleges ranking, SR Education Group researched and analyzed accredited online schools across the nation, taking into consideration academic strength factors as well as annual tuition rates. *“Inclusion on this list shows high academic standards and a commitment to affordability, two key factors important to prospective students.”* Oregon Tech ranked #1 for online bachelor’s degrees in Dental Hygiene. (In 2019 we were ranked #1 and in 2018 we were ranked #9.) The promotional badge we received from SR Education Group is posted on our website:



[SR Education - Best DH Online Programs](#)

Section 4 – Program Student Learning Outcomes

The American Dental Hygienist Association (ADHA) addresses six competencies dental hygienists should demonstrate, but our BDHO students achieve those standards in their AAS programs. [ADHA Standards for Clinical Dental Hygiene](#)

The ADHA has identified professional roles for dental hygienists that correlate with our Program Mission and PSLOs:

“Overview: The dental hygienist plays an integral role in assisting individuals and groups in achieving and maintaining optimal oral health. Dental hygienists provide educational, clinical, and consultative services to individuals and populations of all ages in a variety of settings and capacities. The professional roles of the dental hygienist include the following: Clinician, Corporate, Public Health, Researcher, Educator, Administrator, and Entrepreneur.” [ADHA Professional Roles of the Dental Hygienist](#)

The American Dental Educators Association (ADEA) also recognizes the expanding roles of dental hygienists, which align with our BDHO Program Mission and PSLOs:

“For those with a passion for dental hygiene who do not wish to practice clinically, there are many career paths outside of the operatory available in education, research, administration, public health and corporate business.”
[ADEA Career Options](#)

BDHO students take a minimum of 15 courses with Oregon Tech, but only six are required core courses that dental hygiene faculty teach. Core courses address the PSLOs listed below with each course aligned with one PSLO and assessment. Even with the assessment limitation of six courses, the PSLOs address the professional roles and career options identified by the ADHA and ADEA. Other required and elective courses in the BDHO program also address the PSLOs, including minor degree options. An updated business minor was approved in 2019, which was implemented beginning catalog year 2019-20.

See Appendix – Professional Courses (Exhibit A), Recommended Electives (Exhibit B), and Business Minor for Dental Hygiene (Exhibit C).

Program Student Learning Outcomes (PSLOs) were reviewed by faculty at the annual program meeting during convocation. No changes were implemented.

Upon graduating from the BDHO program at Oregon Tech, students will:

1. Analyze the strengths and limitations of different research designs and their impact on the dental hygiene profession. (Assessed in **DH 453** – *Research and Evidence-Based Dentistry I*)
2. Apply evidence-based decision making to evaluate and incorporate emerging treatment modalities into dental hygiene practice. (Assessed in **DH 455** – *Research and Evidence-Based Dentistry II*)
3. Analyze your dental hygiene department to identify problems and areas where there is needed improvement; clarify the problem; and propose viable solutions. (Assessed in **DH 454** – *Dental Practice Management*)
4. Identify current and emerging issues in the profession of dental hygiene. (Assessed in **DH 401** – *Overview of Advanced Dental Hygiene*)
5. Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs. (Assessed in **DH 470** – *Community Assessment and Program Planning I*)
6. Design instruction that includes teaching strategies and assessments to meet a variety of learning style needs. (Assessed in **AHED 450** – *Instructional Methods*)

Section 5 – Essential Student Learning Outcomes

Oregon Tech's Essential Student Learning Outcomes (ESLOs) support Oregon Tech's institutional mission and core themes. The assessment structure is to have three pathways (foundation, essential practice, and capstone) for each of the six ESLOs.

The uniqueness of the BDHO program is not conducive to following the exact, same assessment pathways as students who achieve most, if not all, of their credits through OT courses.

The reasons BDHO students cannot be assessed in the same manner as BS dental hygiene students is because:

- BDHO students are required to take a minimum of 15 OT courses; BS students (depending on where they took their prerequisite courses) are required to take 51-64 OT courses
- Although BDHO students are required to take general education and elective courses to earn a bachelor's degree, students' course plans are all unique depending on previous courses transferred from other colleges
- Of the 15 required OT courses for BDHO students, only six courses are taught by dental hygiene faculty in the BDHO program

All BDHO students graduated from an AAS dental hygiene program accredited by the Commission on Dental Accreditation (CODA). The accreditation process is rigorous, and programs must address specific standards related to *"...student evaluation methods that measure all defined program competencies..."* and *"...the evaluation methods used in the dental hygiene program should include process and end-product assessments of student performance, as well as a variety of objective testing measures."* [CODA Accreditation Standards - 2.6 Curriculum](#)

ESLO 1: Communication – OT students will communicate effectively orally and in writing

- Assessed in AAS program – CODA Standard 2-8a: *General education content must include oral and written communications, psychology, and sociology*; CODA Standard 2-15: *Graduates must be competent in communicating and collaborating with other members of the health care team to support comprehensive patient care.*
- Assessed in students' communication courses transferred from previous colleges and/or through OT courses as needed
- The six required BDHO dental hygiene courses do not have an 'oral' communication component, so cannot be assessed
- 'Written' communication is assessed in the BDHO program

ESLO 2: Inquiry and Analysis – OT students will engage in a process of inquiry and analysis

- Assessed in AAS program – CODA Standards on Critical Thinking 2-22: *Graduates must be competent in the evaluation of current scientific literature*; and 2-23: *Graduates must be competent in problem solving strategies related to comprehensive patient care and management of patients.*
- Assessed in students' courses transferred from previous colleges and/or through OT courses as needed
- Inquiry and Analysis is assessed in the BDHO program

ESLO 3: Ethical Reasoning – OT students will make and defend reasonable ethical judgments

- Assessed in AAS program – CODA Standard 2-19: *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.*
- Assessed in students' required course equivalency for OT's DH 275 - Ethics
- No assessment activity to address from the six required BDHO dental hygiene courses

ESLO 4: Teamwork – OT students will collaborate effectively in teams or groups.

- Assessed in AAS program – CODA Standard 2-15: *Graduates must be competent in communicating and collaborating with other members of the health care team to support comprehensive patient care.*
- Assessed in students' SPE 221 – Small Group and Team Communication course transferred from previous college and/or taken through OT
- No assessment activity to address from the six required BDHO dental hygiene courses

ESLO 5: Quantitative Literacy – OT students will demonstrate quantitative literacy.

- Assessed in students’ MATH 243 – Introductory Statistics or MATH 361 – Statistical Methods course transferred from previous college and/or taken through OT
- Assessed in AAS programs through anesthesia course (i.e. proper dosage calculations) and clinical experiences (i.e. use of indices)

ESLO 6: Diverse Perspectives – OT student will explore diverse perspectives.

- Assessed in AAS program – CODA Standard 2-15: *Graduates must be competent in communicating and collaborating with other members of the health care team to support comprehensive patient care. One of the ‘intents’ listed under this Standard is: The ability to communicate verbally and in written form is basic to the safe and effective provision of oral health services for diverse populations. Dental Hygienists should recognize the cultural influences impacting the delivery of health services to individuals and communities (i.e. health status, health services and health beliefs).*
- No assessment activity to address from the six required BDHO dental hygiene courses

Graduates are contacted to complete an Exit Survey that does ask proficiency levels for the six ESLOs.

See Appendix – Six Required DH Courses in BDHO with PSLO and ESLO Assessment Plan (Exhibit D); Exit Survey Results for ESLO proficiency levels (Exhibit E)

Section 6 – Curriculum Map

Not included for BDHO because students only have six required Dental Hygiene (DH) courses and remaining nine (approximate) courses vary depending on students’ transfer credits and program plan.

Section 7 – Assessment Cycle

Assessment Cycle							
PSLOs and ESLOs – Six Year Cycle	2017- 18	2018- 19	2019- 20	2020- 21	2021- 22	2022- 23	2023- 24
1. Analyze the strengths and limitations of different research designs and their impact on the dental hygiene profession (DH 453)	PSLO				PSLO		
2. Use evidence-based decision making to evaluate and incorporate emerging treatment modalities into dental hygiene practice (DH 455)	PSLO						PSLO
ESLO – Inquiry and Analysis	ESLO						ESLO
3. Analyze your dental hygiene department to identify problems and areas where there is needed improvement; clarify the problem; and propose viable solutions. (DH 454)		PSLO					
4. Identify current and emerging issues in the profession of dental hygiene (DH 401)				PSLO			

5. Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs. (DH 470)			PSLO				
6. Design instruction that includes teaching strategies and assessments to meet a variety of learning style needs. (AHED 450)						PSLO	
ESLO – Written Communication						ESLO	

See Appendix – Six Required DH Courses in BDHO with PSLO and ESLO Assessment Plan (Exhibit D)

Section 8 – Methods for Assessment

Because of the limitation of only six courses in BDHO that faculty can use to conduct assessments, only one direct and one indirect measure are used for each PSLO and the ESLO.

PSLO 5: BDHO Online, DH 470, 201901, Jill Schultz				
PSLO 5: Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs.				
Assignment title: Sustainable Program Plan				
Assessment – direct measure: For the PSLO assessment the course instructor and another instructor independently assessed the objectives, strategies and community health issues that are a part of the strategic program plan using a proficient, competent, and novice scale. The two instructors then met to discuss and rate each performance criteria together. Students had the option to work individually or in pairs.				
Performance Criteria	Assessment Methods	Measurement Scale	Minimum Acceptable Performance (MAP)	Results n = 5
Program Plan Objectives	Rubric	Proficient, Competent, or Novice	85% of students scoring competent or proficient	3 - Proficient 2 - Competent 0 - Novice MAP = 100%
Program Plan Strategies	Rubric	Proficient, Competent, or Novice	85% of students scoring competent or proficient	3 - Proficient 1 - Competent 1 - Novice MAP = 80%
Program Plan Consideration of Community Health Issues	Rubric	Proficient, Competent, or Novice	85% of students scoring competent or proficient	3 - Proficient 2 - Competent 0 - Novice MAP = 100%
Assessment – indirect measure: Student Exit Survey; Students were asked to “rate their proficiency in the following area”:				
Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs.	Results (n = 7): 86% High Proficiency (6/7 students) 14% Proficient (1/7 students) 0% Some Proficiency or Limited Proficiency			

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See Appendix – Rubric for direct assessment (Exhibit F); BDHO PSLO Survey data (Exhibit G); Student comments on Exit Survey (Exhibit H)

History of Results:

PSLO 5 was assessed in DH 470 during Academic Year 2015-16 with no noted weaknesses. A different instructor now teaches the course and has revised the course content, so the assignment chosen this cycle for assessment is different than the assignment used for assessment four years ago. One reason for the revision was the impact on community health after the Affordable Care Act was implemented.

Assessment Shared with Faculty:

The BDHO has one full-time and one adjunct faculty member who teach the six required dental hygiene courses. Faculty met via web-conferencing on 1-10-20 to discuss outcomes from the direct assessment. Faculty met again on 7-28-20 to discuss minor changes to assessment and favorable outcome when the course was taught again spring term.

Faculty communicated by email 9-17-20 to discuss Exit Survey results. It was noted that assessment data was derived from two sets of students – 1) direct assessments from current BDHO students enrolled in courses that were assessed and 2) indirect assessments from BDHO students as they graduated each term throughout the academic year. Faculty also discussed changes to the assessment process (i.e. 3-year cycle for both PSLOs and ESLOs) that begins for the upcoming academic year. It was determined PSLO 1.1 and 1.2 will be assessed along with ESLO Inquiry and Analysis.

Interpretation of Results:

PSLO 5 Direct Assessment: The faculty concluded that 100% of the students (n=5) achieved Competent or Proficient for all three criteria except one student only achieved Novice for the Program Plan Strategies criterion. Although five artifacts were assessed, the work included a total of seven students. (Students had the option of working individually or in pairs.) The instructor did a major revision of the course before the start of fall term. Weekly assignments were created to scaffold the content and application leading up to the final project, which was used for the PSLO assessment. Other strengths included the instructor providing multiple resources and past student work examples. Faculty agreed the inclusion of the “Make a Difference” section to the project was most beneficial. Students chose one way they could make an impact in their own community to improve oral health.

PSLO 5 Indirect Assessment: Students rated their proficiency level for the PSLO at 86% High Proficiency; 14% Proficient.

The faculty agreed that the assignment was a good match for the PSLO assessment and overall the students achieved the learning outcome.

9. Evidence of Improvement in Student Learning.

Faculty met in July via Zoom conferencing to discuss changes implemented to the assessment when the DH 470 course was offered again spring term. The instructor didn’t grade the students’ self-evaluations of their projects like she has done so in the past. Instead, the faculty had the students use the self-evaluation as a “self-check” to review their projects before they submitted for grading. The self-evaluation appeared to have more value and usefulness to the students using this method. A bigger change occurred due to restrictions from the COVID-19 pandemic. In the past, students were required to interview a healthcare employee at their local county health department. These types of workers did not have time to meet with students with the extra demands on their jobs and data reporting. The alternative assignment was students would instead interview a member of their local professional organization or oral health coalition. When the instructor teaches the course again fall term she plans to continue using this alternative assignment as it seemed to be more applicable and valuable to our working professional students.

10. Data-driven Action Plans: Changes Resulting from Assessment

Faculty were pleased with the direct assessment results from fall term. Two changes the instructor implemented before teaching the course again spring term were – 1) requiring students to interview a member of their own state’s Oral Health Coalition and 2) removing points in the final project from the self-evaluation. Fall term the students had their choice on who they would like to interview within the Public Health community. The instructor thought it would be more beneficial for students to connect personally with a member from their local oral health coalition to really find out problems, trends, and action plans within their own state. The self-evaluation was really a check-sheet for the student to ensure they had not missed including any components of the final project. The instructor felt that awarding points for this activity was not needed.

Appendix

Exhibit A – Professional Courses Required for BDHO

Course	Description	Credits
AHED 450	Instructional Methods	3
BUS 317	Healthcare Management	3
DH 401	Overview of Advanced Dental Hygiene	3
DH 453	Research & Evidence Based Dentistry I	3
DH 454	Dental Practice Management	3
DH 455	Research & Evidence Based Dentistry II	3
DH 470	Community Assessment and Program Planning I	3
	Humanities electives (two)	6
MATH 243	Introductory Statistics	4
SPE 321	Small Group and Team Communication	3
	Communication elective (from General Education list)	3
	Dental Hygiene electives (three; approved by advisor)	9
	Total Professional Course Credits	46

Exhibit B – Recommended Electives

Electives approved by Dental Hygiene Department			
Clinical Practice	Management	Education	Public Health
COM 205, Intercultural Communication	BUS 223, Marketing I OR BUS 337, Principles of Health Care Marketing	AHED 451, Instructional Experience	BUS 313, Health Care Systems & Policy
BIO 336, Essentials of Pathophysiology	BUS 308, Principles of International Business	AHED 460, Fundamentals of Distance Ed	WRI 410, Grant Writing
PSY 347, Organizational Behavior	BUS 226, Business Law	SOC 225, Medical Sociology	COM 205, Intercultural Communication
SOC 225, Medical Sociology	BUS 313, Health Care Systems & Policy	PSY 347, Organizational Behavior	PSY 347, Organizational Behavior
BUS 313, Health Care Systems & Policy	PHIL 342, Business Ethics	PSY 301, Basic Counseling Techniques	SOC 225, Medical Sociology

PSY 336, Health Psychology	PSY 347, Organizational Behavior	Master of Science in Allied Health ALH 515, <i>Scientific Writing & Medical Literature</i> 2 other MSAH courses may be taken for DH electives or to meet residency requirement	SOC 325, Global Population Health
PSY 337, Health Psychology II	BUS 345, Fraud Examination		SOC 335, Health Inequality & Cultural Competency
RCP 326, Disaster Preparedness	BUS 349, Human Resource Management		DH 471, Community Program Planning II
*PSY 301, Basic Counseling Techniques	BUS 441, Leadership		
COM 205, Intercultural Communication	ACC 201/203, Principles of Accounting		
	DH 465, Dental Hygiene Entrepreneurship		

Exhibit C – Dental Hygiene Business Minor

DH Business Minor		
ACC 201	Principles of Accounting	4
BUS 226	Business Law	3
BUS 317	Healthcare Management	3
BUS 337	Healthcare Marketing	3
PSY 347	Organizational Behavior	3
An elective choice from following options: DH 465, BUS 356, BUS 313, BUS 349, SOC 305, or SOC 335.		3
Total Credits		19

Exhibit D – Six Required DH Courses in BDHO with PSLO and ESLO Assessment Plan

PSLO 1	Analyze the strengths and limitations of different research designs and their impact on the dental hygiene profession.
ESLO	n/a
Course	DH 453 – Research and Evidence Based Dentistry I
Direct Assessment	Module Four – <i>Analyze Randomized Controlled Trials</i>
Indirect Assessment	Student Exit Survey
Assessment Cycle	2017-18; 2021-22
PSLO 2	Apply evidence-based decision making to evaluate and incorporate emerging treatment modalities into dental hygiene practice.
ESLO	Inquiry and Analysis
Course	DH 455 – Research and Evidence Based Dentistry II
Direct Assessment	Module Four – <i>Critical Analysis of Research II</i>
Indirect Assessment	Student Exit Survey
Assessment Cycle	2017-18; 2023-24

PSLO 3	Analyze your dental hygiene department to identify problems and areas where there is needed improvement; clarify the problem; and propose viable solutions.
ESLO	n/a
Course	DH 454 – Dental Practice Management
Direct Assessment	Practice Application Project
Indirect Assessment	Student Exit Survey
Assessment Cycle	2018-19; 2024-25
PSLO 4	Identify current and emerging issues in the profession of dental hygiene.
ESLO	n/a
Course	DH 401 – Overview of Advanced Dental Hygiene
Direct Assessment	Module Ten – <i>Workforce Models: Compare and Contrast</i>
Indirect Assessment	Student Exit Survey
Assessment Cycle	2016-17; 2020-21
PSLO 5	Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs.
ESLO	n/a
Course	DH 470 – Community Assessment and Program Planning I
Direct Assessment	Community Oral Health Strategic Plan
Indirect Assessment	Student Exit Survey
Assessment Cycle	2019-20; 2025-26
PSLO 6	Design instruction that includes teaching strategies and assessments to meet a variety of learning style needs.
ESLO	Written Communication
Course	AHED 450 – Instructional Methods
Direct Assessment	Module Ten – <i>Final 4 MAT Lesson Plan Project</i>
Indirect Assessment	Student Exit Survey
Assessment Cycle	2015-16; 2022-23

Exhibit E – Exit Survey: Proficiency Levels for Six ESLOs

Q ESLO 1 - Oregon Tech Essential Student Learning Outcomes Please rate your proficiency in the following areas.

#	Question	High proficiency	Proficiency	Some proficiency	Limited proficiency	Total				
1	ESLO 1a. Communication: Writing effectively	86.00%	6	14.00%	1	0.00%	0	0.00%	0	7
2	ESLO 1b. Communication: Speaking effectively	86.00%	6	14.00%	1	0.00%	0	0.00%	0	7
3	ESLO 2. Inquiry & Analysis: Thinking critically and analytically	100.00%	7	0.00%	0	0.00%	0	0.00%	0	7
4	ESLO 3. Ethical Reasoning: Making ethical judgements	100.00%	7	0.00%	0	0.00%	0	0.00%	0	7
5	ESLO 4. Teamwork: Work effectively with groups and teams	100.00%	7	0.00%	0	0.00%	0	0.00%	0	7

6	ESLO 5. Quantitative Literacy: Using quantitative/numerical information to solve problems, evaluate claims, and support decisions	100.00%	7	0.00%	0	0.00%	0	0.00%	0	7
7	ESLO 6. Diverse Perspectives: Understanding of diverse perspectives to improve interactions with others	100.00%	7	0.00%	0	0.00%	0	0.00%	0	7

Exhibit F – Direct Assessment Rubric – DH 470 – Sustainable Program Plan

Criteria	Proficient	Competent	Novice
Problems and Prioritized Needs	0 Points Restated accurately from needs analysis. Any needed feedback from needs analysis is incorporated.		-5 Points Not restated in program plan.
Goal(s) Statement	0 Points Broad-based umbrella statement that indicates the overall goal---already on your worksheet		
Objectives	7- 10 Points Specific--defines the population served; Attainable/achievable; Relevant--relate back to the prioritized needs; Time-bound. Summative evaluation is defined.	4-6 Points Objectives include some SMART features, but not all. Summative evaluation is not defined.	0-3 Points Objectives are not written as outcomes and summative evaluation is not defined.
Strategies	7-10 Points Strategies reflect the needs analysis; address the prioritized needs of the community; consider contributing factors; community health issues; and core functions of public health. Formative evaluation is considered.	4-6 Points Strategies do not entirely reflect the needs of the community or contributing factors are not considered. Formative evaluation may not be included.	0-3 Points Strategies are not realistic or reflective of the community's needs. Contributing factors, community health issues and/or core functions are not considered. No thought to formative evaluation.
Community health issues	5 Points Good consideration to resources and manpower is evident. Strategies include preventive or health promotion efforts. Major barriers to access are addressed. Strategies are considered effective and backed by evidence.	3 Points Some portion of the strategies could be effective, but some aspect of prevention, resources, or access is missing.	0 Points Major oversight in development of strategies. Completing missing preventive aspect and does not address access.

Exhibit G – BDHO Exit Survey – PSLOs

Q BDHO 1 - Program Student Learning Outcomes for Dental Hygiene B.S. Degree Completion. Please rate your proficiency in the following areas.

#	Question	High proficiency	Proficiency	Some proficiency	Limited proficiency	Total
1	1. Analyze the strengths and limitations of different research designs and their impact on the dental hygiene profession.	86.00% 6	14.00% 1	0.00% 0	0.00% 0	7
2	2. Use evidence-based decision making to evaluate and incorporate emerging treatment modalities into dental hygiene practice.	100.00% 7	0.00% 0	0.00% 0	0.00% 0	7
3	3. Analyze your dental hygiene department to identify problems and areas where there is needed improvement; clarify the problem; and propose viable solutions.	86.00% 6	14.00% 1	0.00% 0	0.00% 0	7
4	4. Identify current and emerging issues in the profession of dental hygiene.	100.00% 7	0.00% 0	0.00% 0	0.00% 0	7
5	5. Assess the oral health care needs of a community and develop a strategic plan that addresses identified needs	86.00% 6	14.00% 1	0.00% 0	0.00% 0	7
6	6. Design instruction that includes teaching strategies and assessments to meet a variety of learning style needs.	100.00% 7	0.00% 0	0.00% 0	0.00% 0	7

Exhibit H – Student comments from Exit Survey

<p>The Research and Evidence Based courses gave a lot of opportunities to discover strengths and weaknesses of research articles.</p>
<p>Suzanne Hopper is an excellent communicator and educator.</p>
<p>The strongest aspect of the program were the courses and professors. I learned so much for each and every course and instructor I had.</p>
<p>The best thing about the program is that you can go at your own pace. I loved that I could go as slow as I needed depending on what was going on in my life</p>
<p>The class sizes were great for ensuring student/professor interaction. The class sizes also allowed for relationships between classmates to build. The administration was extremely helpful for making sure I was on track to graduate in the timeframe that I desired.</p>
<p>Though I have been a distance learning student only, I felt like the dental hygiene program was small, in a good way like a community. I got to know my professors well, they were approachable, and helpful. The ease of this program I would say was strong, not the coursework, but from the application process to my last class. I was always able to navigate easily and when I needed help I found it quickly, which is not the same for many schools. The biggest draw for me was that it was completely online and affordable.</p>
<p>I feel that the degree completion online program was well done. The course work was presented well online, and the instructors did a wonderful job!</p>