

# Program Review Year 2006 – 2007

## Name of Program:

Dental Assisting Program

### Program Review Team Members

#### Name

#### Title

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**DATE: March 9, 2007**

## SECTION SIX: SUMMARY

### I. CONCLUSIONS: PROGRAM STRENGTHS AND WEAKNESSES

**A. List and describe the program's major strengths, based on information obtained in the Program Review. Cite evidence for each identified strength.**

AREA OF STRENGTH	EVIDENCE
Dental Assisting Program Faculty: a highly qualified faculty dedicated to maintaining the excellence of the program.	SECTION ONE, Part A, #7, Strengths SECTION FOUR, Part I, A, B, C
Dental Assisting Advisory Committee that is committed to the program's ongoing success.	SECTION ONE, Part A, #7, Strengths SECTION FOUR, Part VI, Content Experts
Dental Assisting Clinic/Laboratory Space: a well designed space that allows students access to current dental technology and equipment.	SECTION ONE, Part III, Accountable College SECTION FOUR, Part II, Classrooms and Laboratories
Financial Support: an administration that supports the program's objectives.	SECTION FOUR, Part V, Financial Resources
Community Service Learning: caring faculty and students that provide preventive dental services to children from the community while perfecting dental assisting skills.	SECTION ONE, Part III, Caring College SECTION THREE, Part I C, Curriculum Development
Program that responds to the needs of the dental community.	SECTION TWO, Part I A, Program Demand
Student Retention	SECTION TWO, Part I B, Program Completion
Clinical Sites: Provide clinical experiences that allow students the opportunity to apply dental assisting knowledge to actual patient treatment.  Provide dental assisting faculty the opportunity to observe the latest dental technology, materials and dental treatment techniques.	SECTION THREE, Part I C, Curriculum Development SECTION FOUR, Part VI, C, Content Experts
Curriculum: a curriculum that provides well planned sequence of courses.	SECTION THREE, Part I B, Curriculum Organization

**B. List and describe the program's weaknesses or areas in which improvement is desirable, based on information obtained in the Program Review. Cite evidence for each identified weakness or area for improvement.**

<b>WEAKNESS OR AREA FOR IMPROVEMENT</b>	<b>EVIDENCE</b>
Need additional F/T Faculty	SECTION TWO, Part I D, Student Retention SECTION TWO, Part I D, 1, Program Policies SECTION FOUR, Part I A, Number of Faculty and Part C, Percentage of FT Faculty
Need to develop more activities to further support retention of students.	SECTION TWO, Part I D, Student Retention SECTION TWO, Part I D, 1, Program Policies
Need to recruit more minority students to mirror the diversity of the community.	SECTION TWO, Part I C, Demographic Characteristics
Need for DCE faculty to work toward a Baccalaureate degree.	SECTION FOUR, Part I A and D
Need additional classroom space, capabilities and climate control.	SECTION FOUR, Part II, Classrooms and Laboratories
Need to add telephone and printer to room 11	SECTION FOUR, Part II, Classrooms and Laboratories
Need adequate ventilation in materials lab.	SECTION FOUR, Part II, Classrooms and Laboratories
Admissions Criteria: need to review and revise Waiver of Assessment policy.	SECTION TWO, Part I D, 1, Program Policies

### III. RESOURCES REQUESTED

Complete the following chart, including quotes from vendors, diagrams for requested space, and draft postings as appropriate. (Note: Add rows, increase row height, etc., as needed.)

1. EQUIPMENT				
Item	Justification	Vendor (include contact information)	Cost	Date Needed
One unit to include: Printer, FAX, Copier, Scanner Room 11	To meet ADA accreditation guidelines for students to be familiar with the operation of business office equipment. In addition, this will add to the existing computer in room 11 and re-create a more realistic "business office" setting. The FAX will support the information that must be sent to and from local dental offices for DAS112 and DAS290.	Staples	\$200 Phone line is already in place in room 11.	Fall 07
Telephone Room 11	Same as above.	NECC equipment.	? Phone line is already in place in room 11.	Fall 07
Ventilation to be re-connected in room 13.	To meet ADA accreditation standards and safety standards for adequate ventilation during the use of laboratory materials.	NECC facilities staff.	?	Fall 07

## 2. PERSONNEL

Position (identify as faculty, staff, etc.)	Justification	Credentials/area of content expertise related to curriculum	Salary	Date Needed
Need 1 additional F/T Faculty	To meet ADA accreditation standards for faculty to student ratios in laboratory sessions. To increase time for faculty to work on retention activities.	Bachelor's degree in a health related field required, Master's degree preferred. Current certification in Dental Assisting required; Massachusetts registration as a dental Hygienist preferred. Experience in a general dentistry practice as either a Dental Assistant or Dental Hygienist required. Teaching experience preferred.	Anticipated starting salary range is \$40,000 - \$55,000 per academic year.	Fall 07

## 3. SPACE

Type of space requested	Justification	Description (include square feet, construction requirements, e.g., plumbing, electricity, data ports)	Cost	Date Needed
NA				