

## **Community Dental Health Program Review**

Review Period: Academic Years 2016-2019

**Review Conducted: AY2019-20** 

Rio's Academic Program Review Process is an essential component of the College's Strategic Plan. The 2016-2020 work is guided by the goals of Pillar 3: *Accountability, Assessment, and Quality Assurance*, and supports Strategic Pathway 7: *Grow a Culture of Accountability Through College-wide Quality Assurance Processes*. In addition, data relating to student enrollment, learning, persistence, goal attainment, satisfaction, and institutional accountability are aligned with the college-wide Key Performance Indicators that measure progress toward achieving the goals of the College's Strategic Plan.

## I. Certificate in the Community Dental Health Coordination Program

**Community Dental Health Coordination** 

Major Code: 5709N

**Total Program Credits: 11.5** 

**Description:** The Certificate of Completion (CCL) in Community Dental Health Coordination (CDHC) program is designed to provide students with a practical and theoretical basis for assisting in the reduction of disparities in dental health. Program will cover advocacy, intercultural communication, and finance in addition to dental health coordination, documentation, and reporting procedures. Legal and ethical issues will also be covered.

#### **Program Notes:**

Students must earn a grade of C or better for all courses within the program.

This program is not eligible for Title IV Federal Financial Aid.

+ indicates course has prerequisites and/or corequisites.

**Admission Criteria:** Ability to fully participate in classroom, laboratory, and clinical setting program activities.

Complete and submit required MCCCD Non-Academic Allied Health Program Policy documents.

Submit current Arizona Department of Public Safety (DPS) Level One fingerprint card AND a supplemental background check.

Applicants who are accepted and enroll in the Community Dental Health Coordination (CDHC) program will be exposed to blood-borne and infectious diseases. The program strictly adheres to established policies and procedures regarding infection control as recommended by the Centers for Disease Control and Prevention, American Dental Association, The Organization for Safety and Asepsis Procedures, and the Occupational Safety and Health Administration.

Formal application and acceptance into the Community Dental Health Coordination program is required.

#### **Program Prerequisites:**

11.5

Students must be a Registered Dental Hygienist or Certified Dental Assistant. Applicants are required to provide documentation of licensure or certification according to their individual state's dental practice act.

Req	uired Courses:		11.5
+	CDH105	Community Oral Health Project Planning	3
+	CDH110	Oral Health Communication	1
+	CDH115	Interviewing Skills for Dental Health Advocate	2
+	CDH130	Dental Health Legal and Ethical Issues	2
+	CDH240	Dental Care Finance	0.5
+	CDH245 Com	nmunity Dental Health Coordinator Internship	3

# II. Program Purpose and Mission

### Purpose

Rio Salado College's Community Dental Health Coordination (CDHC) Program's purpose is to provide students with a practical and theoretical basis for assisting in the reduction of disparities in dental health.

### Mission

We do this through:

- Accessible online courses
- Innovative concepts to promote advocacy and strategies for assisting underserved local populations
- High-quality education and personalized service

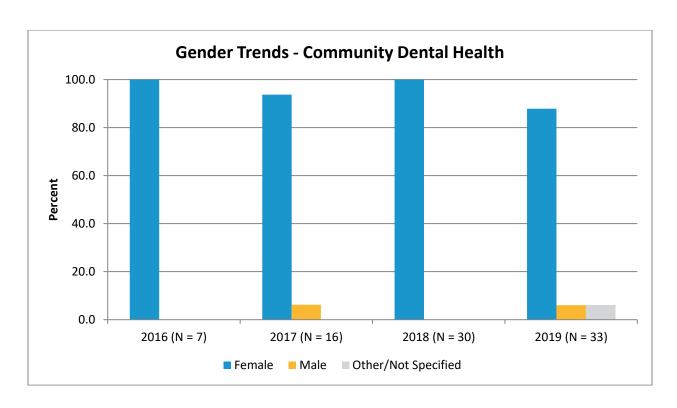
The CDHC's program aligns with Rio Salado College's Mission. The program has been revised since the pilot and is completely online lending to accessibility for students across the nation. This meets Rio Salado College's mission of flexibility and affordability. Innovative strategies and concepts we have developed in the program such as role playing online and courses which follow a grant process toolbox kit meets Rio Salado College's mission of innovation and high-quality education. The program also meets the high-quality education and personalized service through our cohort model and unique partnership with the American Dental Association.

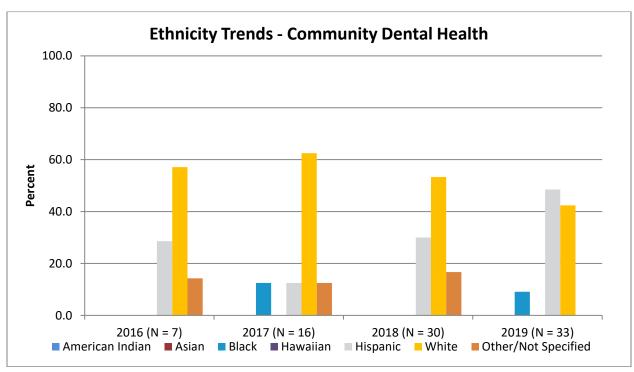
## III. Student Population of the CDHC Program

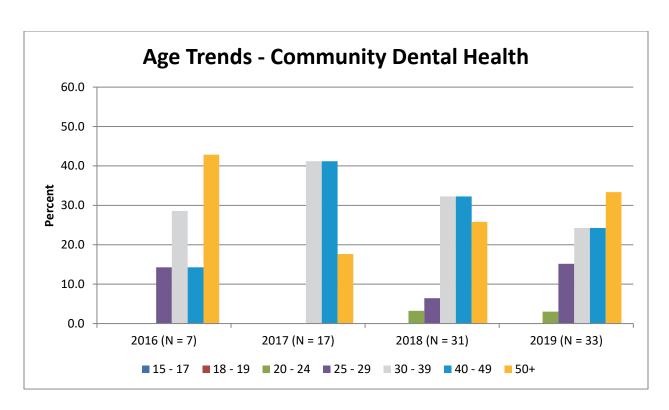
## a. Student Data Analysis

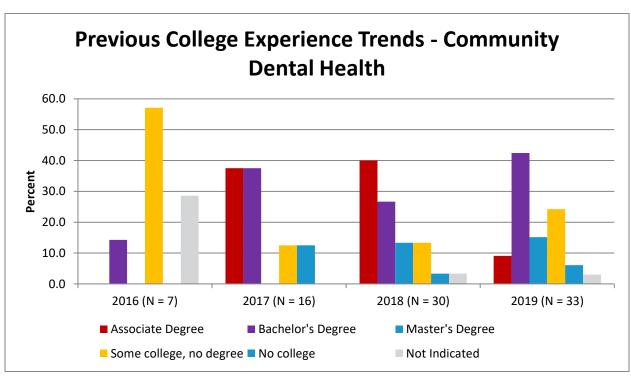
In reviewing the student data for the populations being served, the biggest factor to consider is the variation in educational levels of those enrolled in the CDHC program. While the data does not show a complete view of the CDH student, the admission criteria require dental experience. We have students who have completed dental degrees, associate and bachelor level dental hygiene degrees and dental assistants with no formal education. This is shown in the continued high percentage of first-generation trends. While we have a large population of first generation students, we are successful in our retention efforts and have successful completion rates.

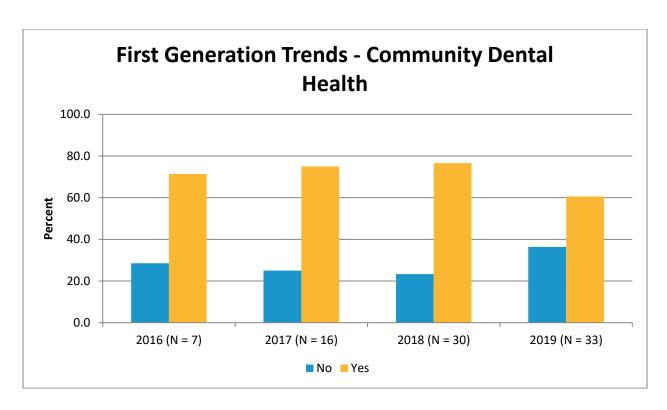
The data also show a large percentage of the students are white with a significant increase in Hispanic ethnicity over the last three years. It is also important to point out that many students are employed within Federally Qualified Health Centers or FQHC's. This is something that may require further analysis in order to meet the purpose of the program to assist in the reduction of disparities in dental health. A primary goal of the CDH is to meet the needs of the local population and do our ethnicity trends speak to this goal?

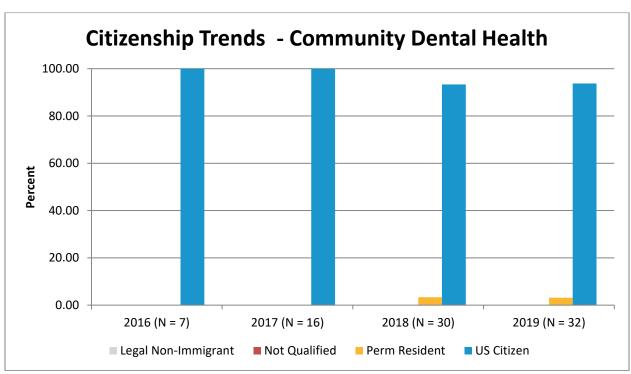


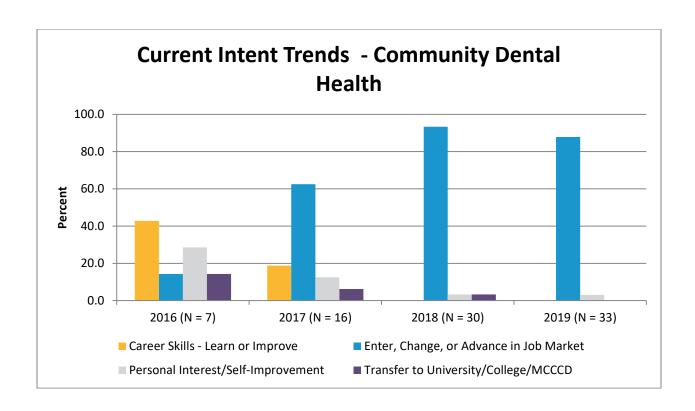










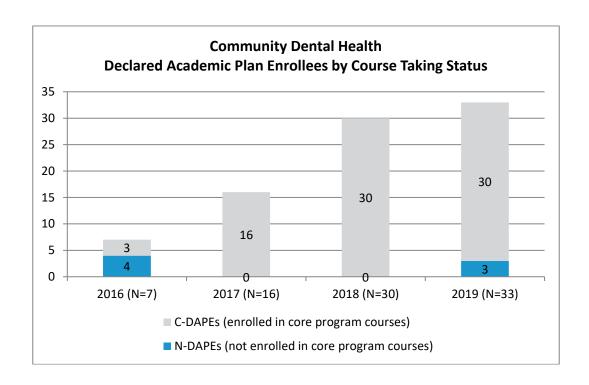


#### **b.** Enrollment Trends

The CDHC program is a cohort program with specific admission criteria and dynamically dated starts every fall. The enrollment fluctuates every year with an average of 21 students per year for the four years covering this review period. Most of the students are out of state and pay tuition fees at the elevated rate for out of state students.

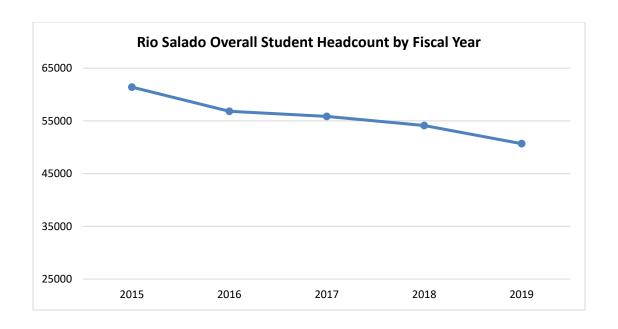
Enrollment has primarily been directed by our partnership with the American Dental Association (ADA). ADA has a scholarship for students in the program that has covered the entire tuition, including books and registration. Since the pilot and the implementation of our online CDHC program, the ADA has instituted other CDHC programs across the country. These programs range in academic rigor. Examples include a single non-credit course, courses within a dental hygiene program, to our certificate of competition program.

We are completing the guided pathways curriculum process. During this time, we will investigate avenues to making the program financial aid eligible, eliminating the admission criteria, and offering more start dates. We will also look to improve the curriculum to set Rio Salado College apart from other colleges.



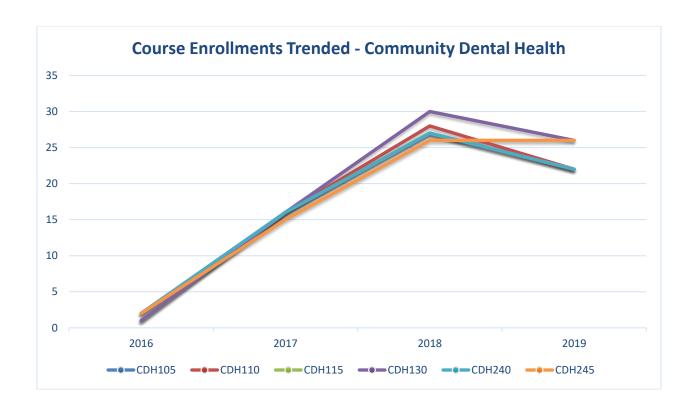
FTSE in the program decreased from 2017-2019, which corresponds to an overall decline in college student headcount for this same time period:

Table 1. FTSE by Year - Community Dental Health						
	2016	2017	2018	2019		
C-DAPEs (Declared Academic Plan /Enrolled in Core Program Courses)	0.90	11.68	10.48	9.00		



The Community Dental Health Coordinator certificate is a one-year cohort program. Students are enrolled in the fall semester and are required to complete each course consecutively throughout the year. Course enrollment typically remains stable, with some attrition in the fall semester courses. All courses are in the online format.

Table 2. Top Course Enrollments Trended - Community Dental Health					
Course	2016	2017	2018	2019	
CDH105	2	16	27	22	
CDH110	1	16	28	22	
CDH115	1	16	27	22	
CDH130	1	16	30	26	
CDH240	2	16	27	22	
CDH245	2	15	26	26	
Total	9	95	165	140	



#### c. Student Graduation Data

Most of the attrition in the CDH program occurs within the first semester. The fall 2019 cohort will complete the program in the summer of 2020.

Table 3. Cohort Graduation Rates - Community Dental Health							
				F		n Awar erred	d
				2016	2017	2018	2019
Total Graduates <sup>1</sup> 0 17 0 31							
		Conferred					
	Cohort	Award	% Conferred				
FY Cohorts <sup>2</sup>	(N)	(N)	Award				
2016	3	2	66.7%	0	2	0	0
2017	18	17	94.4%	0	15	0	2
2018	29	23	79.3%	0	0	0	23
2019	29	16*	55.2%	0	0	0	0

<sup>1</sup>Reports the total number of graduates without cohort classification constraints. <sup>2</sup>Cohort created based on first FY that student declared the academic plan. Cohort created to compute approximate graduation rates; however, for programs with small numbers (Cohort <50), rates are subject to high degrees of variability and should not be used for making inferences. Cohorts will not be identical in size to those created for persistence, which is based on term with summer terms modified.\*Students in FY19 cohort completed awards during FY20.

### **IV. Student Goals**

Certificates of completion goals are being met with a high number of students graduating. In the student profile data, many have entered the program to change or advance in the job market. There are currently no specific job openings for a CDH and the employment trend for a Community Health Worker (CHW) in Arizona is estimated to increase 29% between 2016 and 2026. This correlates to an additional 200 CHW's over the course of 10 years. Across the nation it is projected to increase 13%. Students primarily work in Federally Qualified Health Centers (FQHC). Students can directly apply what they learn to their daily work duties.

We review evaluations at the end of the semester to gather feedback and make sure student goals are being met at the course level. Course evaluation data indicate students are engaged and satisfied with courses and instructors:

### **End-of-Course Survey Questions**

- 1. My instructor communicated the course policies and procedures.
- 2. My instructor communicated his/her expected response time for messages and grading assignments.
- 3. My instructor responded to messages within the stated time frame.
- 4. My instructor graded assignments within the stated timeframe.
- 5. My assignment feedback explained why I earned or lost points.
- 6. My instructor's feedback on assignments helped to increase my understanding of the course content.
- 7. My instructor provided complete responses to my questions.

Table 4. Distance End-of-Course Evaluation Data							
					Number	of Surveys	227
Course	Q1	Q2	Q3	Q4	Q5	Q6	Q7
CDH105	4.89	4.89	4.79	4.79	4.89	4.79	4.89
CDH110	4.60	4.60	4.68	4.60	4.68	4.49	4.64
CDH115	4.80	4.89	4.91	4.91	4.80	4.84	4.84
CDH130	4.67	4.69	4.75	4.73	4.57	4.45	4.54
CDH240	4.51	4.39	4.14	4.44	4.28	4.22	4.19
CDH245	4.71	4.81	4.68	4.70	4.79	4.82	4.82
Total	4.68	4.69	4.66	4.69	4.64	4.57	4.63

Scale information: 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree

For the capstone course, students blog about their experience in the program and we use general themes and suggestions from these blogs to guide program improvements. See sample student blogs below.

Student #1: Each and every one of the academic tools, resources, and elements known and acquired throughout this whole course complement each other, giving us a solid foundation as a CDHC and broadening the spectrum of work and what it implies. All of them are worthy of recognition, but as I expressed before, the Motivational Interviewing and OARS, are simply part of my daily work, they are intrinsically immersed in the communication process, that constitutes the base of any interaction. Through all the time working on our HPV project, the importance and effectiveness of the knowledge gotten was evidenced; therefore, I would say, that regardless of the duties, functions, responsibilities, and projects, that my work requires, the majority of them will continue to be part of my day to day.

Infinite thanks to our instructor for her guidance with charisma, respect and professionalism; also for her help and understanding.

#### Best wishes!

Student #2: As I discussed in my essay, everything I learned will be used in my daily work; From the very beginning of the course, during the first chapters, I received significant guidance: from the fundamental basis of the role to the meaning of the Community Dental Health Coordinator. Rooted in the commitment and heart to fight injustice and to advocate for social changes that promote the health and well-being of clients and communities

Motivational Interview and cultural humility will be integrated into my daily work; it will be my guide as a professional and as a new CDHC.

I'm planning to follow up the patients participated in the project in a year, through our dental software to check the patient nutritionally progress, as well as dental treatment needed, to find out the outcome of my project in a long-term

In the toolbox website, many exciting tools can be implemented for the development of any other intervention in the community, as well as excellent continuing education courses Wishing you all the best of luck

Hats off!!.... Well done 😊

The most significant dataset for assessing student satisfaction resulted from our alumni survey, which covered students in the program for the years 2016-2019. Results of the alumni survey are linked at the end of this document.

An average of 93% of the students somewhat agreed or strongly agreed they felt confident in their ability to perform certain CDHC skills. 96% felt they gained useful skills and information from the CDHC program and 88% felt Rio Salado College adequately prepared them to perform the duties of a CDHC.

### V. Evaluation of Curriculum

The alumni survey provided valuable feedback on how the program's curriculum is preparing CDHC students with valuable skills. We are currently using the survey as we go through the curriculum mapping process. Input is collected through course evaluations, faculty, advisory council and the ADA to ensure the curriculum is relevant and current. The advisory council for dental programs is appraised of any changes and recommendations are solicited during the yearly meetings. The partnership with the ADA also ensures the relevance of the courses.

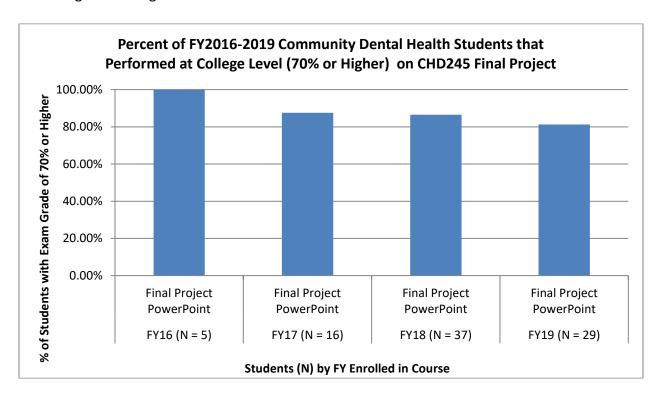
Changes will be made to the course content as we go through the guided pathways mapping process in the fall 2020. Faculty initiated recommendations and course evaluations prompts minor curriculum changes. Curriculum changes will be completed over the course of this and next academic years. Courses are being combined and at least two new courses are being created in response to our alumni survey. The new version of the curriculum will have a fall 2021 start.

## **VI. Student Learning Outcomes**

### a. Program-Level Student Learning Outcomes

- 1. Create and maintain social networks. (CDH105)
- 2. Develop and implement community based oral health prevention and promotion programs. (CDH105, CDH110, CDH115)
- 3. Demonstrate knowledge and skills required to collect diagnostic data. (CDH105, CDH115)
- 4. Explain the role of the Community Dental Health Coordinator (CDHC). (CDH105, CDH115, CDH240)
- 5. Create and maintain social networks. (CDH105, CDH245)
- 6. Demonstrate effective communication skills in the healthcare setting. (CDH110)
- 7. Review teaching and learning skills as they apply to the dental healthcare setting. (CDH110, CDH115)
- 8. Demonstrate effective communication skills in the healthcare setting. (CDH110, CDH245)
- 9. Describe major components of care/case management. (CDH115)
- 10. Review legal and ethical issues related to community dental health. (CDH130)
- 11. Explain CDHC responsibilities in the area of dental care finance. (CDH240)
- 12. Demonstrate the role of advocacy within the scope of practice of the CDHC. (CDH245)
- 13. Identify leadership skills within community members to improve oral health. (CDH245)
- 14. Assess and prioritize oral and general healthcare needs and assets of the community. (CDH245)

The capstone course for this certificate is CDH245. Students implement a project they developed in the previous course. The data shows that more than 80% of the students in the CDHC program performed at a college level for each of the years under review, which meets the college-wide target.



### **b.** College-Wide Student Learning Outcomes

In addition to the program-level outcomes addressed above, Rio Salado College places a high priority on developing core competence in the following areas:

- 1. **Critical Thinking:** The student will demonstrate the ability to analyze information, evaluate material, use inference to draw conclusions, and use deductive reasoning and inductive reasoning at a college level
- 2. **Information Literacy:** The student will demonstrate the ability to determine an information need, access successfully and evaluate critically the needed information, and organize and apply the information appropriately to accomplish a given research task.
- 3. **Oral Communication:** The student will demonstrate the ability to prepare and present oral communication in a variety of contexts as a college-level speaker.
- 4. **Reading:** The student will demonstrate the ability to comprehend a variety of materials by determining the central idea and providing textual evidence, drawing inferences or valid conclusions, analyzing the author's purpose and bias, and applying the text to a given task or course content.

5. **Writing:** On a written assignment, the student will demonstrate the ability to generate relevant and sufficient content; organize his or her thoughts coherently; adhere to the conventions of correct mechanics and sentence structure; and use correct terminology and rich vocabulary in the fulfillment, at the college level, of his or her writing assignments.

For more information: <a href="http://www.riosalado.edu/about/teaching-learning/assessment/Pages/SLO.aspx">http://www.riosalado.edu/about/teaching-learning/assessment/Pages/SLO.aspx</a>

Table 5. (	Courses and College	-Wide Learning Ou	ıtcomes Includ	led in Community	Dental Health
Course	Critical Thinking Flag	Reading Flag	Info Lit Flag	Oral Comm Flag	Writing Flag
CDH105	Υ	Υ	Υ		Υ
CHD110	Υ	Υ	Υ		Υ
CDH115	Υ*			γ*	
CDH130	Υ	Υ	Υ		Υ
CDH240	Υ	Υ	Υ		Υ
CDH245	Υ	Υ	Υ		Υ

\*The Oral Communication Flag will be added to CDH115, Interviewing Skills for Dental Health Advocate. This course specifically addresses motivational interviewing techniques and patient interviews directly related to oral communications. This will be completed as we move through the course revision process and will occur spring/summer 2021. The critical thinking flag will also be added, as this course requires the student to differentiate between effective and ineffective patient assessment questions and patient's health behaviors. This will occur across the curriculum, and will be completed as we revise courses in the spring/summer 2021. This will incorporate college-wide learning outcomes throughout the courses and program.

A specific ongoing outcomes assessment plan has not been formalized for the CDHC program. However, this will be a focus for the program moving forward, and will be reinforced at the All-Faculty meetings in the spring and fall.

A review of the Assessment Data Display shows consistent year to year college-level performance on the student learning outcomes by the end of the course. See sample below from CDH245. Though only 67% of the students performed at a college level on a pre-writing activity, 100% of the students performed at a college level on the final reflection essay:

Lesson	Dimension	Critical Thinking		Oral Comm	Reading	Writing	%Stds @CL
Project Outline	Analysis	Υ	Υ		Υ		<mark>67%</mark>
Reflection Essay	Analysis	Υ	Υ		Υ		100%

## **VII. Effective Teaching**

Faculty attend All Faculty meetings in the spring and fall as well as department meetings to support effective teaching. Faculty are current with educational methodologies consistent with their teaching assignments.

Data from course evaluations included in section IV as well as retention and completion rates detailed below are evidence to support effective teaching in the CDHC program.

### VIII. Retention and Persistence

Data show high course success and retention throughout the program:

Table 6. Aggregate Course Success and Retention Rates Community Dental Health							
2016	5	201	L7	201	8	201	19
Course Retention	Course Success	Course Retention	Course Success	Course Retention	Course Success	Course Retention	Course Success
*	*	100.0%	97.9%	99.4%	97.8%	98.6%	97.9%

Note: Course Success = Grade A,B,C,P/any letter grade(includes withdraws). Course Retention = Grade A,B,C,D,F,P/any letter grade (includes withdraws).

Table 7. % Students Passed, Failed, Withdrew, and Retained by Course

_	rable 7: 70 Stadents 1 assea, 1 and a, with a rew, and Netanica by course											
2017						201	8		2019			
	Retentio	on/Pass	Withdr	aw/Fail	Retentio	on/Pass	Withdr	aw/Fail	Retenti	on/Pass	Withdra	aw/Fail
	Rat	tes	Ra	tes	Rat	tes	Ra	tes	Ra	tes	Rat	es
	Retain	Pass	W	D/F	Retain	Pass	W	D/F	Retain	Pass	W	D/F
CDH105	100.0%	93.8%	0.0%	6.3%	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
CDH110	100.0%	100.0%	0.0%	0.0%	100.0%	96.8%	0.0%	3.2%	100.0%	100.0%	0.0%	0.0%
CDH115	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
CDH130	100.0%	100.0%	0.0%	0.0%	97.1%	91.2%	2.9%	5.9%	92.3%	92.3%	7.7%	0.0%
CDH240	100.0%	93.8%	0.0%	6.3%	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%
CDH245	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%	100.0%	96.2%	0.0%	0.0%
Total	100.0%	97.9%	0.0%	2.1%	99.4%	97.8%	0.6%	1.7%	98.6%	97.9%	1.4%	0.0%

<sup>\*</sup>If no students enrolled or N < 10, percentages not computed

 $P = course \ success \ (A,B,C,P); \ F = course \ failure \ (D,F); \ W = course \ withdrawal$ 

(W,Y); R = (A,B,C,D,F,P)

The data also show that students in the CDHC program persist from term to term:

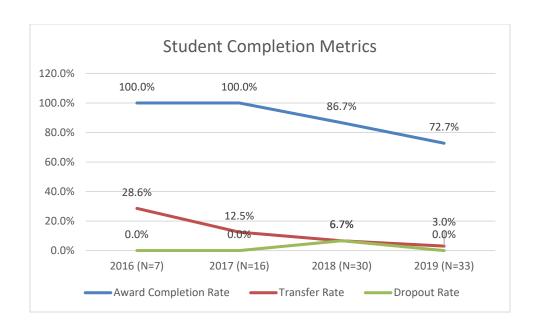
Table 8. (C-DAPES) Persistence for Following Term and Following Year – Community Dental Health						
Cohort Term Start	Cohort (N)	% Persist to Following Term	% Persist to Following Year			
4156	1	0.0%	0.0%			
4162	2	100.0%	0.0%			
4166	16	100.0%	93.8%			
4176	30	90.0%	86.7%			
4186	26	84.6%	84.6%			
4196	4	n.a.	n.a.			
Total	79	84.8%	79.7%			

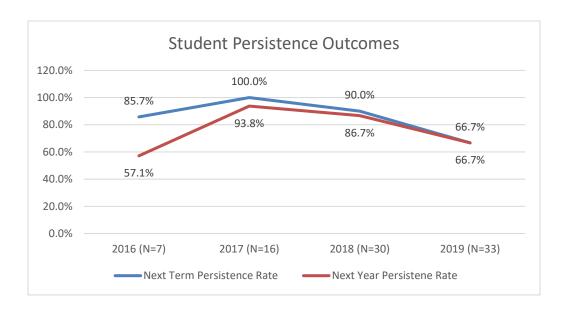
Notes. Cohort determined as first term that a student declared the academic plan and took core course during review period. Course taking activities in summer term are rolled up into the next Fall term. Persistence to next term is Fall to Spring or Spring to Fall. Persistence to next year is Fall to Fall or Spring to Spring. % Persistence excludes graduates (Term Enrollees/(Initial Cohort - Grads to date).

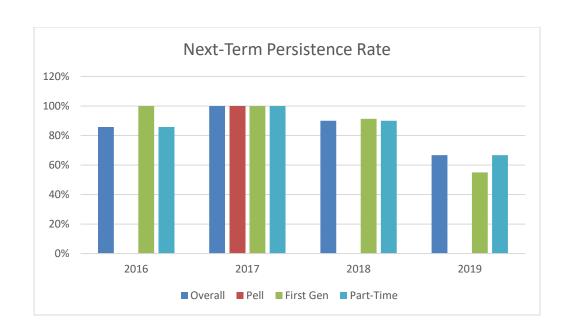
#### **Additional Student Outcomes Analysis**

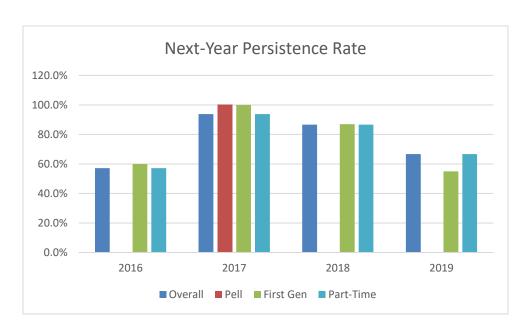
The charts below provide analysis of student early momentum and outcomes in their program(s). Cohorts were created based on the first FY that students declared the academic plan and will not be identical in size to those used to track DAPES, which are based on total student enrollment in a given year. Award Completion Rate is total number of students completing the declared award out of the full cohort. Transfer Rate is total number of students enrolled in another institution of higher education after declaring the program in review at RSC. Dropout Rate is total number students who did not complete the program, did not transfer to another institution, and are no longer enrolled at RSC. Next Term Persistence Rate is total number of students enrolled in the term following their initial term in the program (i.e. Fall to Spring, Spring to Fall). Next Year Persistence Rate is the total number of students enrolled in the year following their initial year in the program (i.e. Fall to Fall, Spring to Spring). Credit Success Rate is the total number of credits earned by students of the total number of credits attempted.

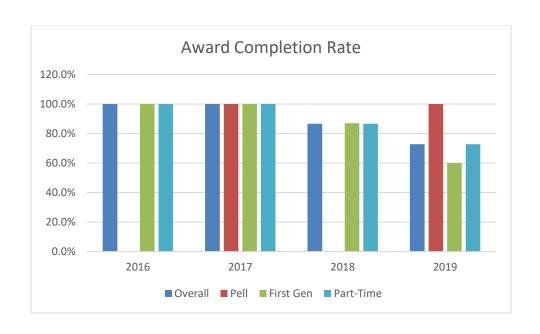
In reviewing the additional student outcomes analysis, I feel we have an excellent completion and low drop-out rates. Many of the students who have withdrawn are full time employees and did not understand the rigors of college courses. Others have had family and personal considerations. We are very consistent with student persistence once they have completed the first semester of learning. The additional student outcomes presented reflect our students and are overall high. We will consider this information as we go through the mapping process to improve student retention and persistence.

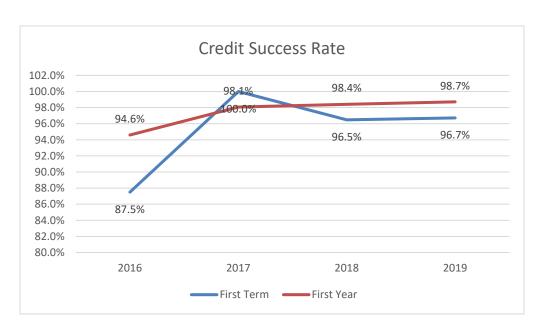


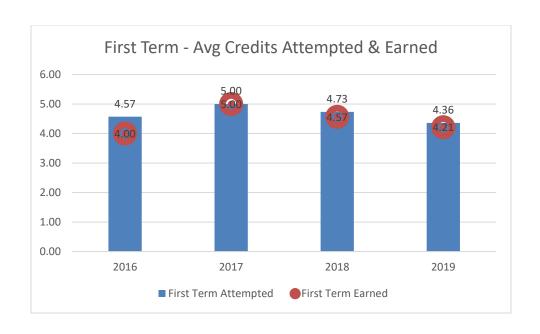


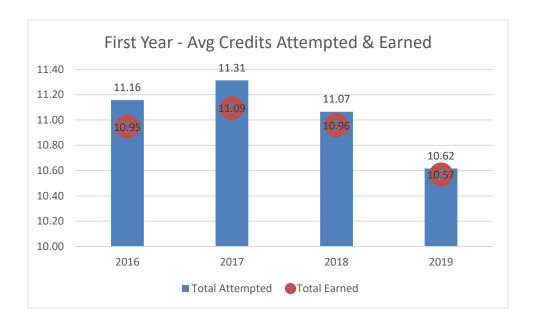












Given that retention levels are already quite high, the CDHC program does not currently implement any specific interventions based on analytic data at the course or program levels to improve retention.

## IX. Impact of Co-curricular Programs

Many of the CDCH students work full-time and do not participate in co-curricular activities as indicated in the chart. Also, there are no Honors-only courses in the CHDC program.

Table 9. Community Dental Health College-Wide Learning Outcomes All DAPEs and Co-Curricular DAPEs

			27 ti 25			
Learning Outcome	All Student Activities	Activities at College Level	% of Activities at College Level	Co- Curricular Activities	CC Activities at College Level	% of CC Activities at College Level
Critical Thinking	888	721	81.2%	0	0	0.0%
Information Literacy	888	721	81.2%	0	0	0.0%
Oral Communication	0	0	0.0%	0	0	0.0%
Reading	888	721	81.2%	0	0	0.0%
Writing	1791	1400	78.2%	0	0	0.0%

## X. Program Resources

We have an instructional coordinator whose responsibilities include management of the CDHC program. Some responsibilities include communication between the ADA and RSC, admissions, course development, and faculty support. The program has a partnership with the American Dental Association but moving forward marketing resources would be beneficial to increase program enrollment. The program currently relies on the ADA for students and enrollment. The ability to market the program nationwide and increase enrollment independent of the ADA would move the CDHC towards being self-sustaining. There is no marketing plan in place. There has been discussion of incorporating CDHC in the national division. Strategies for marketing programs through the national division would then be discussed with the national team. There is no specific timeline or budget for marketing. An anticipated date for a plan would be spring 2022.

The CDHC students benefit from Rio Salado College's library, dedicated advising and program specific information sessions. Our instructional coordinator provides students with guidance as they apply to the program.

# XI. Program Recommendations, Decisions, and Action Plans

### a. Program Best Practices

The cohort model for the program works very well. Students provide encouragement and support throughout the program.

A specific admissions criterion provides students with the foundational knowledge to be successful in the program.

### **b.** Program Viability

RSC continues to partner with the American Dental Association. Work has begun on the mapping of curriculum to set Rio Salado College's program apart from others that offer the ADA's curriculum. In addition, we are making the financial aid eligible and responding to our students' feedback.

Workplace demand for this program is very limited, as this is such a specialized certificate with no actual job positions or classifications. There are currently no specific local job openings for a CDH. However, the employment trend for a Community Health Worker (CHW) in Arizona is estimated to increase 29% between 2016 and 2026. This correlates to an additional 200 CHW's over the course of 10 years. Across the nation it is projected to increase 13%. Students primarily work in Federally Qualified Health Centers (FQHC). Students can directly apply what they learn to their daily work duties. According to the alumni survey 20% of the graduates successfully obtained new dental related employment while 36% have looked for other job opportunities. 44% have not sought new employment.

### c. Action Plans

In completing this program review, I discovered we are lacking a formal ongoing outcomes assessment plan tied to the program's learning outcomes. The following is a timeline for developing an assessment plan:

Plan	Date for completion	Check/Assess
Guided pathways mapping	Fall 2020 to spring 2021	CCTA for completion
Course revisions and new course development	Spring 2021 through fall 2021	Follow course revision/development process
Tie in college learning outcomes Oral communications Critical Thinking to courses - through course development	As courses are completed spring through fall 2021	Assessments as courses are taken fall 2021 through summer 2022
Development of a formal program learning outcome assessment	Fall 2022	Assessment of program learning outcomes through an outcome assessment plan implemented for the completion of the first cohort 2022

Development of a marketing strategy	Fall 2022	Following the completion of the formal outcomes assessment plan and new curriculum a marketing
		strategy will be developed beginning fall 2022

#### d. Recommendations

The recommendations for the CDHC program based on this review are captured in the table above. The first recommendation is for the program to go through the guided pathway mapping process. The second recommendation is to complete course revisions and new course development tying in college learning outcomes to assessments in the courses. The third recommendation is to develop a formal outcomes assessment plan. The last recommendation is to develop a marketing plan for the program.

Attachments: <u>CDHC Alumni Survey results</u>

Version 6. Last Updated by Assessment Committee 12-5-2018