Program Review
Executive Summary

Dental Hygiene Program

Majors Reviewed:

- Dental Hygiene, A.A.S.
- Dental Hygiene, B.S.

May 2019
The Dental Hygiene (DH) program was developed in 1977. The first class of students began in January, 1978 and graduated in May 1979. The bachelor’s degree program was implemented in 1992, and the first students enrolled during the fall of that year.

The applicant pool for the DH program continues to remain consistent, with more qualified applicants than can be accommodated within the major. Other than a few exceptions made for transfer students, all students begin as pre-dental hygiene majors and complete general courses towards selection into the major. The program uses a point-based admissions ranking system to select students for admission into the associate’s degree major. Clinic capacity limits acceptances into the associate degree to 40 students each year.

According to the Bureau of Labor Statistics, employment trends suggest that the demand for dental hygienists will continue to grow 20% through 2026. However, reports from recent graduates, area dental hygienists, and members of our advisory committee indicate that there continues to be geographical mal-distribution of employment opportunities. It is common for dental hygienists to work multiple part-time positions, with the majority of positions located in urban/suburban areas. However, the recent growth of corporate dentistry has created new, full-time employment opportunities with employee benefits.

The DH program continues to integrate and evaluate emerging technologies to enhance the teaching and learning process to align with industry trends.

**Recommendations to maintain program excellence include the following:**

1. Continue to enhance the clinical faculty calibration plan to align with the new American Dental Association’s Commission on Dental Accreditation (CODA) Standard 2-24, which states that dental hygiene programs must have a defined mechanism to calibrate dental hygiene faculty for student clinical evaluation.
2. Evaluate National Board Dental Hygiene Exam outcomes for student performance and first-time pass rates.
3. Reduce the overall number of program goals for the associate degree major to improve efficiency of outcomes assessment.
4. Continue exploring models to expand enrollment in the bachelor’s degree completion program.
5. Monitor opportunities related to a dental mid-level provider model in Pennsylvania as well as ongoing national discussions related to making entry level into the profession at the bachelor’s degree.