# Program Assessment Plan

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<th>Program Learning Outcomes</th>
<th>Assessment Mapping</th>
<th>Assessment Methods</th>
<th>Use of Assessment Data</th>
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<tr>
<td></td>
<td>Using the knowledge and concepts of periodontics, apply major practices, theories, or evidence-based literature in clinical periodontics.</td>
<td>Residents daily provide comprehensive clinical periodontal care under the direct supervision of periodontal faculty. Foundational knowledge is obtained from all core and periodontal specific didactic course work. Knowledge and clinical skills are developed and refined during clinical care.</td>
<td>An informal formative assessment occurs with daily verbal feedback from the attending periodontists. A formalized assessment occurs weekly during the Periodontal Case Presentation Seminar. In the seminar, residents provide documented self-evaluation of their performance on patient treatment. Faculty provide and document feedback and a course grade. Bi-annually, residents are formally evaluated by all program faculty using a rubric. Exit interviews and alumni surveys are also used to assess whether the program is meeting its outcome.</td>
<td>The Program Director reviews the case outcomes each term looking for negative trends in performance that require intervention or remediation. Treatment seminars and/or individual coursework are modified as needed. The results of the bi-annual evaluations are also reviewed in consultation with the faculty. In the case of an underperforming resident, a plan is formulated to address any deficiencies. If evidence suggests that all residents are not achieving the program learning level, department faculty are convened to recommend programmatic changes.</td>
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**Note:** Each cell in the table below will expand as needed to accommodate your responses.
<table>
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<th></th>
<th>2</th>
<th>Assess relevant literature or scholarly contributions in periodontics</th>
<th>Residents prepare and present complete and accurate critical evaluations of assigned research literature for weekly Periodontal Literature Reviews and Current Literature courses. Residents are also challenged during patient care to support their treatment decision using evidenced-based literature.</th>
<th>Literature evaluations are discussed in the seminar and become part of the courses’ final grade. Weekly quizzes evaluate comprehension of the prior weeks’ topics. The annual American Academy of Periodontology In-Service examination is a comprehensive written exam used to assess residents’ knowledge of literature and concepts critical to the discipline of periodontology. In a one on one setting, residents are required to support their patient care using appropriate literature. The results for each resident are compared to ensure that the program learning outcome level is being achieved. Further understanding of the literature is assessed in the development of an original research project and presentation in an oral defense and thesis using a rubric. Exit interviews and alumni surveys are also used to assess whether the program is meeting its outcome.</th>
<th>The Program Director reviews the outcomes each term looking for negative trends in performance that require intervention or remediation. Treatment seminars and/or individual coursework are modified as needed. The results of the bi-annual evaluations are also reviewed in consultation with the faculty. In the case or underperforming residents, a plan is formulated to address any deficiencies. If evidence suggests that all residents are not achieving the program learning level, department faculty are convened to recommend programmatic changes to improve the outcome. Programmatic changes are summarized and reported to the Executive Director.</th>
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<td>3</td>
<td>Articulate arguments or explanations to both a disciplinary or professional audience and to a general audience, in both oral and written forms.</td>
<td>Each resident designs original research project, carries it out, analyzes data, and reports results during oral defense of the thesis.</td>
<td>A thesis is written and orally defended utilizing standard criteria by a thesis committee and graduate education criteria. A department rubric is used to define criteria for the quality of the thesis. Where appropriate, a manuscript is prepared for submission to a refereed journal.</td>
<td>Theses, data and publications are maintained by the department. Outcomes are annually reviewed, summarized and reported to the Executive Director. Using the rubric, if class trends are reporting below quality work, department faculty are convened by the program director to recommend changes in the process to strengthen the end-product.</td>
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<td>4</td>
<td>Evidence scholarly and professional integrity in periodontics</td>
<td>Content from all department didactic and clinical course work.</td>
<td>First analysis will consist of an understanding of the literature in the development of an original research project and presentation in an oral defense and thesis using a rubric. Additional analysis will consist of each resident’s performance on the American Academy of Periodontology In-Service written examination. Upon completion of the exam, residents are interviewed by the program director to ascertain potential areas of weakness. If residents report any difficulty in a section of the exam, program changes are implemented to improve performance. (Results are also reviewed during the program’s professional accreditation process.) Further assessment consists of tracking alumni as to their progress of during the board certification process. In addition, exit interviews and alumni surveys are also used to assess whether the program is meeting its outcome. The data for this outcome is reviewed annually and the results are shared with the Executive Director. If necessary, a plan is implemented to address any shortcomings. The impact of the assessment-informed changes is also assessed annually.</td>
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### Additional Questions

1. On what schedule/cycle will faculty assess each of the above-noted program learning outcomes? *(It is not recommended to try to assess every outcome every year.)*

We are presently implementing all four of these learning outcomes. The program director is responsible for all efforts in this program. Current data will be provided. Ultimately the program will be reviewed annually at the end of the academic year in June/July.
2. Describe how, and the extent to which, program faculty contributed to the development of this plan.

The program director is responsible for development of this plan. Other periodontal faculty are consulted, as needed, to obtain additional input for modification of the plan.

3. On what schedule/cycle will faculty review and, if needed, modify this assessment plan?

a. Timeline regarding when or how often this plan will be reviewed and revised. (This could be aligned with program review.)
   - Current data will be provided. Ultimately the program will be reviewed annually at the end of the academic year in June/July.

IMPORTANT: Please remember to submit any assessment rubrics (as noted above) along with this report.
Resident:

Year of Graduation:

Thesis Title:

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<tr>
<th></th>
<th>Complexity</th>
<th>Clarity</th>
<th>Composition</th>
<th>Assessment of Relevant Literature</th>
<th>Contribution to Existing Literature</th>
<th>Significance</th>
<th>Overall</th>
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<td>EE</td>
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<tr>
<td>ME</td>
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<td>BE</td>
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EE = Exceeds Expectations; ME = Meets Expectations; BE = Below Expectations*

*All Below Expectation ratings must be justified with written comments.

Comments:

Committee Member Signature:

Date:
Resident:

Each of the following items are discussed and evaluated for each term:

- Diagnosis and Treatment Planning
- Clinical ability
- Patient Treatment Records
- Asepsis
- Didactic coursework
- Research
- In-Service Exams
- Communication
- Attitude
- Professional and Ethical Conduct
- Work Habits and Time Utilization

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<tr>
<th></th>
<th>Resident initials</th>
<th>Director initials</th>
<th>Date</th>
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<tr>
<td><strong>Year I</strong></td>
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<td><strong>Year II</strong></td>
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<td><strong>Year III</strong></td>
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Comments:
The Commission on Dental Accreditation will review complaints that relate to the program’s compliance with the accreditation standards. The Commission is interested in the sustained quality and continued improvement of dental and dental-related education programs but does not intervene on behalf of individuals or act as a court of appeal for treatment received by patients or individuals in matters of admission, appointment, promotion or dismissal of faculty, staff or students.

A copy of the appropriate accreditation standards and/or the Commission’s policy and procedure for submission of complaints may be obtained by contacting the Commission at 211 East Chicago Avenue, Chicago, IL 60611-2678 or by calling 1-800-621-8099 ext. 4653.

Cc: Resident
Rating Criteria:

1. **Diagnosis and Treatment Planning**

   Satisfactory: Resident is usually able to formulate an accurate periodontal diagnosis and treatment plan.

   Unsatisfactory: Resident is unable to consistently formulate an accurate periodontal diagnosis and treatment plan and faculty assistance is required on an on-going basis.

2. **Clinical ability**

   Satisfactory: All periodontal procedures are performed in a satisfactory manner according to level of experience. The student may require some guidance and/or intervention.

   Unsatisfactory: Clinical procedures are frequently performed in an unacceptable manner resulting in major corrective action by the faculty or the need for additional clinical procedures for the patient.

3. **Patient Treatment Records**

   Satisfactory: Resident is maintaining an accurate and complete record of periodontal patient treatment.

   Unsatisfactory: The resident is not maintaining an accurate and complete record of periodontal patient treatment.

4. **Asepsis**

   Satisfactory: Follows OSHA and university guidelines with regard to operatory and instrument asepsis.

   Unsatisfactory: Frequently has major deficiencies with regard to compliance with OSHA and university guidelines for operatory and instrument asepsis.

5. **Didactic coursework**

   Satisfactory: Resident performs an acceptable, passing level on all and exams and coursework.
6. **Research**

   Satisfactory: The research project is progressing in a timely manner and will be completed by the end of the program.

   Unsatisfactory: The research project is not progressing in a timely manner and it is unlikely that the project can be completed by the end of the program.

7. **In-Service Exams**

   Satisfactory: Exam scores are acceptable with some improvement in Year II and III.

   Unsatisfactory: Exam scores are in the tenth percentile or lower and need considerable improvement.

8. **Communication**

   Satisfactory: Residents’ oral and written communication skills are good.

   Unsatisfactory: Resident has difficulty with oral and/or written communication skills.

9. **Attitude**

   Satisfactory: Resident has a positive attitude.

   Unsatisfactory: Resident’s attitude is generally negative.

10. **Professional and Ethical Conduct**

    Satisfactory: Resident exhibits acceptable professional and ethical conduct.

    Unsatisfactory: Resident’s professional or ethical behavior is frequently unacceptable and results in patient, faculty, resident/student or staff complaints.
11. **Work Habits and Time Utilization**

Satisfactory: Resident makes good use of clinic time and is always prepared for didactic classes. Resident is organized.

Unsatisfactory: Resident frequently does not make good utilization of clinic time and is frequently not prepared for didactic coursework.