**Sinclair Community College - Continuous Improvement Annual Update 2011-12**

**Program:** Dietetics & Nutritional Management

**Section I: Trend Data**

* 1. **Program Trend Data– Please include the three most recent years of data in each area so that trends may be examined.**
     1. **Course Success Rates(%) – Please report the course success rates for:**
* **Highest enrollment courses (numbers indicate course success in percentage)**

|  |  |  |  |
| --- | --- | --- | --- |
| **High Enrollment Courses** | **2008-09** | **2009-10** | **2010-11** |
| **DIT 109 Intro to Dietetics** | **86.5%** | **80.0%** | **90.4%** |
| **DIT 112 Medical Terminology** | **88.3%** | **79.0%** | **78.3%** |
| **DIT 129 Human Nutrition** | **87.7%** | **80.4%** | **78.9%** |
| **DIT 135 Nutrition in the Lifecycle** | **94.1%** | **100%** | **96.4%** |
| **DIT 137 Food Safety & Sanitation** | **93.5%** | **88.5%** | **94.2%** |

* + - * + **Any courses that deviate - high and low - from the typical success rate for your department -none**
    1. **Degree and certificate completion (where applicable)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Degree & Certificate completion** | **2009** | **2010** | **2011** |
| **DIT.AAS** | **22** | **20** | **21** |
| **DM.STC** | **26** | **23** | **28** |

* + 1. **Any additional data that illustrates what is going on in the program (examples might include course sequence completion, retention, demographic data, data on placement of graduates, graduate survey data, etc.)**

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| **Additional Data (%)** | **2009** | **2010** | **2011** |
| **Pass rate percentage- 5 yr**  **(data from CADE)** | **82 (2004-2008)** | **75 (2005-2009)** | **81 (2006-2010)** |
| **Employment rate percentage- working FT or PT in the dietetics field** | **80** | **83** | **60** |
| **Continued education -pursuing a 4 yr degree** | **30** | **35** | **16** |
| **Retention of students accepted into DT program (includes part time students and students taking DIT courses that transfer to 4 yr institutions with no intention of completing DIT.AAS degree.** | **2007 cohort**  **67** | **2008 cohort**  **70** | **2009 cohort**  **68** |

**Section I: Trend Data**

1. **Program Trend Data**

* + While there was a dip in pass rate percentage to 75% (2005-2009) rates have now returned to >80% (pass rate benchmark required by CADE).
  + Employment rate in the field has decreased from 80-83% in the past two years to a recent 60% (2010).
  + Continued Education- Graduates enrolled in bachelor degree programs increased from 30% (2009) to 35% (2010) and have now decreased to 16% (the goal is for 20% or more students to continue pursuing their education).
  + Retention of students accepted into the Dietetic Technician (DT) program has remained fairly stable from 67% -70% over the past three years. The DIT program tracks
  1. **Interpretation and Analysis of Trend Data Included in the Section Above *Suggestions of questions that might be addressed in this section:***  *What trends do you see in the above data? Are there internal or external factors that account for these trends? What are the implications for the program or department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*

**Analysis of the above trends (including external/internal factors)**

* + **Employment rate:** Two external factors exist for the drop in employment rate:
    - * + Fewer jobs available related to the economy (institutions have cut some technician positions)
        + Reduced number of students pursing higher education (lack of funds to finance college tuition) resulting in a larger pool of graduates seeking jobs as DTR’s.
  + **Continuing Education:** During exit interviews conducted June 2011, graduates indicated that for financial reasons they were seeking employment first in the field as a DTR. If their financial situation improved, many indicated an interest in continuing their education at a 4 yr institution. This is an external factor.
  + **Retention:** Retention improvement over the last three years is the result of better departmental tracking. Tracking includes not only students accepted in the program but also includes part time students and students taking DIT courses that transfer to 4 yr institutions with no intention of completing DIT.AAS degree. This is an internal factor.

**Implications/Actions/Strategies:**

* **Employment rate**: A decrease in the employment rate is a significant concern for the program. This was presented at the annual preceptor meeting (9/2011) where it was suggested to create a PowerPoint presentation highlighting graduates successful as DTR’s in non-traditional roles.
* **Continuing Education:**  With this downward trend the program no longer meets the goal of 20% or more students seeking higher education. We will continue to encourage students to seek financial aid and scholarship support.
* **Retention:** Program efforts of better tracking has resulted in better alignment to meet the SCC vision of student retention.

**Section II: Progress Since the Most Recent Review**

1. What was the fiscal year of the most recent Program Review for this program? (The most recent Program Review self-study can be found at <http://www.sinclair.edu/about/administrative/vpi/pdreview/> ). 2008
2. Briefly summarize the goals that were listed in Section IV part E of the most recent Program Review Self-Study (this section of the Self-Study asks “What are the department’s/program’s goals and rationale for expanding and improving student learning, including new courses, programs, delivery formats and locations”)?

* Continue to improve national pass rates on Dietetic Technician Registration. Exam to achieve and maintain an 80% 5 year pass rate or higher.
* Strive to improve retention rates in alignment with the SCC mission.
* Continue to assess and evaluate outcome data that reflect 2005-2006 curriculum changes.
* Explore expansion of dietetic technician practicum experiences and job opportunities in the Dayton community.
* Evaluate computer software applications for possible implementation to improve competency in clinical and management practicum settings (computerized charting, selective menus, inventory and ordering).
* Goal was to increase enrollment by converting DIT 111 and DIT 129 to online course offerings. This request was denied due to class enrollment status. This affects the possible growth in enrollment for these classes. To offset a decline in FTE an independent study option was created for both and DIT 129 has been approved as an OBR TAG course.
* Continue to explore articulation agreements with 4-year colleges. This is on hold until after the Q2S conversion.

1. What Recommendations for Action were made by the review team to the most recent Program Review?

Written recommendations were never forwarded to the DIT Department after the 2008 review. In August 2009, DIT Program Director (Nora Schaefer) met with Dr. Goldman to discuss the new CADE 2009 Eligibility Requirements and Accreditation Standards.

Following the meeting with Dr. Gloria Goldman, DIT program outcomes were revised

( listed below under section e) to reflect compliance with the new 2009 accreditation standards. A 5 -year plan titled “Aggregate Data collection,” was developed for each learning outcome. Each year the plan addresses the following information; DT competencies/learning outcomes, data collected availability of data, courses being assessed, numbers assessed, expected outcome, actual outcome and action plan as needed. Aggregate data has been collected for 2008-09 addressing Program Outcome #1 and DT competencies 1.1-1.5, and aggregate data has been collected for 2009-10 addressing Program Outcome #2, DT competencies 2.1-2.6, and aggregate data has been collected for 2010-11 addressing Program Outcome #2, DT competencies 2.7-2.11 and 2.5.

1. Have the goals in your self-study changed since your last Program Review Self-Study as a result of the Review Team recommendations or for any other reason?  If so, please describe the changes.

* The conversions to online courses have been addressed through the use of an

independent study option.

* Exploration of additional articulation agreements will resume after Q2S.
* Outcome data has changed to reflect not only curriculum changes but also the new 2009 CADE Eligibility Requirements and Accreditation Standards.

1. What progress has been made toward meeting any of the goals listed in the sections above (b, c, and d) in the past year?

* **Pass Rate Improvement Plan:** A Holistic Plan for Student Success was developed and piloted with the 2010-2012 cohort This year students were surveyed by Counseling Service on the effectiveness of this program. Based on survey results modifications were made in the plan. The plan is currently in its second year of a 2 yr pilot program and is being continued for first year students. Gwen Helton from Counseling Services met with 39 students enrolled in the DIT 109 class to develop personal time management skills and complete holistic worksheet. Course grades will be tracked in the DIT 129 Human Nutrition course Winter Qtr 2012. The goal is to achieve a B or higher in this course. Long term goal of the plan is to improve pass rate on national DTR credentialing exam to >80%.
* **Retention Rates:** program is able to improve accuracy of retention rates reported due to tracking of part-time students and students taking DIT courses that transfer to 4 yr institutions with no intention of completing DIT.AAS degree. This tracking system reveals an increase in the actual number of students retained.
* **Outcome Data**: program is currently collecting aggregate data for 2011-12 addressing Program Outcome #3, DT competencies 3.1-3.7 During 2012-13 the program will collect aggregate data for Program Outcome #4, DT competencies 4.1-4.5.
* **Dietetic Practicum Sites/Preceptor Availability**: Fewer sites are actually accepting students due to staffing cut backs. To resolve the current issue some preceptors accepted more than one student per site.
* **Software:** DIT faculty attended a demonstration (12/5/11) on Surequest software and pricing information from the company is pending. This software is currently being used in many long term care foodservice settings and performs the following applications; computerized charting, selective menus, inventory and ordering. Our purpose is to create a virtual long-term nursing home/hospital setting thus reducing our reliance on community preceptors. The goal is to submit a proposal for the FY2012 capital budget development process due January 20, 2012.
* **Articulation Agreements:** Current articulation agreements with UD, UC, OSU and UMDNJ are in the process of revision to reflect the semester conversion.

**Section III: Assessment of Outcomes**

The Program Outcomes for this program are listed below. **At least one-third of your program outcomes must be assessed as part of this Annual Update, and across the next three years all of these program outcomes must be assessed at least once**. The Program Outcomes for this program are listed below. **At least one-third of your program outcomes must be assessed as part of this Annual Update, and across the next three years all of these program outcomes must be assessed at least once**.

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| --- | --- | --- | --- |
| **Dietetics & Nutritional Management Technology** Program Outcomes | In which courses are these program outcomes addressed? | Which of these program outcomes were assessed during the last fiscal year? | Assessment Methods  Used |
| **1)**.Describe and apply scientific information and research related to the dietetic technician level of practice  DT 1.1  DT 1.2  DT 1.3  DT 1.4  DT 1.5 | DIT 129, 135, 224, 227, 228, 237, 240 | Assessed in FY 08-09 |  |
| **2)** Develop beliefs, values, attitudes and behaviors for the dietetic technician level of practice in accordance with the American Dietetic Association Code of Ethics  FY 09-10  DT 2.1  DT 2.2  DT 2.3  DT 2.4  DT 2.5  DT 2.6  **FY 10-11**  **DT 2.5**  Refer situations outside the dietetic technician scope of practice or area of competence to the Registered Dietitian or other professional  **DT 2.7**  Participate in professional and community organizations  **DT 2.8**  Establish collaborative relationships with internal and external stakeholders, including patients, clients, caregivers, other health care professionals and support personnel to facilitate individual and organizational goals  **DT 2.9**  Demonstrate professional attributes such as advocacy, customer focus, flexibility, openness to change, time management, work prioritization and work ethic within various organizational cultures  **DT 2.10**  Perform self assessment, develop goals & objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetic Registration  **DT 2.11**  Demonstrate respect for life experiences, cultural diversity and educational background in interpersonal relationships | DIT 218, 224, 226, 227, 228,  237, 240, 255 | Assessed in FY 09-10  DT 2.1-2.6  **Assessed in FY 10-11**  **DT 27-2.11 & 2.5** | Assessment methods reflect CADE competencies DT 2.7-2.11 and DT 2.5 (DT 2.5 was carried over from last year because outcomes were not met)    **DT 2.5 Expected Outcomes**  90% of students will accurately triage level III: high risk patients to RD’s based on levels of care criteria (DIT 227)  **DT 2.7 Expected Outcomes:**  90% of students will score a B or higher on EFNEP/FNP assignment (DIT 224)    **DT 2.8 Expected Outcomes:**  80% of students will score a B or higher on student career portfolio and preceptor eval  (DIT 228)  **DT 2.9 Expected Outcomes**  75% of students will score a B or higher on employee schedule assignment  (DIT 237)    **DT 2.10 Expected Outcomes**  90% of students will score a B or higher on CDR Portfolio (DIT 255)  **DT 2.11 Expected Outcomes**  90% of students will score a B or higher on diversity project  (DIT 224) |
| **3)** Develop and deliver information, products and services to individuals, groups and populations at the dietetic technician level of practice.  DT 3.1  DT 3.2 (a-e)  DT 3.3  DT 3.4  DT 3.5  DT 3.6  DT 3.7 | DIT 135, 216, 218, 225, 226, 228, 236, 237 | Will assess in  FY 11-12 |  |
| **4)**.Apply principles of management and systems in the provision of clinical and customer services to individuals and organizations at the dietetic technician level of practice  DT 4.1  DT 4.2  DT 4.3  DT 4.4  DT 4.5  DT 4.6  DT 4.7  DT 4.8 | DIT 216, 218, 219, 224, 227, 228, 236, 237 | Will assess in  FY 12-13 |  |

1. For the assessment methods listed in the table above, what were the results?

|  |  |  |  |
| --- | --- | --- | --- |
| DT Competency | Assessment Method Used  Expected Outcome | Results  Actual Outcome | Goal Met |
| **DT 2.5** | 90% of students (19/21) will accurately triage level III: high risk patients to RD’s based on levels of care criteria (DIT 227) | 12/12 (100%) students scored  > 85% on triage Level III assignment | Outcome data was collected from GVH only and not from SVH. Only 12 out of the 21 students were assessed. Will carry goal over to 2011-2012 calendar. |
| **DT 2.7** | 90% of students (28/31) will score a B or higher on EFNEP/FNP assignment (DIT 224) | 22/31 (71%) scored 33/40 or higher on EFNEP/FNP community paper. | No.. 2 scores were a direct effect of student misconduct (plagiarism) This was corrected at time of incidence. Future instruction will include an example that emphasizes adequate detail when completing assignment. |
| **DT 2.8** | 80% of students will score a B or higher on student career portfolio and preceptor eval  (DIT 228) | 18/21 students scored > 8/10 points on career portfolio  20/21 students scored > B on preceptor eval. | Goal Met |
| **DT 2.9** | 75% of students (18/24) will score a B or higher on employee schedule assignment  (DIT 237) | 22/24 (91.7%) scored 20.5/25 or higher | Goal Met |
| **DT 2.10** | 90% of students (19/21) will score a B or higher on CDR Portfolio (DIT 255) | 21/21 (100%) scored 41/50 or higher on CDR Portfolio Assignment | Goal met |
| **DT 2.11** | 90% of students (18/20)will score a B or higher on diversity project  (DIT 224) | 20/20 (100%) scored > 42/50 on diversity service learning project | Goal met |

1. Were changes planned as a result of the data? If so, what were those changes?

DT 2.5 competency: Will again carry this competency over to 2011-2012 for evaluation so that assessment occurs on the whole group of students.

DT 2.7 competency: Future instruction will include an example that emphasizes adequate detail when completing assignment.

1. How will you determine whether those changes had an impact?

Compare actual outcome data with expected outcome data to determine if goals have been met. A new strategy will be implemented if goals have not been met.

c) Starting with next year’s Annual Update, this section will ask about assessment of general education outcomes. For FY 2012-13, you will be asked how the department is assessing Oral Communication and Written Communication in your courses, and in addition you will be asked to share the results of those assessments. Please be prepared to address this in next year’s Annual Update.

d) Does your department have courses where there are common assignments or exams across all sections of the course? Yes

If so, please list those courses, and indicate whether you are currently examining results across all sections of those courses.

DIT 129-01/03 Human Nutrition

DIT 209-01/02 Lab for DIT 208

DIT 218-01/02 Directed Practice for DIT 216

DIT 219-01/02 Lab for DIT 216

DIT 226-01/02 Dietetics Directed Practice I

DIT 227-01/02 Dietetics Directed Practice II

DIT 237-01/02 Directed Practice for DIT 236

Through the aggregate data collection all sections are being reviewed.

**Section IV: Improvement Efforts for the Fiscal Year**

1. **FY 10-11:** What other improvement efforts did the department make in FY 10-11?  How successful were these efforts?  What further efforts need to be made? If your department didn’t make improvement efforts during the fiscal year, discuss the strengths and weaknesses of the department over the last year and how the department plans to address them in the coming year.

**Improvement Efforts:**

* 1. Collaborated with Counseling Services and implemented a DIT Holistic Student Plan for Success (Fall 2010) and continued plan for first year students (Fall 2011).

**Success- of efforts:** Students completed evaluations created by counseling services. Feedback received was positive. Further outcomes will be based on national credentialing 2012 pass rate scores. In the first two weeks of the DIT 222 course (WI-12) second year students will be asked to explain use of their holistic plan. In the first few weeks of the DIT 129 course Counseling Services will visit first year students to review their Holistic Plan. Students will be offered the opportunity for a private session with Counseling Service.

* 1. Tracked information for student success and retention 2010-2012 cohort

**Success of efforts:**  Enables the program to track trends regarding employment and continuation of education.

* 1. Sought input at the September 2011 Preceptor Meeting regarding potential preceptor/practicum site shortages due to current economic situations resulting in staffing/budget cuts.

**Success of efforts**: recommendations included looking into virtual practicum experiences. DIT faculty is currently evaluating Surequest software as mentioned under Section IIe.

**Further Efforts**:

1. Explore obtaining Good Samaritan as a teaching hospital for medical nutrition therapy practicum experiences. This would enable the program to send a group of 25 dietetic students to one site and utilize the computerized rooms for access to medical information.
2. **FY 11-12:** What improvement efforts does the department have planned for FY 11-12? How will you know whether you have been successful?

1. Continue collaboration with Counseling Services for yearly implementation of the DIT Holistic Student Plan for Success. Monitor success through student feedback/evaluations and national DTR credentialing exam pass rates.
2. Continue to explore and implement virtual practicum experiences. Monitor success through scores obtained on graded nutritional assessments/care plans that applied the nutrition care process utilizing virtual case scenarios.
3. If the purchase of Surequest software is approved with the 2012 capital budget it will be used for foodservice and clinical applications. Use of this program will strengthen student computer application skills and reduce reliance on community preceptor sites.

Questions regarding completion of the Annual Update? Please contact the Director of Curriculum and Assessment at 512-2789 to schedule a time to review the template and ask any questions.