Verification of Compliance with Accreditation-Relevant Federal Regulations  
Institutional Report Template

The Middle States Commission on Higher Education, as a federally recognized accreditor, is obligated to ensure that its candidate and member institutions comply with the accreditation-relevant federal regulations developed by the U.S. Department of Education in the Higher Education Opportunity Act of 2008. Further, the Commission is required to review candidate and member institutions’ continued compliance with Title IV program responsibilities. Commission policy regarding federal compliance requirements for institutions was revised and enacted in January 2013, indicating that institutions must meet these federal regulations to be accredited by the Commission.

In response to this, it is assumed that the institution will provide documentation of policies and procedures that are (1) in writing, (2) approved and administered through applicable institutional processes, and (3) published and accessible to those affected.

In the event that one or more of these regulations do not apply to an institution, that institution shall indicate that fact in the compliance document. Otherwise, all accredited and candidate institutions must respond with regard to each of the areas.

These areas will be reviewed as part of the accreditation process, especially as they relate to the MSCHE Standards and applicable Requirements of Affiliation. Failure to comply with the areas of verification listed above will result in follow-up.

Reports must be filed in the Commission office according to the dates below:

<table>
<thead>
<tr>
<th>Self-Study Visit falls between...</th>
<th>Report on federal compliance is due no later than...</th>
<th>Reviewer’s Report is due...</th>
</tr>
</thead>
<tbody>
<tr>
<td>September – January</td>
<td>July 1</td>
<td>August 15</td>
</tr>
<tr>
<td>February – March</td>
<td>December 1</td>
<td>January 15</td>
</tr>
<tr>
<td>April – May</td>
<td>January 15</td>
<td>March 1</td>
</tr>
<tr>
<td>PRR review begins...</td>
<td>Report on federal compliance is due no later than...</td>
<td>Reviewer’s Report is due...</td>
</tr>
<tr>
<td>June 1</td>
<td>June 1</td>
<td>August 1</td>
</tr>
</tbody>
</table>

Please note that as additional guidance is received from the U.S. Department of Education, these guidelines may be modified without prior notice.

Institution: Camden County College

Report completed by: Dr. Vanessa O’Brien-McMasters, Executive Director, Institutional Effectiveness and Planning, ALO

Date: November 23, 2017
### 1. Student Identity Verification in Distance and Correspondence Education

Institutions must provide the following information and evidence:

<table>
<thead>
<tr>
<th>Policies and procedures used to ensure student identity verification in distance or correspondence education courses.</th>
<th>Documents, Policies, and Procedures</th>
</tr>
</thead>
</table>
| Camden County College students registered for online courses have a secure user ID and password assigned to them by the College using a FERPA compliant procedure. Students have the opportunity to change their password at any time and are encouraged to do so periodically. Access to online courses is controlled by the use of secure User ID and Password. | Guidelines for Student Identity Verification in Distance Education  
Proctor Candidate Request Form |
| Procedure(s) regarding the protection of privacy for students enrolled in distance and correspondence courses or programs. | Guidelines for Student Identity Verification in Distance Education |
| All methods of verifying student identity in distance learning protect the privacy of student information. The privacy of students who enroll in online courses at Camden County College is protected under the College’s policies regarding student privacy, confidentiality, fraud, FERPA rules, and the Social Security Privacy Act of 1974 (P.L. 93-579). | |
| Procedure(s) for notifying students about any projected additional charges associated with student identity verification. Provide URLs, catalogs, student handbooks, and other locations of any alternative institutional website documenting required disclosures. | Camden County College does not charge a fee for student identity verification. Students would be notified of additional fees, if any, prior to and during the registration process through various publications i.e., the Schedule of Classes and the College Catalog, and on the College website. |
### 2. Transfer of Credit Policies and Articulation Agreements

**Institutions must provide the following information and evidence:**

<table>
<thead>
<tr>
<th></th>
<th><strong>Documents, Policies, and Procedures</strong></th>
</tr>
</thead>
</table>
| 1. Policies and procedures for making decisions about the transfer of credits earned at other institutions (including all modes of delivery, if applicable). Include public disclosure (URL, catalog, or other public locations for information) of policy. | Policies and procedures for transfer of credit can be found in:  
- [2017 Student Handbook](#)  
- [2018 Student Handbook](#)  
- [2017 Catalog](#)  
- [Awarding of Transfer Credit](#)  
Credit for Prior Learning can be found in:  
- [Credit for Prior Learning](#) |
| 2. URL and other publication locations, if applicable, of institutions with which the institution has established an articulation agreement. | Articulation agreements can be found online:  
- [Four Year College Information](#) |
3. Title IV Program Responsibilities

Institutions must provide the following information and evidence:

<table>
<thead>
<tr>
<th>Documents, Policies, and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Student loan default rates for the most recent three years. If applicable, submit reports on compliance from the U.S. Department of Education in regard to the cohort default rate, including any default reduction plans.</td>
</tr>
<tr>
<td>2. Three most recent years of composite ratios (private and proprietary institutions only).</td>
</tr>
<tr>
<td>3. Date of most recent Title IV program review.</td>
</tr>
<tr>
<td>4. Relevant correspondence from the U.S. Department of Education, such as program reviews and any actions to limit, suspend, or terminate the institution’s eligibility to participate in Title IV, including institutional responses, if applicable.</td>
</tr>
</tbody>
</table>
### 4. Institutional Records of Student Complaints

*Institutions must provide the following information and evidence:*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
| **1. Policy and methods used in handling and tracking student grievances and complaints. Include public disclosure(s) of the policy/policies for student grievances and complaints (URLs, catalog, handbook, or other public location of this information).** | Policies regarding student complaints and grievances can be found online at

**Student Complaints or Grievances**

Policies can also be found at

- 2017 Student Handbook
- 2018 Student Handbook |
| **2. Procedures for making modifications and improvements to the institution as a result of information obtained in handling student complaints.** | Camden County College strives to maintain best practices for all policies and procedures pertaining to student complaints, along with all other aspects of campus life.

Each unit (eg. academics, student services, public safety) will review the complaints regarding their areas annually. Trends will be identified and recommendations for improvement made.

For those issues that do not require a change in policy, the executive director of the area will be responsible for implementing the required remediation.

For complaints that, upon review, require a change in policy, the recommendation will come from the specific unit to faculty council and the executive team for review. All proposed changes to College Policy must be approved by the Camden County College Board of Trustees (Board Policy 101).

In the case of academic complaints, policy changes will be considered by the Academic Policy committee. This body will make recommendations to the full Faculty Assembly. After careful discussion, the Assembly will vote on the recommendation and the resulting policy change will be sent to the Office of the Vice President of Academic Affairs.

Assessment of changes made based on student complaints will occur annually to determine their effectiveness and be reported to the appropriate stakeholders for review. |
### 5. Required Information for Students and the Public

*Institutions must provide the following information and evidence:*

<table>
<thead>
<tr>
<th>1. <strong>URLs, catalogs and student handbooks, and other public locations of any alternative institutional website documenting required disclosures as required by Student Right to Know, as well as polices on SAP, withdrawal, leave of absence, and attendance.</strong></th>
<th><strong>Documents, Policies, and Procedures</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financial Aid Policies and Procedures</strong></td>
<td><strong>Higher Education Opportunity Act, Student Right to Know, Consumer Information</strong></td>
</tr>
<tr>
<td><strong>2018 Student Handbook - Student Right to Know</strong></td>
<td><strong>2017 Catalog - Student Right to Know</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. <strong>Methods used to collect and review information on student outcomes and licensure pass rates.</strong></th>
<th><strong>Data on licensure pass rates is gathered by chairs/coordinators and submitted to the Division Dean’s office. Licensure and Certification pass rates for all programs can be found at</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Licensure Pass Rates</strong></td>
<td><strong>Licensure Pass Rates</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. <strong>Documents and URLs for advertising and recruitment materials that are available to current and prospective students that show the accreditation status with the Commission and any other U.S. Department of Education approved agencies.</strong></th>
<th><strong><a href="http://www.camdenc.edu/academics/Assessment/Middle-States-Commission-on-HE.cfm">http://www.camdenc.edu/academics/Assessment/Middle-States-Commission-on-HE.cfm</a></strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong><a href="http://www.camdenc.edu/middlestates/index.cfm">http://www.camdenc.edu/middlestates/index.cfm</a></strong></td>
<td><strong><a href="http://www.camdenc.edu/academics/Accreditations.cfm">http://www.camdenc.edu/academics/Accreditations.cfm</a></strong></td>
</tr>
</tbody>
</table>
6. Standing with State and Other Accrediting Agencies

_Institutions must provide the following information and evidence:_

<table>
<thead>
<tr>
<th>Documents, Policies, and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Documentation of the relationships with any specialized, programmatic, or institutional accrediting agencies recognized by the U.S. Department of Education and all governing or coordinating bodies in the state(s) and countries in which the institution has a presence. If, in the last five years, the institution has had a review resulting in non-compliance, include the report from the state or other accreditor as well as the institutional response.</td>
</tr>
</tbody>
</table>
| List of accredited programs can be found online: [Accreditations](#)  
As of November 1, 2017, all accredited programs are in good standing.  
Within the past five years, the following programs received findings letters from their accrediting bodies (Program Response and Accreditation letters are attached). All have since earned full accreditation:  
  - Dental  
  - Dietetics  
  - Veterinary Technology |
| 2. URLs, catalogs, student handbooks, and other locations of any alternative institutional website documenting required disclosures. |
| [2017 Student Handbook](#)  
[2018 Student Handbook](#)  
[2017 Catalog](#)  
[2017 Academic Program Guide](#)  
[2018 Academic Program Guide](#) |
### 7. Contractual Relationships

*Institutions must provide the following information and evidence:*

<table>
<thead>
<tr>
<th>Documents, Policies, and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our Lady of Lourdes School of Nursing</td>
</tr>
<tr>
<td>Our Lady of Lourdes Institute of Wholistic Studies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. List of contractual arrangements for education services, including name of third-party and applicable programs and the date the arrangement was approved by the Commission.</th>
<th><strong>Documents, Policies, and Procedures</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our Lady of Lourdes School of Nursing</strong></td>
<td><strong>Our Lady of Lourdes Institute of Wholistic Studies</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. URLs, catalogs, student handbooks, and other locations of any alternative</th>
<th><strong>Documents, Policies, and Procedures</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Our Lady of Lourdes Nursing</strong></td>
<td><strong>Our Lady of Lourdes Institute of Wholistic Studies</strong></td>
</tr>
</tbody>
</table>
## 8. Assignment of Credit Hour

Institutions must provide the following information and evidence:

<table>
<thead>
<tr>
<th>Documents, Policies, and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Camden County College offers courses that comply with the New Jersey Administrative Code Title 9A – Higher Education and in Appendix H of the Administrative Code under Chapter 1, Licensure Rules, Subchapter 1. General Standards, section 9A:1-1.2 the following definition for a credit hour is stated: “Semester credit hour” means 50 minutes of face-to-face class activity each week for 15 weeks (or the equivalent attained by scheduling more minutes of face-to-face class activity per week for fewer weeks in the semester) in one semester complemented by at least 100 minutes each week of laboratory or outside assignments (or the equivalent thereof for semesters of different length).</td>
</tr>
</tbody>
</table>

### Credit Hour Auditing Guidelines

#### 1. Policy and procedures for credit hour assignment covering for all types of courses (including studio, internships, laboratory, practica, etc.), disciplines, programs, degree levels, formats, and modalities of instruction (including hybrid and online). Include each policy that documents the assignment of credit hours specific to the types noted above. The following should be clearly indicated:

- **Academic period** (e.g., 15 weeks plus one week exam over two semesters);
- **Recommended instructional time** (e.g., three 50-minute sessions or two 75-minute sessions per week);
- **Recommended out-of-class time requirements** (e.g., twice in-class time).

#### 2. URLs, catalogs, student handbooks, and other locations of any alternative institutional website documenting required disclosures.

- [Fall 2017 Credit Schedule of Classes](#)
- [Spring 2018 Credit Schedule of Classes](#)

#### 3. Evidence that the institution’s credit hour policies and procedures applied consistently across the full range of institutional offerings. If the institution is required to obtain approval from the relevant State Department of Education, compliance with this requirement should be documented.

#### 4. Processes used by the institution to review periodically the application of its policies and procedures for credit hour assignment.

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MSCHE | Verification of Compliance, Institution Report
Ensuring Student Identity Verification

Camden County College students registered for online courses have a secure user ID and password assigned to them by the College using a FERPA compliant procedure. Students have the opportunity to change their password at any time and are encouraged to do so periodically. Access to online courses is controlled by the use of secure User ID and Password.

The privacy of students who enroll in online courses at Camden County College is protected under the College’s policies regarding student privacy, confidentiality, fraud, FERPA rules, and the Social Security Privacy Act of 1974 (P.L. 93-579). These policies are published in the Student Handbook and on the College’s website at: http://www.camdencc.edu/financialaid/policiesandprocedures.cfm

All credit-bearing courses and programs offered through distance learning methods at Camden County College verify that a student who registers for a distance education course or program is the same student who participates in and completes the course or program and receives academic credit through the use of a secure login and password and the utilization of proctored examinations in the College’s Testing Center or at an approved secure remote testing location.

Students are responsible for providing complete and true information in any identity verification process, in accordance with the “Student Code of Conduct” as outlined in the Student Handbook and administered by the Dean of Students or his/her designee.

Protection of Student Privacy

All methods of verifying student identity in distance learning protect the privacy of student information. The privacy of students who enroll in online courses at Camden County College is protected under the College’s policies regarding student privacy, confidentiality, fraud, FERPA rules, and the Social Security Privacy Act of 1974 (P.L. 93-579). Privacy policies are published in the Student Handbook and on the College’s Website.
All users of the College’s online learning management systems are responsible for maintaining the security of usernames and passwords. Access credentials may not be shared or given to anyone other than the user to whom they were assigned for any reason. Users are responsible for any and all uses of their online account. Users are held responsible for knowledge of the information contained within the most recent Student Handbook, including the section on Acceptable Use of Technology. Failure to read College guidelines, requirements and regulations will not exempt users from responsibility.

**Charges Associated with Student Identity Verification**

Camden County College does not charge a fee for student identity verification. Students would be notified of additional fees, if any, prior to and during the registration process through various publications i.e., the *Schedule of Classes* and the College *Catalog*, and on the College website.

**Unit Responsible**

The Office of Academic Affairs is responsible for the consistent application of student identity verification procedures. The Office of Academic Affairs is responsible for ensuring College-wide compliance with the provisions of this practice and that deans and directors are informed of any changes in a timely fashion. Academic deans are expected to ensure that faculty within their Divisions remain in compliance. Instructors teaching courses through distance education methods are responsible to ensure that their individual courses comply. If necessary, the Vice President of Academic Affairs may address non-compliance through performance reviews or other measures as appropriate.

**Related Procedures:**

- Student Issued ID’s (Appendix I)
- Remote Test Proctoring Guidelines (Appendix II)
- Proctor Screening Email correspondence (Appendix III)

**Related College Policies:**

- Acceptable Use of Technology Guidelines
- Student Code of Conduct – Student Handbook

**Additional Resources:**

“Best Practice Strategies to Promote Academic Integrity in Online Education” by WCET, UT TeleCampus, and Instructional Technology Council. 2009.
APPENDIX I

STUDENT ISSUED ID NUMBERS

Upon enrollment each student at Camden County College is assigned a permanent ID number that is used to identify him/her for all internal College processes and for access to Web services.

Access to and use of Camden County College’s information technologies by users is an affirmation that they accept the terms of Camden County College’s Acceptable Use of Information Technology Policies.

The Acceptable Use of Information Technology policies are posted in all College computer public access facilities, in the Student Handbook and on the College’s website.

Users granted access to College information technologies shall adhere to the following rules regarding Access to Resources/Authorized Use/Security:

   Student User Accounts are granted to support the instructional process, facilitate communications in academic endeavors and promote information sharing on projects and class assignments.

   Students are responsible for their own data and accounts. Students must not allow any person to use their passwords or to share their accounts. It is the student’s responsibility to protect their account from unauthorized use by changing passwords periodically and using passwords that are not easily guessed. The College is not responsible for lost data or work.
APPENDIX II

REMOTE TESTING PROCTORING GUIDELINES

The College’s Testing Center provides proctoring services for online distance learning courses if so required by the instructor. Student must provide the following in the Test Center:

1) Must present a current/valid photo ID card (School ID, Driver’s License, Passport, etc.)
2) Must know instructor’s last name and course title.
3) Must bring pens and #2 pencils with erasers.
4) Must bring other authorized materials as listed on exam by instructor.

At all times academic integrity and appropriate conduct is enforced as outlined in the Camden County College Student Handbook.

For online students who require exams to be administered remotely due to their geographic location, the process is as follows:

1) The student is provided with a Proctor Candidate Request Form which must be completed by a proctor (remote testing site) within the first 10 days of class.
2) Once the form is returned to the Testing Center, an email correspondence begins between the proctor (testing center) and the CCC Testing Center in which the following information is required:
   a. Is the student related to you, or an employee of your organization?
   b. Where will the exam be stored?
   c. Where will the exam be administered?
   d. Will you or your staff remain with the student for the duration of testing?
3) Once the Testing Center has confirmed this information and approved the proctor (testing center), test materials are sent via email and/or fax to the remote site.
4) The proctor (testing center) is asked to return the exam via fax or email, and then return originals via USPS.

The College requires that proctors be from an education setting, generally a college educator or staff member. The mailing address has to be their business address, exams are never sent to a proctor’s residence. The proctor is required to have an .edu or .org E-mail address.
Proctor Screening Email Correspondence Template

Dear (Enter Proctors Name here),

Camden County College received a Proctor Request Form from (Enter Student’s name here) listing you as their proctor for (enter course here) for the (enter semester/year here.) Before we can send any exams, we require responses to the questions below.

- Are you related to the student?
- Does the student work for your office/school?
- Are you a full-time employee of the school?
- What is your job title?
- Where will the exam be stored?
- Will the exam be administered in a quiet, secure location?
- Can you scan and email a copy of the exam back?
- Can I send the exam via email?

Once we have received this information back from you and we have reviewed it, we can move forward with sending the exams. The exams will be in paper/pencil format and will be emailed.

Photo ID is required and verified prior to all testing. Please retain Photo ID until student has handed exam back to you with all materials.

We anticipate the instructor delivering the exams to us at least one week before the test date.

Thank you for your time and please let me know if you have any questions.

Best regards,

(Type your name here)
(Type your title here)
Camden County College
Proctor Candidate Request Form

To be completed by the student

Semester Dates _____________________ Course Title & Course Number _____________________
Instructor’s Name _________________________________________________________________
Student’s Name__________________________ Student ID#_______________________________
Student’s Address _________________________________________________________________
Daytime Phone ____________________________ Email__________________________________
Student Signature _____________________________________________ Date ________________

To be completed by Proctor candidate

Name of Proctor Candidate _______________________________________________________
Candidate’s Position/Occupation (Be Specific) ________________________________________
The Proctor Candidate is a/an _____ Educator (College-level Instructor or Administrator)

Business Address________________________________________________________________

Business Phone_________________ Cell Phone_________________ Fax___________________
Email Address____________________________________________________________________

- The above named student has requested that I proctor his/her examination(s) for the semester that is listed on this document. By signing, I am certifying that I am not a family member, co-worker, or friend, and that I will ensure that test security is met, including verifying student photo ID.
- Camden County College will mail the examination materials directly to me in a sealed envelope, which only I will open. I will not accept the examination from the student.
- The student will complete each examination under my personal supervision in a professional environment within the time specified and will not use notes, tests, or other outside materials, unless otherwise specified in the proctor instructions, which are included in the examination materials. Any scrap paper that is allowed will be collected and destroyed by me.
- I will personally return the original questions with the completed examination for grading. Neither the question nor the student’s answers will be reproduced in any manner. The student is responsible for the payment of postage.

Proctor Signature _________________________________ Date ________________
Guidelines for Student Identity Verification in Distance Education or Correspondence Education

At a minimum, students registered for online and/or correspondence courses should have a secure user ID and password assigned to them by the academic institution and/or representatives thereof using a FERPA compliant procedure. Students should have the opportunity to change their password at any time and it is considered a good practice that students be required to change their password periodically, with times and conditions to be determined by each institution. Access to online and/or correspondence courses should be controlled by the aforementioned password.

It shall be incumbent on the institution to develop a procedure for student notification regarding any projected charges associated with student identity verification.

The Consortium adopts the UTTC/WCET/ITC “Best Practice Strategies to Promote Academic Integrity in Online Education Version 2.0, June 2009” document, included here by reference, as our statement regarding best practices for insuring academic integrity in online education.

Submitted for approval to NJAAAG for May 2013
JUL 1 2013

Mr. Raymond Yannuzzi,
President
Camden County College
P.O. Box 200
College Drive
Blackwood, NJ 08012

Certified Mail
Return Receipt Requested
Domestic Return Receipt
7006 2760 0002 1734 8249

RE: Final Program Review Determination
OPE ID: 006865
PRCN: 201110227373

Dear Mr. Yannuzzi:

The U.S. Department of Education’s (Department’s) School Participation Team – NY/Boston issued a program review report on May 31, 2012 covering Camden County College’s (Camden’s) administration of programs authorized by Title IV of the Higher Education Act of 1965, as amended, 20 U.S.C. §§ 1070 et seq. (Title IV, HEA programs), for the 2008, 2009 and 2010. Camden’s final response was received on September 4, 2012. A copy of the program review report (and related attachments) and Camden’s response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by Camden upon request. Additionally, this Final Program Review Determination (FPRD), related attachments, and any supporting documentation may be subject to release under the Freedom of Information Act (FOIA) and can be provided to other oversight entities after this FPRD is issued.

Purpose:

Final determinations have been made concerning all of the outstanding findings of the program review report. The purpose of this letter is to: (1) identify liabilities resulting from the findings of this program review report, (2) provide instructions for payment of liabilities to the Department, (3) notify the institution of its right to appeal.

The total liabilities due from the institution from this program review are $1,721,027.04.

This final program review determination contains detailed information about the liability determination for all findings.
Protection of Persony Identifiable Information (PII):

PII is any information about an individual which can be used to distinguish or trace an individual’s identity (some examples are name, social security number, date and place of birth). The loss of PII can result in substantial harm, embarrassment, and inconvenience to individuals and may lead to identity theft or other fraudulent use of the information. To protect PII, the findings in the attached report does not contain any student PII. Instead, each finding references students only by a student number created by Federal Student Aid. The student numbers were assigned in Appendix A, Student Sample.

Appeal Procedures:

This constitutes the Department’s FPRD with respect to the liabilities identified from the May 31, 2012 program review report. If Camden wishes to appeal to the Secretary for a review of monetary liabilities established by the FPRD, the institution must file a written request for an administrative hearing. The Department must receive the request no later than 45 days from the date Camden receives this FPRD. An original and four copies of the information Camden submits must be attached to the request. The request for an appeal must be sent to:

Ms. Mary E. Gust, Director
Administrative Actions and Appeals Service Group
U.S. Department of Education
Federal Student Aid/PC
830 First Street, NE - UCP3, Room 84F2
Washington, DC 20002-8019

Camden’s appeal request must:

(1) indicate the findings, issues and facts being disputed;
(2) state the institution’s position, together with pertinent facts and reasons supporting its position;
(3) include all documentation it believes the Department should consider in support of the appeal. An institution may provide detailed liability information from a complete file review to appeal a projected liability amount. Any documents relative to the appeal that include PII data must be redacted except the student’s name and last four digits of his/her social security number (please see the attached document, “Protection of Personally Identifiable Information,” for instructions on how to mail “hard copy” records containing PII); and
(4) include a copy of the FPRD. The program review control number (PRCN) must also accompany the request for review.

If the appeal request is complete and timely, the Department will schedule an administrative hearing in accordance with § 487(b)(2) of the HEA, 20 U.S.C. § 1094(b)(2). The procedures followed with respect to Camden’s appeal will be those provided in 34 C.F.R. Part 668, Subpart H. Interest on the appealed liabilities shall continue to accrue at the applicable value of funds rate, as established by the United States Department of Treasury, or if the liabilities are for refunds, at the interest rate set forth in the loan promissory note(s).
Record Retention:
Program records relating to the period covered by the program review must be retained until the later of: resolution of the loans, claims or expenditures questioned in the program review; or the end of the retention period otherwise applicable to the record under 34 C.F.R. §§ 668.24(e)(1), (e)(2), and (e)(3).

The Department expresses its appreciation for the courtesy and cooperation extended during the review. If the institution has any questions regarding this letter, please contact Teresa Martinez at 646-428-3748. Questions relating to any appeal of the FPRD should be directed to the address noted in the Appeal Procedures section of this letter.

Sincerely,

Betty Coughlin,
Director,
NY/Boston, School Participation Division

Enclosure:
Protection of Personally Identifiable Information

cc: Felicia Bryant, Financial Aid Administrator
Prepared for
Camden County College

OPE ID 006865
PRCN 201110227373

Prepared by:
U.S. Department of Education
Federal Student Aid
School Participation Team – NY/Boston

Final Program Review Determination

JUL 1 2013

Federal Student Aid, School Participation Team – NY/Boston
32 Old Slip, New York, NY 10005
www.FederalStudentAid.ed.gov
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- Finding 5 Incomplete Verification
- Finding 6 Entrance/Exit Counseling Not Documented/Performed
- Finding 7 Conflicting Information/Inaccurate Loan Certification

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| F. | Appendices |

**Appendix A:** Student Sample

**Appendix B:** Student Level Detail – Finding 1 & 2

**Appendix C:** Student Level Detail – Finding 4

**Appendix D:** Estimated Actual Loss Calculation


**Appendix F:** Cost of Funds – Finding 4 - 2008/2009, 2009/2010

**Appendix G:** 5/31/12 Program Review Report

**Appendix H:** Institution’s Written Response

**Appendix I:** FEDWIRE Form
A. Institutional Information

Camden County College
P.O. Box 200
Blackwood, NJ 08012

Type: Public

Highest Level of Offering: Associate's Degree

Accrediting Agency: Middle States - Higher Education

Current Student Enrollment: 15,493 (2010)

% of Students Receiving Title IV, HEA funds: 67% (2010)

Title IV Participation PEPS:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PELL</td>
<td>$13,361,177</td>
<td>$21,681,127</td>
<td>$22,789,180</td>
</tr>
<tr>
<td>FFEL</td>
<td>$13,198,937</td>
<td>$16,652,455</td>
<td>$6,779</td>
</tr>
<tr>
<td>FSEOG</td>
<td>$301,840</td>
<td>$612,161</td>
<td>$428,911</td>
</tr>
<tr>
<td>FWS</td>
<td>$175,660</td>
<td>$251,471</td>
<td>$278,003</td>
</tr>
</tbody>
</table>

Common Origination & Disbursement (COD):

<table>
<thead>
<tr>
<th></th>
<th>2011/2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>PELL</td>
<td>$23,049,229</td>
</tr>
<tr>
<td>DL</td>
<td>$11,408,512</td>
</tr>
</tbody>
</table>

Default Rate FFEL/DL:

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFEL/DL</td>
<td>13.2%</td>
<td>11.4%</td>
<td>10.9%</td>
</tr>
</tbody>
</table>
B. Scope of Review

The U.S. Department of Education (the Department) conducted a program review at Camden County College (Camden) from November 15, 2010 to November 19, 2010. The review was conducted by Teresa Martinez, Jacqueline Watford and Janelle Jacobs.

The focus of the review was to determine Camden’s compliance with the statutes and federal regulations as they pertain to the institution’s administration of Title IV programs. The review consisted of, but was not limited to, an examination of Camden’s policies and procedures regarding institutional and student eligibility, individual student financial aid and academic files, attendance records, student account ledgers, and fiscal records.

A sample of 45 files was identified for review from the 2008, 2009 and 2010 award years. The files were selected randomly from a statistical sample of the total population receiving Title IV, HEA program funds for each award year. In addition, 15 files were selected to conduct further review of students enrolled in the Helene Fuld and Our Lady of Lourdes Nursing programs. Nine additional files were selected to conduct further review of R2T4 calculations and three additional files were selected to conduct further review of the Federal Work Study program. Appendix A lists the names and partial social security numbers of the students whose files were examined during the program review.

Disclaimer:

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning Camden’s specific practices and procedures must not be construed as acceptance, approval, or endorsement of those specific practices and procedures. Furthermore, it does not relieve Camden of its obligation to comply with all of the statutory or regulatory provisions governing the Title IV, HEA programs.

C. Findings and Final Determinations

Resolved Findings

Findings 3, 5, 6, and 7

Camden has taken the corrective actions necessary to resolve findings 3, 5, 6, and 7 of the program review report. Therefore, these findings may be considered closed. Camden’s written response related to these resolved findings are found in Appendix C. Findings requiring further action by Camden are discussed below.
Findings with Final Determinations

The program review report findings requiring further action are summarized below. At the conclusion of each finding is a summary of Camden’s response to the finding, and the Department’s final determination for that finding. A copy of the program review report issued on May 31, 2012 is attached as Appendix G.

Finding 1 Ineligible Program - Helene Fuld Associate in Science Nursing Program

Noncompliance:

Regulations state that if an eligible institution enters into a written arrangement with an institution or organization that is not an eligible institution, and the ineligible institution or organization provides part of the educational program of students enrolled in the eligible institution, the Secretary considers that educational program to be an eligible program if the ineligible institution has not had its eligibility to participate in the Title IV, HEA programs terminated by the Secretary and the institution or organization has not provided more than 50 percent of the educational program. 34 C.F.R § 668.5(c)(1)(i)(ii)(A).

Camden had a cooperative agreement in place with Helene Fuld School of Nursing (Helene Fuld) in Blackwood, NJ for their 75-credit Associate in Science Nursing program. Camden provided the combined programs’ general education courses and awarded an Associate in Science degree, while Helene Fuld provided the clinical nursing courses and awarded a diploma in nursing. A review of documentation received from Camden indicated that Helene Fuld had been providing more than 50% of the program, offering 41 credits, while Camden offered 34 of the 75 credit hours in the combined program.

According to school officials, Camden has been disbursing financial aid to its students enrolled in the Helene Fuld Nursing program since the mid 1980s. The Helene Fuld School of Nursing became ineligible for Title IV funding in 1992 due to loss of state authorization. The nursing program’s cooperative agreement with Helene Fuld was not reported to the Department for approval until 2010 through its submission for recertification. Current school officials were unable to explain why the nursing program was not previously reported to the Department. During the program review, school officials informed the reviewers that they were no longer enrolling students into the Helene Fuld Nursing program and the class being taught out would finish in December, 2011.

On November 2, 2011, this office issued Camden a denial letter for the Helene Fuld Associate in Science Nursing Program.
Directives From Program Review Report:

Because the Helene Fuld Associate in Science Nursing program is an ineligible program, Camden was required to perform a review of all students who were enrolled in the Nursing program since the 2006-2007 award year and identify the amount of funds awarded, by Title IV program. Camden was required to provide a report identifying the amount of Title IV liabilities for each student.

Final Determination:

Camden, as part of its September 4, 2012 response, performed a full file review of all students who were enrolled in the Nursing program since the 2006-2007 award year and identified the amount of funds awarded, by Title IV program, attached in Appendix C. The file review included all students from finding 2.

As outlined above, Camden has been disbursing financial aid to students enrolled in the Helene Fuld Nursing program, an ineligible program. Consequently, all of the Title IV funds received by the students enrolled in the Helene Fuld Nursing program are institutional liabilities.

The Pell and SEOG grant principal and interest due to the Department for this finding is $1,625,754.75. Details of the liability for this finding can be found in Appendix E.

In lieu of requiring the institution to assume the risk of default by purchasing the ineligible loans from the holder, the Department has asserted a liability not for the loan amount, but rather for the estimated actual or potential loss that the government may incur with respect to the ineligible loan or loan amount. The estimated actual loss to the Department that has resulted or will result from those ineligible loans is based on Camden’s most recent cohort default rate available. The liabilities resulting from the estimated loss are $19,255.64.

Repayment instructions are provided at the end of this letter.

Finding 2 - Improper FFEL Certifications

Noncompliance:

Students receiving Federal Family Education Loan (FFEL) funds have maximum limits on the loans they are eligible to receive each year. For example, the annual loan limits established in regulation for an Independent Undergraduate student are as follows:

<table>
<thead>
<tr>
<th></th>
<th>Base Amount</th>
<th>Additional Unsubsidized Loan Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-Year Undergraduate:</td>
<td>$3,500</td>
<td>$6,000</td>
</tr>
<tr>
<td>Second-Year Undergraduate:</td>
<td>$4,500</td>
<td>$6,000</td>
</tr>
<tr>
<td>Third Year &amp; Beyond Undergrad:</td>
<td>$5,500</td>
<td>$7,000</td>
</tr>
</tbody>
</table>
34 C.F.R § 682.204. In addition, regulations require that the information an institution provides in connection with a loan application about the borrower is complete and accurate. 34 C.F.R.§ 682.603(a).

The Department found that Camden incorrectly certified 3rd year loan amounts for students enrolled in the Helene Fuld Nursing Associate degree program, a two-year credit hour program. The following are examples of the issues found.

**Student #52** enrolled in the Helene Fuld Nursing Associate degree program in January, 2008. As an independent student she was eligible to borrow up to $9,500 in combined subsidized and unsubsidized loans for her first year and $10,500 for her second year. Camden, however, certified three separate subsidized and unsubsidized loan applications on different dates for the 2008/2009 award year totaling $10,500 and two separate subsidized and unsubsidized loan applications for the 2009/2010 award year totaling $12,500. The incorrectly certified loans were approved by the guarantee agencies because the loans were certified with incorrect grade levels.

**Student #53** enrolled in the Helene Fuld Nursing Associate degree program in January, 2008. As an independent student she was eligible to borrow up to $9,500 (3,500 subsidized/6,000 unsubsidized) for her first year and $10,500 (3,500 subsidized/6,000 unsubsidized) for her second year. Camden, however, certified subsidized and unsubsidized loans for the 2008/2009 award year totaling $10,500 and an unsubsidized loan for the 2009/2010 award year for $10,500.

Similarly, Camden erroneously certified loan amounts in excess of eligibility for students #9, 21, 46, 49, 50, 51. In addition, Camden reported incorrect grade levels to NSLDS when certifying FFEL loans for students #48 and 54.

**Directives From Program Review Report:**

In response to finding 1, Camden was required to review all of the students who were enrolled in the Nursing program since the 2006 – 2007 award year and identify the amount of funds awarded. Since this finding correlated with finding 1, this issue was addressed through finding 1.

**Final Determination:**

The liabilities for this finding are subsumed in the liabilities for finding 1.
Finding 4 - Untimely Determination of Students' Withdrawal

Noncompliance:

The withdrawal date for a student who withdraws from an institution that is not required to take attendance is the date that the student began the withdrawal process prescribed by the institution, or the date the student otherwise provided official notification to the institution, in writing or orally, of his/her intent to withdraw. 34 C.F.R. § 668.22(c)(1)(i)(ii). Official notification is a notice of intent to withdraw that a student provides to an office designated by the institution. For a student who did not provide notification of his or her withdrawal to the institution, the institution may use the midpoint of the payment period. 34 C.F.R § 668.22(c)(iii). An institution may also use as the student’s withdrawal date the student’s last date of attendance at an academically-related activity. 34 C.F.R § 668.22(c)(3)(i).

The Department found that Camden failed to determine students were no longer in attendance when students ceased to attend the College without completing the official withdrawal process. Camden’s system to determine if a student did not complete a semester relies on a review of a student’s grade in all courses at the end of that semester. According to Camden officials, unofficial withdrawals are tracked at the beginning and midpoint of a semester. Teachers are expected to report attendance at the fourth week and at finals. The financial aid office receives a report at the end of the term and if a student receives a “NA” grade, a last date of attendance is needed for a Return of Title IV funds (R2T4). Because Camden relies on teachers to report attendance, which is not consistently performed, the college is unable to accurately determine students who are no longer in attendance. The following are examples of this problem.

Student #25 was enrolled in the Spring 2010 semester and received Pell Grant funds for that semester. His transcript indicated that he failed two of the three courses he was enrolled in, and received an incomplete in the third course. According to documents in the student’s file, his last date of attendance was 3/11/10. Camden used a date of determination of 9/23/10. Although documents in the file indicate that the student should receive a refund of $914.48, the reviewers did not find any documentation that a refund calculation was performed.

Student #15 was enrolled in the Spring 2009 semester and received Pell Grant funds for that semester. The student’s transcript indicates that he failed two of the three courses he was enrolled in, and received an NA in the third course. According to documents in the student’s file, his last date of attendance was 10/26/09. Camden determined the student’s withdrawal date on 9/23/10. Although documents in the file indicate that the student should receive a refund of $1,337.50, the reviewers did not find any documentation that a refund calculation was performed.

Directives From Program Review Report:

Camden was required to revise its current procedures and develop procedures that will ensure students who informally withdraw from the College are properly identified and that the correct withdrawal date is used to determine any refunds to the Title IV programs. For students who
unofficially withdrew Camden was required to use a student’s actual last day of attendance as the withdrawal date. Camden was also notified that if the student ceases attendance without providing official notification to the institution, Camden may use the mid-point of the payment period or period of enrollment in its Return to Title IV (R2T4) calculation, provided that the College can confirm that the student actually began his or her studies in that payment period. Camden was required to provide details of these procedures to this office in response to this report.

In addition, Camden was required to review the files of all Title IV recipients from the 2008/2009 and 2009/2010 award years to identify students who are no longer in attendance at the College, and received all “F,” “WF,” or “W” and “F” or NA grades, or any combination of those grades, in any semester, plus all students cited in this finding. Camden was then required to calculate the R2T4 payments for each student and report them in its file review.

**Final Determination:**

Camden, as part of its September 4, 2012 response, performed a full file review of all Title IV recipients from the 2008/2009 and 2009/2010 award years and identified students who were no longer in attendance at the College and determined the date any refund was due and the date paid, attached in Appendix C.

The file review submitted by Camden resulted in several late refunds. Camden is responsible for interest from the return due date until the return paid date. The Pell grant and FSEOG interest due to the Department for this finding is **$295.36**. The Federal Family Education Loan interest due to the Department for this finding is **$257.29**. Details of the liability for this finding can be found in Appendix F.
D. Summary of Liabilities

The total amount calculated as liabilities from the findings in the program review determination is as follows. Appendix E contains a detailed accounting of the interest liabilities identified below for the costs the Department incurred as a result of ineligible disbursements and late or unmade returns.

<table>
<thead>
<tr>
<th>Initial Liabilities</th>
<th>Pell (Closed Award Year)</th>
<th>SEOG</th>
<th>DL / FFEL</th>
<th>EALF FFEL</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Findings 1 &amp; 2</td>
<td>$1,468,838.79</td>
<td>$66,363.00</td>
<td>$10,077,651.00</td>
<td>$19,753.64</td>
<td></td>
</tr>
<tr>
<td>Finding 4</td>
<td>$0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal 1</strong></td>
<td><strong>$1,468,838.79</strong></td>
<td><strong>$66,363.00</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest/SA (Finding 1 &amp; 2)</td>
<td>$156,915.96</td>
<td>$9,101.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest/SA (Finding 4)</td>
<td>$295.36</td>
<td></td>
<td></td>
<td>$422.87</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal 2</strong></td>
<td><strong>$1,626,050.11</strong></td>
<td><strong>$75,464.00</strong></td>
<td><strong>$422.87</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$1,626,050.11</strong></td>
<td><strong>$75,464.00</strong></td>
<td><strong>$422.87</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Payable To:

- **Department** $1,626,050.11 75,464.00 $257.29 $19,255.64 $1,721,027.04
- **Students** $165.58 $165.58

Totals
Estimated Actual Loss (EAL)

The total amount of Federal Family Education Loans that Camden improperly disbursed during the 2006/2007, 2007/2008, 2008/2009, and 2009/2010 award years for findings 1 & 2 is $10,077,651.00. The total estimated actual loss that Camden must pay to the Department for the ineligible loans is $19,255.64. A copy of the results of that calculation is included as Appendix D.

Adjusting Federal Supplemental Education Opportunity Grant (SEOG) Liabilities:

The appropriate methodology for returning the $66,363.00 liability in programmatic SEOG funds, involving revisions to prior-year’s FISAP reports, is described in Section 4 of the following Payment Instructions. Therefore, the total liability payable identified in Section 1 of the Payment Instructions was adjusted to remove that amount.

E. Payment Instructions

1. Liabilities Owed to the Department

Liabilities Owed to the Department $100,000 or More

Camden owes to the Department $1,654,664. This liability must be paid using an electronic transfer of funds through the Treasury Financial Communications System, which is known as FEDWIRE. Camden must make this transfer within 45 days of the date of this letter. This repayment through FEDWIRE is made via the Federal Reserve Bank in New York. If Camden’s bank does not maintain an account at the Federal Reserve Bank, it must use the services of a correspondent bank when making the payments through FEDWIRE.

Any liability of $100,000 or more identified through a program review must be repaid to the Department via FEDWIRE. The Department is unable to accept any other method of payment in satisfaction of these liabilities.

Instructions for completing the electronic fund transfer message format are included on the attached FEDWIRE form. Appendix I.
2. Terms of Payment

As a result of this final determination, the Department has created a receivable for this liability and payment must be received by the Department within 45 days of the date of this letter. If payment is not received within the 45-day period, interest will accrue in monthly increments from the date of this determination, on the amounts owed to the Department, at the current value of funds rate in effect as established by the Treasury Department, until the date of receipt of the payment. Camden is also responsible for repaying any interest that accrues. If you have any questions regarding interest accruals or payment credits, contact the Department’s Accounts Receivable Group at (202) 245-8080 and ask to speak to Camden’s account representative.

If full payment cannot be made within 45 days of the date of this letter, contact the Department’s Accounts Receivable Group to apply for a payment plan. Interest charges and other conditions apply. Written request may be sent to:

U.S. Department of Education
OCFO Financial Management Operations ~
Accounts Receivable Group
550 12th Street, S.W., Room 6114
Washington, DC 20202-4461

If within 45 days of the date of this letter, Camden has neither made payment in accordance with these instructions nor entered into an arrangement to repay the liability under terms satisfactory to the Department, the Department intends to collect the amount due and payable by administrative offset against payments due Camden from the Federal Government. Camden may object to the collection by offset only by challenging the existence or amount of the debt. To challenge the debt, Camden must timely appeal this determination under the procedures described in the "Appeal Procedures" section of the cover letter. The Department will use those procedures to consider any objection to offset. No separate appeal opportunity will be provided. If a timely appeal is filed, the Department will defer offset until completion of the appeal, unless the Department determines that offset is necessary as provided at 34 C.F.R. § 30.28. This debt may also be referred to the Department of the Treasury for further action as authorized by the Debt Collection Improvement Act of 1996.

3. Liabilities Owed to the Department in the case of Title IV Grants

Findings: 1, 2 & 4
Appendices: Appendix B and C
Camden must repay:
The disbursement record for each student identified in the appendices to the applicable finding(s) must be adjusted in the Common Origination and Disbursement (COD) system based on the recalculated amount (principal) identified in the appendices.

Adjustments in COD must be completed prior to remitting payment to the Department. Payment cannot be accepted via G5. Once the Department receives payment via FEDWIRE, the Department will apply the principal payment to the applicable G5 award. Interest will be applied to the general program account.

A copy of the adjustment to each student's COD record must be sent to Teresa Martinez within 45 days of the date of this letter.

4. Campus Based Programs

Findings: 1 & 2
Appendices: Appendix B
Camden must repay $66,363.00 in Federal Supplemental Education Opportunity Grant funds.

FISAP Corrections

Camden must make corrections to its FISAP for award year(s) 2008/2009, 2009/2010, 2010/2011 and 2011/2012 as follows:

- Log into eCB and make change(s) to the Working Copy, click on Submit and choose “Change Request”. Provide the justification for the changes in the comments box, including that the changes are a result of a program review and include the Program Review Control Number.

- Once the request is approved, submit the changes within 5 days.
Changes to the FISAP may result in changes to subsequent FISAPS. Contact the eCB Call Center at (877) 801-7168 for assistance in making this determination.

If the recalculation of the school’s funding results in an unprocessed deobligation (negative balance), return those funds via G5 in accordance with the automated notification from eCB.

Please note: Each year a school reports on data from the prior year to request funds for the next year. For example, on its 12-13 FISAP the school submits 10-11 data by September 30, 2011. This data is used to determine campus based allocations for the 12-13 award year. Therefore, if adjustments are required for the 10-11 award year, corrections are made to the 2012/13 FISAP.

The SEOG amounts to be repaid are as follows:

<table>
<thead>
<tr>
<th>Award Year</th>
<th>Liability Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006/07</td>
<td>$17,250</td>
</tr>
<tr>
<td>2007/08</td>
<td>$21,500</td>
</tr>
<tr>
<td>2008/09</td>
<td>$14,013</td>
</tr>
<tr>
<td>2009/10</td>
<td>$13,600</td>
</tr>
</tbody>
</table>

Camden must submit proof of the FISAP corrections and payment via G5 for any unprocessed deobligation (if applicable) to Teresa Martinez within 45 days of the date of this letter.

These SEOG liabilities are not reflected in the amount owed to the Department in Section 1 above, since Camden will be returning the resulting negative balances through G5.

5. FFEL - Estimated Loss

Findings: 1 & 2
Appendix: Appendix D

<table>
<thead>
<tr>
<th>FFEL – Estimated Actual Loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount</td>
</tr>
<tr>
<td>--------</td>
</tr>
<tr>
<td>$19,255.64</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>
Camden must pay the amount above in FFEL estimated actual loss liabilities for the award year(s) reflected above. The liabilities will be applied to the general Direct Loan fund. This amount is also reflected in the total amount owed to the Department in Section 1 above.

6. **FFEL - Payment Instructions**

Finding: 4
Appendix: Appendix C & F

<table>
<thead>
<tr>
<th>FFEL</th>
<th>Amount (Principle)</th>
<th>Amount (Interest)</th>
<th>Award Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>$84.10</td>
<td>2008/2009</td>
<td></td>
</tr>
<tr>
<td>$0</td>
<td>$81.48</td>
<td>2009/2010</td>
<td></td>
</tr>
<tr>
<td>Total Principle</td>
<td>Total Interest</td>
<td>$165.58</td>
<td></td>
</tr>
</tbody>
</table>

Camden must pay the amount above to the holder(s) of the FFEL loans on behalf of the students identified in the Appendices listed above, plus any interest that has accrued since the date of this letter and the day the school pays the holder. These appendices list each of the applicable students and the corresponding amount owed to the student’s FFEL loan, except for the interest that continues to accrue. Camden must access NSLDS to determine if the FFEL loan(s) have been purchased and/or are serviced by the Department. See Chapter 4, Volume 4 (Returning funds from FFEL loans purchased/serviced by the Department) of the FSA Handbook for additional guidance.

As proof of payment, a copy of the front and back of the canceled checks, or proof of electronic transfer of the funds, must be provided to Teresa Martinez **within 45 days of the date of this letter**.
In the matter of

CAMDEN COUNTY COLLEGE,

Respondent.

Docket No. 13-54-SP
Federal Student Aid Proceeding

DEcision OF THE SECRETARY

This matter comes before me on appeal by Camden County College (Camden) of the Initial Decision by Chief Administrative Judge (CAJ) Ernest C. Canellos. On January 29, 2014, Judge Canellos issued an Initial Decision upholding Finding One of the Final Program Review Determination (FPRD) letter issued on July 1, 2013, by the office of Federal Student Aid (FSA) of the U.S. Department of Education (Department). As a result, Camden was ordered to pay $1,721,027.04 to the Department for the liability resulting from funds disbursed to ineligible students. Camden has appealed the CAJ’s ruling. Based on the following analysis, I affirm the decision.

I. Background

Camden is a public institution of higher education in Blackwood, New Jersey. It offers programs leading up to an Associate Degree. Among its programs, Camden offers an “Associate in Science Nursing Program” in conjunction with the Helene Fuld School of Nursing (Helene Fuld). While Camden is otherwise eligible to disburse Title IV funds, Helene Fuld is not.

For the nursing program, Camden provided 34 general education credits while Helene Fuld provided 41 nursing credits. Camden disbursed Title IV money for the entire 75 credit program. At the conclusion of the program, a graduating student would receive an Associate in

1 Judge Canellos acted as the hearing official appointed under 34 C.F.R. § 668.114(a).
2 Initial Decision, p. 1.
3 34 C.F.R. § 682.609.
4 FPRD, p. 6.
5 Id., p. 8.
6 Id.
7 Id.
8 Id.
Science degree from Camden and a diploma in nursing from Helene Fuld. The institutions laid out these and other particulars of their arrangement through a document titled “Consortium Agreement Between Helene Fuld School of Nursing and Camden County College.”

FSA conducted a program review on November 15–19, 2010. FSA made three findings and Camden appealed two of them. Only one of those two findings remains on appeal before the Secretary: FSA determined that, because Helene Fuld provided 41 of the 75 credits, or more than 50% of the credits, the program could not qualify for Title IV funds.

A. Eligibility for Title IV Funds in a Shared Program

An institution that disburses Title IV funds is a fiduciary of the Department and is held to the highest standard of care and diligence. The institution bears the burden of demonstrating that it properly spent all disbursed funds on behalf of the intended beneficiary.

Normally, Title IV funds can only be disbursed for educational programs run by eligible institutions. However, 34 C.F.R. § 668.5(c) provides an exception to that rule, allowing students to receive Title IV funds in certain educational programs run jointly by both an eligible institution and an ineligible institution. Generally under this exception (e.g., absent a waiver), the ineligible institution can only provide 25% or less of the program. A further exception allows the ineligible institution to provide more than 25% (but less than 50%) of the program if the two institutions are not owned or controlled by the same entity, and the institution’s accrediting agency determines the contractual arrangement meets their standards for contracting out of educational services.

B. The CAJ’s Initial Decision

The CAJ could find no authority expressly describing how to determine the percentage of relative contributions under an agreement like the one in this case. However, the CAJ pointed out that the regulations clearly make it an exception for an ineligible institution to provide part of a program, and they make providing more than 25% (up to 50%) a further exception. The CAJ noted that “the regulations look at agreements with ineligible institutions with some degree of caution.”

The burden of proof was on Camden to demonstrate an error in the FPRD, and the CAJ was unpersuaded by the evidence Camden presented. First, the CAJ was unpersuaded that Camden and Helene Fuld qualified for the exception noted above allowing the ineligible

9 Id.
10 Camden County College Appeal to the Secretary (Camden Brief), Ex. R-2.
11 34 C.F.R. § 668.82(b)(1).
12 Id. § 668.82(a); In re Hope Career Institute, Dkt. No. 06-45-SP, U.S. Dep’t of Educ. (Jan. 15, 2008), at 3.
13 34 C.F.R. § 668.5(c)(3)(i).
14 Id. § 668.5(c)(3)(ii).
15 Initial Decision, p. 3.
16 Id.
17 Id.
institution to provide up to 50% of the program. Second, despite Camden’s assertion that it added value to the program beyond the credit hours it offered, the CAJ found that Camden “offers no evidence of the relative value” of its non-classroom contribution to the program. Finally, in any event, the CAJ concluded that Helene Fuld provided more than 50% of the program and therefore the program did not qualify for Title IV funds. Camden has appealed the CAJ’s decision to me.

II. Analysis

Camden bears the burden of demonstrating, by a preponderance of the evidence, that the CAJ erred in his findings. On appeal, Camden argues that it did offer a rational measurement of the relative contributions, and using that measurement, Camden provided over 50% of the program, thus qualifying under the most generous exception. Based on the following analysis, I reject Camden’s argument and uphold the CAJ’s ruling.

Camden argues that the respective contribution of academic credits is not the appropriate measure of how much each institution contributed to the program. Rather, Camden argues that a measurement of “the program” should include non-classroom services. For instance, under the consortium agreement, Camden provided the curriculum, allowed the teachers of the program’s courses to hold faculty rank at Camden, provided the classroom space, housekeeping and maintenance for the nursing classes, conducted all recruitment and advertising, set the tuition, and employed a librarian dedicated to the nursing program. According to Camden, “the sheer volume and breadth of Camden’s services and oversight” clearly demonstrate it contributed more than 50% of the program. Camden also argues that the exact figure is not “left to sheer guesswork,” as concluded by the CAJ, because the consortium agreement between Camden and Helene Fuld established the “agreed-upon payment of 15 percent of the tuition costs charged for HFSN-taught nursing courses to compensate Camden for the general services.” Therefore, Camden asserts it provided the equivalent of 15% of the 41 credits, or 6.15 credits, taught at Helene Fuld with this payment. Those 6.15 credits, added to the 34 taught at Camden, bring Camden’s total to 40.15 credits worth of contribution, or 53.5% of the program.

Camden further asserts that departmental precedent is to treat a program as eligible “despite a technical violation of the regulations, because the contract arrangement between the

18 Id., p. 4.
19 Id., p. 3.
20 Id.
21 Central State University, Dkt. No. 12-32-SA, U.S. Dep’t of Educ. (Sept. 2, 2014) (Decision of the Secretary), at 1 (citing 34 C.F.R. § 668.116(d)).
22 Camden also argued that the AJ erred by finding that Camden did not demonstrate it qualified for the narrower 50% exception. In particular, Camden argued that the question of whether it qualified for the narrower exception cannot be resolved in this appeal because FSA failed to make a prima facie case on that issue. In light of the resolution of this case on other grounds, I need not address this issue.
23 Camden Brief, p. 5.
24 Id.
25 Id.
26 Id., p. 6.
27 Id.
eligible and ineligible institutions was one that ‘could have been qualified under the regulations.’” 28 Thus, the substance of the relationship between the institutions informs the analysis of whether a program should be eligible, rather than “blind reliance on the listing of credit hours.” 29

Counsel for FSA argues that the application of the 50% exception should be narrowly construed. 30 FSA argues that the plain language of the regulation indicates that the percentage an institution “provides” is the percentage of credits taught by that institution. 31 In this case, FSA argues, “[t]he breakdown of the credits clearly establishes that Helene Fuld provided more than 50% of the program.” 32 Counsel for FSA asserts that payment of overhead expenses does not constitute providing a portion of the program. 33

As an initial matter, I disagree with Camden’s assertion regarding departmental precedent. The case Camden cites, In re Mary Holmes College, does not stand for the principle that an ineligible program should be considered eligible because it could have been structured in a way to make it eligible. In that case, a private, nonprofit Historically Black College offered an Entrepreneurial/Truck Driving Program through two contractors who were not eligible to distribute Title IV funds. In the cited portion of the opinion, the judge considered whether the college’s failure to report the contracting arrangement (a regulatory requirement) should result in any sanction. The judge found, based on the evidence in the record, that the contractors contributed less than 25% of the program, an arrangement that would otherwise be eligible for Title IV funds. Therefore, the failure to report did not, by itself, warrant the harsh sanction of declaring the entire program ineligible. The case before me is distinguishable, because the issue here is how to calculate the respective contributions to the program of the eligible and ineligible institutions, which was not at issue in Mary Holmes College. This calculation goes to the heart of the matter; failure to comply with this requirement is in no way a “technical violation” of the regulations.

I agree with FSA’s interpretation of the rule. The regulations define “educational program” as, among other things, a “legally authorized postsecondary program of organized instruction or study” that leads to a degree and includes instruction from the providing institution, rather than instruction from other institutions, direct assessments, or other accomplishments such as “life experience.” 34 At the core of this definition is the organized instruction leading to a degree. I see no reason to redefine “educational program” to include an estimated percentage of an institution’s overhead that supported the organized instruction. When the Department promulgated the rules at issue, one of its specific goals was “to simplify the title IV regulations.” 35 Asking FSA to engage in the complex estimation urged by Camden would not serve the goal of the rule.

28 Id., p. 6 (citing In re Mary Holmes College, Dkt. No. 94-32-SP, U.S. Dep’t of Educ. (Sept. 18, 1995)).
29 Id.
30 Appeal Response of Federal Student Aid, p. 8.
31 Id., p. 6.
32 Id.
33 Id., p. 7.
34 34 C.F.R. § 600.2 Educational program.
Furthermore, the amendment of the rules in 2010 clearly intended to narrow the use of these exceptions. Specifically, the amendment added additional circumstances that would prohibit written agreements between eligible and ineligible institutions.\textsuperscript{36} I recognize the intent of the amendment to be an overall reduction of joint programs with ineligible institutions.

After reviewing the history of the regulation, I agree with the CAJ's assessment that the regulations look at written arrangements "with some degree of caution."\textsuperscript{37} FSA's interpretation of the rule as it applies to Camden, measuring the contribution of each institution to the program only by its respective number of offered credits, and not also including estimated administrative contributions, was reasonable and appropriate.

**ORDER**

ACCORDINGLY, the Initial Decision by Chief Administrative Judge Ernest C. Canellos is HEREBY AFFIRMED as the Final Decision of the Department. Respondent is ordered to pay $1,721,027.04 to the Department.

So ordered this 8\textsuperscript{th} day of March 2016.

\[Signature\]

John B. King, Jr.  
Acting Secretary

Washington, D.C.

\textsuperscript{36} 75 Fed. Reg. 34,806, 34,815 (June 18, 2010); 75 Fed. Reg. 66,832, 66,871 (Oct. 29, 2010).

\textsuperscript{37} Initial Decision, p. 3.
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Response to the Draft of
Commission on Dental Education’s Report
Site Visit Evaluation
November 17-19, 2015

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Standard 1. Institutional Commitment and Program Effectiveness

NARRATIVE:

Dental Hygiene: The program has documented its effectiveness using a formal and ongoing outcomes assessment process to include measures of dental hygiene student achievement. Based on a review of the program’s outcomes assessment process and student achievement measures, the visiting committee found the program has developed an outcome assessment program to measure program goals and collects data from multiple sources. The program collects data such as: national board pass rates, clinical licensure exams, jurisprudence exams and advisory member feedback to assess program goals and student achievement. Data in areas such as clinical licensure exams results, jurisprudence exam results and advisory committee member feedback indicates positive outcomes. The visiting committee found the program has demonstrated positive results in clinical and jurisprudence exam results. The program indicated national board exam results were below average in previous years and the program has implemented a number of changes, such as adding more case studies throughout the curriculum, adding a mock national board, utilizing a software program to enhance radiology instruction and the addition of Objective Structured Clinical Examinations (OSCE). The program has noted improvement in national board exam scores and will continue to monitor student national board results.

The program has not demonstrated positive student achievement outcomes in on-time graduation rates. The visiting committee noted the program informally reviews student achievement outcomes and informally discusses strategies to improve student on-time graduation rates. The program lists three (3) program goals, however, the visiting committee did not identify a formal plan to improve on-time graduation rates. The committee noted the program modified admission criteria to increase the required Grade Point Average (GPA); however, the visiting committee could not verify this change resulted from a formal outcomes assessment process. The program indicated it will monitor student success as a result of this admissions change.

The program must demonstrate its effectiveness using a formal and ongoing planning and assessment process that is systematically documented by: a) developing a plan addressing teaching, patient care, research and service which are consistent with the goals of the sponsoring institution and appropriate to dental hygiene education; and d) using the results for program improvement.

Through review of the self-study documents, on-site interviews, and documents provided on-site, the visiting team verified the program has a number of program goals and assessment mechanisms within a formal outcomes assessment process. The visiting committee identified the program a 69% average student on-time graduation rate for the period 2013 through 2015 (2013: 57%, 2014: 91% and 2015: 61%). The visiting committee noted the program allows students who do not complete program clinic requirements on-time to complete clinic requirements in one or two additional semesters. The visiting committee noted faculty and administration informally review student achievement outcomes and informally discuss strategies to improve student on-time graduation rates; however, the visiting committee did not identify a formal plan that
includes appropriate program goals to address program completion outcomes. Additionally, the visiting committee noted the program has used program outcomes data to improve written board scores; however, the visiting committee could not verify the program uses program completion rates as a basis for program improvement.

RECOMMENDATION#1:
It is recommended that the program demonstrate its effectiveness using a formal and ongoing planning and assessment process that is systematically documented by: a) developing a plan addressing teaching, patient care, research and service which are consistent with the goals of the sponsoring institution and appropriate to dental hygiene education; and d) using the results for program improvement. (DH Standard 1-1, a and d)

DESCRIBE PROGRESS MADE IN IMPLEMENTING THIS RECOMMENDATION SINCE THE SITE VISIT. COMPARE THE CURRENT SITUATION WITH THAT EXISTING AT THE TIME OF THE SITE VISIT.
On site, the team requested data for the classes that graduated in 2014 and 2015. The exhibit that examines enrollment and attrition, Exhibit 2-5-01, asks for program data for the year of admission, starting in 2015. We believe the site visitors plugged in the TBA data Exhibit 2-5-01 as if it were the graduating classes of 2014 and 2015, not the year the class was admitted. The data for the classes that is cited in the preliminary CODA report is not correct. The actual average rate of completion for those who started the program and have graduated in 4 semesters during the last 3 years is actually 77.23%, not 69%. The average rate of completion for those who started the second year and have graduated in 4 semesters is 84%. See Appendix 1-1-01, Table of Enrollment and Retention Data.

It is believed that our standards are high but reasonable, and allow most students to complete requirements in four semesters. Rather than dismissing a student from the program, those who do not successfully complete a didactic or clinical DH III or DH IV course are given the opportunity to retake the course and continue in the program. As adult learners, these students come to our program with increased outside responsibilities. Students may need to take an individualized alternative route to successful completion, which may not always equate to four consecutive semesters. In andragogy, it is imperative that we identify individual needs and work to successful resolutions on a one-on-one basis.

We believe that we are now and always have been in compliance with Standard 1-1. The Dental Department has had an ongoing formal assessment plan required by the College for years. We prepare an extensive Academic Program Review once every five years, which was available on site. The College requires that one Program Student Learning Outcome be formally evaluated yearly. See Appendix 1-1-02, pages from Camden County College’s Student Learning Outcomes Assessment Plan. Methods used to assess outcomes include but are not limited to graduate surveys, patient surveys, National and CDCA Board results, Departmental Strategic Plan,
Quality Assurance Plan, course evaluations, end of semester curriculum meetings and beginning of semester/end of semester clinic meetings. Examples of this evidence were submitted in our Self Study. See Appendix 1-1-03, Assessment Schedule for the Dental Hygiene Program. CDCA results and clinic meetings have helped us to identify ways to improve student outcomes in the past.

Recommendation #1 states that “the program informally reviews student achievement and informally discusses strategies to improve student on-time graduations rates…however the visiting committee did not identify a formal plan to improve on-time graduation rates.” We believe that statement to be inaccurate since improving the outcomes of all aspects of the program, including graduation rates, are formally assessed on a regular basis.

Clinic meetings are held at the beginning and end of each semester to calibrate, as well as to discuss requirements, student progress, board scores, policies, etc. See Appendix 1-1-04, Methods of DH Clinic Evaluation. Examples of evaluation tools and results were submitted in our Self Study. Quality Assurance and other clinic issues are discussed at monthly Department meetings, meetings with science faculty who teach dental hygiene students and end of semester curriculum meetings. See Appendix 1-01-05, Examples of Meeting Minutes Discussing Assessment. The failure rate in DH III and IV Clinics for the class that graduated in 2015 was unusually high compared to other years and does not reflect the typical rate of completion in 4 semesters.

Examples of changes that were made to clinic in the past in order to improve student success as a result of these assessments include, but are not limited to:

- Implementing Mock CDCA Exam (spring 2010)
- Holding a technology session to familiarize students with equipment and adjunctive procedures (fall 2011)
- Implementing clinical OSCE’s (fall of 2013)
- Changing our patient cancellation policy from requiring patients to give 24 hours notice to 48 hours notice (fall 2013)
- Allowing carry-over requirements from DH II to DH III to avoid failing students (spring 2015)
- Initiating a Proficiency Log Book to verify the number of proficiencies completed each session (spring of 2015)

In order to highlight and address specifically the process of clinical evaluation, the following criteria in assessing clinical outcomes has been added to the Curriculum Management Plan in Appendix 1-1-06, Curriculum Management Plan (see III.A.):

1. Review of student clinic data
2. Discussion of findings of that data at the end-of-semester clinic meeting.
3. Identification of requirements and policies that need to be changed.
4. Implementation of the changes that have been identified.
5. Evaluation of changes

Clinical data that has been assessed include, but has not been limited to:
- CDCA results
- Utilization of Chart Review time
- Review of Proficiency Log Book
- Double-booking forms
- Clinic grades
- Quality assurance reports

An analysis of the 4 students who failed DH III Clinic and the 3 students who failed DH IV Clinic between the fall of 2013 and the spring of 2015 was conducted. It was evident that there was not just one thing that prevented a successful clinical outcome. Students who were not successful did not complete a combination of the required patients, proficiencies and radiology requirements. A statistician was consulted who said there were too many variables to pinpoint specific correlation data. However, in analyzing the overall grades of all students who failed DH III or DH IV clinic, we found that all had C’s in DH II Clinic. The 4 students who failed DH III Clinic also had C’s in DH III Seminar. The 3 students who failed DH IV Clinic also had C’s in DH III Clinic. See Appendix 1-1-07, *Analysis of Grades.*

Recommendation #1 also states that “the program modified admission criteria to increase the required Grade Point Average (GPA); however the visiting committee could not verify this change resulted from a formal outcomes assessment process.” We believe that this statement is also inaccurate. No documentation regarding the formal assessment process of modifying the GPA was requested on site. Raising the GPA was one of the changes that came about as a result of assessing student grades in didactic courses and National Board scores. It was found that students who started the program with a 3.0 did not do well didactically or on Boards. This change was suggested at an Admissions Committee meeting and at a meeting between dental hygiene faculty and science faculty. It was approved by our department and our dean. See Appendix 1-1-05, *Examples of Meeting Minutes Discussing Assessment.*

A student could pass a clinical course even if they are missing requirements if their grades are strong enough, but then they would have to complete those requirements the following semester. Any student who has weak clinical and radiology grades and is missing requirements will most likely not be able to successfully complete the course, and must repeat it to strengthen their skills.
Acceptable “on-time” graduation rates are a subjective statistic. The Accreditation Standards mandate that a graduate be competent, not that they graduate in four semesters. Fine motor skills, time management and professional judgment take time to develop. In addition, some students take longer than others for various reasons including medical issues, failure of a didactic course, family issues, maturity level, financial difficulty, etc. It would be a disservice to the dental community to graduate anyone who could not function effectively in a dental office. The faculty at Camden County College work tirelessly to assist students in their goal to become a dental hygienist. They also work to ensure that anyone who graduates from this program is fully competent, be it in four or five semesters.

LIST ALL DOCUMENTATION THAT IS SUBMITTED IN SUPPORT OF THIS PROGRESS:
Appendix 1-1 Table of Enrollment and Retention Data
Appendix 1-2 Pages from Camden County College Program SLO Assessment Plan
Appendix 1-3 DH Assessment Schedule
Appendix 1-4 Methods of DH Clinic Evaluation
Appendix 1-5 Examples of Meeting Minutes Discussing Assessment
Appendix 1-6 Curriculum Management Plan
Appendix 1-7 Analysis of Grades

**Standard 2. Educational Program**

**NARRATIVE:**
**Dental Assisting:** The dental assisting program is presented in two (2), 16-week terms and two (2), five-week summer terms. Upon completion of the program, graduates are awarded Certificates in Dental Assisting or Associate of Applied Science (A.A.S.) in Dental Assisting degrees.

Prior to exposing dental images during extramural clinical assignments, students must demonstrate competence, under faculty supervision, in exposing diagnostically acceptable full-mouth dental image surveys on a minimum of two patients in the program, or contracted facility.

Through review of documents provided on-site and on-site interviews, the visiting committee noted the program contracts with clinical practice experience sites to provide students with radiography experience under faculty supervision. Students are required to expose two (2), full-mouth radiographic surveys (FMX) under faculty supervision at their clinical practice experience site.

The visiting committee could not verify that students demonstrate competence in exposing radiographs on patients under faculty supervision and evaluation prior to exposing dental images during their extramural clinical assignments. The visiting committee received conflicting
information regarding the timing of radiograph exposure on patients and could not verify students are supervised and evaluated by faculty while exposing radiographs.

RECOMMENDATION #2
It is recommended that prior to exposing dental images during extramural clinical assignments, students demonstrate competence, under faculty supervision, in exposing diagnostically acceptable full-mouth dental image surveys on a minimum of two patients in the program, or contracted facility. (DA Standard 2-17)

DESCRIBE PROGRESS MADE IN IMPLEMENTING THIS RECOMMENDATION SINCE THE SITE VISIT. COMPARE THE CURRENT SITUATION WITH THAT EXISTING AT THE TIME OF THE SITE VISIT.
In reviewing the recommendation from Commission on Dental Accreditation (CODA), the Camden County College Dental Assisting Program reorganized the dental radiology course to comply with two governing bodies, Commission on Dental Accreditation and the New Jersey Department of Environmental Protection Bureau of X-ray Compliance. See Appendix 2-1, Dental Radiology Syllabus.

The N.J. DEP Bureau of X-ray Compliance general minimum required hours for didactic is 30 hours and laboratory 25 hours.

The department has made moderate schedule changes to include patient full mouth series at Camden County College prior to attending the student’s required extramural clinical assignments. See Appendix 2-2.

The revised course which will be in place the next time it is offered (September 2016) will achieve all of the didactic and laboratory requirements of the state prior to performing clinical patient’s full mouth series. By scheduling patients in our institution the students will demonstrate competence under Camden County College faculty supervision prior to attending extramural clinical assignments.

During a conference with Camden County College administration and the department director, it was agreed that new equipment was to be purchased and installed by fall of 2016. It was also agreed that additional staff would be hired to accommodate the Bureau of X-ray Compliance 1:1 student/instructor ratio.

It was also determined to reduce enrollment from 24 students to 18 for one admissions cycle. By reducing enrollment and adding two patients per student the same standard of education will be achieved. An assessment will be performed at the end of the semester (December 2016) determining what if any changes should be addressed within course.

LIST ALL DOCUMENTATION THAT IS SUBMITTED IN SUPPORT OF THIS PROGRESS:
Appendix 2-1 Dental Radiology Syllabus
Appendix 2-2 Dental Radiology Schedule
Appendix 2-3 Dental Department Revision Approval
Appendix 2-4 Chairs and Coordinators Revision Approval

NARRATIVE:

**Dental Hygiene:** The dental hygiene program is presented in four (4), 16-week terms and two (2), five-week summer terms. Upon completion of the program, graduates are awarded Associate of Applied Science (A.A.S.) degrees.

The dental hygiene program must have established mechanisms to ensure a sufficient number of patient experiences that afford all students the opportunity to achieve stated competencies.

Through review of the self-study document and on-site interviews, the visiting committee noted the program utilizes a mechanism within the dental hygiene clinic for patient assignment to students. Additionally, the program informs students they are responsible for recruiting patients to complete clinic requirements. The visiting committee determined, however, the program has policies that may restrict the type and number of procedures that students can perform at a clinic session for evaluation, faculty availability for clinic proficiency assessments, and may limit the number of proficiency evaluations students can complete toward meeting patient requirements.

The visiting committee noted the program is in the process of revising assessment protocols to facilitate course completion; however, the visiting committee did not identify documentation to support the changes, could not verify that changes have been implemented, and did not identify post-change course outcomes data. Additionally, the visiting committee could not determine the extent to which students repeat individual clinic courses and could not determine how previously completed patient requirements are counted toward repeated clinic courses.

**RECOMMENDATION #3:**

It is recommended that the dental hygiene program have established mechanisms to ensure a sufficient number of patient experiences that afford all students the opportunity to achieve stated competencies.

(DH Standard 2-11)

**DESCRIBE PROGRESS MADE IN IMPLEMENTING THIS RECOMMENDATION SINCE THE SITE VISIT. COMPARE THE CURRENT SITUATION WITH THAT EXISTING AT THE TIME OF THE SITE VISIT.**

We respectfully disagree that there is not a sufficient number of patient experiences that afford all students the opportunity to achieve stated competencies. The site visit interview with the students was scheduled for 30 minutes, it went on for 55 minutes. At the final debriefing, it was apparent that during the student interview, the students expressed their frustration at not having sufficient opportunities to complete requirements. The faculty members were not informed of this until the final debriefing on Wednesday evening, and were not given a chance to provide documentation to dispute this claim. The clinical faculty was not given the opportunity to provide documentation that would address specific statements regarding the students’ perception...
of barriers toward completing patient requirements. We were not informed of which policies restricted the type and number of procedures that students can perform at a clinic session. During the first day of scheduled meetings, the visiting team interviewed the full time clinical faculty and commended them on the didactic and clinical syllabi, outlines, sequencing, policies, proficiency forms, etc. In fact, they requested not to meet with Barbara Iuliiucci and Barbara Jacobs for DH Seminar I, II, III, and IV, the classes that are affiliated with clinical courses.

When we learned of the students’ concerns during the final debriefing, we pulled data that evening to show evidence that the student accounts were overstated and not valid. We were not permitted to present this information at the final conference.

The following information substantiates the fact that experiences and policies are weighted in favor of student success:

We inform students in information sessions prior to admission and during program orientation that they are responsible for recruiting a variety of patients to fulfill their clinic requirements. See Appendix 3-1, *New Student Checklist*. In addition, we have a patient pool of 6,972 active patients that students can draw from. Students are encouraged to have family and friends on standby should their clinic patient cancel. 5 to 10 new patients a week call in requesting appointments. While the number of proficiencies required has increased since our last site visit in 2008 due to an increase in technology, the patient requirements have decreased from 72 to 54 to compensate.

The students fill out a “Needs List” each night and the clinic scheduling manager assigns all patients who call in for an appointment on a systematic basis to those with particular needs. See Appendix 3-2, *Needs List*. Opportunities during the week are given to students to review recall cards in order to find appropriate patients. Students are also encouraged to review patient charts in order to be better prepared for each session. See Appendix 3-3, *Example of Chart Review Sign-In Sheet*. Out of 21 possible scheduled occasions that students could have come in between September 2 and November 18, 2015 to review charts and recall cards, the average number of times a student took advantage of these opportunities was 4.4. The range of times students came in varied from 0 to 10. See Appendix 3-4, *Chart Review Statistics*.

The visiting team stated that instructors were not available in order for students to complete proficiencies. Our student to instructor ratio is never more than 5 to 1 and is often 4 to 1. A student is required to enter their name and type of proficiency requested in a sign-in book, along with the time they are ready. The instructor also signs the book and enters the time they go to the unit. See Appendix 3-5, *Example of Proficiency Sign-In Sheet*. Students requesting a proficiency which must be done on a specific patient (prophy jet, pain control, Graceys, etc.) are given preference. Those who are requesting proficiencies on procedures that can be done on any
patient will be seen as soon as possible. After reviewing the Proficiency Log from September 8, 2015 to November 18, 2015, we found that an average of 94% of the proficiencies that requested were completed that day.

The visiting team stated that students reported that they were not allowed to double book. When double booking is requested, the student must clear it with an instructor first and fill out a form for the reception area. See Appendix 3-6, *Special Scheduling Form*. There are times when a student over estimates his/her abilities and permission is not granted, but an alternative suggestion is provided. During the fall of 2015, 156 requests to double book in clinic were granted.

The preliminary draft states that the visiting committee could not determine the extent to which students repeat individual clinic courses and could not determine how previously completed patient requirements are counted toward repeated clinic courses. In our Policies and Procedures Manual, it states that a student is allowed to repeat a second year course once. A second failure will result in dismissal. See Appendix 3-7, *Page from the Policies and Procedures Manual*. It was explained to the committee that if a student repeats a clinical course, all requirements of that course must be completed. The same is true for any didactic course.

Cancellations are to be expected, and buffer sessions are built into the schedule allowing a student an extra week in DH II Clinic, DH III Clinic and DH IV Clinic. Students are instructed to confirm their patient two days prior to the appointment. If a patient has had to cancel due to illness, death or any other legitimate reason, extra sessions are given to the student. If a patient stops coming after a student has invested time, the instructor or clinic supervisor will call that patient to urge them to return for the sake of their oral health. Students are also instructed to have a backup plan for each day in case of a cancellation. If a cancellation occurs unexpectedly, we have a *Short Call List*—a log that is kept of patients who are willing to come in on short notice. (See Appendix 3-8, *Short Call List Form.*) The library, Wellness Center and café are also good sources of patients in case of an unexpected cancellation. Our patient cancellation policy has been changed from requiring the patient to give 24 hours notice to 48 hours notice. If a patient has more than 2 broken appointments, they are no longer seen in the clinic. See Appendix 3-9, *Clinic Brochure* (abbreviated, used for recruitment)

Students participate in College and community health fairs where they give out abbreviated clinic brochures to recruit patients. They can also take brochures to give out at churches, school nurses, local businesses, friends and family. The clinic is advertised on the College web site, College radio station, Twitter and Facebook.

Class meetings are held with students once a month and students are able to set the agenda. Strategies as to how to make clinic go smoothly are addressed. Students are encouraged to speak
personally with an instructor if they are having a problem, and this occurs on a daily basis. Three times a semester, each student has a one-on-one with a full time instructor to go over the clinic requirements. Students are given advice on how to proceed to best finish requirements. See Appendix 3-10, Forms for Assessing Student Progress.

Although the clinic pool provides a sufficient number of patients for all students, it is up to the student to take advantage of the resources available and be responsible for having a patient in his/her chair. When students wait for requirements to appear rather than taking the initiative and controlling their schedule, it may lead to an unsuccessful outcome.

LIST ALL DOCUMENTATION THAT IS SUBMITTED IN SUPPORT OF THIS PROGRESS:
Appendix 3-1 New Student Check List
Appendix 3-2 Needs List
Appendix 3-3 Example of Chart Review Sign-In Sheet
Appendix 3-4 Chart Review Statistics
Appendix 3-5 Example of Proficiency Sign-In Sheet
Appendix 3-6 Special Scheduling Form
Appendix 3-7 Page from Policies and Procedures Manual
Appendix 3-8 Short Call List Form
Appendix 3-9 Abbreviated Clinic Brochure (used for recruitment)
Appendix 3-10 Forms Used to Assess Student Progress

NARRATIVE:
**Dental Hygiene:** Graduates must be competent in providing dental hygiene care for the child, adolescent, adult and geriatric patient.

Graduates must be competent in assessing the treatment needs of patients with special needs.

Through review of the self-study document, on-site interviews, and documents provided on-site, the visiting committee identified that the program has requirements for the child, adult and geriatric patient. The visiting committee did not identify, however, that the program has requirements for the adolescent patient and did not identify proficiency evaluations. The visiting committee could not verify that graduates are competent in providing care for the adolescent patient.

**RECOMMENDATION #4:**
It is recommended that graduates are competent in providing dental hygiene care for the adolescent patient. (DH Standard 2-12)
DESCRIBE PROGRESS MADE IN IMPLEMENTING THIS RECOMMENDATION SINCE THE SITE VISIT. COMPARE THE CURRENT SITUATION WITH THAT EXISTING AT THE TIME OF THE SITE VISIT.

We have revised our classification of adolescent patients from children ages 13 to 17, to the World Health Organization’s definition of adolescence which is children from 10 to 19 years of age. In reviewing our tracking of patients using this new definition, we found that students see a minimum of 2 adolescent patients and a maximum of 4. We have revised our requirement sheets so that adolescent patient requirements appear, and are differentiated from pediatric patients.

LIST ALL DOCUMENTATION THAT IS SUBMITTED IN SUPPORT OF THIS PROGRESS:
Appendix 4-1 Tracking form
Appendix 4-2 Requirement Sheets

Standard 6. Patient Care Services

NARRATIVE:
Dental Hygiene: The program must have a formal written patient care quality assurance plan that includes: (a) standards of care that are patient-centered, focused on comprehensive care, and written in a format that facilitates assessment with measurable criteria; (b) an ongoing review of a representative sample of patients and patient records to assess the appropriateness, necessity and quality of the care provided; (c) mechanisms to determine the cause of treatment deficiencies; and (d) patient review policies, procedure, outcomes and corrective measures.

Through review of the self-study, on-site interviews and documents provided at the time of the visit, the visiting committee identified that policies and procedures within the quality assurance process measure student clinical care competencies through review of student evaluations, and verify appropriate signatures (a). The visiting committee determined the patient chart review does not address appropriateness, necessity and quality of patient care (b). In addition, the visiting committee did not identify a mechanism in place to determine the cause of patient treatment deficiencies (c) or corrective measures (d).

RECOMMENDATION #5:
It is recommended that the program have a formal written patient care quality assurance plan that includes: b) an ongoing review of a representative sample of patients and patient records to assess the appropriateness, necessity and quality of the care provided; c) mechanisms to determine the cause of treatment deficiencies; and d) patient review policies, procedure, outcomes and corrective measures. (DH Standard 6-2, b, c, and d)
DESCRIBE PROGRESS MADE IN IMPLEMENTING THIS RECOMMENDATION SINCE THE SITE VISIT. COMPARE THE CURRENT SITUATION WITH THAT EXISTING AT THE TIME OF THE SITE VISIT.

The question was asked at the final conference if Standard 6-2 had changed in the last 7 years, and the answer was that it had not. The Camden County College administration wondered why we were in compliance 7 years ago with the same Quality Assurance Plan, but are not now. The Quality Assurance Plan that was in place from 2006 until November of 2015 utilized a review of student grades which we felt reflected the care a patient was receiving. The chart of each patient who was treated was also evaluated for completion of paperwork and treatment. Any chart that was incomplete was reviewed by the clinic supervisor to assure thorough treatment. Each incomplete chart was then referred back to the instructor for clarification and follow-up if needed.

The Quality Assurance Plan was expanded in November of 2015. See Appendix 5-1, Quality Assurance Plan. It now includes a random review of clinic charts by full time faculty. Each full time faculty member is now responsible for reviewing 10% of randomly selected patient charts which were finished during that month. The charts are for patients that the instructor has not treated. Deficiencies are identified and corrected. The paperwork is collected and tallied by the Dental Director, who continues to present the Quality Assurance Report at monthly department meetings. See Appendix 5-2, Quality Assurance Data. If a deficiency occurs, a meeting is scheduled with the DH faculty to address and correct issues. See Appendix 5-3, Examples of Meeting Minutes.

LIST ALL DOCUMENTATION THAT IS SUBMITTED IN SUPPORT OF THIS PROGRESS:
Appendix 5-1 Quality Assurance Plan
Appendix 5-2 Quality Assurance Data
Appendix 5-3 Example of Meeting Minutes
# Appendix 1-1
## Enrollment and Retention Data

<table>
<thead>
<tr>
<th></th>
<th>Class that started in 2011 (graduated in 2013)</th>
<th>Class that started in 2012 (graduated in 2014)</th>
<th>Class that started in 2013 (graduated in 2015)</th>
<th>Class that started in 2014 (will graduate in 2016)</th>
<th>Class that started in 2015 (will graduate in 2017)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total # enrolled</strong></td>
<td>22</td>
<td>22</td>
<td>23</td>
<td>23*</td>
<td>22</td>
</tr>
<tr>
<td><strong># of 1st year students who withdrew or failed</strong></td>
<td>2- W 1- F</td>
<td>0</td>
<td>4-F (see * below)</td>
<td>1-W 2-F</td>
<td>TBA</td>
</tr>
<tr>
<td><strong># who started in 1st year and completed in 4 semesters</strong></td>
<td>18 (81.8%)</td>
<td>20 (90.9%)</td>
<td>13 (59%)</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td><strong># who started 2nd year</strong></td>
<td>19</td>
<td>22</td>
<td>18</td>
<td>19</td>
<td>TBA</td>
</tr>
<tr>
<td><strong>% of those starting 2nd year and completed in 4 semesters</strong></td>
<td>95%</td>
<td>90.9%</td>
<td>72%</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td><strong># who completed in 5 semesters</strong></td>
<td>0</td>
<td>2</td>
<td>5</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td><strong># who completed in an extra year</strong></td>
<td>1 (failed DH III seminar, had to wait a yr. to retake)</td>
<td>0</td>
<td>3*</td>
<td>TBA</td>
<td>TBA</td>
</tr>
<tr>
<td><strong>Percentage of those admitted in the 1st year who ultimately completed the program</strong></td>
<td>86% (19 out of 22)</td>
<td>100% (22 out of 22)</td>
<td>81.81% ** (91.3%)</td>
<td>TBA</td>
<td>TBA</td>
</tr>
</tbody>
</table>

*Two students in this class started in September 2013 and failed one didactic course in the spring of 2014. They elected to continue in the program by auditing clinic and retaking the course that they failed. They had to wait until the course was offered again in the spring of 2015, so they will be included in the class that started in 2014. One student from the class that started in 2013 took a medical leave after her second semester, so she is also included in the class that started in 2014. Twenty new students were admitted to the class that began in 2014, 3 students from the class that started in 2013 were added to this class in the fall of 2015.

**This figure is as of December 2015. If the 3 students who elected to continue in the program and graduate in 2016 as expected, this figure will go up to 91.3%.
Program Student Learning Outcomes Assessment
Academic Programs offered at Camden County College are assessed in a variety of ways. Each program publishes program student learning outcomes in the catalog and Academic Program Guide. At least one program student learning outcome must be assessed each year. Each spring, data is collected from these assessments along with strategies being proposed to improve outcomes. In addition, outcomes data from SLOs measured the following year are reviewed to establish if new strategies were successful.

In addition, data is collected and published each year on student outcomes on industry standard examinations. Examples of career based external examinations include exams in nursing, veterinary technician, opticianry, medical laboratory technician, dental assisting and dental hygiene. These outcomes are reported to the Advisory Board each semester in their annual report to the Advisory Committee. Results are also reported to the Board of Trustees via monthly reports at each Board meeting.

Program Student Learning Outcomes Assessment – Conducted Annually
1. Each academic program is required to assess program student learning outcomes each year.
2. Academic programs are required to report annually on its assessment outcomes.
3. Every program level student learning outcome must be assessed (and reassessed where appropriate) within a five-year cycle.
4. Programmatic SLO Assessment includes the following Assessment Tools:
   a. Curriculum Map, which outlines General education and Programmatic course requirements, as well as outlines compliance of the General Education program and interconnectedness of course level and Programmatic Level Student Learning Outcomes.
   b. Interconnectedness Charts, outline Department Master Syllabi Course Level Student Learning Outcomes for each programmatic course and the connection to the programmatic student learning outcomes.
   c. Assessment Raw Data – Recorded
5. The Associate Dean of Curriculum and Assessment will summarize and report on all assessment activities to the Vice President for Academic Affairs annually.
6. The Vice President for Academic Affairs will report on all assessment activities to the President annually.

Assessment Criteria
1. Assessment instruments should primarily be direct measures of outcomes.
2. Rubrics should be developed for communicating expectations and enhancing objectivity of evaluations.
3. Multiple assessment methods should be outlined for each outcome.
4. Assessment should focus on capstone projects or courses, but may be formative.
5. Assessment must be analyzed to identify strengths and weakness of the population assessed as a whole, regardless of the grade earned.
6. Assessment should lead to changes in the curriculum or pedagogy that will lead to improved student outcomes.
7. Follow-up assessment must be performed to evaluate the effectiveness of the change.

**Academic Program Evaluation**

1. All academic programs are scheduled for a comprehensive evaluation every five years. This review will include five years of assessment data with analysis and recommendations.
2. Academic departments are presented with data and asked to discuss and analyze and respond to a series of items, submitting responses to area dean.
3. Area Academic Dean presents results of these evaluations to the Vice President for Academic Affairs each academic year.

**Interrelatedness of Course Level and Programmatic Student Learning Outcomes**

The Inter-relatedness component of academic programs’ assessment of student learning outcomes is demonstrated through the interconnectedness of Course Level Student Learning Outcomes as indicated on the Departmental Master Syllabi, and the Programmatic Student Learning Outcomes. Each year, faculty review and record how the learning outcomes at both the course and the program are appropriately integrated with one another.

Through both curriculum mapping and completion of the interconnectedness chart faculty determine whether all Camden County College graduates have adequate opportunities to achieve all core competencies and program/course learning outcomes. It is a process for showing curriculum-integration at the institutional, program and course levels and identifying where students in a program or course achieve learning outcomes and core competencies.
Appendix 1-3
Assessment Schedule
Dental Hygiene Program

September: Clinic Assessment meeting
            Analyze National Board Scores
            Quality Assurance Review

October: Quality Assurance Review
          Review midterm course evaluations

November: Quality Assurance Review
          Advisory Committee Meeting

December: Assess Clinic Forms
          Conduct Curriculum Meetings
          Review Course Completion Rates
          Review course evaluations

January: Clinic Assessment Meeting

February: Quality Assurance Review

March: Review Current Year’s Strategic Plan
       Quality Assurance Review
       Review midterm course evaluations

April: Review Results of Jurisprudence Test
       Analyze Graduate Surveys
       Finalize Next Year’s Strategic Plan
       Quality Assurance Review

May: Clinic Assessment Meeting
     Review Clinic Forms
     Analyze Patient Survey
     Send out Graduate Surveys
     Review course evaluations
     Review SADHA Activities
     Conduct Curriculum Meetings
     Review Course Completion Rates
     Analyze Graduation and Attrition Rates
     Quality Assurance Review

June: Review Cost of Program
      Analyze CDCA Results
The following measures are used to assess student progress and the effectiveness of instruction in Dental Hygiene Clinics:

**Student journals**: students keep a daily journal. They record daily events including problems encountered, perceived strengths and weaknesses, and strategies for improvement.

**Proficiency exercises**: students must demonstrate proficiency in using specific instruments, equipment and procedures on patients as part of their DH III requirements.

**Student self-evaluations**: students must write a self-evaluation twice during the semester. They summarize their progress in completing patient requirements, identify specific treatment areas that were below average and describe any remedial steps taken to improve those areas. An individual conference is then scheduled with a full time faculty member to discuss the student’s progress.

**Patient grades**: students receive a series of grades for each patient completed. The grades are in the areas of patient assessment, risk management and instrumentation. Each area is weighted and a final grade for that patient is given.

**Final grades**: instructors evaluate final grades at the end of the semester to further make adaptations to the course.

**Quality assurance**: once a month, the director of dental programs evaluates the student grades in the areas of assessment, planning, implementation and evaluation. The clinical secretary keeps a running report, analyzing important areas of documentation. Full time instructors take 3 randomly chosen charts once a month to review for quality of patient care treatment. At the monthly staff meetings, findings are reported.

**Instructor evaluations**: at the end of the semester, the student fills out a Clinical Instructor Evaluation form for each clinical instructor. The evaluation addresses the areas of enthusiasm/stimulation, instructor knowledge, faculty/student interaction, and instructional skill.

**Clinic meetings**: once each semester clinical instructors meet to discuss calibration, clinical procedures, and adaptations to improve the course and student performance.

**Results of Clinical Boards**: at the completion of the program, the student takes a regional clinical exam. The results of this test are used to adjust requirements in order to better prepare the students to take this test.

**Graduate surveys**: a year after graduation, the department sends a graduate survey to each former student, asking for information on equipment and procedures used in the clinical setting and the student’s preparedness for clinical practice.
DEPARTMENT OF DENTAL PROGRAMS
Department Meeting
Tuesday, March 5, 2013
Taft Hall, Room 206

Present: Anna Marie Agresti, Jennifer Blackwell, Judy Burns, Dawn Conley, Jean Corbi, Barbara Iuliucci, Barbara Jacobs, Lillian Straub, Roxane Terranova, and Dr. Catherine Boos.

Dr. Boos called the meeting to order at 3:45 p.m.

Course Revision
Roxane Terranova presented a course revision for Supervised Clinical Experience, DAS-160. This revision will increase the total number of clinical hours from 300 hours to 315 hours within the fifteen week course. By adding 15 hours to the course, the College will be reimbursed 7 fundable credits instead of 6. The revision will also remove the radiology clinical requirement of 30 hours of experience, and replace it with a DEP requirement of 6 full mouth series of x-rays.

The proposal was passed unanimously.

Assessment
Dr. Boos presented the Quality Assurance report from January/February. It was noted that most areas except polishing improved from previous months. The instructors will use this information while meeting with students for self-evaluation.

Dr. Boos also presented test results, comparing 3 years of Head and Neck Anatomy, Periodontology and Local Anesthesia classes. This is the first year that TurningPoint polling has been utilized. So far, when comparing the results of 5 tests and 6 quizzes from this year with results from previous years, there does not seem to be an improvement in student performance. However, other factors need to be taken into consideration, and Dr. Boos will continue to assess the use of this technology.

Dr. Boos asked everyone to take a turn during future department meetings in presenting a subject that has been assessed in class/clinic/affiliate site rotations.

Accreditation
Our next accreditation site visit will be in 2015. To comply with DH Standard 2, we need to have formalized interaction with the science teachers who teach our students. It had been easier in previous years because the science courses were specific to dental hygiene and taught by one instructor. Now that our students are exposed to a variety of instructors in Basic A&P and Basic Microbiology, it becomes more difficult. It was suggested that the full-time DH faculty meet with department heads at the end of the semester, who can then disseminate our needs to their faculty.
**GKAS**
A final GKAS meeting was held at NJDA Headquarters in New Brunswick on February 27. Jean Corbi and Barbara Iuliucci attended. Participants shared their experiences and voiced suggestions for next year.

**Science Building**
Details of moving were discussed. We have been aggressively purging. Suggestions were considered regarding the utilization of students in packing clinic units at the end of the semester. Dr. Boos will contact Dr. McGinley to see if it is possible to have students help.

**Fund Raiser for New Building**
Barbara Jacobs is spearheading a celebration/fund raiser for April 2014 in order to showcase our new facility. She is working with Melissa Daly and Marsha Patrick to organize and cater the event. Graduates and area dentists will be invited. Possible dates are April 4 and April 11, 2014.

The meeting was adjourned at 4:40 p.m.

Respectfully submitted,
Catherine Boos

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**MINUTES**
**DEPARTMENT OF DENTAL PROGRAMS**
**Department Meeting**
**Tuesday, December 3, 2013**
**Halpern Hall, Room 121**

**Present:** Anna Marie Agresti, Judy Burns, Dawn Conley, Jean Corbi, Barbara Iuliucci, Barbara Jacobs, Lillian Straub, Roxane Terranova, and Dr. Catherine Boos.

Dr. Boos called the meeting to order at 3:45 p.m.

**Course Revision Proposal**
Dr. Boos introduced a proposal to revise *Head and Neck Anatomy*, DHY-172. It is currently a 2 credit hybrid course, with 1 hour lecture and 2 hours of face-to-face lab time. It should be changed to a 2 credit lecture course with web enhancement. After a short discussion the proposal was unanimously approved.

**Dental Hygiene Graduate Survey**
Dr. Boos sent out 15 surveys to the 2012 dental hygiene graduates and received 6 responses. It was determined that the graduates felt that they would like more clinical experiences in radiology, indices and computerized records. It was decided that evaluations for rotations would be given to current students to try to pinpoint specific areas where students need more confidence in radiology. Dr. Boos has talked to Louise McCarthy about indices, and the department is gradually incorporating computerized records into clinic.


**Quality Assurance**

November quality assurance information was dispersed and discussed.

**End of Semester Meetings**

In preparation for end of semester meetings, Dr. Boos reminded everyone to distribute course evaluations.

The meetings will be held in SCI-121 as follows:

**Dental Assisting:**
- Radiology: December 14, time TBA
- Dental Materials: December 16 at 3 PM
- Dental Anatomy: December 18 at 3:30 PM
- Chairside: December 19 at noon

**Dental Hygiene:**
- Advanced Techniques, Dental Anatomy, Pathology, Medical Emergencies, Dental Hygiene I Seminar, Dental Hygiene III Seminar and Clinic: December 17, from 2 to 5 PM
- Radiology: December 19 at 12:30 PM

**Reception Announcements**

Anna Marie Agresti revised the x-ray consent form to include digital x-rays. The group made suggestions and the new form with suggested revisions will be implemented in January.

**Clinic Items**

- Discussed the implementation of OSCE’s for both Dental Assisting and Dental Hygiene.
- Recommended ordering 6 more Oraquix handles.
- Four handpieces, Midwest ID caries detection instruments and Isodry isolation systems will be put on the 2015 Perkins request. Jean Corbi will investigate the cost of a digital panorex to replace our panorex, which is past its prime.
- Drawers in the clinic will be reconfigured over break. On December 19th DA students will empty drawers in the lab units, and on December 20th, DH students will empty the units in clinic.

**Give Kids a Smile (February 7, 2014)**

Barbara Iuliucci presented a flyer to be approved for publicizing the event. Dr. Boos will investigate reserving the lobby area and getting publicity on the CCC Facebook page.

The meeting was adjourned at 4:35 p.m.

Respectfully submitted,

Dawn Conley
CAMDEN COUNTY COLLEGE
Department of Dental Programs

Course Update Meeting

Course: Dental Hygiene Clinic DH III
Date of Meeting: January 6, 2014

Present:
Dawn Conley, Barbara Iuliucci, Barbara Jacobs and Jean Corbi

Discussion

1. Radiology-keep requirement for FMX on Level 3
   Add line to Radiology for Requirement Sheet for Clinic Level 3 patient and duplication activity
   Will adjust edent and pedo requirements for Class of 2015
   Nice to have so much space in radiology

2. Clarification that NERB prof and BP prof can be done during Sterilization rotation.

3. Revise Patient Education Proficiency so it is not all or nothing. Adjust critical areas.


5. Communication system not in place for the entire semester and inhibited calibration as well as communication with the students.

6. Will set up bi-weekly clinic faculty lunch meetings to discuss clinic issues and student progress.

7. Create binder for continuous revisions of paperwork which will be stored in Cabinet P in third drawer.

8. Revise opening and closing responsibilities of each clinical session to all clinical faculty.

9. Introduced computer charting into clinical technologies in preparation for becoming paperless.

10. Lack of PA system and music was a severe hindrance for both students, patients and faculty.

11. Students need to take more responsibility in following up on completed patients and grades within a 2 week time.

Minutes submitted by:
Dawn Conley
CAMDEN COUNTY COLLEGE  
Department of Dental Programs  
Curriculum Meeting

Date of Meeting:  May 18, 2015 from 1:00 -1:50 P.M. in SCI-121

Present:  Linda Bacha (A&P), Catherine Boos (Dental), Susan Choi (Chemistry), Dawn Conley (Dental), Rita Connolly (Microbiology), Dawn Conley (Dental), Jean Corbi (Dental), Roberto Feudale (Chemistry), Nancy Gartland (A&P), Barbara Iuliucci (Dental), Barbara Jacobs (Dental), Betty Joynes (Nutrition), Anne McGinley (Dean of Math, Science and Health Careers), David Nugel (Chemistry), Marsha Patrick (Nutrition) and Teresa Smith (Chemistry).

Dr. Boos called the meeting to order at 1 PM and explained that the purpose of the meeting was to give DH faculty an opportunity to communicate with faculty who teach our pre-hygiene and hygiene students.

The meeting started by discussing DH admissions criteria and how to differentiate between applicants who have high grades in science courses with less rigorous teachers and applicants who have average grades with teachers who hold higher standards.  It was admitted that with so many sections of a course with different teachers, it is difficult to distinguish the better student. It was suggested that Dr. Boos request grade distributions sections of the applicable science courses, but on Data-tel, one can’t tell what section a student has taken.  Another suggestion was to require a letter of recommendation from a science teacher addressing motivation, organization, study habits, etc.  Susan Choi will forward a form she has that can be used for that purpose.

Dr. Boos has been investigating predictor tests and has found that they are measuring what a student knows from high school.  No one thought they would be valuable.

The Admissions committee suggested to raise the GPA from 3.0 to 3.2.  Those present agreed.  Dr. Boos will do that after discussing it with the Advisory Committee and voting on it at a Department meeting.

The conversation next revolved around generational learning and what we can do to reach and motivate the students.  Various techniques such as “flipping the classroom” and peer tutoring were discussed, both of which DH faculty have tried.

Dr. Boos explained that we are having an accreditation site visit November 17-19, 2015 and requested that instructors be available to meet with the site team.

Dr. Boos ended the meeting by thinking the group for their input.  Changes to the admissions criteria will be made as soon as they go through the proper channels.
Present: Anna Marie Agresti, Judy Burns, Dawn Conley, Jean Corbi, Andrea Hudnall, Barbara Iuliucci, Barbara Jacobs, Roxane Terranova, and Dr. Catherine Boos.

Dr. Boos called the meeting to order at 2:15 p.m.

Professional Induction Ceremony
The Professional Induction Ceremony held at the Palace last May was very successful. Dr. Boos signed a contract to hold next year’s event at the Palace. A deposit will be due the end of September.

County Fair
The county Fair will be held at CCC September 19 and 20. It was decided we would give out clinic brochures, literature and toothpaste. The seniors would be asked to man the tables.

Pacemakers
Use of sonics, ultrasonics and piezzos on patients with pacemakers was discussed. It was decided that new patients would need a verbal clearance from the physician if an ultrasonic is going to be used.

DH Graduate Surveys
Six out of 23 surveys from the DH graduating class of 2014 were returned. Students indicated that they need to learn more about general dentistry. We discussed having mini lectures for seniors in the spring to give students an idea of how to sell dentistry. Roxane Terranova offered to present the lectures.

Admissions
After careful consideration of data, and at the suggestion of the Admissions committee and the group of non-hygiene instructors who teach DH students, Dr. Boos recommended that the GPA for admission for students beginning in September of 2017 be 3.2. It was unanimously agreed that this suggestion be implemented.

Pediatric Blood Pressures
Dr. Boos contacted the American Academy of Pediatric Dentists regarding taking blood pressures on 3 year olds. This is their response:

The positive "yield" on routine BP testing for children is very low because it is rare; almost all hypertension in children is indicated by some positive finding in their medical history. Today, that has changed slightly due to the obesity epidemic, but even with that the occurrence of minor hypertension is well below 2 percent and would be predicted by a child's body mass index (BMI). For routine dental care, BP measurement is unnecessary and the occurrence of false positives (ie, finding elevated BP when there really isn't any - probably due to fear) can make this a nightmare for a practitioner who then needs to (1) verify the reading and (2) make an appropriate referral. It doesn't take more than a couple of erroneous referrals to piss off your friendly pediatrician, by the way.

We have decided to keep our current guidelines.
Accreditation Site Visit
In anticipation of the site visit, for those who are involved in interviews, changes in class schedules will have to be made. Arrangements for alternate class times should be made well in advance so the students can be notified. Starting clinic a half hour later on the day the students are interviewed is a possibility. There should be no clinic screenings for Dr. Boos on Tuesday or Wednesday.

Sterilization
Format for labeling autoclave bags was discussed so there is consistency between DH and DA. Setting up a schedule so 2 students at a time can wrap instruments in the sterilization area was also discussed.

The meeting was adjourned at 3:15 p.m.

Respectfully submitted,
Dawn Conley

End of Semester Meeting Minutes
December 22, 2015
10:30 AM-12:30 PM

Present: Catherine Boos (director), Dawn Conley (faculty), Barbara Iuliucci (clinic supervisor), Barbara Jacobs (faculty)

DH III Clinic: DHY-253

Clinical Requirements
Faculty discussed clinical requirements and how to remove barriers to students completing in four semesters without compromising quality. Since students fail because of a combination of incomplete experiences, the group decided to address proficiencies first. Revisions will be made to the proficiency requirements. Since late completion of proficiencies result in minus points, it was decided to take out due dates for sulcular irrigation, computer charting, PSR, amalgam polishing and VelScope. Due dates will be left in for time sensitive experiences like Tobacco Cessation. Based on assessment of Graduate Surveys, pouring and trimming of study models will be eliminated in DH III Clinic, and pouring of study models will be eliminated in DH IV Clinic. Students will still be required to take impressions for study models, bleaching tray and athletic mouth guards. This will also free up a clinic session in DH III to give students another session in which to complete requirements. One pedo fluoride experience is going to be substituted with 1 varnish.

The faculty will also emphasize to students that preparation for patient treatment by utilizing Chart Review times is key. Students have been lax in taking advantage of this resource to schedule patients and prepare for patient treatment.

Quality Assurance
Full time instructors each took 3 charts to evaluate patient care. It was decided that we need to make adjuncts more aware of the definitions of ASA Classifications and expectations for documenting H.C.I. We will continue to review charts monthly, report during department meetings and make changes where appropriate. Adjuncts will be informed by meeting minutes throughout the semester and reinforcement by attendance at pre- and post- semester meetings.
Dental Hygiene III Seminar: DHY-223

1. The Colgate Trip was better in the beginning of December because more employees were available to show us saliva testing and different methods of research. Our next year trip is scheduled for 12/1/16.
2. Dentsply packets are going online only. This means Barbara will need to scan them into their shell packets.
3. Isodry was introduced with the sealant lecture. Barbara will review placement on a manikin in DH IV in the two units available.
4. Barbara will be making videos of different homecare methods in the spring for DH and DA.

Advanced Techniques in Periodontology: DHY-233

1. Case studies went well. Good feedback from students.
2. Students liked the Oral Cdx speaker and Dr. Benedon. He also lectured on laser technologies which was interesting.
3. Added the National Board Review Book as a Chapter Quiz. Students felt that was very helpful.
4. Changed quizzes to 5 questions from previous lecture and 5 questions from the current lecture.
5. One student failed the course and will repeat it next fall. The final tally was 4-A, 11B, 3C, and 1 F.
6. New edition of the Perio book will be utilized next fall.

Dental Anatomy: DHY-130

1. Independent Study did not work—will remove for next fall
2. Models for occlusion lab were replaced
3. Flow of lab activities worked well this semester
4. Will change the % of tests to 80% for next fall and decrease the homework % to 0—we will add a clause that states “all homework must be done or there will be 5 points deducted from the clinic grade
5. A grid sheet will be made up to track homework completion (like the one in radiology lab)
CAMDEN COUNTY COLLEGE
Department of Dental Programs

Clinic Meeting
February 8, 2016
6 PM-7:30 PM
(postponed from January 25)

Present:
Catherine Boos, Mary Buttery, Dawn Conley, Jean Corbi, Gretchen Heller, Barbara Iuliucci, Barbara Jacobs and Barbara Lutz.

1. Dr. Boos introduced the additional phase of the Quality Assurance Plan for the benefit of the adjuncts, while Barbara Iuliucci described some of the areas that she found while reviewing charts. To help ensure that those who are prescribed radiographs are scheduled, it was suggested that the very last entry on Services Rendered should be, “Rx for radiographs by Dr. Boos”. This will alert instructors to check to make sure radiographs have been scheduled.

2. Instructors were asked to make sure that the back of side of the student’s Day Sheet is filled out so tracking information is complete.

3. Identifying and describing gingival inflammation is a problem. It was decided that next year, for their intraoral camera proficiency, students will take pictures of inflammation which will be described on the proficiency evaluation.

4. Dr. Boos has been reviewing student data to come up with a common theme for those who fail DH III Clinic. In the last three years, all students who have failed DH III clinic had a grade of C in DH II Clinic. A lengthy discussion revolved around actions that could be taken to improve the passing rate in DH III, including things that have been tried in the past that did not work, such as allowing carry-overs. It was decided to take the sharpening experience out of Tuesdays to give each student one more clinic session. It was also noted that most students who failed DH III were slow at completing patients at first, but become more proficient when they repeated the course. It was viewed that repeating the course benefited the student and decreased attrition.

5. Barbara Jacobs introduced a video demonstrating the Iso-dry. The Iso-dry will be used in clinic when placing sealants.

Minutes submitted by:
Catherine Boos
Appendix 1-6

CAMDEN COUNTY COLLEGE
DENTAL ASSISTING & DENTAL HYGIENE PROGRAMS

CURRICULUM MANAGEMENT PLAN

I. At the end of each semester, both dental assisting and dental hygiene faculty will meet to review courses offered during that semester, evaluation processes, curricula, and program competencies and goals, and other related issues. Minutes will be kept of these meetings.

A. Meeting Groupings
   1. All team members who team teach a course will meet to discuss that course.
   2. Part-time dental hygiene instructors will meet with full-time dental hygiene faculty.
   3. Part-time dental assisting instructors will meet with full-time dental assisting administrators.
   4. All full-time dental hygiene instructors will meet with the dental director.
   5. All full-time dental assisting instructors will meet with the dental director.

B. Agenda will include, but will not be limited to:
   1. Student course evaluations
   2. Student performance
   3. Course content and overlapping topics
   4. Assessment process/outcomes review
   5. Program goals and competencies review

C. Measurements Utilized: These assessments will be utilized to determine if the goals and objectives of the program are being met:
   1. Feedback from instructors, grades (clinical and didactic), proficiencies, attendance reports, etc.
   2. Feedback from students
   3. Assessments from affiliate sites and clinical performance
   4. Feedback from employer surveys
   5. Feedback from advisory board
   6. Previous year board results
   7. Present and future trends of dentistry
   8. Minutes of meetings held by specific faculty during the year
II. At the end of every academic year, the dental hygiene faculty will meet as a group with general science faculty who teach in the dental hygiene program. Minutes will be kept of these meetings.

   A. Agenda will include, but will not be limited to:
      1. Course content and overlapping topic areas
      2. Course objectives: revisions and updates
      3. Board results
      4. Assessment

   B. Measurements Utilized
      See I- C

III. At the beginning and end of every semester, all clinic instructors will meet with the clinic supervisor. Minutes will be kept of these meetings.

   A. Agenda will include, but will not be limited to:
      1. Review and discussion of student clinic data
      2. Review of requirements/proficiencies/policies and identification of requirements that need to be changed
      3. Discussion of how changes will be implemented
      4. Evaluation of the effectiveness of previous changes
      5. Review of student evaluations
      6. Calibration
      7. Review of infection control procedures
      8. Review of new equipment
      9. Training assignments for opening week.

   B. Measurements Utilized
      See I- C

IV. Other Methods of Coordinating Instruction

   A. All faculty who teach in dental hygiene and dental assisting programs are invited to monthly dental department staff meetings.

   B. All faculty who teach in dental hygiene and dental assisting programs are sent dental department staff meeting minutes.

   C. Meetings requiring immediate curriculum action may be held as the need arises.
### Appendix 1-7 Analysis of Grades for those who failed DH III or IV Clinic

<table>
<thead>
<tr>
<th>Student</th>
<th>DH II Clinic</th>
<th>DH III Seminar</th>
<th>DH III Clinic</th>
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#### Students in the Graduating Classes of 2015 and 2014 who passed both DH III and DH IV Clinic

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Appendix 2-1

Department Master Syllabus
Camden County College
Blackwood, New Jersey

Course Title: Dental Radiology

Course Number: DAS-120

Department/Program Affiliation: Dental / Dental Assisting

Date of Review: January 2016

Date of Last Revision: January 2016

Credits: 4

Contact Hours: Lecture 30 hours Lab 90 hours Other ___

Prerequisites: DAS-141 Biological Science for Dental Assistants
DAS-143 Infection Control for the Dental Assistants

Course Description: This Dental Radiology course is designed to provide the dental assisting student with the opportunity to gain knowledge of the origin, production and utilization of radiation and digital radiography. Emphasis is placed on concepts of radiation safety and patient management. Through lecture and laboratory sessions, students will achieve practical experience in exposing dental radiographs on manikins, processing, mounting, and evaluating dental radiographs of diagnostic quality. Students will attain understanding of the extra-oral panoramic survey and intraoral surveys utilizing the paralleling and bisecting techniques with image receptors, including film and digital sensors. Students will perform two full-mouth series on patients to clinical proficiency. Although some patients may be provided by the College, the student may need, identify and schedule patients who have a clinical need for dental radiographic imaging. Following successful completion of this course, the student will continue into the Supervised Clinical Experience Course, DAS-160, where they will complete the necessary requirements set by the New Jersey Department of Environmental Protection (DEP). Once both courses are successfully completed, the student will be able to finalize the steps necessary to apply to the DEP for a New Jersey Limited – Dental Radiographer License. Completion of this course does not provide the student the authority to take radiographs in a dental setting /office of any kind.

This course is accredited by the New Jersey Radiographic Technology Board of Examiners.
Assessment of Student Learning Outcomes:

Course Student Learning Outcomes:
At the completion of this course, the student will be able to:

1. Explain the physics and technical aspects of radiation production and exposure.  
   Assessed by: Student will successfully complete written exams, evaluations, proficiencies, and an objective structured clinical exam (OSCE)

2. Demonstrate the process for obtaining periapical, bitewing, occlusal and panoramic radiographs.  
   Assessed by: Student will expose a full-mouth series using paralleling/bisecting technique on a patient and exposing a panoramic image to laboratory proficiency

3. Explain the procedures used in dental x-ray film processing  
   Assessed by: Student will process full mouth series of images, read and assess the images to laboratory proficiency

   Assessed by: Student will evaluate dental radiographs determining anatomical landmarks through the text book Internet activities, laboratory full-mouth series and students clinical dental images

5. Describe measures taken to ensure patient and operator safety when exposing radiographs.  
   Assessed by: Student will demonstrate patient and operator safety prior to exposing radiographs by reciting and enacting all safety precautions to the patient and instructor on a clinical evaluation
<table>
<thead>
<tr>
<th>Session</th>
<th>Lecture Topics</th>
<th>Required Readings</th>
<th>Homework Assignments: Assigned Unit Objectives &amp; <a href="http://www.myhealthprofessionskit.com">www.myhealthprofessionskit.com</a> North Star Computer Activity</th>
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<tr>
<td>1</td>
<td>Course Intro, History and Image Receptors The X-ray Unit</td>
<td>Ch. 1,3,7</td>
<td>Ch. 1: Fill-in-blank Ch. 3: Matching Ch. 7: True/False</td>
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<td>1</td>
<td>Introduction to Paralleling, Intraoral Imaging Procedures, Processing Dental films</td>
<td>Ch. 8,13</td>
<td>Ch. 8: Fill-in-blank Ch. 13: Matching Obj. for Infection Control</td>
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<td>Interproximal Survey, Mounting, Physics of Radiation</td>
<td>Ch. 16, 21,2</td>
<td>Ch. 16: Matching Ch. 21: True/False Ch. 2: Fill-in-blank North Star Computer Activity: TBA</td>
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<td>Ch. 30,9</td>
<td>Ch. 30: Matching Ch. 9: True/False</td>
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<td>Ch. 14, 22</td>
<td>Ch. 14: True/False Ch. 22: Matching</td>
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<td>Biological Effects and Radiation Protection</td>
<td>Ch. 5,6</td>
<td>Ch. 5: Fill-in-blank Ch. 6: Matching</td>
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<td>Ch. 14, 22</td>
<td>Ch. 14: Matching Ch. 22: True/False North Star Computer Activity: TBA</td>
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<td>Ch. 4: Matching Ch. 19: Fill-in-blank</td>
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<td>Ch. 18</td>
<td>Ch. 18: Matching</td>
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<td>Test 3, Radiographic Charting, DA Role in Interpretation of Dental Radiographs</td>
<td>Ch. 23, 24, 25</td>
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<td>Ch. 28,29</td>
<td>Ch. 28: Matching Ch. 29: Matching</td>
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Course Activities:

Activities will include quizzes, exams, proficiencies, laboratory activities within the preclinical and darkroom areas.

UNIT OBJECTIVES FOR DENTAL RADIOLOGY LECTURE:

History and Production of Dental Radiation

The X-ray Unit

Upon completion of this unit, the student will be able to:

1. Discuss the important developments in the history of x-ray as it applies to dentistry today.
2. Name 6 properties of x-rays.
3. Define the following terms:
   
<table>
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<tr>
<th>Atom</th>
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<tr>
<td>Proton</td>
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<td>Neutron</td>
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<td>Long wavelength</td>
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<td>Ionizing radiation</td>
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4. Compare x-ray wavelength to its penetrating power.
5. Identify the components of the x-ray unit.
6. Label the internal components of the x-ray tube and discuss the composition and function of the cathode and anode.
7. Describe factors involved in x-ray production.
8. Discuss the control settings of mA, kVp and time in relation to quantity and quality, density and contrast.

Infection Control in Dental Radiography

Upon completion of this unit, the student will be able to:

1. Define the following infection control terms:
   
   | Asepsis      | Barrier protection |
   | Cross-contamination | Disinfection |
   | Infection control  | Pathogen |
   | Sanitation       | Standard procedures |
   | Sterilization    | Universal precautions |
2. Identify routes of infection transmission, conditions for infection to occur and methods to break the chain of infection.
3. Identify radiographic instruments and equipment requiring sterilization.
4. Identify radiographic instruments and equipment requiring disinfection.
5. Discuss radiographic infection control measures to protect operator and patient.

X-ray Film and Film Quality

Upon completion of this unit, the student will be able to:

1. Describe the purpose of each of the 4 components of intraoral dental x-ray film.
2. List the characteristics, components and functions of intensifying screens for extra-oral film cassettes.
3. Explain the effects of variations in milliamperage, kilovoltage, exposure time and distance.
4. Define the following and identify their influencing factors on production and quality of film:
   - contrast
   - density
   - distortion
   - definition
   - latent image
   - film speed
   - inverse square law
5. List the basic requirements of an acceptable diagnostic radiograph.
6. Describe the types and speeds of intraoral films and their use in dental radiography.
7. Describe correct methods of film storage and handling.
8. Describe the five shadow-casting rules or geometric factors and how they contribute to the quality of the radiographic image.

**Processing Dental Films**

*Upon completion of this unit, the student will be able to:*
1. Discuss the production of processing diagnostic quality images.
2. Recognize the characteristics of a well-equipped darkroom.
3. List the major ingredients in processing solutions and the functions of each ingredient.
4. Recall the requirements for a safelight and trouble shoot problems occurring when these requirements are not met.
5. Discuss the sequence for processing films automatically and manually.

**Physics of Radiation**

*Upon completion of this unit, the student will be able to:*
1. Describe various forms of natural and artificial ionizing radiation.
2. Define the following terms:
   - primary beam
   - scatter radiation
   - useful beam
   - leakage radiation
   - secondary beam
   - coulombs/roentgen
   - gray/rad
   - sievert/rem

**Anatomical Landmarks**

*Upon completion of this unit, the student will be able to:*
1. Identify anatomical landmarks on periapical, bitewing, panoramic and occlusal radiographs.
2. Label drawings of the anatomical landmarks of the face and skull.
3. List anatomical landmarks that appear radiopaque and radiolucent.
4. Differentiate between cortical and trabecular bone formation.
5. Mount radiographs using the ADA recommended method.

**Biological Effects of Radiation Exposure and Radiation Protection**

*Upon completion of this unit, the student will be able to:*
1. Describe the design features of a radiation-safe dental facility.
2. Identify hazardous waste in radiography and its disposal.
3. Explain the areas of professional responsibility for radiation safety.
4. Describe personal monitoring devices used to detect radiation.
5. Explain the risks from dental diagnostic radiography.
6. Explain the risk from diagnostic imaging and non-ionizing radiation.
7. Describe the effects of ionizing radiation on living tissue.
8. State the radiation exposure dose for the healthcare worker, pregnant healthcare worker, and the general population as published by the National Council in Radiation and Protection Management.
9. Name sources of unnecessary radiation exposure to both the patient and operator.
10. Identify the exposure and dose from oral and maxillofacial imaging.
11. Identify devices used for filtration and collimation, their composition and importance to radiation safety.
12. Explain the importance of shielding and distance in protecting the operator from unnecessary radiation.
13. Summarize the radiation protection methods for the patient and the operator.
14. Explain the ALARA principle.
15. Rank the cells and body tissues from high to low radio-sensitivity.
16. Identify current ADA guidelines for prescribing dental radiographs.

**Radiographic Quality Assurance**

*Upon completion of this unit, the student will be able to:*

1. Define and compare quality assurance and quality control.
2. List tests for quality control measures in processing and darkroom procedures.
3. Identify quality assurance mechanisms for x-ray machines.
4. Identify the purpose and steps in constructing a step wedge.

**Occlusal Survey**

*Upon completion of this unit, the student will be able to:*

1. List the reasons for making an occlusal survey.
2. Describe the topographical exposure method.
3. Explain the cross-sectional exposure method.

**Paralleling and Bisecting Intraoral Imaging Technique for Interproximal Survey, Anterior and Posterior Periapicals Radiographs**

*Upon completion of this unit, the student will be able to:*

1. Identify 3 basic intraoral procedures.
2. Identify 5 basic rules for shadow casting.
3. Identify advantages and disadvantages of bisecting and paralleling techniques.
4. Demonstrate the ability to position patient and locate points of entry on the face.
5. Position and prepare patient for examination, using proper safety and sterilization methods.
6. Assemble the snap-a-ray and paralleling instruments, and select the proper films to be used for the specific areas, size and anatomical structures of the patient being exposed.
7. Select the proper angulation; activate the dental x-ray machine, using proper PID, exposure time, kVp, and mA.
8. Identify patient variables that affect exposure factors such as patient age, edentulous arches and pathology.
9. Position the film packet and establish horizontal and vertical angulation for maxillary and mandibular areas.
10. Expose, process and mount X-rays of diagnostic quality, using critique sheet as
guide.
11. Deactivate the dental x-ray unit, return to proper position, and use proper hygiene measure in order to maintain asepsis in the x-ray area.

Radiographic Errors/Correcting Faulty Radiographs

Upon completion of this unit, the student will be able to:
1. Discuss the importance of identifying faulty radiographs.
2. Identify inadequacies attributable to incorrect positioning of the film, incorrect positioning of the tube head or PID, and incorrect exposure factors.
3. Identify inadequacies caused by faulty processing techniques.

Documentation and Radiographic Charting

Upon completion of this unit, the student will be able to:
1. Record all pertinent information on patient's chart, i.e., date, med/dent history, E/I exam, number of x-rays, area, kVp, mA, exposure time and retakes.
2. Record all pertinent information on the radiographic mount.
3. Mark the radiographic mount, identifying left and right side of patient.
5. Maintain all pertinent information used in transmittal of radiographs in the patient’s file.

Dental Assisting Role in Interpretation of Dental Radiographs

Upon completion of this unit, the student will be able to:
1. Compare normal and pathological tooth or bone structures.
2. Interpret normal and pathological radiolucent and radiopaque structures.
3. Discuss the use of radiographs in the following areas:
   a. periodontal evaluation (horizontal/vertical bone loss)
   b. calculus detection
   c. instrumentation technique
   d. dental caries
   e. occlusal trauma
   f. faulty restorative work
   g. pulp vitality
   h. root proximity
   i. clinical crown-root ratio
   j. root resorption
   k. lamina dura
   l. PDL width
   m. furcation involvement
   n. periapical pathology
   o. impaction

Panoramic, Extra-oral Surveys

Upon completion of this unit, the student will be able to:
1. Identify intended use and components of the extra-oral cassette.
2. Identify the various types of films used in extra-oral radiography.
3. Discuss purposes for making extra-oral exposures.
4. Describe 3 exposure techniques that use 5" x 7" or 8" x 10" extra-oral films.
5. Demonstrate in sequence the basic steps in operating a panoramic type x-ray unit.
6. Describe the use of a Cephalometric tracing.

**Patient Education, Patient Management, Patients with Special Needs**

*Upon completion of this unit, the student will be able to:*

1. Discuss techniques for greeting the patient, reviewing medical/dental history and evaluating the area to be exposed.
2. Describe educational methods by which the patient can learn to appreciate the value of dental radiography.
3. Explain methods for handling film placement in patients with challenging access.
4. Discuss actions for managing the apprehensive patient.
5. Describe methods to reduce the tactile stimuli to control the gag reflex.
7. Utilize the buccal-object rule to identify the location of pathology or a foreign object.

**Pediatric and Edentulous Surveys**

*Upon completion of this unit, the student will be able to:*

1. Discuss important reasons for taking a radiographic survey of edentulous arches.
2. Explain several methods involving various combinations of intraoral, occlusal or extra-oral films commonly used for a survey of an edentulous dentition.
3. Explain minor modifications in technique that are required for taking radiographs of edentulous dentitions.
4. Explain factors that would be different for the child patient as compared to the adult patient.
5. Discuss the importance of periodic radiographic examinations on children.
6. Mount radiographs of the deciduous and edentulous dentition.

**Digital Radiography**

*Upon completion of this unit, the student will be able to:*

1. Compare digitized film radiography and direct digital imaging.
2. Discuss the advantages and disadvantages of digital radiography.
3. Identify the factors involved in digital imaging protection.
4. Identify the quality of digital images.
5. Demonstrate the ability to properly care for sensors.
6. Define the following terms:
   - analog    digital    CCD    direct digital imaging
   - pixel    sensors    gray scale    indirect digital imaging
6. Compare the various forms of imaging, i.e., electronic imaging, computed tomography, magnetic resonance imaging, and digital imaging.
7. Differentiate between film-based image formation and electronic image receptors.

**Legal and Ethical Responsibilities**

*Upon completion of this unit, the student will be able to:*

1. State the process required for application for licensure.
2. List the educational requirements necessary for obtaining a radiological license in the state of New Jersey.
3. Discuss federal and state regulations concerning the use of dental x-ray equipment.
4. List reasons a license may be revoked.
5. Recognize procedures that are regarded as incompetent and indicating negligence.
6. List the five aspects of informed consent.
7. Identify specific risk management strategies for radiography.
8. Describe the reasons for retaining medical/dental records, including radiographs.

UNIT OBJECTIVES FOR DENTAL RADIOLOGY LAB:

Infection Control
At the completion of this unit, the student will be able to:
1. Disinfect radiology operatory and radiographic equipment.
2. Demonstrate proper hand-washing.
3. Practice appropriate infection control standards and procedures when handling film and sensors, mounting, processing procedures, and instrument processing.
4. Set up and breakdown radiology apparatus, as it relates to patient treatment, according to OSHA standards and CCC policy and procedures.

Operation of X-ray unit/Assembly of XCP Instruments
At the completion of this unit, the student will be able to:
1. Change x-ray machine settings to accommodate adults and children according to their body size.
2. Calibrate x-ray machines according to film to be exposed-including kVp, mA, and exposure time.
3. Assemble XCP instruments to include bitewing, anterior and posterior set ups.
4. Place film correctly into XCP instruments in relation to the occlusion and film packet orientation.
5. Activate and deactivate the dental machine according to instruction.

Darkroom Activation/Processing Film
At the completion of this unit, the student will be able to:
1. Identify the equipment and purpose for each component used in manual and automatic processing.
2. Demonstrate the step by step sequence for processing x-rays.
3. Activate the darkroom for processing x-rays according to CCC radiographic policies for Darkroom Activation.
4. Determine need and methods to add or change solutions for manual and/or automatic processing.
5. Provide cleaning and maintenance of manual and automatic processing.
6. Process test films in the automatic processor to verify the quality of processing.
7. Duplicate films.
8. Sequence the assembly of a step wedge.
9. Perform a coin test to monitor the safelight integrity.
10. Properly store and dispose of all chemical agents used in radiography procedures in compliance with the OSHA Hazard Communication Standard.
11. Inspect and evaluate dark room area for proper temperature, humidity, radiation protection and inventory control.

Documentation
At the completion of this unit, the student will be able to:
1. Review medical history taking procedures.
2. Conduct an extra/intra oral exam on a manikin relative to taking radiographs.
3. Verify need and type for x-rays.
4. Document results of medical history and extra/intra oral exam, radiographs taken, kVp, Ma, and exposure time.
5. Identify information that must legally appear on the mount label.

Film Placement and Exposure
*At the completion of this unit, the student will be able to:*
1. Select the proper type of film (size and speed), film holders, cassettes, etc. to produce a radiograph of diagnostic quality with minimum exposure to the patient.
2. Position film and expose horizontal and vertical bitewing radiographs utilizing the paralleling and bisecting techniques for taking a bitewing film.
4. Position film and expose posterior periapical radiographs utilizing the paralleling technique for taking a posterior film.
5. Expose a full mouth series of x-rays utilizing the paralleling and bisecting technique.
6. Expose, topographical occlusal and cross-sectional occlusal radiographs, utilizing the bisecting technique.
7. Expose a panoramic survey using proper positioning and extra-oral radiographic technique.

Mounting
*At the completion of this unit, the student will be able to:*
1. Determine differences among anterior, posterior and bitewing films utilizing anatomy, landmarks, and film “dot” orientation.
2. Mount films so they accurately reflect the dentition of the patient.
3. Mount adult, pedodontic and edentulous full mouth surveys.
5. Identify radiographic landmarks that aid in correct mounting.
6. Identify anatomical structures, dental materials, and patient information on radiographs, including differentiating between radiolucent and radiopaque structures.

Evaluation of Radiographs
*At the completion of this unit, the student will be able to:*
1. Identify common errors that can occur when exposing and processing film.
2. Discuss methods to correct film errors.
3. Evaluate full mouth series to identify common radiographic errors.
4. Apply appropriate corrective action for technique, processing, and film handling errors.

Panoramic Radiography
*At the completion of the unit, the student will be able to:*
1. Set up the panoramic x-ray unit and load the film properly.
2. Identify the planes used to position the arches correctly within the focal trough.
3. Activate the exposure button on the panoramic x-ray unit.

Digital Radiography
*At the completion of this unit, the student will be able to:
1. Describe infection control protocols for digital equipment.
2. Assemble the sensors and sensor holders appropriately.
3. Describe proper care of the sensor.
4. Navigate the computer program used in digital radiography.
5. Demonstrate correct placement of the sensor and the alignment of the tube head.
6. Establish the correct settings for digital radiology.
8. Demonstrate the ability to produce and save an electronic image.

**Course Policies**

This course will involve lecture, laboratory and preclinical components. The laboratory component will entail various learning activities involving classroom lab stations as well as rotation into the radiology clinical area. All students not assigned to the radiology clinical area will report to the classroom for specific lab activities. Attendance is mandatory and roll will be taken in the lecture/lab classrooms and radiology clinical area. Please refer to the following manuals for policies and procedures pertaining to lecture/lab classrooms and radiology clinic:

- Ionizing Radiation Policy
- Exposure and Infection Control Plan
- Hazard Communication Standards
- Policies and Procedures for the Dental Assisting Student
- Dental Assisting Competencies

Dress code, cell phone and absence policy may be found in the Dental Assisting Policy and Procedure Manual.

Student are expected to follow Camden County College Code of Conduct found in the Student Handbook at:

*Lab coats, name tags and dosimetry badges are required to be worn while working in the Radiology/Clinic area.

**In accordance with the Department of Environmental Protection Bureau of Radiological Health, no person may either place or expose a dental radiograph on any individual, or make a radiographic exposure by pressing the exposure button in any dental setting except in the Camden County College dental area or approved Clinical Affiliate Site unless he/she is properly licensed in the State of New Jersey. A DANB certificate is not a New Jersey dental radiologic technology license and must not be used as such. Non-compliance will result in a formal report to the New Jersey Department of Environmental Protection, Bureau of X-Ray Compliance.**
Student attendance at all sessions is required. Each unexcused absence from class will result in a deduction of five (5) points from the student’s final grade. Three (3) late arrivals equal one unexcused absence. Three (3) unexcused absences will result in a final grade of “F” for the course.

Tests will be returned to the student for review, then collected and saved by the instructor.

Any proficiency activity scoring below 75% competency may result in an incomplete or failing course grade. The student will be given one opportunity to repeat the proficiency during a specific scheduled time, based on space-availability in the radiology area. The highest score attainable upon repeating proficiency is a score of 75%. If student is not successful on the second opportunity, a final course grade of “F” will be received, resulting in dismissal from the Dental Assisting Program.

Lecture/Lab assignments/homework not completed on due dates will result in a grade no higher than 75% for that assignment/homework.

In order to be eligible to schedule your testing date for the Radiology section of the Dental Assisting National Boards, each student must turn in their personal computer printout report showing scores of 85% or above on all sections of the final North Star Edmentum Computer Board Review Activity.

Compilation of Grades
Unit Tests 35%  A = 92 to 100
FMX Paralleling First Patient Proficiency 10%  B = 83 to 91
FMX Paralleling Second Patient Proficiency 10%
Panoramic Evaluation 2%  C = 75-82
Bisecting DXTTR Evaluation 2.5%  F = 74 and below
Paralleling DXTTR Evaluation 2.5%
Lab Homework/assignments 2.5%
Lecture Homework/assignments 2.5%
Final Exam 33%

Course Materials:

Textbook(s):

Required Textbook:

Required Reading:
Ionizing Radiation Hygiene Policy, Camden County College Dental Department

New Jersey Radiology Technology Act (NJAC 7:28-19)
http://www.state.nj.us/dep/rules/proposals/100107b.pdf
Supplemental Materials:


Camden County College Dental Department Procedure DVD’s (found on WebStudy)
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>9/6 Tuesday</td>
<td>9:00-10:00</td>
<td>Introduction to Lab Manual and Schedule (ALL- 18 students)</td>
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<td>10:15-11:30</td>
<td>Calibration of X-ray Machine, Prep for Exposing X-rays (Group A- 9 students)</td>
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<td>11:30-11:50</td>
<td>Sterilization/XCP Bagging Procedures</td>
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<tr>
<td>9/12 Monday</td>
<td>9:00-10:15</td>
<td>Calibration of X-ray Machine, Prep for Exposing X-rays Part I (Group B)</td>
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<td>10:30-11:50</td>
<td>Assemble XCP Instruments (Vertical + Horizontal BW, Anterior + Posterior PA (ALL)</td>
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<td>11:00-11:20</td>
<td>PID Angulation Exercise (Group A)</td>
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<td>11:20-11:40</td>
<td>PID Angulation Exercise (Group B)</td>
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<td>9/13 Tuesday</td>
<td>9:00-9:55</td>
<td>HW Assignment Lab Activity- Film Duplication, Fabricate Step Wedge + Coin Test (Group 1)</td>
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<td>9:55-10:50</td>
<td>Open Dark Room, Automatic Processing (Group 2)</td>
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<td>10:50-11:50</td>
<td>PERI PRO Daily Maintenance (Group 3)</td>
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<td>9/19 Monday</td>
<td>9:00-10:00</td>
<td>Documentation Lecture, Patient Med/Dental History (ALL)</td>
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<td>10:00-10:35</td>
<td>Prep for Exposing X-rays Part II (Group 1)</td>
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<td>10:35-11:10</td>
<td>Tray Set-up (Group 2)</td>
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<td>11:10-11:50</td>
<td>Practice BW Placement- Horizontal/Vertical, Digital/Film (Group 3)</td>
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<td>9/20 Tuesday</td>
<td>9:00-9:30</td>
<td>Demonstration</td>
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<td>Retakes and Breakdown</td>
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<td>9:30-11:50</td>
<td>Lab Activity- Practice Anterior PA Placement, NorthStar, X-ray mounting - RTC</td>
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<td>PANO (Group of 6)- AH</td>
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<td>9/26 Monday</td>
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<td>9/27 Tuesday</td>
<td>6 Anterior Radiograph Exposures - 3 Max Digital/3 Mandibular Film (6 students total)- MVH + GW</td>
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<td>9:00-9:30- Demonstration and BW Retakes</td>
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<td>10/3 Monday</td>
<td>6 Anterior Radiograph Exposures - 3 Max Digital/3 Mandibular Film (6 students total)- MVH + GW</td>
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<td>10/4 Tuesday</td>
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<td>10/10 Monday</td>
<td>8 Posterior Radiograph Exposures - Right side Digital/Left side Film (6 students total)- MVH + GW</td>
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<td>10/11 Tuesday</td>
<td>8 Posterior Radiograph Exposures - Right side Digital/Left side Film (6 students total)- MVH + GW</td>
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| 10/17 Monday | 8 Posterior Radiograph Exposures- Right side Digital/Left side Film (6 students total)- MVH + GW  
|            | 9:00-9:30- Demonstration and POST Retakes                                       |
|            | 9:30-10:00 (2 students)                                                        |
|            | 10:00-10:30 (2 students)                                                        |
|            | 10:30-11:00 (2 students)                                                        |
|            | 11:00-11:50 Retakes and Breakdown                                               |
|            | Lab Activity- NorthStar, X-ray mounting- RTC                                    |

| 10/18 Tuesday | 3 Occl X-ray Exposures- 2 Topographical Film/1 Cross-sectional Digital (9 students)- MVH, GW + AH  
|              | 9:00-9:30- Demonstration and POST Retakes                                       |
|              | 9:30-10:00 (2 students)                                                        |
|              | 10:00-10:30 (2 students)                                                        |
|              | 10:30-11:00 (2 students)                                                        |
|              | 11:00-11:50 Retakes and Breakdown                                               |
|              | Lab Activity- RTC                                                              |

| 10/24 Monday  | 3 Occlusal X-ray Exposures- 2 Topographical Film/1 Cross-sectional Digital (9 students)- MVH, GW + AH  
|              | 9:00-9:30- Demonstration and OCCL Retakes                                       |
|              | 9:30-10:00 (2 students)                                                        |
|              | 10:00-10:30 (2 students)                                                        |
|              | 10:30-11:00 (2 students)                                                        |
|              | 11:00-11:50 Retakes and Breakdown                                               |
|              | Lab Activity- RTC                                                              |

| 10/25 Tuesday | 5 Bisecting Rad. Exposures- 2 Posterior, 1 BW, 2 Anterior Digital (9 students)- MVH, GW + AH  
|              | 9:00-9:30- Demonstration and OCCL Retakes                                       |
|              | 9:30-10:00 (3 students)                                                         |
|              | 10:00-10:30 (3 students)                                                        |
|              | 10:30-11:00 (3 students)                                                        |
|              | 11:00-11:50 Retakes and Breakdown                                               |
|              | Lab Activity- RTC                                                              |

| 10/31 Monday  | 5 Bisecting Rad. Exposures- 2 Posterior, 1 BW, 2 Anterior Digital (9 students)- MVH, GW + AH  
|              | 9:00-9:30- Demonstration and OCCL Retakes                                       |
### November

#### 11/1 Tuesday
FMS Mock Proficiency - ½ Paralleling ½ Bisecting (6 students)- MVH, GW + AH  
9:00-10:00 (3 students)  
10:00-11:00 (3 students)  
11:00-11:50 Retakes and Breakdown  
Lab Activity- RTC

#### 11/7 Monday
FMS Mock Proficiency - ½ Paralleling ½ Bisecting (6 students)- MVH, GW + AH  
9:00-10:00 (3 students)  
10:00-11:00 (3 students)  
11:00-11:50 Retakes and Breakdown  
Lab Activity- RTC

#### 11/8 Tuesday
FMS Mock Proficiency - ½ Paralleling ½ Bisecting (6 students)- MVH, GW + AH  
9:00-10:00 (3 students)  
10:00-11:00 (3 students)  
11:00-11:50 Retakes and Breakdown  
Lab Activity- RTC

#### 11/14 Monday
FMS Mock Proficiency - ½ Paralleling ½ Bisecting- MVH, GW, + AH  
Retakes and Practice Placement, Prep for Patients  
Lab Activity- RTC

#### 11/15 Tuesday  **(Total 36 patients with 2 Scheduled Retake days = 5 weeks)**  
**PATIENTS- FMS Appointments- Staggered starts (5 students total)- MVH, GW + AH**  
9:00-10:20 (2 students)  
9:30-11:00 (1 student)  
10:30-11:50 (2 students)  
Workroom/Patient Room Turnover (3 students)  
Lab Activity- (10 students)- RTC

#### 11/21 Monday  
**PATIENTS- FMS Appointments- Staggered starts (5 students total)- MVH, GW + AH**  
9:00-10:20 (2 students)  
9:30-11:00 (1 student)  
10:30-11:50 (2 students)  
Workroom/Patient Room Turnover (3 students)  
Lab Activity- (10 students)- RTC
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<td><strong>12/14 Tuesday</strong></td>
<td><strong>PATIENTS- FMS Appointments- Staggered starts (5 students total)- MVH, GW + AH</strong></td>
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<td>9:00-10:20 (2 students)</td>
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<td>Lab Activity- (10 students)- RTC</td>
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<td>Lab Activity and Paperwork Completion</td>
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<td>ALL Students + ALL Instructors</td>
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<td><strong>12/20 Tuesday</strong></td>
<td><strong>PATIENTS- FMS Retake Day- Schedule Patients Accordingly</strong></td>
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Exhibit 2 – 3: Additional Equipment and Personnel Approved

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<tr>
<th>Quantity</th>
<th>Description</th>
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<tr>
<td>2</td>
<td>Intra Oral X-ray Machines (to replace 2 aging ones)</td>
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<td>4</td>
<td>Intra Oral Digital Sensors</td>
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<td>Adjunct Instructor</td>
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<td>Dentist</td>
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Appendix 2 – 4
Dental Department Minutes Revision Approval

MINUTES
DEPARTMENT OF DENTAL PROGRAMS
Department Meeting
Tuesday, January 19, 2016
Halpern Hall, Room 121

Present: Anna Marie Agresti, Judy Burns, Dawn Conley, Jean Corbi, Andrea Hudnall, Barbara Jacobs, Roxane Terranova, and Dr. Catherine Boos.

Dr. Boos called the meeting to order at 2:45 p.m.

Curriculum Revision Proposal: Dental Assisting
Roxane Terranova presented a curriculum revision for DAS.AAS. There are currently two social science courses in the curriculum. Since only one social science elective is required, it was recommended that we drop one social science elective. The number of credits would go from 63 to 60. After discussion, the proposal was unanimously approved.

Course Revision Proposal: Dental Assisting
CODA is requiring that students complete two patient experiences in radiology prior to sitting chairside in an affiliate office during Supervised Clinical Experience, DAS-160. The students must be supervised one-on-one by an employee of the College while they are taking the radiographs. They cannot be supervised by anyone in the affiliate office for this experience. Changes to DAS-120, Dental Radiology are necessary to meet this standard. Two patient experiences had to be added to this course. The program must not only meet CODA standards, but also standards mandated by the DEP which also regulates radiology courses. This presents multiple problems. After a lengthy discussion, department members voted unanimously to approve the proposal.

Quality Assurance
Changes were made to the Quality Assurance Assessment Plan. The three full time instructors each evaluated three patient charts, looking for appropriate treatment plan and procedures as well as accurate documentation. It was found that one patient was prescribed radiographs, but none were scheduled. The patient was contacted and radiographs were scheduled. In another chart, home care instructions that were given were not the ones treatment planned. The treatment plan was amended. Adjuncts will be given a copy of the form that is being used to evaluate the charts.

Assessment: Dental Hygiene
Dr. Boos reviewed the grades of those who failed DH III Clinic over the past 3 years. The common denominator between the students was that they all had a grade of C in DH II Clinic. It was decided to discuss this with adjuncts at our semester meeting on January 25 to come up with a plan that might help some students to do better.

Seminars for Seniors
Graduate surveys indicate that students are not familiar with some procedures performed by the dentist. Roxane Terranova and Andrea Hudnall will be offering seminars for seniors on endodontics and prosthodontics on 3/10 and 4/7.
CDCA Screenings
Patients for the CDCA exam can be screened at 12:30 and 2:30 in HAL-107D after February 25.

Equipment
Loading the new autoclave was discussed.

Dental Assisting Continuing Education
Dental assistants are now required to complete 2 CEU’s in infection control each renewal period in order to maintain their CDA credentials.

The meeting was adjourned at 3:00 p.m.

Respectfully submitted,
Dawn Conley
**Math, Science & Health Careers**  
**Chairs & Coordinators Minutes**  
**Tuesday, February 9, 2016**  
**Halpern 120**  
**3:30 PM**

**Present:** Robynn Anwar, Dan Banks, Cathy Boos, Audrey Brooks, Rita Connolly, Joe Diaco, Nick DiCicco, Peggy Dorsey, Betty Joynes, Leonard Khazan, Linda Mesko, Marsha Patrick, Susan Reilley, Fatemah Sedighi, Teresa Smith, Sandi Tannen, Roxane Terranova

**Absent:** David Pilla

<table>
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<tr>
<th>Agenda Item</th>
<th>Discussion</th>
<th>Action</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>1. Approval of December minutes</td>
<td>The minutes were approved and seconded.</td>
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<tr>
<td>2. Curriculum</td>
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<tr>
<td>a. OPH-270, Ophthalmic Dispensing Office Procedures – course revision</td>
<td>The revision was made to update the master syllabus, course outline, and course student learning outcomes.</td>
<td>The motion to approve the course revision was passed and will be sent to Academic Affairs.</td>
<td>Lee Ann Havey to prepare for Academic Affairs.</td>
</tr>
<tr>
<td>b. DAS-120, Dental Radiology-course revision</td>
<td>The course will now include the requirement that students complete two full-mouth surveys of dental radiographs on campus under faculty supervision before taking Supervised Dental Assisting, DAS-160.</td>
<td>The motion to approve the course revision was passed and will be sent to Academic Affairs.</td>
<td>Lee Ann Havey to prepare for Academic Affairs.</td>
</tr>
<tr>
<td>c. DAS.AAS, Dental Assisting Associate in Applied Science- revised curriculum proposal</td>
<td>The revision will decrease the number of credits in order to reduce barriers to completing the applied science degree in dental assisting, DAS.AAS.</td>
<td>The motion to approve the curriculum revision was passed and will be sent to curriculum.</td>
<td>Hold for curriculum.</td>
</tr>
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</table>
REVISED COURSE PROPOSAL
(Attach a Department Master Syllabus)

Course Title: Dental Radiology
Course Number: DAS-120
Department/Program Affiliation: Dental / Dental Assisting
Credits: 4
Contact Hours: Lecture 30 hours
Lab 90 hours
Other

Sponsored By:

I. Explain the nature of this revision.

The course will now include the requirement that students complete two (2) full-mouth surveys of dental radiographs on campus under faculty supervision before taking Supervised Clinical Dental Assisting, DAS-160.

II. Explain the rationale for the change.

The Commission on Dental Accreditation (CODA) recommended during their site visit in November of 2015 that the program demonstrate and provide documentation that the student is being supervised by a college instructor while completing proficiencies on patients prior to their clinical experience (Standard 2-17).

Standard 2-17 for Education Programs states: prior to exposing dental images during extramural clinical assignments, students must demonstrate competence, under faculty supervision, in exposing diagnostically acceptable full-mouth dental image survey on a minimum of two patients in the program.

<table>
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<tr>
<th>Department/Program Approval</th>
<th>DATE: 1/1/13</th>
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<tbody>
<tr>
<td>Division Chairs/Coordinators Approval</td>
<td>DATE: 4/1/13</td>
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Appendix 3-1
DENTAL HYGIENE INCOMING CHECKLIST

1. A tentative date of Wednesday, August 19, 2015, 7 p.m., has been scheduled for program orientation. Please make arrangements to attend.

2. Students who have graduated from Camden County College Dental Assisting Program within the last 5 years and received an A in Dental Lab Procedures and Medical Emergencies in the Dental Office are eligible to challenge those courses. On Wednesday, May 20, the exams will be given.

The fee for each test is $40. Dr. Boos will give you the appropriate paperwork which must be completed prior to taking the test. Please let Dr. Boos know which tests you plan to take before Friday, May 1, so the proper paperwork can be processed promptly.

3. Prior to the start of the fall semester, you must be currently certified in Basic Life Support. This course is now part of the curriculum, so you must take this course for college credit. It is offered this summer at Camden County College as HPE-181, American Heart Association, Basic Life Support for Healthcare Providers, Course “C”. You may take this course at another college or facility, but it must be transferable. Bring documentation to orientation that proves you have successfully completed this course.

To get credit for an American Heart Association Basic Life Support Course “C” that you took from an organization outside of a college: Obtain a Credit by Assessment Form from the testing center on the second floor of the library in Blackwood and bring it to Dr. DiCicco in the gymnasium. If he is not here leave it in his mailbox and pick it up two days later. He will leave the instructions on the form. After he signs it you have to take it to the business office and pay a fee ($40), then take it to SCI-106 and have the dean sign it. Then take it back to Dr. DiCicco along with a photocopy of your certification card.

4. If you have taken courses at another college, make sure those courses have been transferred via official college transcript to Camden County College BEFORE SEPTEMBER. It is your responsibility to make sure your transcript is in order with appropriate courses and credits.

5. If you are eligible for financial aid, contact the Financial Aid Office in Wilson Center (ext. 4462). Please be aware that to be considered a full-time student you must carry 12 credits.

6. OSHA requires immunization against Hepatitis B for all students who may be occupationally exposed to potentially infectious materials. Check your health insurance to see if you have coverage. You must also be tested for tuberculosis exposure.

It is also required that all students be immunized against measles, rubella, tetanus, polio and influenza, if not already immune. You will be required to show documentation of immunization at orientation.

If you are unable to be immunized for religious or medical reasons, appropriate supporting documentation will be required.
9. Return Medical Clearance and Vision Screening forms at orientation.

10. You will need extracted teeth for Dental Anatomy. They should not be filled with amalgam (silver fillings) or have crowns. Please ask a dentist to save them for you in a solution of household bleach diluted 1:10 with tap water. (The teeth should first be cleaned of adherent patient material by scrubbing with detergent and water or by using an ultrasonic cleaner.) After the dentist gives you the teeth, the Dental Department will provide a letter to the dentist verifying that the College will store and dispose of the teeth according to OSHA Guidelines and the EPA's Standard of Tracking and Management of Medical Waste. These teeth should be in relatively good condition and of various types, e.g., centrals, laterals, canines, premolars and molars. You will be told when your teeth will be needed during your first Dental Anatomy class.

11. The cost of the instrument kit is as of yet undetermined, but may be as much as $1,500. You will receive a list of supplies at orientation to be ordered in August from specific companies. You must bring these supplies to class the first week of school.


13. You have been emailed a copy of the department's current Hazard Communication Standard, Radiation Safety, Written Exposure and Infection Control Manual, Policies and Procedures Manual, program competencies and program goals and objectives. These documents must be read before orientation. You will be required to sign (to be turned in at orientation) indicating that you have read and understand this information. Any questions regarding this information should be directed to Dr. Boos.

14. Some of your classes will be using TurningPoint Technology. You will need to purchase a response card (“clicker”) from the book store. You may also purchase a used response card from a former student. Then you must register your “clicker” before the first class. Instructions for registration:

   1. Go to the website student.turningtechnologies.com
   2. Enter your ResponseCard ID (found on back of unit)
   3. Enter your first name and last name in the appropriate fields
   4. "Other Field" may be used to request the student to submit student ID or any other information you wish them to include to identify them in your class
   5. Complete security entry
   6. Press Next
   7. Enter instructor's email address (ex. cboos@camdencc.edu)
   8. Select class(es) name that you are in for this instructor and add it to the list on the right
   9. Click Next and confirm information. You may click Back if you find information you need to correct.
15. If you need to take courses outside of the hygiene department, schedule them at least one hour after the end of your hygiene class. Hygiene classes sometimes run late, and you are required to stay until the end.

16. Check the College catalog to make sure you are aware of what non-hygiene courses you need that are part of the hygiene curriculum. These courses must be taken before or during the semester indicated in the catalog.

17. Since many courses in the DH curriculum incorporate computer activities, it is required that the student have Internet access and a basic understanding of computer usage and Internet navigation.

18. You are required to be available between the hours of 8 AM and 5 PM Monday through Friday whether you have class or not. You will be a patient for your senior partner in Plaque Control and Nutritional counseling and must be ready to sit for your partner, sometimes with short notice.

19. You are responsible for recruiting a variety of patients to fulfill your clinic requirements in DH II, III and IV Clinics. This includes children, adolescents, adults, and geriatric patients as well as patients with medical conditions and special needs.

20. Please be aware that when you successfully complete the dental hygiene program, you must pass national and regional licensing exams in order to practice. You must also have a criminal background check and be finger printed to practice in the state of New Jersey.

21. To access Web Advisor, see instructions:
   http://www.camdencc.edu/registration/WebAdvisorInformation.cfm

22. To access your student email, see instructions:
   http://www.camdencc.edu/oit/Student-Email.cfm

23. If you have ANY PROBLEMS WHATSOEVER, please contact the dental department IMMEDIATELY at 856-227-7200, extension 4472 (secretary) or 4490 (Dr. Boos).

24. Classes that you must register for:
   
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Appendix 3-2
Example of a Daily Requirement Needs List

**REQUIREMENT NEEDS- DH III/ DH IV**

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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
</tbody>
</table>

Date: 11/30/15

Row Needs: 10/17/13
Appendix 3-3
Example of Chart Review Sign in sheet

Chart Review
12-4-15

<table>
<thead>
<tr>
<th>Student</th>
<th>Patient(s)</th>
<th>Time Out</th>
<th>Time In</th>
<th>Location Returned</th>
</tr>
</thead>
<tbody>
<tr>
<td>X X X X</td>
<td></td>
<td>10:00</td>
<td>10:05</td>
<td>Chart Review</td>
</tr>
<tr>
<td>X X X X</td>
<td></td>
<td>10:00</td>
<td>10:00</td>
<td>AM_BN</td>
</tr>
<tr>
<td>X X X X</td>
<td></td>
<td>10:00</td>
<td>10:00</td>
<td>PM_BN</td>
</tr>
</tbody>
</table>

Clinic Forms/Reception/Chart Review
## Appendix 3-4

### Chart Review Statistics

A student could review charts to pick patients from our applicant pool and/or prepare for their patient visits 21 possible times between September 3 and November 18, 2015. Below is the number of times students took advantage of this opportunity:

<table>
<thead>
<tr>
<th>Student</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student 1</td>
<td>4</td>
</tr>
<tr>
<td>*Student 2</td>
<td>6</td>
</tr>
<tr>
<td>*Student 3</td>
<td>0</td>
</tr>
<tr>
<td>Student 4</td>
<td>1</td>
</tr>
<tr>
<td>Student 5</td>
<td>8</td>
</tr>
<tr>
<td>Student 6</td>
<td>5</td>
</tr>
<tr>
<td>Student 7</td>
<td>4</td>
</tr>
<tr>
<td>Student 8</td>
<td>4</td>
</tr>
<tr>
<td>Student 9</td>
<td>8</td>
</tr>
<tr>
<td>Student 10</td>
<td>7</td>
</tr>
<tr>
<td>*Student 11</td>
<td>0</td>
</tr>
<tr>
<td>Student 12</td>
<td>7</td>
</tr>
<tr>
<td>Student 13</td>
<td>4</td>
</tr>
<tr>
<td>Student 14</td>
<td>6</td>
</tr>
<tr>
<td>Student 15</td>
<td>9</td>
</tr>
<tr>
<td>*Student 16</td>
<td>1</td>
</tr>
<tr>
<td>Student 17</td>
<td>6</td>
</tr>
<tr>
<td>Student 18</td>
<td>3</td>
</tr>
<tr>
<td>*Student 19</td>
<td>0</td>
</tr>
<tr>
<td>Student 20</td>
<td>3</td>
</tr>
<tr>
<td>Student 21</td>
<td>2</td>
</tr>
<tr>
<td>Student 22</td>
<td>1</td>
</tr>
<tr>
<td>Student 23</td>
<td>10</td>
</tr>
<tr>
<td>Student 24</td>
<td>3</td>
</tr>
</tbody>
</table>

**Average: 4.4**

*Students who are repeating clinic courses, either DH III or DH IV.*
## Appendix 3-5: Example of Proficiency Sign-In Sheet

### PROFICIENCY SIGN IN - TIME FLOW CHART

<table>
<thead>
<tr>
<th>Unit</th>
<th>Student</th>
<th>Proficiency (you are ready for)</th>
<th>Instructor(s) Needed</th>
<th>Time Ready</th>
<th>Instructor Initials</th>
<th>Instructor Time In</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td></td>
<td>G 1/2</td>
<td></td>
<td>1:12</td>
<td></td>
<td>1:20</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>Some</td>
<td></td>
<td>1:23</td>
<td></td>
<td>1:24</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>Cav.</td>
<td></td>
<td>1:24</td>
<td></td>
<td>1:25</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td>G 7/8</td>
<td></td>
<td>1:30</td>
<td></td>
<td>1:44</td>
</tr>
<tr>
<td>21</td>
<td></td>
<td>85K</td>
<td></td>
<td>1:38</td>
<td></td>
<td>1:43</td>
</tr>
<tr>
<td>6</td>
<td>REDACTED</td>
<td>Explorer</td>
<td></td>
<td>1:39</td>
<td></td>
<td>2:09</td>
</tr>
<tr>
<td>14</td>
<td>REDACTED</td>
<td>FL</td>
<td></td>
<td>2:17</td>
<td></td>
<td>2:17</td>
</tr>
<tr>
<td>5</td>
<td>REDACTED</td>
<td>Bacterial</td>
<td></td>
<td>2:27</td>
<td></td>
<td>2:29</td>
</tr>
<tr>
<td>12</td>
<td>REDACTED</td>
<td>Pen Chart</td>
<td></td>
<td>2:45</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>REDACTED</td>
<td>Ultraceare</td>
<td></td>
<td>2:57</td>
<td></td>
<td>3:00</td>
</tr>
<tr>
<td>11</td>
<td>REDACTED</td>
<td>FL Varnish</td>
<td></td>
<td>3:00</td>
<td></td>
<td>3:04</td>
</tr>
<tr>
<td>17</td>
<td>REDACTED</td>
<td>ST</td>
<td></td>
<td>3:10</td>
<td></td>
<td>3:10</td>
</tr>
<tr>
<td>14</td>
<td>REDACTED</td>
<td>Arestin</td>
<td></td>
<td>3:15</td>
<td></td>
<td>3:18</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>FL trays</td>
<td></td>
<td>3:21</td>
<td></td>
<td>3:30</td>
</tr>
</tbody>
</table>
Appendix 3-6

SPECIAL SCHEDULING FORM

Student_______________________________  Date______________________

Type of Scheduling Change Requested
(Please circle one)

_radiology Post Rotation  Clinic double booking  Clinic Transfer  Other

Date of proposed schedule change_______________  Clinic session involved  AM  PM

Rationale for request:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Faculty/Administrators affected by request:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Other factors involved:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Signatures of those involved in schedule change:  _________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Approved by:______________________________
d. Within two weeks of being placed on clinical probation, the student will receive a written notification of clinical status.

5. Academic Dismissal

A student having any of the following academic deficiencies will be dismissed from the Dental Hygiene Program:

a. Grade below "C" in any first semester didactic or first year pre-clinic or clinical course.
b. An average in hygiene courses below 2.0.
c. Failure to remove academic probationary status in the following semester.
d. Receipt of a second clinical probationary status.
e. Failure in two Dental Hygiene courses.
f. Failure to maintain academic standards in any semester following:
   1) Readmission.
   2) Repeating of a hygiene course.
   3) Returning from an academic LOA.

6. Readmission Following an Academic Dismissal

a. The student must reapply to the program following the standard admissions process. The application for the fall semester must be received in the Office of Records and Registration no later than February 1.

b. If a student's cumulative GPA is below 3.0, the student must retake a sufficient number of courses to bring the GPA to a 3.0.

c. The Admissions Committee will review all completed applications and notify the student of its decision.

d. Students who do not meet the academic standards following readmission will be dismissed from the program and will not be eligible for readmission.

e. Upon readmission, the student will be placed in the hygiene course that he/she did not successfully complete, providing clinical placement is available. Note that before readmission, the student may be required to audit an appropriate course in order to reinforce skills.

7. Withdrawal

a. A withdrawal from a course that is part of the dental hygiene curriculum constitutes a withdrawal from the hygiene program.

b. A student may withdraw from the hygiene program because of illness, academic reasons, or special circumstances.

c. If a student withdraws before the College’s designated withdrawal date, a "W" will appear on the transcript. If a student withdraws after that time, a grade will be assigned and will appear on the transcript.
<table>
<thead>
<tr>
<th>Today's Date</th>
<th>Today's Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient</td>
<td>Patient</td>
</tr>
<tr>
<td>Phone</td>
<td>Last visit</td>
</tr>
<tr>
<td>Rating</td>
<td>DFS</td>
</tr>
<tr>
<td>Times available:</td>
<td>Times available:</td>
</tr>
<tr>
<td>Comments RAD SCR RC PEDO-AGE</td>
<td>Comments RAD SCR RC PEDO-AGE</td>
</tr>
<tr>
<td>Date Called</td>
<td>Stud</td>
</tr>
<tr>
<td></td>
<td>Outcome</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Today's Date</th>
<th>Today's Date</th>
</tr>
</thead>
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<tr>
<td>Patient</td>
<td>Patient</td>
</tr>
<tr>
<td>Phone</td>
<td>Last visit</td>
</tr>
<tr>
<td>Rating</td>
<td>DFS</td>
</tr>
<tr>
<td>Times available:</td>
<td>Times available:</td>
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<tr>
<td>Comments RAD SCR RC PEDO-AGE</td>
<td>Comments RAD SCR RC PEDO-AGE</td>
</tr>
<tr>
<td>Date Called</td>
<td>Stud</td>
</tr>
<tr>
<td></td>
<td>Outcome</td>
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</tbody>
</table>

<table>
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<tr>
<th>Today's Date</th>
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<td>Patient</td>
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<tr>
<td>Phone</td>
<td>Last visit</td>
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<td>DFS</td>
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<tr>
<td>Times available:</td>
<td>Times available:</td>
</tr>
<tr>
<td>Comments RAD SCR RC PEDO-AGE</td>
<td>Comments RAD SCR RC PEDO-AGE</td>
</tr>
<tr>
<td>Date Called</td>
<td>Stud</td>
</tr>
<tr>
<td></td>
<td>Outcome</td>
</tr>
</tbody>
</table>
PATIENT'S BILL OF RIGHTS

You have the right to:

1. Expect ethical, considerate and respectful treatment that meets the standard of care in the profession. This takes place in a clean, safe and smoke-free environment without discrimination as to race, color, religion, sex, national origin, disability, or sexual orientation.

2. Obtain complete and current information concerning diagnosis, treatment, and prognosis in terms you can understand.

3. Receive information necessary to give informed consent prior to the start of any procedure and/or treatment. This information shall include possible risks and benefits of the procedure or treatment.

4. Review your record and participate in all decisions about your treatment.

5. Refuse treatment to the extent permitted by law and to be informed of the consequences of your decision.


7. Privacy concerning your dental care program. Case discussion, consultation, examination, and treatment will be conducted discreetly.

8. Expect that all communications and records pertaining to your care will be treated as confidential.

9. Know the names, positions, and functions of all dental hygiene instructors, staff, and students in the dental hygiene clinic who are involved in your care.

DENTAL HYGIENE CLINIC
at Camden County College
P.O.Box 200
Blackwood NJ 08012
Phone: (856) 374-4930 Fax: (856) 374-5048

DENTAL HYGIENE CLINIC HOURS

Fall Semester – September to December
Mondays  9 am to 12 noon  1 pm to 4 pm
Tuesday  no morning hours 12:30 pm to 3:30 pm
Wednesdays 9 am to 12 noon  1 pm to 4 pm

Spring Semester - January and February
Mondays  9 am to 12 noon  1 pm to 4 pm
Wednesdays 9 am to 12 noon  1 pm to 4 pm

Spring Semester - March through May
Mondays  9 am to 12 noon  1 pm to 4 pm
Tuesdays  no morning hours 12:30 pm to 3:30 pm
Wednesdays 9 am to 12 noon  1 pm to 4 pm
Thursdays  8:30 am to 11:30 am  12:30 pm to 3:30 pm

Revised 08/06/13
**CLINIC FEES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration Fee/Screening</td>
<td>$2.00</td>
</tr>
<tr>
<td>Preventive Services</td>
<td>$5.00</td>
</tr>
<tr>
<td>which may include:  Scaling, quadrant scaling, root planing, ultrasonic scaling (cavitron), polishing, prophyl jet, amalgam polishing, fluoride treatment, sulcular irrigation, periodontal screening, periodontal charting.</td>
<td></td>
</tr>
<tr>
<td>Bitewing Radiographs</td>
<td>$2.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Full Mouth Radiographs</td>
<td>$5.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Panoramic Radiograph</td>
<td>$5.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Radiograph of Individual Tooth</td>
<td>$1.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Radiograph Duplication</td>
<td>$5.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Sealants (per tooth)</td>
<td>$2.00</td>
</tr>
<tr>
<td>With prescription from dentist</td>
<td></td>
</tr>
<tr>
<td>Tobacco Cessation Program</td>
<td>No Charge</td>
</tr>
<tr>
<td>Plaque Control Program</td>
<td>$5.00</td>
</tr>
<tr>
<td>Nutritional Counseling</td>
<td>No Charge</td>
</tr>
<tr>
<td>Athletic Mouthguard</td>
<td>$5.00</td>
</tr>
</tbody>
</table>

The **patient** is expected to pay at the time of service. We accept **cash only – no check or credit cards.**

**Camden County College follows the highest standards of infection control. Our policy on infection control in the dental clinic is available upon request.**

---

**CLINIC INFORMATION/PATIENT RESPONSIBILITIES**

**Appointments:** Camden County College operates a dental hygiene clinic on the Blackwood campus in Halpern Hall, 1st floor, Room 107. Appointments can be made by calling the reception desk at 856 374-4930 during regular clinic hours or by leaving a message on the voice mail system at any other time. The fax number is 856 374-5048.

As with any teaching institution, individual services require more time than a private setting. Appointments for oral prophylaxis are for three hours and patients may require more than one appointment. Your student hygienist must have each procedure evaluated by an instructor. Therefore, you must expect to wait during the procedure.

**Screening (New Patients):** Before being accepted as a patient, an individual must be screened by our staff dentist. At the screening appointment, the patient will fill out a medical/dental history form, have vital signs taken, and complete an oral exam. Those individuals accepted as patients may make an appointment for treatment at this time. Patients who do not keep their screening appointments will not be rescheduled.

**Patients of Record:** Patients who have previously been seen in the clinic may be scheduled for a cleaning appointment without having to repeat the screening process.

**Late or Broken Appointments:** It is essential for the patient to respect the student’s commitment to education and patient care, therefore, we require 48 hours notice for a cancellation. It will be considered a broken appointment if proper notice is not given. If two broken appointments occur, the patient will be dismissed from the clinic. If a patient is more than 15 minutes late for an appointment, the student will treat another patient.

**Rules Regarding Minors:** Adult patients being treated should not bring young children. We have no facilities for babysitting and cannot assume responsibility for unattended children. The parent/guardian must remain in the waiting area outside room 107 Halpern Hall while the patient is treated.

**School Closing Number** is 559. Listen to KYW News radio 1060.

**Parking:** Patients may park in white lined spaces only. Halpern Hall is handicap accessible, including special parking areas, and a ramp. Parking tickets are issued for any infractions of the rules.
PROGRESS REPORT FOR CLINICAL REQUIREMENTS

Appendix 3-10: Forms for Assessing Student Progress

Clinic Rotation 1 2 3 4 MT Final

Student __________________________ Date Prepared ______________________

Color Code Key: #2 Pencil = patient scheduled; Red pencil = patient started/incomplete; Black ink = patient completed

<table>
<thead>
<tr>
<th>CASE TYPE I/II</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grade</td>
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</tr>
<tr>
<td>Level 3</td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CASE TYPE III/IV</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients Completed to Date</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients Started/Incomplete</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients Scheduled</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Patient Types Needed</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Number of patient clinic sessions remaining:

Number of patient clinic sessions needed:

Buffer sessions (+ or – and #):

**After completing the above charts, complete the following on the back of this form:
1. List the adjunctive requirements left to complete.
2. List plan of action for scheduling or strategies for completing those requirements.

Date reviewed: ___________ Instructor Signature: ________________________________
SELF-EVALUATION FORM

Student ____________________________
Instructor ____________________________
Date Received _________________________

Complete summary of clinical rotation to date by addressing the following information:

1. What strategies or sequences assist you in maintaining your strengths in clinic?

2. What strategies or solutions assist you in improving your clinical skills needing improvement?

3. State ways to improve self preparation for clinic in order to achieve future requirements.
<table>
<thead>
<tr>
<th>Date:</th>
<th>Patient:</th>
<th>CT/Level:</th>
<th>Instructor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>Patient:</td>
<td>CT/Level:</td>
<td>Instructor:</td>
</tr>
<tr>
<td>Date:</td>
<td>Patient:</td>
<td>CT/Level:</td>
<td>Instructor:</td>
</tr>
<tr>
<td>Date:</td>
<td>Patient:</td>
<td>CT/Level:</td>
<td>Instructor:</td>
</tr>
<tr>
<td>Date:</td>
<td>Patient:</td>
<td>CT/Level:</td>
<td>Instructor:</td>
</tr>
</tbody>
</table>

**STRENGTHS**
Identify strengths with strategies and/or sequences used in the following areas:

1. Check in (Patient assessment, time management, data collection and treatment plan, etc…)

<table>
<thead>
<tr>
<th>Need Improvement</th>
</tr>
</thead>
</table>
| Identify any need improvement areas with strategies used and possible solutions in the following categories:

2. Treatment rendered: (Scaling, polishing, detection, supra/sub areas, adjunctive treatment, etc..)

3. Patient communication: (Initial rapport, plaque control, patient motivation, etc…)

4. Documentation: (Forms, services rendered, progress notes, informed consent etc…)
CAMDEN COUNTY COLLEGE
Department of Dental Hygiene

Remediation Action Form

Student's Name ___________________________ Date Prepared _________________________

1. I have earned three procedure scores of 2 or below. (List category and specific NI areas from grade sheets.)

<table>
<thead>
<tr>
<th>Category/Procedure Score</th>
<th>Need Improvement Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>4.</td>
</tr>
<tr>
<td>2.</td>
<td>5.</td>
</tr>
<tr>
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2. List at least 2 solutions for each need improvement area. (Be specific - list steps to enhance skills and strategies tried.)

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3. Date reviewed ___________________________ Instructor ___________________________

4. Outcome/Comments:

Note: Enter remediations on Progress Report forms

69
**Exhibit 4-1: Monitoring Mechanism to track student clinical experiences in all patient care categories**

**CLINIC DAY SHEET**  
Department of Dental Hygiene

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Appendix 4-2: Requirement Sheets
REQUIREMENTS FOR DENTAL HYGIENE II CLINIC

Student:_________________________________________          Semester: SPRING 2016                    Requirements Met:  Yes_______  No______

A. Patient Requirements:

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*minimum 1 pt. 10-19 years old

B. Adjunctive Requirements:

1. Medical/Dental History Screenings (3)
   ______________,  ______________,  ______________

2. Proficiency Evaluations (7)
   Anterior Scaler,  Posterior Scaler,  Polishing,  Probe
   ______________,  ______________,  ______________
   Explorer 11/12,  Univ. Curet,  Anterior Gracey

3. Journal/Self Evaluation (3)
   ______________,  ______________,  ______________
   3/27/14,  4/24/14,  Rad

4. Radiology
   Digital Dxttr Act.,  FMX,  FMX,  BWX
   ______________,  ______________,  ______________
   Pan,  Coin test,  StepWedge,  Duplicating,  Rad analysis

5. Blood Pressures (3)
   ______________,  ______________,  ______________
   Feb/March,  March/April,  April /May

6. Fluorides (6)
   ______________,  ______________,  ______________
   Pedo (tray),  Pedo(tray),  Pedo(varnish)
   ______________,  ______________,  ______________
   Adult,  Adult,  Adult (Rinse)

7. Rotation and Clinic Observations (4)
   DH 4 Clinic,  Radiology,  Reception,  Sterilization

8. Sterilization (7)
   Ultrasonic Degas,  Statim,  Tuttnauer,  Validator
   ______________,  ______________,  ______________
   Set-up Unit,  Breakdown Unit,  Inventory

PROFICIENCIES NEEDING IMPROVEMENT

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**Minimum of 1 patient must be a Case Type IV in either level 2 or 3**

*Minimum of 1 pt. must be 10-19 years old

### ADJUNCTIVE REQUIREMENTS:

1. **Medical/Dental History: Patient Screenings:** (5)
   - ____________, ____________, ____________
   - ____________, ____________, ____________

2. **Proficiency Evaluations:** (8) Due by 10/29/14
   - Probe’, Explorer 11/12’, Polishing’, Univ Curet
   - Gracey 1/2’, Gracey 7/8’, Gracey 11/12’, Gracey 13/14

3. **CDCA:** (2)
   - ____________, ____________, ____________, ____________
   - Quiz’, Patient (FT)

4. **Blood Pressure:** (3)
   - ____________, ____________, ____________, ____________
   - Sept., Oct., Nov.

5. **Velscope:** (1) Due by dates assigned – see schedule
   - ____________

6. **Fluoride Treatments:** (7)
   - Pedo’, Pedo’, Varnish (Desens)’, Adult
   - Adult’, Adult (DBL-Tray)’, Adult (Rinse)

7. **PSR:** (5)
   - ____________, ____________, ____________, ____________, ____________

8. **Impressions/Athletic Mouthguard:** (4) Follow Lab (L) schedule
   - SM Imp Max./Man.‘, Bases/Trim’, Bleaching Trim’, Ath MG

9. **Periodontal Charting** (2) See schedule
   - ORA - Perio’, Full Mouth’, Case Hx.

10. **Computer Charting** (4) Follow dates below
    - ____________, ____________, ____________, ____________

11. **Intraoral Camera:** (2)
    - ____________, ____________, ____________, ____________
    - Pt. Ed’, Other

12. **Sharpening** (2) Lab
    - ____________, ____________, ____________, ____________
    - Moving Stone’, Side Kick
<table>
<thead>
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<th>Step</th>
<th>Task Description</th>
<th>Quantity</th>
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<tr>
<td>12.</td>
<td>Plaque Control: (2)</td>
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<td>V.1 DC/ORA - Perio / Case Summary / Date of prophy / Chairside Pt. Ed.</td>
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<td>Power Scalers: (5)</td>
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<td>URQ / LRQ / ULQ / LLQ</td>
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<td>Tobacco Cessation Program: (1)*</td>
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<td>Ck-in-OCRA / I/O Camera / Velscope / Chairside Ed. / Follow-up/Case Hx</td>
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<td>Radiology Rotation: (12) Begins Friday am, prior to X rotation</td>
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<td>BWX / PAN / Level 3 FMX / FMX</td>
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<td>FMX / FMX / FMX(Digital) / Duplicating</td>
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<td>DXTTR Digital Act / Maint. (Fri am) / Coin Test/Step Wedge / Rad. Analysis</td>
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<td>Nutritional Counseling: (1)</td>
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<td>Computer Program Training: (1) Friday 10am, prior to R rotation</td>
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<td>Practice Web</td>
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<td>21.</td>
<td>Journal &amp; Self Eval: (3)</td>
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<td>10/7/16 / 11/13/16 / Rad Rotation</td>
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<tr>
<td>22.</td>
<td>Sulcular Antibiotic Therapy: (3) Placement + (1) Follow-up)*</td>
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<td></td>
<td>Placement / Placement / Placement / Follow-up</td>
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<td>23.</td>
<td>Sterilization Rotation: (10) Begins Friday am, prior to S rotation</td>
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<td>Spore Testing / Autoclave Maint. - #___</td>
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<td></td>
<td>Statim / Tuttnauer / Immersion Sol / Ultrasonic Maint</td>
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<tr>
<td></td>
<td>Set-up Unit / Breakdown Unit / Inventory / Unit Maint-#___</td>
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* Tobacco Cessation and Arestin Placement may be performed in DH III or DH IV Clinic
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<tr>
<th>PROFICIENCIES NEEDING IMPROVEMENT</th>
<th>ADDITIONAL PROCEDURES</th>
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<td>Date</td>
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Appendix 5-1

Quality Assurance Plan

Goals of the Camden County College Dental Hygiene Clinic Quality Assurance Program:

1. To ensure that the treatment delivered at the Camden County College Dental Hygiene Clinic is patient centered and focused on quality comprehensive care.
2. To provide continuity of total treatment using written and measurable criteria.
3. To provide a mechanism for reviewing clinical deficiencies and identifying corrective measures.

The students and staff of the Dental Hygiene Clinic at Camden County College are committed to providing the highest standard of care for our patients within the scope of dental hygiene practice as established by the New Jersey State Board of Dentistry. To insure that this standard is met, the following protocol will be followed:

1. For new patients, the clinic dentist and a student will complete screening process. *(See Screening Grade Sheet.)*

2. All new patients will be given a clinic brochure that explains fees, scope of services, and Patient’s Bill of Rights. The student who is providing the screening services will explain the contents of the brochure and document under services rendered.

3. Patient will complete a health history form, the General Oral Health Risk Assessment form and sign the consent indicating that he/she understands that the scope of services is limited. The screening student and dentist will also sign.

4. A treatment plan will be developed after data is collected. This treatment plan will include information regarding number of visits, instruments to be used, homecare instructions, maintenance interval, adjunctive therapy needed (including but not limited to fluoride treatment and polishing), and x-rays (if indicated). **The treatment plan will always include a referral back to a dentist.** If the patient does not have a dentist of record, he/she will be given a list of local dental clinics.

5. As part of informed consent, the treatment plan will be explained to the patient in terms he/she can understand. The patient will then accept, reject or choose an alternative treatment, if indicated. The patient will sign the treatment plan after the student explains it. The instructor, student and dentist will also sign.

6. If the patient has areas of concern that the student would like to bring to the attention of the patient’s dentist of record, a referral letter can be obtained from the clinic dentist. The student will fill out the form under the supervision of the dentist. The need for further treatment will be explained to the patient and documented on services rendered.

7. When treatment is complete, the student will send a postcard to the patient’s dentist of record to indicate that he/she has been seen in our clinic and referred back to the DDS. The student will
also complete a recall card. This process is checked by the clinic secretary for each patient. *See Reception Grade Sheet.*

8. At the recall visit, compliance with previously recommended referral to a dentist will be confirmed by the student and instructor.

9. The clinic scheduling manager will review the charts of each patient seen that day for status of treatment, appropriate signatures, documentation regarding distribution of clinic brochure and dentist referral, completion of recall card and DDS postcard at completion of treatment. Findings will be reported, and deficiencies and plans for remediation will be discussed at the monthly staff meetings.

10. Once a month, a *Quality Assurance Report* will be completed by the dental director on all student clinic grades completed that month. On an Excel spreadsheet, the dental director will record every grade that is a “2” or below (below average) in each of the grading categories (see clinic grade sheet). Findings will be reported, and deficiencies and plans for remediation will be discussed at the monthly staff meetings.

11. Each full time faculty member will be responsible for reviewing clinical services of 3 arbitrarily chosen patient charts per month. The charts are for patients that the instructor has not seen. The paperwork will be collected and tallied by the Dental Director, who will present this as part of the *Quality Assurance Report* at monthly department meetings. Findings will be reported, and deficiencies and plans for remediation will be discussed at the monthly staff meetings.

12. Surveys regarding our services will be distributed to randomly selected patients. The director of dental programs will tally the results. Results will be discussed at end of semester clinic meetings.
## Appendix 5-2: Example of Quality Assurance Report

**QUALITY ASSURANCE 2015-2016**

**Month: November**

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| Total | 110 | 6 | 27 | 17 | 6 | 12 | 11 | 8 | 26 | 7 | 9 |

| 5.45% | 24.55% | 15.45% | 5.45% | 10.91% | 10.00% | 7.27% | 23.64% | 6.36% | 8.18% |

| Last Nov. | 1.01% | 25.25% | 12.12% | 0.00% | 12.12% | 13.13% | 11.11% | 21.21% | 9.09% | 15.15% |

| Last Month | 2.11% | 24.21% | 15.79% | 2.11% | 12.63% | 11.58% | 14.74% | 15.79% | 10.53% | 2.11% |

80
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<th>Completed Patients</th>
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Summary of Results: [Handwritten notes]

Signature: [Handwritten signature] Date: 12-2-15 Submitted to: [Handwritten name]
# Tally Sheet for Quality Assurance Patient Care Chart Audit

**Month**: November 2015

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<td>Chief complaint has been addressed</td>
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<tr>
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<td>Oral cancer exam is completed and documented</td>
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<td></td>
<td>Gingival exam is completed and documented</td>
</tr>
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<td>0</td>
<td></td>
<td>DFS and case type is accurate</td>
</tr>
<tr>
<td>8</td>
<td>1</td>
<td></td>
<td>Charting is completed and accurate</td>
</tr>
<tr>
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<td></td>
<td>H.C.I. completed and documented</td>
</tr>
<tr>
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<td></td>
<td>Treatment plan is completed</td>
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<tr>
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<td></td>
<td>Radiographs taken if prescribed</td>
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<td>Recall has been established</td>
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<td>Other (please describe)</td>
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Number of charts reviewed: 9

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<th>Percentage of Unacceptable Results</th>
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<td>1</td>
<td>11%</td>
<td>Medical/Dental History is accurate</td>
</tr>
<tr>
<td></td>
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<td>Chief complaint has been addressed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oral cancer exam completed and documented</td>
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<td>DFS and case type is accurate</td>
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<tr>
<td>1</td>
<td>11%</td>
<td>Charting is completed and accurate</td>
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<td>H.C.I. is completed and documented</td>
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<td>11%</td>
<td>Services rendered matches treatment plan</td>
</tr>
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<td></td>
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<td>Other (please describe)</td>
</tr>
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</table>

Remedial steps taken for unacceptable results of 20% or more:

*Will discuss all results at end of year meeting*

*Signature*

82
Example of Chart Audit Form

Quality Assurance Patient Care Chart Audit for the Month of __________

Patient ____________________ Periodontal Classification____________
Student ____________________ Date of completion_____________
Instructor___________________ Date of review_________________
Chart reviewed by______________

ACC | UNACC | Procedure
---|---|---
| | Medical/ Dental History is accurate |
| | Chief complaint has been addressed |
| | Oral cancer exam is completed and documented |
| | Gingival exam is completed and documented |
| | DFS and case type is accurate |
| | Charting is completed and accurate |
| | Appropriate H.C.I. is completed and documented accurately |
| | Treatment plan is completed |
| | Radiographs have been taken if prescribed |
| | Recall has been established |
| | Services rendered matches treatment plan |
| | Other (please describe) |

Description of any unacceptable results:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Actions for remediation:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Appendix 5-3: Examples of Meeting Minutes

CAMDEN COUNTY COLLEGE
Department of Dental Programs

Clinic Meeting
February 8, 2016
6 PM-7:30 PM
(postponed from January 25)

Present:
Catherine Boos, Mary Buttery, Dawn Conley, Jean Corbi, Gretchen Heller, Barbara Iuliucci, Barbara Jacobs and Barbara Lutz.

1. Dr. Boos introduced the additional phase of the Quality Assurance Plan for the benefit of the adjuncts, while Barbara Iuliucci described some of the areas that she found while reviewing charts. To help ensure that those who are prescribed radiographs are scheduled, it was suggested that the very last entry on Services Rendered should be, “Rx for radiographs by Dr. Boos”. This will alert instructors to check to make sure radiographs have been scheduled.

2. Instructors were asked to make sure that the back of side of the student’s Day Sheet is filled out so tracking information is complete.

3. Identifying and describing gingival inflammation is a problem. It was decided that next year, for their intraoral camera proficiency, students will take pictures of inflammation which will be described on the proficiency evaluation.

4. Dr. Boos has been reviewing student data to come up with a common theme for those who fail DH III Clinic. In the last three years, all students who have failed DH III clinic had a grade of C in DH II Clinic. A lengthy discussion revolved around actions that could be taken to improve the passing rate in DH III, including things that have been tried in the past that did not work, such as allowing carry-overs. It was decided to take the sharpening experience out of Tuesdays to give each student one more clinic session. It was also noted that most students who failed DH III were slow at completing patients at first, but become more proficient when they repeated the course. It was viewed that repeating the course benefited the student and decreased attrition.

5. Barbara Jacobs introduced a video demonstrating the Iso-dry. The Iso-dry will be used in clinic when placing sealants.

Minutes submitted by:
Catherine Boos
Dr. Boos called the meeting to order at 3:45 p.m.

**Give Kids a Smile**
Forty four children were seen on February 5, Give Kids a Smile Day. It was the consensus of the department that keeping the same students at the exit table, sterilization area and with Dr. Boos was a good idea. The three dentists worked well and provided much needed treatment. Asking them to come at 9 instead of 8:30 was discussed, since it takes time to have the patients who need work triaged. Next year, we will try to simplify things and delegate more responsibilities so the work load is evenly distributed. It was decided to add GKAS to the agenda of the department meetings starting in September.

**Professional Induction Ceremony**
The Professional Induction Ceremony will be held again this year at the Palace on May 15 at 1 PM. Anna Marie Agresti will start to collect the money after spring break.

**Awards and Scholarships**
DH faculty will meet March 21 at 12 noon to decide on awards and scholarships.

**Equipment and Sterilization**
Use of the chair levers, air water syringe hoses and lights was discussed.

It was decided to write the pertinent information regarding the equipment on the side of sterilization bags versus the top.

Making changes to the sterilization area to make it more OSHA compliant was discussed. We will come up with a long range plan, and take it step by step.

**Quality Assurance**
Dr. Boos clarified that review of the patient chart should be only for the current treatment, not the entire chart. She revised the QA form to differentiate between the instructor who supervised the student and the instructor who reviewed the chart.

Omissions or inconsistencies in the medical history was of 6 charts was noted for February, as were charting deficiencies. We will meet again on March 9 at 12 noon to discuss how to approach and remediate this problem.

The meeting was adjourned at 4:45 p.m.

Respectfully submitted,
Dawn Conley
Minutes  
DH Full time Faculty  
March 9, 2014, 12 noon  
Halpern 117-B

Those present: Dawn Conley, Barbara Iuliucci, Barbara Jacobs, Dr. Boos

The purpose of the meeting was to address a problem found through the February Quality Assurance. Dr. Boos found that in reviewing student grades, Medical/Dental History grades were lower than what would be expected. We also found that area was deficient in documentation on patient charts. After a brief discussion it was decided that students ask the right questions at the patient’s initial visit due to questions asked in the Medical/Dental History form, but that at future visits, follow up documentation was poor. It was decided to prompt the student at recall visits to ask the appropriate questions by creating an overlay for the chart. The overlay will be stapled to the recall sheet and have questions and space for the answers. Dr. Boos will create the overlay.

Charting deficiencies were also discussed. It was noted that symbols for computer charting can be confusing. It was suggested that we create revised guide for the symbols for computer charting. Barbara Iuliucci will create a reference sheet to accompany the current computer charting symbols so better consistency can be maintained when the students are utilizing the software. After spring break, the faculty will review the newly revised charting and introduce the updated form to the students.

Minutes submitted by:  
Catherine Boos
August 16, 2016

Dr. Raymond Yannuzzi  
President  
Camden County College  
200 College Drive  
Blackwood, NJ 08012

RE: Dental Assisting and Dental Hygiene Program

Dear President Yannuzzi:

At its August 4, 2016 meeting, the Commission on Dental Accreditation (CODA) granted the dental assisting and dental hygiene programs the accreditation statuses of approval without reporting requirements. The definitions of accreditation classifications are enclosed. Below is a summary of actions and additional information.

**Dental Assisting Site Visit Report**  
The Commission considered the site visit report on the dental assisting program. The Commission also considered the institution’s response to the site visit report.

On the basis of this review, the Commission determined that the recommendation(s) cited in the report have been met and adopted a resolution to grant the program the accreditation status of “approval without reporting requirements.”

**Dental Hygiene Site Visit Report**  
The Commission considered the site visit report on the dental hygiene program. The Commission also considered the institution’s response to the site visit report.

On the basis of this review, the Commission determined that the recommendation(s) cited in the report have been met and adopted a resolution to grant the program the accreditation status of “approval without reporting requirements.”

No additional information is requested from the programs at this time. The next site visit for the programs is scheduled for 2022.

**General Information**  
The findings of the Commission on Dental Accreditation are noted in the enclosed Commission-approved site visit report. Oral comments made by site visit team members during the course of the site visit are not to be construed as official site visit findings unless documented within the site visit report and may not be publicized. Further, publication of site visit team members’ names and/or contact information is prohibited.
One copy of this report and the related enclosures have also been sent to the chief administrative officer and program director copied on this letter. The Commission requests that a copy of this report and the related enclosures be forwarded to the chairpersons and appropriate faculty.

In taking these actions, the Commission stipulated that it will expect the institution to keep the Commission informed as soon as possible of anticipated changes in any approved educational program offered, particularly in the areas of administration, enrollment, faculty, facilities and curriculum. The Commission’s policy and guidelines for reporting program changes are enclosed.

The Commission on Dental Accreditation monitors increases in enrollment. The purpose for monitoring increases in enrollment through review of existing and projected program resources (faculty, patient availability, and variety of procedures, physical/clinical facilities, and allied support services) is to ensure that program resources exist to support the intended enrollment increase. Failure to comply with the policy will jeopardize the program’s accreditation status.

Institutions/Programs are expected to follow Commission policy and procedure on privacy and data security related to compliance with the Health Insurance Portability and Accountability Act (HIPAA). The Commission’s statement on HIPAA, as well as the Privacy and Data Security Summary for Institutions/Programs (PDF), are found in the Policies/Guidelines section of the Commission’s website at http://www.ada.org/en/coda/policies-and-guidelines/hipaa/. Programs that fail to comply with CODA’s policy will be assessed a penalty fee of $1000.

The Commission has authorized use of the following statement by institutions or programs that wish to announce their programmatic accreditation by the Commission. Programs that wish to advertise the specific programmatic accreditation status granted by the Commission may include that information as indicated in italics below (see text inside square brackets); that portion of the statement is optional but, if used, must be complete and current.

The programs in dental assisting and dental hygiene are accredited by the Commission on Dental Accreditation [and have been granted the accreditation statuses of “approval without reporting requirements”]. The Commission is a specialized accrediting body recognized by the United States Department of Education. The Commission on Dental Accreditation can be contacted at (312) 440-4653 or at 211 East Chicago Avenue, Chicago, IL 60611. The Commission’s web address is: http://www.ada.org/en/coda.

The Commission wishes to thank you and the faculty and staff for their cooperation during the site visit. If this office can be of any assistance to you, please contact the Allied accreditation managers, Ms. Patrice Renfrow at renfrowp@ada.org or 1-800-621-8099, extension 2695, or Ms. Alyson Ackerman at ackermana@ada.org or 1-800-621-8099, extension 4660.
Sincerely,

Patrice Renfrow

Patrice Renfrow, MA, BSDH, RDH
Manager, Allied Dental Education
Commission on Dental Accreditation

PR/ja

Enclosures:

Sent via e-mail
CODA Accreditation Status Definitions
Formal Report of the Site Visit
Guidelines for Reporting Program Changes in Accredited Programs
Electronic Submission Guidelines for General Correspondence

cc: Dr. Anne McGinley, dean, Math, Science, and Health Careers, Camden County College
Ms. Roxane Terranova, program coordinator, Dental Assisting
Dr. Catherine A. Boos, director, Dental Programs
Mr. Herman Bounds, Jr., director, Accreditation Division, U.S. Department of Education
(via CODA website)
State Boards of Dentistry (via CODA website)
Institutional Accreditors (via CODA website)
Dr. Karen West, chair, CODA
Dr. Sherin Tookes, director, CODA
Ms. Alyson Ackerman, manager, Allied Dental Education, CODA
Summary of the Evaluation of ACEND Accreditation Standards for U.S. Programs

<table>
<thead>
<tr>
<th>Accreditation Standards for U.S. Programs</th>
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<td><strong>Program Planning and Outcomes Assessment</strong></td>
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<td>10. Curricular Mapping</td>
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<td>15. Responsibilities of the Program Director</td>
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<td>16. Faculty and Preceptors</td>
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<td>18. Program Resources</td>
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<td>19. Supervised-Practice Facilities</td>
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<td>20. Student Progression and Professionalism</td>
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<td>22. Information to Prospective Students and the Public</td>
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<td>23. Policies and Procedures</td>
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**KEY**
- **Meets** 1. No compliance problems are present.
- **Partially Meets** Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.
- **Does Not Meet** Plans to address compliance problems are not viable or have not been developed.
Program Planning and Outcomes Assessment

Standard 5: Program Goals
The program must have goals that reflect its mission and are accomplished through activities conducted by the faculty, preceptors and graduates.

Findings and Assessments:

Goal One:
To provide an affordable entry-level dietetic education to all students enrolled in the program and to maximize student success.

Goal Two:
To provide a general education and technical experience to adequately prepare students to become Dietetic Technicians Registered, for entry-level employment in the area of food and nutrition, while fostering attitudes and behaviors consistent with ethical and professional practice.

Goal Three:
To provide a foundation for student transfers to a four-year dietetics, food and nutrition and/or food service management program as a means of establishing an education ladder for all graduates of the dietetic program.

Information provided in the self-study report was confirmed through the site visit and various interviews with the stakeholders. The program appears to meet the intent of the Standard, however, goals are not clearly stated as graduate-focused goals.

While the goals appear to be stated as program management plans (what the program will provide), the objectives aligned to the goals help define the goals as graduate-focused goals. The goals could be more clearly stated as broad program goals if they were stated in terms of graduate abilities and outcomes.

Meeting with stakeholders including faculty, preceptors and administrators validated the development of program goals and that outcomes are in alignment with program and college outcomes. Regular meetings held with administration, division and department staff were validated with agendas and meeting notes showing topics relating to program goals and outcomes.

Recommendations:

When the program reviews goals for compliance with the 2017 Standards, which will be effective June 2017, the goals need to be re-written as broad program goals in terms of program and graduate outcomes.

Evaluation of the Standard: ☑
The program has decided to review goals for compliance and re-write broad program goals in terms of program and graduate outcomes. This is being done prior to the availability of the 2017 Standards, which will be effective June 2017. Objectives will be aligned with the new goals at the time the program makes the transition to the 2017 Standards. The program will be sure to include each of the ACEND-required objectives for the 2017 Standards (Standard 3). The program will transition to the 2017 Standards in June, 2017.

| Program Mission                                                                                           |
|                                                                                                           |
| "The Dietetic Technology Program at Camden County College provides a strong academic and practical education platform to students pursuing careers in food and nutrition. The Program strives to meet the needs of individual students while ensuring that all aspects of the established accreditation process are met. Graduates will be prepared to become Dietetic Technicians Registered, for entry level career opportunities, and transfer to four year institutions upon Program completion.” |

| New Program Goal 1                                                                                       |
|                                                                                                           |
| Prepare graduates to become entry-level Dietetic Technicians Registered who possess attitudes and behaviors consistent with ethical and professional practice and who will help meet the employment needs of the community in the area of food and nutrition, and/or food service management. |

| New Program Goal 2                                                                                       |
|                                                                                                           |
| Prepare graduates who have a commitment to advancing their education beyond the associate degree level in the field of dietetics, food and nutrition and/or food service management. |
Program Staff and Resources

Standard 15: Responsibilities of the Program Director
The director of the program must have the authority, responsibility and sufficient time allocated to manage it. The program director may have other responsibilities that do not compromise the ability to manage the program. Responsibilities and time allocation for program management are reflected in a formal position description for the program director and approved by administration.

Guideline 15.1
The program director must be responsible for assuring that all ACEND accreditation standards, policies and procedures are met; however, this can be achieved by managing or overseeing other individuals assigned to complete ACEND-related tasks. ACEND responsibilities should be included in the job description of the program director or the job description should state that the “program director is responsible for assuring that all ACEND accreditation standards, policies and procedures will be met.”

Guideline 15.2
Program director responsibilities must include, but are not limited to the following:
 a. Development of policies and procedures for effectively managing all components of the program and to ensure fair, equitable and considerate treatment of prospective and enrolled students/interns (such as program admission, retention and completion policies)
 b. Student recruitment, advisement, evaluation and counseling
 c. Maintenance of program accreditation, including timely submission of fees, reports and requests for major program changes
 d. Maintenance of the program’s student records, including student advising plans and verification statements; verification statements must be kept indefinitely
 e. Maintenance of complaints about the program received from students/interns or others, including disposition of the complaint
 f. On-going review of program’s curriculum to meet the accreditation standards
 g. Communication and coordination with program faculty, preceptors and others involved with the program
 h. Facilitation of processes for continuous assessment of program and student learning outcomes

Findings and Assessments:
Information provided in the self-study report was confirmed through the site visit and various interviews with the stakeholders. All required components pertaining to Standard 15 appear to be met.

The Program Director’s position description includes a statement that the “program director is responsible for assuring that all ACEND accreditation standards, policies and procedures will be met.” The responsibilities of the Program Director were validated by the Vice President and Dean. The Program Director’s job description also includes time allocation for program management.

The Program Director validated processes described in the self-study report relating to student contact, advisement, program management and participation in college level responsibilities that include: continuing and ongoing assessment, student success initiatives, external collaboration and management of graduate, employer and advisory input and review. These activities were validated by administration, faculty, preceptors, students, graduates, employers and other college stakeholders including counseling and student support services.

In review of student records management practices, the review team noted that the student file process is not described fully in terms of how student counseling records and verification statements records are housed electronically. While the Program Director follows a process, it is unclear if others would have enough information to complete the process during Program Director transitions or in her absence. While a short-term strategy was specified that discusses part of this process, the review team suggests the details of the process be further clarified in an internal policy.
Stakeholders stated that the Program Director is open to suggestions and collegial discussion.

Recommendations:

There are no recommendations at this time.

Evaluation of the Standard: ☑

Meets
✔ 1. No compliance problems are present.
   2. Compliance problems exist, but all are being resolved successfully. (Monitor)

Partially Meets
   Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet
   Plans to address compliance problems are not viable or have not been developed.

Response:

In review of student records management practices, the review team noted that the student file process is not described fully in terms of how student counseling records and verification statements records are housed electronically.

The Program Director follows a process, and is currently exploring with the college technical support staff the best system to house electronically, student counseling records and verification statements records. The process will be described fully in terms of how to give access to designated administrators, staff and faculty. A policy and procedure will be developed to include details that are clear enough to be implemented during a Program Director transition or in the absence of the Program Director.
Program Staff and Resources

**Standard 19: Supervised practice Facilities**

The program must have policies and procedures to maintain written agreements with institutions, organizations and/or agencies providing supervised practice experiences to meet the competencies. The policies and procedures must address the selection and periodic evaluation of adequacy and appropriateness of facilities, to ensure that facilities are able to provide supervised practice learning experiences compatible with the competencies that students/interns are expected to achieve.

**Guideline 19.1**

a. A program under the Didactic Nutrition and Dietetic Education Program standards is not required to demonstrate compliance with Standard 19 and its guidelines if it does not provide supervised practice to its students.

b. Agreements must be signed by administrators with appropriate authority in advance of placing students/interns.

c. Agreements must delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies.

**Findings and Assessments:**

The review of affiliation agreement policies and an audit of affiliation agreements on-site indicate that compliance problems related to Guideline 19.1.b exist. The Program is in process of resolving the issue as soon as possible. The Program’s policies regarding affiliation agreements were reviewed. The affiliation agreements include the required components and are consistent with the Program’s policies and ACEND requirements. On-site, the review team viewed affiliation agreements for rotations being actively used. One affiliation agreement was not currently valid. (Guideline 19.1.b) The Program Director stated there had been a change in preceptors and the agreement had been submitted by the College but it had not been returned by the facility. The need for current, valid affiliation agreements was reviewed with the Program Director and she stated that she was in process of following up with the site and preceptor.

**Recommendations:**

The Program must provide evidence that a valid, signed affiliation agreement for Cooper Center is in place. (Guideline 19.1.b)

**Evaluation of the Standard:** ✅

- **Meets**
  - 1. No compliance problems are present.
  - 2. Compliance problems exist, but all are being resolved successfully. (Monitor)

- **Partially Meets**
  - Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

- **Does Not Meet**
  - Plans to address compliance problems are not viable or have not been developed.
Response:

The review team visited three locations where supervised practice was occurring: Community Practicum in the Regional Food Bank of South New Jersey at Cooper Center Family Medicine, Food Service at Virtua Health and Rehabilitation Center, and Clinical Practicum at Voorhees Virtua (Hospital).

Community Practicum in the Regional Food Bank of South New Jersey at Cooper Center Family Medicine was arranged by the Regional Food Bank of South Jersey. The Regional Food Bank of South Jersey has valid, signed affiliation agreement with various community agencies. The Program provided evidence that a valid, signed affiliation agreement with the Regional Food Bank of South Jersey is in place. (See Appendix: A, the valid, signed affiliation agreement for the Food Bank of South Jersey)

The Program has not directly assigned students for supervised practice at Cooper Center Family Medicine. I’m scheduled to meet with Pauline Sundell, RN, BSN and Dr. Robertson on February 14, 2017 to explore what they can offer DTT students and what DTT students can offer their patients. We are in the process of obtaining a valid, signed affiliation agreement with Cooper Center Family Medicine to start student placement. (See Appendix: B, the email correspondence between the DTT Program Director and Pauline Sundell, RN, BSN)

On-site, the review team viewed affiliation agreements for rotations being actively used. One affiliation agreement was not currently valid. One student was placed with Bishop McCarthy Center during the Fall 2016 Semester. The Program Director became aware of the missing current, valid affiliation agreement on Sunday and contacted the site and preceptor on Monday, November 7, 2016. The Program Director did state there had been a change in preceptors and the agreement had been submitted by the College but it had not been returned by the facility. The facility recently changed management and no longer under the management of Central Care Solutions. (See Appendix: C, the valid, signed affiliation agreement for Bishop McCarthy Center)
Guideline 23.2
The following policies and procedures specific to dietetics programs must be provided to students/interns, such as in a program handbook:

<table>
<thead>
<tr>
<th>Policies and Procedures (Guideline 23.2)</th>
<th>Meets</th>
<th>Partially Meets</th>
<th>Does Not Meet</th>
<th>N/A</th>
<th>Required: Please explain areas marked “partially meets” or “does not meet.”</th>
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<tbody>
<tr>
<td>g. If the program grants credit or supervised practice hours based on an assessment of prior learning or competence, it must define procedures for evaluating equivalency of prior education or experience to the knowledge and/or competencies covered by the courses or rotations for which the credit is granted; Otherwise, the program must indicate that it has no policy for assessing prior learning or competence</td>
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<td>The self-study reports the Program has no policy for assessing prior learning or competence, page 141. However, this statement also needs to be communicated to students, such as in the student handbook.</td>
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Findings and Assessments:
After review of the self-study report and observations on-site, the review team determined that the Program did not meet Standard 23, Guideline 23.2.g.

Recommendations:

The Program must provide evidence that the student handbook contains a statement informing students that the Program does not assess for prior learning. (Guideline 23.2.g)

Evaluation of the Standard: ☑

Meets
1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully. (Monitor)

Partially Meets
✓ Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet
Plans to address compliance problems are not viable or have not been developed.

Response:
The Program has added a statement to the Rotation Requirement section of the Dietetic Technology Student Handbook 2016-2017, informing students that the Program does not grant credit or supervised practice hours based on an assessment of prior learning or competence. (See Appendix: D, Rotation Requirements- Attendance)
Appendix A

The valid, signed affiliation agreement for the Food Bank of South Jersey

Pending receipt of a copy to be emailed by the Dean’s Office (Lee Ann or Kristen)

AGREEMENT

AGREEMENT MADE THIS 29th day of September, 2016 by and between Camden County College, P.O. Box 200, Blackwood, NJ 08012 (hereinafter referred to as “CCC”) and, Food Bank of South Jersey, 1501 John Tipton Blvd., Pennsauken, NJ 08110 (hereinafter referred to as “COMMUNITY FACILITY”) for the Dietetic Technology Program (hereinafter referred to as “PROGRAM”).

WITNESSETH:

WHEREAS, CCC is an educational institution organized and operated under the authority of the State of New Jersey which provides among its courses the training of students for the career of Food and Nutrition; and WHEREAS, in the training of students for the career of Dietetic Technology community experience is necessary, and the COMMUNITY FACILITY can provide for such experience, and desires to associate with CCC in providing experience.

NOW THEREFORE, the parties hereto intending to be legally bound hereby agree as follows:

FIRST: The COMMUNITY FACILITY agrees to supervise students at the community site while the students are on site, including when the students are performing the following duties:

1. Assist clients with planning a well-balanced diet.
2. Take diet histories of clients in a community setting.
3. Evaluate food-related behavior of clients.
4. Evaluate influence of psychological, social and economic factors on eating.
5. Assess learning needs of clients at various stages in life cycle.
6. Teach/counsel clients and families.
7. Refer clients to other sources of help.
8. Evaluate intake of specific nutrients of clients at various stages in the life cycle.
9. Recommended dietary changes when appropriate.
10. Obtain and document screening data on individuals.
11. Obtain data on community resources.

Reviewed: July 1, 2010
12. Identify nutrition problems within individuals/families.
13. Prepare/select nutrition education materials and media.
14. Plan and teach a nutrition lesson for preschool children, elementary school children, pregnant and lactating women and the elderly.
15. Evaluate the menus of a preschool program.
16. Evaluate the sanitation and safety practices of a preschool program.
17. Describe the functions of the nutrition consultant in a preschool program.
18. Describe the functions of the Public Health Nutritionist and WIC (Women, Infants and Children Supplemental Program) nutritionist.
19. Describe nutrition services provided by the local health departments and WIC programs.
20. Describe the duties of dietetic personnel in nutrition for the elderly program (congregate feeding and home delivered meals).
21. Describe the overall operations of a variety of community food programs such as Food Banks.

SECOND: Students shall be responsible for their own transportation to and from CCC and the COMMUNITY FACILITY.

THIRD: The COMMUNITY FACILITY shall comply with OSHA requirements and labor laws, including providing to the best of its ability:

1. Any specialized item necessary for students’ safety and health.
2. Adequate time for a lunch.

FOURTH: CCC shall be responsible for coordinating instruction, maintaining standards, and evaluation of the students in conjunction with the appropriate COMMUNITY FACILITY staff.

FIFTH: CCC will provide:

1. Specific objectives for the student practice experience and will work with the COMMUNITY FACILITY staff to help implement the objectives; and
2. a student evaluation instrument.

SIXTH: CCC shall provide liability insurance for its students and staff.

SEVENTH: CCC requests the COMMUNITY FACILITY provide evidence of insurance as according to Appendix I.

Reviewed: July 1, 2010
EIGHTH: Students enrolled in the PROGRAM shall obey the rules and regulations of both
Institutions.

NINTH: Prior to admission to the COMMUNITY FACILITY, students must have a
complete
physical examination, which will be retained in the student’s file at the College
(if applicable).

TENTH: There shall be at least one meeting of the CCC staff and the COMMUNITY
FACILITY staff each academic year for the purpose of evaluating and improving
the PROGRAM.

ELEVENTH: In the event the student does not meet minimum standards (as agreed upon by the
COMMUNITY FACILITY and CCC) in his or her ability to perform in a
community setting, the COMMUNITY FACILITY reserves the right to
discontinue the relationship with the student. This agreement shall remain in
effect from year to year unless written notice thirty days prior to anticipated
termination date is given by either party.

IN WITNESS WHEREOF: The parties hereto have executed this Agreement on the day and year
first written above.

BY:  Donald Borden
President, Camden County College

BY:  [Signature]
Name: Valerie Lavois
Name of Facility: Food Bank of South Jersey

Reviewed: July 1, 2010
Appendix I

All partners are to provide us with a current certificate of insurance providing proof of the following coverage before any contract is finalized:

Commercial General Liability – carrier must have Best Rating of A- or Better:
General Aggregate: $2,000,000.
Products/Completed Operations Aggregate: $2,000,000.
Each Occurrence Limit: $1,000,000.
Personal Injury/Advertising Injury Limit: $1,000,000.
Fire Damage Limit: $50,000.
Medical Expense Limit: $5,000.
Coverage is to provide Waiver of Subrogation, must be Primary and Non-Contributory, General Aggregate is to be a Per Project Aggregate. X, C and U Exclusions are to be deleted. Subcontractors must carry limits equal to or greater than the General Contractor with a carrier with Best Rating of A- or better. Policy is to be endorsed using Form CG2010 (11/85 ed.) to include Camden County College, Inc., Camden County Foundation, Camden County Board of Trustees, Camden County Board of Chosen Freeholders, all officers, directors, employees, servants, subsidiaries, affiliates, subcontractors, temporary employees and leased employees are named insured.

Workers’ Compensation – carrier must have Best Rating of A- or Better:
Statutory Workers’ Compensation Benefits Payable in Accordance with Laws of The State of New Jersey
Employer’s Liability Limits of Liability:
$1,000,000. Each Employee
$1,000,000. Each Accident
$1,000,000. Policy Limit
Experience Modification Factor must be less than 1.00. Proof of NJ Experience Modification Factor must be submitted.

Umbrella – carrier must have Best Rating of A- or Better:
Limit of Liability Required:
$5,000,000. Per Occurrence
$5,000,000. Annual Aggregate
$0. Retained Limit
Policy is to be a true umbrella policy, excess liability policy form is not acceptable.
Coverage is to provide Waiver of Subrogation, must be Primary and Non-Contributory, General Aggregate is to be a Per Project Aggregate. Policy is to be endorsed to include Camden County College, Inc., Camden County Foundation, Camden County Board of Trustees, Camden County Board of Chosen Freeholders, all officers, directors, employees, servants, subsidiaries, affiliates, subcontractors, temporary employees and leased employees as named insured.

Social Services Professional Liability - carrier must have Best Rating of A- or Better:
Limit of Liability Required: $1,000,000.
Deductible is not to exceed $5,000. any one occurrence. Coverage is to provide Waiver of Subrogation, must be Primary and Non-Contributory, General Aggregate is to be a Per Project Aggregate. Policy is to be endorsed to include Camden County College, Inc., Camden County Foundation, Camden County Board of Trustees, Camden County Board of Chosen Freeholders, all officers, directors, employees, servants, subsidiaries, affiliates, subcontractors, temporary employees and leased employees as named insured.

30 days notice of cancellation must apply to all policies and the words endeavor to... but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives must be deleted from the certificate of insurance.

Reviewed: July 1, 2019
Marsha,
Thank you for your interest in partnering with our primary care office, Cooper Collaborative Care, on the Blackwood campus. We are very interested in exploring what we can offer your students and what your students can offer our patients. Thank you for the contract. I have passed it along to the appropriate people.

Is there a day and time that we might be able to meet to discuss what your expectations would be for your students. At that time we can present our patient’s needs. I feel confident that we will be able to work together to meet these needs.

If possible a Tuesday or Thursday would be the best days for us to meet. Let me know your availability.

Thank you,
Pauline Sundell RN, BSN
Population care Coordinator
Cooper Collaborative Care
Cooper University healthcare
856-874-0139

From: Patrick, Marsha [mailto:MPatrick@camdencc.edu]
Sent: Wednesday, January 25, 2017 5:21 PM
To: Sundell, Pauline
Subject: Contract Agreement

Hello Pauline,

I met with Tricia Yeo from the Food Bank of South Jersey on Tuesday and I obtained your contact information from her. I have attached a contract agreement, which will formally allow Dietetic students to provide nutrition education in the Cooper University Healthcare Center on the Blackwood campus. Print the contract in triplicate and have three copies of the contract signed by the authorized administrator. You can mail the three signed copies to me. The contracts will be then signed by the Camden County College President and one signed copy by both parties will be mailed to you for your records. Please email me concerning any questions or concerns.

Thank you,

Marsha

Marsha V. Patrick, MS, RD, FAND
Assistant Professor/Program Director
Food & Nutrition Science
Camden County College
P.O. Box 200
College Drive
Blackwood, New Jersey 08012
Phone: 856-227-7200, ext. 4665
e-mail: mpatrick@camdencc.edu
Appendix C

AGREEMENT

AGREEMENT MADE THIS 18th day of January, 2017 by and between Camden County College, P.O. Box 200, Blackwood, NJ 08012 (hereinafter referred to as “CCC”) and, Bishop McCarthy Center at 1045 E Chestnut Ave, Vineland, NJ 08360 (here in after referred to as “CLINICAL FACILITY”) for the Dietetic Technology Program (hereinafter referred to as “PROGRAM”).

WITNESSETH:

WHEREAS, CCC is an educational institution organized and operated under the authority of the State of New Jersey which provides among its courses the training of students for the career of Food and Nutrition; and WHEREAS, in the training of students for the career of Dietetic Technology clinical experience is necessary, and the CLINICAL FACILITY can provide for such experience, and desires to associate with CCC in providing experience.

NOW THEREFORE, the parties hereto intending to be legally bound hereby agree as follows:

FIRST: The CLINICAL FACILITY agrees to supervise students at the clinical site while the students are on on-site, including when the students are performing the following duties:

1. Practice daily operating procedures of Food and Nutrition Department and demonstrate orientation to the policies of the department and facility.
2. Identify the duties and functions of the Clinical and Management positions of the dietary department as exemplified by participating in the day to day functions of various career levels.
3. Practice in the nutrition assessment of patients.
4. Participate in the implementation of the nutrition care plan program.
5. Participate in the evaluation of the nutrition care program by assisting in collecting data and preparing surveys for the evaluation process.
6. Develop a nutrition care plan for a selected patient based on chart review, patient interview, researched evidence and needs assessment.
7. Perform ethically in accordance with the Code of Ethics for the profession of dietetics.

Reviewed: July 1, 2010
SECOND: Students shall be responsible for their own transportation to and from CCC and the CLINICAL FACILITY.

THIRD: The CLINICAL FACILITY shall comply with OSHA requirements and labor laws, including providing to the best of its ability:

1. Any specialized item necessary for students' safety and health.
2. Adequate time for a lunch.

FOURTH: CCC shall be responsible for coordinating instruction, maintaining standards, and evaluation of the students in conjunction with the appropriate CLINICAL FACILITY staff.

FIFTH: CCC will provide:

1. Specific objectives for the student practice experience and will work with the CLINICAL FACILITY staff to help implement the objectives; and
2. a student evaluation instrument.

SIXTH: CCC shall provide liability insurance for its students and staff.

SEVENTH: CCC requests the CLINICAL FACILITY provide evidence of insurance as according to Appendix I.

EIGHTH: Students enrolled in the PROGRAM shall obey the rules and regulations of both Institutions.

NINTH: Prior to admission to the CLINICAL FACILITY, students must have a complete physical examination, which will be retained in the student’s file at the College (if applicable).

TENTH: There shall be at least one meeting of the CCC staff and the CLINICAL FACILITY staff each academic year for the purpose of evaluating and improving
the PROGRAM.

ELEVENTH: In the event the student does not meet minimum standards (as agreed upon by the CLINICAL FACILITY and CCC) in his or her ability to perform in a clinical setting, the CLINICAL FACILITY reserves the right to discontinue the relationship with the student. This agreement shall remain in effect from year to year unless written notice thirty days prior to anticipated termination date is given by either party.

IN WITNESS WHEREOF: The parties hereto have executed this Agreement on the day and year first written above.

BY: Donald S. Borden
President, Camden County College

BY: [Signature]

Printed Name: Linda Gatier
Name of Facility: Bishop McCarthy

Appendix 1

All partners are to provide us with a current certificate of insurance providing proof of the following coverage before any contract is finalized:

Reviewed: July 1, 2010
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Products/Completed Operations Aggregate: $2,000,000.
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Statutory Workers’ Compensation Benefits Payable in accordance with Laws of the State of New Jersey
Employer’s Liability Limits of Liability:
Each Employee $1,000,000.
Each Accident $1,000,000.
Policy Limit $1,000,000.

Experience Modification Factor must be less than 1.00. Proof of NJ Experience Modification Factor must be submitted.

Umbrella — carrier must have Best Rating of A- or Better:

Limit of Liability Required:
Per Occurrence $5,000,000.
Annual Aggregate $5,000,000.
Retained Limit $0.

Policy is to be a true umbrella policy, excess liability policy form is not acceptable. Coverage is to provide Waiver of Subrogation, must be Primary and Non-Contributory, General Aggregate is to be a Per Project Aggregate. Policy is to be endorsed to include Camden County College, Inc., Camden County Foundation, Camden County Board of Trustees, Camden County Board of Chosen Freeholders, all officers, directors, employees, servants, subsidiaries, affiliates, subcontractors, temporary employees and leased employees as named insured.

Social Services Professional Liability — carrier must have Best Rating of A- or Better:

Limit of Liability Required:
$1,000,000.

Deductible is not to exceed $5,000. any one occurrence. Coverage is to provide Waiver of Subrogation, must be Primary and Non-Contributory, General Aggregate is to be a Per Project Aggregate. Policy is to be endorsed to include Camden County College, Inc., Camden County Foundation, Camden County Board of Trustees, Camden County Board of Chosen Freeholders, all officers, directors, employees, servants, subsidiaries, affiliates, subcontractors, temporary employees and leased employees as named insured.

30 day notice of cancellation must apply to all policies and the words endeavor to ... but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives must be deleted from the certificate of insurance.

Please send the certificates of insurance you receive from all partners to the compliance office for our review.

Reviewed: July 1, 2010
Rotation Requirements

Scheduling
Students must complete a minimum of 450 hours of practicum experience, which is completed in actual work settings. Students are not to be used to replace employees. In general, students should not be brought into a workplace if the sole reason is to provide free labor when paid employees are absent. The hours are divided among three practicum courses; 135 hours for FNS 200- Community Nutrition Rotation, 135 hours for FNS 240- Food Service Rotation and 180 hours for FNS- Clinical Nutrition Rotation. Practicum experience is integrated with classroom learning. This allows students to discuss and share their experiences with the instructor and with other students throughout the semester.

Most rotation hours are scheduled for normal work week but students may be required to be at facilities during evenings and weekends. Hours are not normally scheduled during the college’s holidays or vacations. A strong effort is made to provide students with ample notice of their practicum schedules, so that work, transportation, and/or childcare can be arranged. If students have questions regarding scheduling, they should contact the Rotation Advisor.

Attendance
Students are required to complete all practicum hours at the scheduled times and complete the documentation forms for attendance. The program does not grant credit or supervised practice hours based on an assessment of prior learning or competence. The documentation forms for attendance must be signed by the site supervisor and Rotation Advisor, and turned in to the Rotation Advisor on the assigned dates.

If an emergency arises, and a student is unable to report to the practicum site, the student must notify the preceptor and Rotation Advisor immediately. If the Rotation Advisor cannot be reached, the student should notify the Program Director and/or the college’s division secretary regarding the absence or delay. The Program Director or Division Secretary will notify the Rotation Advisor as soon as possible. It is not acceptable for a student to ask someone else to notify the Rotation Advisor or site supervisor. Failure to give adequate notification will result in a loss of points toward the student’s grade.

Travel
In order to meet all of the requirements needed to complete the program, it will be necessary for students to report to sites that are located throughout the South Jersey area. Students will be required to provide or arrange for their own transportation to and from these practicum facilities. Students must assume liability for their transportation. Travel time does not count towards practicum hours.
August 11, 2017

Marsha V. Patrick, MS, RD, FAND
Director, Dietetic Technician Program
Camden County College
Math, Science, Health Careers, and Dietetic Technology
200 College Drive
117-N Halpern Hall
Blackwood, NJ 08012

Dear Ms. Patrick:

This letter is to advise you of the action of the Accreditation Council for Education in Nutrition and Dietetics (ACEND®) board regarding the Dietetic Technician Program at Camden County College. During its July 26-28, 2017 meeting, the ACEND board voted to continue full accreditation of your program for a term of seven years ending December 31, 2024. Accreditation is granted for a Dietetic Technician Program with a maximum enrollment of 25 first- and 25 second-year students.

The decision was based on a peer review of your self-study report addressing the 2012 Accreditation Standards, site visit report and your program's response. ACEND recognizes your program's compliance with the 2012 Accreditation Standards and encourages you to continue your efforts in providing quality dietetics education.

Note that the 2017 ACEND Accreditation Standards became effective June 1, 2017. It is expected that you have made any modifications necessary to your program to come into compliance with the 2017 Standards. To view the requirements for demonstrating compliance with the 2017 Accreditation Standards visit: 2017 Standards Compliance

The next accreditation review of your program by the ACEND board will be in 2024. You will receive correspondence at least one year in advance of the site visit, which will be scheduled in September-December 2023, inviting you to apply for full accreditation under the Accreditation Standards in effect at that time.

If you wish to propose a major change to the program, you must submit it in writing to ACEND for review prior to implementation. The ACEND board maintains the right to require an interim report, self-study report, and/or site visit as a result of any changes. Guidelines for requesting major changes are posted on the ACEND Web site here: Major Program Change Guidelines
Marsha V. Patrick, MS, RD, FAND
August 11, 2017
Page 2 of 2

ACEND values your commitment to the quality and continued improvement of dietetics education as demonstrated during the accreditation process. Thank you for your support of dietetics education and students. If you have any questions, please call ACEND staff at 800-877-1600 x5400.

Sincerely,

Wanda Eastman

Wanda Eastman, PhD, RDN, LD
Chair, Accreditation Council for Education in Nutrition and Dietetics

cc: Mr. Donald Borden, President
Dr. Margaret Hamilton, Vice President of Academics
Dr. William T. Lavell, Interim Dean
Judith A. Kaplan, MS, RD, LD, Lead Program Reviewer
Jesica Soto, MBA, RD, CDE, Accompanying Program Reviewer
Lauren Bozich, MS, RD, LDN, ACEND Staff
AVMA Committee on Veterinary Technician Education and Activities (CVTEA)
Interim Report
Spring 2016 Deadline: February 26, 2016

The Program Director must be the primary author of the report.

<table>
<thead>
<tr>
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<th>Camden County College</th>
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<tbody>
<tr>
<td>Type of Report</td>
<td>INTERIM</td>
</tr>
<tr>
<td>Program Director</td>
<td>Peggy Dorsey, CVT</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:pdorsey@camdencc.edu">pdorsey@camdencc.edu</a></td>
</tr>
<tr>
<td>Phone</td>
<td>8562277200 ext 4205</td>
</tr>
<tr>
<td>Current President of Institution</td>
<td>Dr. Raymond Yannuzzi</td>
</tr>
<tr>
<td>President's Email or Address</td>
<td><a href="mailto:Ryannuzzi@camdencc.edu">Ryannuzzi@camdencc.edu</a></td>
</tr>
<tr>
<td>Title and name of person the program director reports directly to:</td>
<td></td>
</tr>
<tr>
<td>Title:</td>
<td>Dean of Math, Science, and Health Careers</td>
</tr>
<tr>
<td>Name:</td>
<td>Dr. Anne McGinley</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:Amcginley@camdencc.edu">Amcginley@camdencc.edu</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide Current Full-time equivalent (FTE) licensed DVM</th>
<th>NAME(s): Mary Wilkes, VMD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide Current Full-time equivalent (FTE) credentialed veterinary technician who is a graduate of an AVMA-accredited program</td>
<td>NAME(s): Peggy Dorsey, CVT Stacie Cantu, VT</td>
</tr>
</tbody>
</table>

SECTION 1
List each reason for the requested interim report and then provide details of actions/changes that have taken place to address the specific concern.

CRITICAL
#1. Standard 3e-“The advisory committee have representation from multiple veterinarians to provide professional diversity and to more fully advise the Program.”

The Program has added 3 veterinarians to the committee: Dr. Torre, Dr. Van Kooy, and Dr. Bell. (Refer to Attachment A-1)
Provide a copy of the most current advisory meeting minutes. (Refer to Attachment A-2)

#2. Standard 4b-“An ambulance resuscitation bag and (completed) emergency drug dosage chart be added to the emergency “crash cart”.

Emergency drug dosage chart has been added to the cart-(Refer to Attachment B-1)

#3. Standard 4e-“Program be compliant with Occupational Safety and Health Administration (OSHA) and other safety considerations with respect to (1) availability of an eye wash station within close proximity to the darkroom (completed); (2) safety/hazard labeling of anatomy cadavers; radiation monitoring of students during internship experiences; and (3) tracking of soda lime usage on anesthetic machines”.

(2) Label was applied to the cadaver storage area in Halpern Hall Vet Tech lab area (Refer to Attachment C-1)
(2) Dosimetry badges for students are currently on order-the money for the badges was encumbered and all students on co-op will receive the badges as soon as they arrive-(Refer to Attachment C-2).
(3) The students now track the soda lime hours (Refer to Attachment C-3)

#5. Standard 5a-“The Program have an appropriately constituted Institutional Animal Care and Use Committee (IACUC)”.

The Program hired an attending veterinarian in July, 2015. Dr. Tina Grove taught the Lab Animal Science course in the fall semester and is listed as the attending veterinarian for the program-(Refer to Attachment D-1).

# 6. Standard 6-“IACUC approved animal care and use protocol be in place for all animal
activities and meet Animal Welfare Act AWA guidelines”.

The IACUC committee met in October 2015 for the mandatory six month meeting. It was decided that since the program does not house USDA covered species, the “IACUC” protocols would be re-named “Program” protocols (Refer to Attachment E-1). The Lab Animal course rabbit lab is held off campus and does not require the housing at the college. The Program suspended the USDA registration in November, 2015 (refer to Attachment E-2). The committee will continue to meet each six months to review and update protocols. Protocols for dog/cat surgeries was updated to include cystocentesis and urinary catheterization (Refer to Attachment E-3), the task sheets were revised to include the same (Refer to Attachment E-4) and cadaver usage was added to Program Protocols (Refer to Attachment E-5).

#7. Standard 10e-(1) “Evidence exist that all students have completed all required skills for all animals and have been evaluated by Program personnel using standardized criteria”; (2) skill assessments include date of completion”.
(1) Part 1: “Provide an updated faculty roster for off campus clinical instruction sites” (Refer to Attachment F-1).
(1) Part 2: “Submit one copy of a completed student skills assessment to demonstrate that the student has completed the required skills on live animals and has been evaluated by Program personnel using standard criteria including full date:”

Equine radiology—There is discussion that the Mount Laurel Animal Hospital will serve as a venue for the equine radiology session. Dr. Torre/vet will demonstrate Equine radiology and assist with the processing of the radiographs. A Program staff member will accompany the students to sign off on tasks completed on live horses. (This class will be held in Fall 2016—there are no completed task sheets at this time—but the task has been added). (Refer to Attachment F-2).

Dental prophylaxis—The Program in conjunction with the Animal Welfare Association in Voorhees will begin dental prophylaxis as part of their co-op requirements. The Program has processed the ordering of a mobile dental unit for the course and the AWA is constructing a dental area for use by the students. The students will be monitored by a CCC program member and AWA veterinarian. (If the date of completion is not met, the students in the surgery class will be required to perform dental prophylaxis on surgical patients and the task will added to the assessment check-off sheets). No task sheets are available but the anticipated date of completion is summer 2016. (Please refer to Attachment F-3/see last item listed). The AWA and the program are obtaining quotes to remodel a room including plumbing for the new sink to accommodate the new machine (Refer to Attachment F-3A).

Microbiology: The program, in conjunction with the Biology Department, are coordinating their efforts complete the skills assessment and implement the tasks sheets. The program is researching purchasing the media and supplies needed for the tasks as the Biology department will not allow animal samples to be stored in the Biology incubators. The supplies/equipment must be budgeted for and content added to the syllabi.

Avian restraint: (Refer to Attachment F-4)

MAJOR
#1. Standard (5a): “The institutional animal care and use committee (IACUC) establish, describe, and publicize the method for investigating requests regarding animal care and use; a.k.a. whistle-blowers policy”.
Refer to Attachment G-1
#2. Standard (5a): “IACUC approved animal care and use protocols contain all information as required
by the Animal Welfare Act (AWA) guidelines to include the frequency and intervals of procedures to be performed, documentation that alternatives to live animals use in potentially painful procedures were considered, and a comprehensive description of procedures”.

The IACUC committee met in October 2015 for the mandatory six month meeting. It was decided that since the Program does not house USDA covered species, the “IACUC” protocols would be re-named “Program” protocols (Refer to Attachment E-1)

#3. (5b, 5e): “Memoranda of understanding with appropriate exit strategies be in place with all critical providers of animal resources and off-campus instructional support”.

A MOU was exchanged with the director of operations at the University of Pennsylvania New Bolton Center in November of 2015. Several drafts were exchanged through the legal departments of the facilities. The most current edition is awaiting approval of the NBC executives. Since the Farm Animal Course is only offered in the fall, the anticipated date of implementation is prior to August of 2016. (Refer to Attachment H-1)

#5. (5d): “The radiology logbook indicate species and include the complete patient identification”.

(Refer to Attachment I-1)

#6. (9f): Program personnel have sufficient time for development and delivery of instruction, curriculum development, students evaluation, student advisement and counseling, and professional development”.

The Program was approved to hire 2 additional lab assistants in order to improve the ability of the staff and instructors to complete their administrative duties.

#7. (11a): Greater efforts be made to strongly encourage students to take the VTNE upon graduation to provide mobility, to facilitate appropriate credentialing of graduates, and to provide more data for Program assessment and improvement”.

The Program is researching several avenues for greater efforts: offering currently attending student’s the opportunity to meet with a tutor for help with the VTNE review; offering Continuing Education course and offer the course to graduates of accredited programs in the area. The Program is researching a grant through Perkins to pay for the development and instruction so the students/graduates will not be required to pay a large registration fee to complete the course.

SECTION 2
Submit VTNE PES summary score reports received since the last report to CVTEA.

Refer to Attachment J-1-separate attachment

If students take a state veterinary technician exam, submit the summary of results since the last report to CVTEA.

NA

SUBMISSION INSTRUCTIONS
All reports must be submitted by email only

1. Name your file according to the naming convention provided
2. Email the report to jhorvath@avma.org.
VETERINARY TECHNOLOGY ADVISORY BOARD COMMITTEE 2016

Debra Bjorling-Hamilton Pet Cemetery
Veterinary Industry Representative
1301 Klockner Road/Hamilton NJ 08619
609-386-9660/debra@petmeadows.com

Tom Browne-Boehringer Ingelheim
Pharmaceutical Industry Representative
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609-304-8031/brownettg@fhnh.com

Sheera Dashkow-Temple University
Research Animal Representative
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215-707-7263/sheera.dashkow@temple.edu

Vikki Rowland-Executive Director
Animal Shelter Representative
Camden County Animal Shelter
Po Box 475/125 County House Road
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856-401-1300/vrowland@ccasnj.org

Janet Small-Gloucester County AH
Office Manager Representative
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856-382-2127/GCAH1@netscape.com

Erik Snyder-Hills Pet Nutrition
Pet Food Industry Representative
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Stacie DaBolt
Animal Shelter Representative
Animal Welfare Association
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Jay Van Kooy, VMD-Cross Keys Animal Hospital
Small/Farm Animal Practitioner
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856-740-3700

Chris Torre, VMD/Mt. Laurel Animal Hospital
Exotic Animal/Emergency Practitioner
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Jeffry Bell, VMD/Evesham Veterinary Hospital
Small Animal Practitioner
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Laura Garber/Camden County College
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Paloma Canales/Camden County College
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609-410-4060
Paloma.Canales234@students.camdencc.edu

Michele McGuire Berk-Camden County College
Graduate
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Dr. Catherine Dreskin-Camden County College
Program Adjunct/Small Animal Representative
1022 Mariner Ave/Manahawkin NJ 08050
609-549-0269/heronbob@gmail.com

Anne McGinley-CCC Administrator
Institutional Officer
Dean of Nursing, Health Sciences, & Human Services

Marianne McGurk-CCC Faculty
Biology Educator Representative

Dr. Mary Wilkes-Program Faculty
Peggy Dorsey-Chair/Program Director
Stacie Cantu-Department Technician
Attachment A-2

Camden County College Veterinary Technology
Advisory Committee Meeting Minutes for October 9, 2015

Committee members present: P. Dorsey, A. McGinley, S. Cantu, J. Small, M. McGurk, L. Williams, M. McGuire-Berk, V. Rowland, S. DaBolt, and C. Dreskin, DVM.

Introduction of members and guests; welcoming remarks presented by Ms. Dorsey.

Minutes: Minutes from March 25th were approved as recorded.

Program Review:
1. The selective process is working well. A January acceptance was added for 2016 to accommodate the overflow of applicants from fall. An orientation session is scheduled for October 19.
2. The program is offering free neutering to community members for the surgery course.
3. The program is working with the Animal Welfare Association in Voorhees to allow our students to complete part of their co-op at the surgical center. Adding dental prophylaxis was discussed. The students will still travel to the CCAS to collect samples for classes.
4. The new Exam Room Assistant program graduated their first class in April. A new class began in September.
5. We received a new digital, computerized lock box for SAN II.
6. The AVMA visit was insightful; the critical, major, and minor recommendations were reviewed. The status of the program will not be known until after the CVTEA meeting in November. Some of the recommendations have already been met. Peggy Dorsey will solicit more veterinarian members.
7. The program now requires all students to be in matching, hunter green scrubs with a paw print patch. The result is a cohesive and professional look.
8. IACUC: Institutional Animal Care and Use Committee will meet on October 22 to review the new 3 year protocols and semi-annual program of veterinary care. Dr. Tina Grove is the new instructor and attending veterinarian for Lab Animal Science.

Club: The Animal Care Club is officially organized for the fall and is registered with CCC Student Life and Activities. The students are active in college events and have planned several trips in the spring. Stacie Cantu is the liaison for the club.

Funding: The funding for fall/spring is adequate. Perkins grant wish list items were submitted. Perkins money has not been approved yet for spending.

Program Enrollment: Currently 68 students are enrolled. 24 new applicants began in fall.

National Exam: VTNE board scores are as follows: March = 4 of 10 new candidates and 0 of 1 repeat candidate passed the exam. July test: 2 of 3 new candidates passed and 1 of 3 repeat candidates passed the exam.

Open discussion/Tour of the facility
Respectfully submitted by P. Dorsey
Attachment B-1
Picture of drug chart in crash cart
**PURCHASE ORDER**

**Order Inquiry:**
Camden County College  
Purchasing Department  
PO Box 200  
College Dr  
Blackwood, NJ 08012

(856) 227-7200 ext: 4235 or 4219

**VENDOR:**
Mirion Technologies GDS Inc  
2652 McGaw Ave  
IRVINE, CA 92614

**DELIVERY ADDRESS:**
Camden County College  
Physical Plant  
200 College Drive  
Blackwood, NJ 08012

**MAIL INVOICE DIRECTLY TO:**
Camden County College  
PO Box 200  
College Dr  
Blackwood, NJ 08012

(856) 227-7200 x5600

**Purchase Order #**
P061688

**Order Date**
11/20/15

**Date Required**
Requested By
Stacie Cantu

**Contract #**
Bid #
FY15ITH-34

**Vendor #**
V00029762

**ITEM**  
**OFFICE USE**  
**DESCRIPTION**  
**QTY**  
**UNIT PRICE**  
**EXTENDED PRICE**

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<td>Per your bid approved by Camden County College BOT Radiology Badges for Veterinary Technology Co-op students for Co-op Feb, Mar, Apr, May, and June 2016.</td>
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<td>3.30</td>
<td>49.50</td>
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<tr>
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<td>Radiology Badges for the Second Group of Veterinary Technology Co-op Students for Apr, May, Jun, July and Aug 2016.</td>
<td>15</td>
<td>3.30</td>
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**SPECIAL INSTRUCTIONS:**

**PURCHASE ORDER TOTAL**
99.00

**CONDITIONS:**
1. College is exempt from state and Federal sales taxes. 2. All shipments must be prepaid - no C.O.D. shipments will be accepted. 3. M.C.S are required for all hazardous products. 4. College reserves the right to cancel any or all material not shipped and/or delivered by date specified. 5. Deliveries are between 8:30 a.m. - 4:30 p.m. 6. Contractors and vendors are required to comply with the procedures of F.L. 107, O.C. 137 (N.J.A.S. 52:27H) 1L 2001; C.134 and P.L. 2004, C.67 (see attached). 7. Filing differences over $50 require reordering of order by Purchasing Department.

**Purchasing Agent Authorized Signature**

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8
Memo

To: Anne McGinley, Dean MSHC

From: Peggy Dorsey

Date: August 15, 2015

Re: IACUC COMMITTEE MEMBER

This memo is notification that Kristina Grove, DVM is replacing Jennifer Asher, DVM as the attending veterinarian for the committee. Dr. Grove has extensive experience in lab animal medicine and is currently employed at Princeton University as the staff lab animal veterinarian.

Thank you.
Attachment E-1
Camden County College IACUC Meeting Minutes/October 22, 2015/Truman Hall, Room 125

Present:
Dr. Tina Grove, DVM (Attending veterinarian)/Sheera Gaskin, MLAS, GVT, CPIA (Chair)
Linda Bacha, DVM (Scientist)/Peggy Dorsey, CVT, MS (Scientist)/Anya Schultz, Non-Scientist
Nancy Buehler (Non-affiliated/Stacie Cantu, VT (Scientist)

In Attendance:
Dr. Anne McGinley (Institutional Official)
Meeting called to order at 4:00 pm.

Introduction of members:
The IO has appointed a second public member and committee member Nancy Buehler
Barbara Laynor has retired; Anya Schultz has replaced her.

Priority Items:
The review of the AVMA accreditation site visit was presented by Ms. Dorsey.
The critical and major deficiencies were discussed. A majority of the three critical deficiencies
were met including adding an attending veterinarian to the staff and adding protocols for exotics in
radiology. The cadaver protocol was discussed and will be researched. The dental protocol was
addressed and discussion with the AWA at the advisory board meeting on October 9 may resolve
the issue. The first major deficiency was met by revising the whistleblowers policy to include
anonymous reporting and adding the IO contact information and the second deficiency was
discussed and more information will be added to the protocols.
The protocols were discussed and it was decided that the protocols are not covered
under the USDA Animal Welfare Act jurisdiction as the animals are not
college owned or not covered species. The IACUC protocols will be renamed
“Veterinary Technology Program Protocols”. The committee will still meet every 6
months and the Veterinary Technology protocols will be reviewed. It was also
decided that due to no covered species residing on campus, we will suspend our
USDA registration. Paperwork will be submitted to the USDA as soon as possible.

Review New Veterinary Technology Protocols for Approval

| 9701-15 | Poultry |
| 9702-15 | IP, SQ, IM in Rat |
| 9703-15 | Collection in Rat |
| 9704-15 | Canine |
| 9708-15 | Radiology |
| 9709-15 | Sheep |
| 9710-15 | Equine |
| 9711-15 | Bovine |
| 9712-15 | Goats |
| 9714-15 | Anesthesia/Surgical Assisting |
| 9715-15 | Alpaca |
| 9802-15 | Rabbit Teaching Lab |
| 9806-15 | Feline |

An article describing the revisions to the Animal Welfare Inspection Guide was submitted and reviewed
The April 27, 2015 minutes were accepted as written. The Semiannual Program Review was conducted
and the Program of Veterinary Care were discussed and no deficiencies were found; the Semiannual
Facilities Inspection was conducted and no deficiencies were found.
Meeting was adjourned at 5:20.
Dear Dr. Goldentyer,

On behalf of Margaret Dorsey, Director of the Camden County College Veterinary Technology Program, USDA registration number 22-R-0076, the program is suspending the USDA registration as we no longer house covered species. If questions arise, please contact Ms. Dorsey at 856-227-7200x4205 or myself at 856-227-7200x4468.

Dr. Anne McGinley, Institutional Officer
Dean, Math Science and Health Careers
Attachment E-3

Veterinary Technology Teaching Protocol-Surgery

APPLICATION NUMBER: 9714-15

DATE RECEIVED: October 22, 2015

ACTION: Approved

1. Title of Laboratory Exercise: ANESTHESIA/SURGICAL ASSISTING TEACHING LAB
2. Course Title: SMALL ANIMAL NURSING II Course Number: ASC-214
   Semester: ANY Length of Protocol: THREE YEARS
3. Faculty Member in Charge: Mary E. Wilkes, Ph.D., V.M.D.
4. Technician in Charge: Raychel Keys, CVT
5. Briefly Describe the Qualifications and Experience of the Faculty Member/Technician:
   Mary E. Wilkes, V.M.D. Graduate Veterinarian, is licensed in the State of New Jersey.
   23 years experience in veterinary practice and teaching in medical school, veterinary school,
   4 year college, and full-time professor at Camden County College (CCC).
   Raychel Keys, CVT, is a graduate of CCC Veterinary Technology Program and has several
   years in small animal practice including surgery and nursing.
6. Purpose of the Laboratory Exercise:
   The purpose of this protocol is for students enrolled in the AVMA accredited Veterinary Technician program to
   become familiar with common surgical assisting and treatment techniques in accordance with AVMA
   accreditation requirements; to gain proficiency at performing anesthetic protocols in a supervised environment,
   to develop/practice aseptic techniques, surgical suite conduct, and cystocentesis.
7. Information /Experience Gained by Students:
   1. Students gain proficiency at performing restraint, injections and anesthetic protocols.
   2. Students develop skills necessary to maintain surgical asepsis.
   3. Students demonstrate knowledge of common surgical instruments and equipment
   4. Students perform admittance and discharge duties
   5. Students become proficient at recording information on patient records and logs
6. Students demonstrate knowledge of the protocols of cystocentesis and urinary catheterization
8. Rationale for Species Use:
   Surgical asepsis is widely used in clinical settings; the AVMA requires that students in an accredited veterinary
   technology program are deemed competent to perform all techniques included on this protocol.
9. Justification for the Number of Animals:
   One/two cats and/or dogs per class will be shared by all students divided into groups;
   maximum of 10 students per class.
10. Animals Required:
    Species: Dog or Cat Sex: Male or female Age: Over 5 months of age
    Number required: One or two per class/week
11. Describe Briefly, in Flowchart Form, the Procedure for the Exercise Including Type and
    Length of Pre-anesthesia, Anesthesia, and Methods of Post Procedure Monitoring:
    Patient will be admitted the morning of surgery, all pertinent releases, consent forms and paperwork will be
    completed by the student. Assessment of the patient’s physical status will be conducted. Administration of pre-
    anesthetic agents such as Acepromazine, Atropine, Butorphenol according to weight of patient. (See dosages
    below). Students will monitor heart rate, respiratory rate, and pulse every 5 minutes, place IV catheter in cephalic
    vein and start administration of IV fluid therapy. 2-10 ml/kg/hr, depending on species & need. Administration of
    induction agent – Diazepam and Ketamine IV according to patient weight. Place and secure endotracheal tube
    according to trachea size, administer prophylactic antibiotic IM injection according to patient size and administer
    inhalant anesthesia – Sevoflurane or Isoflurane based on patient weight. Students will monitor ECG and pulse
    oximeter, prepare surgical site for aseptic surgery. The veterinarian will perform an ovarihysterectomy or castration,
    students will perform one cystocentesis of the urinary bladder and urinary catheterization as a group, vaporizer
    will be turned off and oxygen will be continued until patient is extubated. Patient will be monitored until able to
    walk. Heart rate, respiration, and body temperature, will be monitored every 10 minutes. 2-3 students and the
    veterinarian will maintain observation of patient until sternal. Intravenous catheter will be removed and a bandage
    secured over the area. Butorphenol will be administered subcutaneously for continued pain control according to
patient weight. Patient will be returned to cage when able to stand and walk; patient will be discharged to their owner when recovered from anesthesia. Written instructions for post-operative care will be dispensed and follow-up care will be provided by the pet’s regular veterinarian.

Drug dosages: Acepromazine - 0.02 mg/kg, IM/
Atropine – 0.02 mg/kg, IM/
Butorphanol – 0.2 mg/kg, IM/
Diazepam - 0.25mg/kg, IV/
Ketamine 3mg/kg, IV
Butorphanol – 0.2 mg/kg, PO, IM or IV (depending on need)

12. Is Post Procedure Pain Expected: YES
13. Method of Euthanasia, if Applicable, at End of Procedure: NA
14. Does This Procedure Duplicate Any Previous Laboratory Exercise? YES
   If yes, provide justification for repeating this exercise:
   This exercise is repeated a maximum of three times by each student to assure minimum competency
15. Have Non-Animal Alternative Been Considered? YES
   Explain why non-animal alternative are not used.
   Non-animal alternatives are used in previous courses and in this course as preparation for this exercise. Minimum competency must be demonstrated by all students with live animals as required by the AVMA and alternatives do not mimic the movements and reactions of live animals.

Added to the task sheets:
Small Animal Nursing II-Skill Assessment Sheet
Student name: ____________________________ Instructor: _________________
Semester: ______________________________Year______________________

**Cystocentesis-(GROUP)**
Student gathered all equipment needed for procedure. One student positioned patient in lateral recumbency, with the hind legs extended caudally or for larger dogs and obese cats, the animal was positioned in dorsal recumbency with the hind legs extended straight back from the body. One student located the bladder by palpation. A student spread apart the hair by wetting with alcohol. The instructor or supervised student placed the needle in the laterally recumbent animal through the paralumbar fossa, with the bladder trapped against the body wall or fixed between the thumb and forefingers or placed the needle through the ventral, caudal abdominal midline when the animal was in dorsal recumbency. The needle was directed into the most bulbous part of the bladder. Aspiration on the syringe yielded urine. The needle was carefully removed and the area was cleaned to prevent infection.

**Catheterize a male dog: (GROUP)** Date ______ Supervisor __________________
Student assembled all materials needed for procedure. Student positioned patient in lateral recumbency and lubricated the end of properly measured urinary catheter. The prepuce was cleaned; sliding the prepuce back to expose the penis, the lubricated catheter was moved forward into the penis and gently guided up into the bladder. Fluid was extracted using a syringe attached to the catheter and urine withdrawn. The catheter was gently removed and the area cleaned.
Attachment E-4

Veterinary Technology Teaching Protocol-Cadavers

1. Title of Laboratory Exercise: CADAVER PROTOCOL
2. Course Title: ANIMAL BIOLOGY     Course Number: ASC-111
   Semester: ANY     Length of Protocol: THREE YEARS
3. Faculty Member in Charge: MARY WILKES, PhD, VMD
4. Technician in Charge: NONE
5. Briefly Describe the Qualifications and Experience of Faculty Member and Technician:
   Mary E. Wilkes, V.M.D. Graduate Veterinarian, is licensed in the State of New Jersey.
   23 years experience in veterinary practice and teaching in medical school, veterinary school,
   4 year college and full-time professor at Camden County College (CCC).
6. Purpose of Laboratory Exercise:
   The purpose of this protocol is for students enrolled in the AVMA accredited Veterinary
   Technician program to become proficient in cadaver use in accordance with AVMA
   accreditation requirements; to acquaint students with common anatomical structures.
7. Information/Experience Gained by Students:
   1. Students become more proficient at recognizing the anatomical structures of cats
   2. Students learn proper protocols for storing preserved cadavers
8. Rationale for Species Use:
   Cats are common companion animals and anatomy is required for an understanding of
   clinical procedures and anatomical landmarks.
9. Justification for Number of Animals:
   Approximately 2-4 preserved cats per class.
10. Animals Required:
    Species: Preserved Cats     Sex: Any     Age: Any
    Number Required:
    2-4 cats per class: skinned cats are purchased from a college approved vendor and are
    delivered in an approved non-carcinogenic preservative.
11. Describe Briefly, in Flowchart Form, the Procedure for the Exercise Including Type and
    Length of Preanesthesia, Anesthesia, and Methods of Post Procedure Monitoring:
    After introduction to specific organ systems using models and other teaching
    simulations, students are introduced to preserved specimens.
12. Is Post Procedure Pain Expected?   NO
13. Method of Euthanasia if Applicable at the End of the Procedure:  NA
14. Does This Procedure Duplicate Any Previous Laboratory Exercise?  NO
15. Have Non-Animal Alternatives Been Considered?  YES
    Please explain why non-animal alternatives are not being used?
    Students practice on a variety of models before attempting the review of the cadavers.
Camden County College Veterinary Technology Program
Faculty/Staff Roster for Off-Site Clinical Instruction Sites
Fall 2015/Spring 2016

ASC-292: Small Animal Co-op/AWA
Summer 2015=Stacie Cantu
Fall 2015=Stacie Cantu/Joan Ulrich
Spring 2016=Joan Ulrich

ASC-215: Farm Animal Nursing/ All Large Animal Farms
Fall 2015=Joan Ulrich
Spring 2016=course not offered

ASC-236: Radiology
Spring 2016=Denise D’Antonio-instructor
    Stacie Cantu, VT
Attachment F-2
Radiology-Skill Assessment Sheet
Student name: ________________________  Instructor: ________________________
Semester: ___________________________  Year ________________________

Equine Radiology: Date: _______________  Supervisor ________________________

In the darkroom, student checked the cassette to ensure the proper size film was present within the
cassette and closed the cassette tightly. Student positioned the animal until the anatomical structure
coincide with the view needed, turned on the portable machine, measured the correct distance, and set the
machine to the correct mAs, and kVp. Student directed assistant to correctly position the cassette plate
and pressed the button to create acceptable images. Student processed the radiograph and critiqued the
films and repeated the steps if images were not acceptable.
### Quotation

**Quotation Number:** m4429  
**Quote Date:** Feb 9, 2016  
**Page:** 1

**Company:** Root24, Inc.  
**Address:** 130 Ferry Ave, Suite B, Camden, NJ 08104  
**Contact:** Voice: 856-682-7124, Fax: 856-682-7128

**Tax ID:** 22-3421526  
**NJ Master Plumber Lic#:** 10944

**Quoted To:**  
Animal Welfare  
509 Centennial Blvd  
Voorhees, NJ 08043

**Job Location:**  
509 Centennial Blvd  
Voorhees, NJ 08043

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<td>1.00 A pump will be installed under the sink and connected to the drain piping.</td>
<td>500.00</td>
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<td>1.00 Labor</td>
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<td>1.00 Material</td>
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This is not a bill

Subtotal: 1,450.00  
Sales Tax:  
Total: 1,450.00

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NOW ACCEPTING ALL MAJOR CREDIT CARDS  

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George B Brimfield
Attachment F-4

POULTRY/AVIAN

Restrain birds: Date __________________ Supervisor __________________
Student restrained the chicken by placing one hock joint between the index finger and the thumb, and the other joint between the third and fourth fingers. The chicken’s breast bone sat on the palm of the hand with the head pointing towards the handler’s body and the vent away. The non-holding hand prevented the wings from flapping. Care was taken to prevent injury to the chicken.

Perform physical exam of birds: Date ______________ Supervisor _______________
Student began PE by inspecting the restrained bird beginning at the head; inspected the eyes and beak for discharge or blockage, inspected the feathers for external parasites, felt for muscle tone, excessive fat, enlarged or distended organs, and observed the condition of the vent. Student observed the feet for signs of abnormalities/disease.

Perform nail clipping on birds: Date __________________ Supervisor ______________
Student held the leg of the restrained chicken so the toes could be isolated for trimming. Using the appropriate size nail trimmer, the foot was extended and each nail was cut to shorten the nail yet cause no harm to the foot. Student repeated the procedure on each toe.

Performed postmortem examination-poultry: Date ______________ Supervisor ______________
The instructor euthanized the chicken according to acceptable USDA and IACUC approved methods. Student carefully plucked feathers along the midline, pinned the wings between the radius and ulna at the distal end of the forelimb, slit the skin from the vent to the bill in the ventral midline: nicked the skin over the breast muscles in the midline, continued the incision rostrally to the bill and caudally to the cloaca (vent), taking care not to damage underlying tissues. Student reflected the skin from the neck, chest and abdomen, noted the amount of subcutaneous fat, amount of breast muscle present, the thymus in young birds, the color of subcutaneous tissues, the condition of the external surface of trachea and oesophagus. Student cut through to and disarticulate the hip joints and removed the sternum and rib cage: incised transversely just below the sternum, lifted the sternum upwards and, noted the condition of the air sacs, cut through the rib cage and coracoid on either side using necropsy shears or scissors (as appropriate for the size of the bird). Student noted the general layout and appearance of the heart, lungs, air sacs and liver.
Program Policy Revision to CCC Whistleblowers Policy
Revised: March 2015

NOTE: The Veterinary Technology Program recognizes that reporting of adverse Program policies and procedures by students adheres to the same guidelines outlined in the Whistleblowers Policy of the College #345. Anonymous reporting is accepted within the guidelines as stated in section III

“Although anonymous disclosure is discouraged since it impedes appropriate investigation, employees (students) that report concerns on an anonymous basis must report sufficient corroborating evidence to justify the commencement of an investigation”.

Students may submit animal care concerns/reports to the Institutional Animal Care and Use Committee (IACUC) Institutional Officer Dean Anne McGinley at 856-227-7200x4577 or email: AMcGinley@camdencc.edu. Other reports concerning Program guidelines can be submitted to the Program Director Peggy Dorsey at pdorsey@camdencc.edu or by office appointment. Such reports will remain confidential as reported in Section V. of the Board of Trustees Whistleblowers policy #345.
Attachment H-1
CAMDEN COUNTY COLLEGE VETERINARY TECHNOLOGY PROGRAM
UNIVERSITY OF PENNSYLVANIA-NEW BOLTON CENTER
GENERAL MEMORANDUM OF UNDERSTANDING

THIS MEMORANDUM of UNDERSTANDING ("MOU") is entered into between the Camden County College Veterinary Technology Program of New Jersey (hereinafter called the "Program" and the University of Pennsylvania New Bolton Center (hereinafter called the "NBC").
The Program has students whose education and training would be enhanced by practical educational experiences and desires to use resources of the NBC for its students and NBC has appropriate resources for such training and desires to make them available for educational purposes.
The parties mutually agree as follows:
I. Joint and General Terms and Conditions.
   A. This MOU shall be effective when fully executed by both parties. The MOU shall begin on January 1, 2016, and end December 31, 2016. Either party may terminate this MOU by giving the other prior written notice of termination of not less than sixty (60) days, or at any time by mutual consent.
   B. NBC and the Program shall cooperate in the supervision of students in the practical educational and training. The parties shall periodically confer, as needed, about the student activities during its term.
   C. Prior to the beginning date, the Program will contact the NBC species supervisors to schedule class activities and dates. To ensure availability of dates, the Program will contact NBC at least 8 weeks prior to the proposed lab date(s). NBC staff will respond in a reasonable amount of time to allow for scheduling of classes and transportation.
   D. Neither party shall discriminate against any person by reason of race, color, gender, age, religion, disability, veteran's status, sexual orientation or national or ethnic origin in connection with any aspect of its performance hereunder.
   E. It is mutually agreed that there is a financial obligation on the part of the Program as acceptance of students for training. The program agrees to pay the sum of $750/species per 4 hour lab. This cost covers facility and animal usage, as well as payment of NBC staff to teach the lab. This fee does not cover supplies used to facilitate the lab, as the Program provides their own supplies. Supplies include, but are not limited to stethoscopes, 3ml luer lock syringes, 20g and 22g needles, and anything else specific to the skills they must complete. Additional supplies may be provided as part of the lab at the discretion of NBC staff. Changes to the financial obligation shall be given to the Program no less than 90 days prior to an increase in fees.
   G. Either party reserves the right to withdraw/remove this MOU, unrestrictedly including if the Program or NBC is unable to meet the conditions of this MOU with reasonable notice.
   H. Neither party shall use the other’s name in any publications or advertising without the other’s prior written approval.
   I. Each party shall be responsible for its own negligent acts or omissions and those of its employees in accordance with prevailing law.
      a. Student liability: Camden County College will provide general liability. Professional liability insurance in the amount of $1,000,000 incident/$3,00,000/aggregate/year.
   J. The Program shall be required that the student will provide his or her own medical insurance:
      a. The Program will ensure that each student has undergone the vaccinations required for the Program admission. To include: (1) Documentation of current tetanus vaccine current to eight years (2) Documentation of pre-exposure rabies vaccine current to two years or proof of current rabies titer
      b. Students will be referred to their primary physician or emergency care facility for treatment in event of sickness or injury during assigned hours at NBC.
      c. The student is responsible for reporting any injury to the Camden County College Public Safety Department. Students are responsible for providing proof of current health insurance to the Program.
II. Program Responsibilities.

A. The Program will designate a program faculty or staff member liaison to develop schedules and student activities at NBC.

B. At the NBC’s request, the Program will permit program faculty and/or staff to participate as resource persons for activities related to the classes on a limited and discretionary basis.

C. The Program is responsible for supervising the educational experience, academic evaluation of, and monitoring the student’s learning experiences while visiting NBC.

D. Since the services contemplated by the NBC relate to proprietary NBC information which is of considerable value to the NBC, the Program will inform the students to hold all work-related information, including without restriction, proprietary maps, letters, memoranda, information, and all other materials, plans, and conversations specifically concerning the work comprising the services requested of the student under this MOU (“Confidential Information”) strictly confidential while this MOU is in effect and for a period of twelve months after the termination hereof. These confidentiality obligations shall not apply to any Confidential Information, which was in the public domain prior to disclosure or which subsequently comes into the public domain through no fault of recipient; information that recipient can demonstrate was already known or independently developed by recipient; information received in good faith by recipient from a third party; and information that is required to be disclosed by operation of law.

A. The Program will select students for their courses in accordance with the established admissions policies of the Program and College.

   a. All students participating in the classes will have satisfactory completed preparation for their courses (as identified by the requirements of the American Veterinary Medical Association) including ASC-112; Animal Husbandry.

B. The Program shall require its students to agree to follow all reasonable policies, rules, and regulations during the class in accordance with the Policies of the Student Handbook of the Program.

C. The program will coordinate transportation for students to and from NBC.

D. The program will ensure that students arrive prepared with proper protective outerwear for these labs, including coveralls (disposable or cloth), gloves, and plastic over-boots. Students will be expected to adhere to NBC’s biosecurity protocols.

III. NBC Responsibilities.

A. The NBC will designate one or more employees, with appropriate qualifications, to assist the Program with coordinating activities. NBC will not be responsible for the direct supervision, grading, or control of the student's activities while at the NBC or where performed at its direction.

B. NBC will provide access to facilities agreed upon by the parties consistent with the memorandum referred to in Paragraph I(C), above, and agrees to assist in coordinating schedules which will not conflict with academic schedules of the Program's or NBC’s calendar schedule.

C. NBC will provide sufficient resources to enable the student to function effectively and meet the objectives of the class. Animals used in labs will fall within IACUC guidelines, which will limit some procedures such as intravenous catheterization and esophageal intubation. Animal species available include equine and bovine.

D. At the beginning of each semester, NBC agrees to provide the Program all applicable policies, rules, and regulations which the student is expected to follow during the class while with the NBC staff or engaged in NBC activities. This requirement includes, among other things, such policies and procedures as are in effect and reasonably necessary to protect confidential and/or proprietary information, if such data and information may be involved in the class.

E. When necessary or desirable, the NBC agrees to permit: (i) inspection of its facilities by the Program and by the Program accrediting agencies, upon reasonable request; and (ii) adequate time for the Program faculty or staff member liaison to meet with the NBC staff.

F. If the NBC has any material concerns regarding a student's performance or if specific circumstances arise which lead NBC to conclude that a student should be removed before the end of its term, NBC will confer immediately with the Program faculty or staff member liaison to resolve such concerns.

G. NBC will provide the Program with Institutional Animal Care and Use Committee protocols for USDA cover species, if requested.
IV. General Provisions.
A. This MOU shall be governed by New Jersey law and any action concerning this MOU shall be brought in a court of competent jurisdiction in the State of New Jersey.
B. The parties agree that this MOU shall be binding upon their respective successors or transferees of any nature.
C. Nothing in this MOU shall be construed to make either party the legal agent or representative of the other, nor shall either party have the right or authority to assume, create or incur any liability or any obligation of any kind, either expressed or implied, in the name of or on behalf of the other party.
D. Neither party shall assign this MOU, directly or indirectly, in whole or in part, without the express, prior written consent of the other.
E. The parties may modify this MOU by written agreement at any time.

CAMDEN COUNTY COLLEGE                     NBC

_________________________________              ________________________________
Signature      Signature

___________________________________  _________________________________
Title        Title

________________     _________________________________
Date       Date
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<th>View</th>
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<td>10</td>
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<td>Ancil Winberg Lena Solomon</td>
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<td>2011</td>
<td>Lateral</td>
<td>7</td>
<td>15</td>
<td>55</td>
<td>Ancil Winberg Lena Solomon</td>
</tr>
<tr>
<td>11/13/15</td>
<td>Emily - Cat Smith</td>
<td>2012</td>
<td>Ster.- Front Leg</td>
<td>2</td>
<td>20</td>
<td>45</td>
<td>K. Custer C. Joie</td>
</tr>
<tr>
<td>11/13/15</td>
<td>Turtle Shell CCC</td>
<td>2013</td>
<td>Du</td>
<td>6</td>
<td>15</td>
<td>53</td>
<td>Ancil Winberg Lena Solomon</td>
</tr>
<tr>
<td>11/20/15</td>
<td>Sandy K9 Doggy</td>
<td>2014</td>
<td>R/Lat Abd.</td>
<td>17</td>
<td>10</td>
<td>82</td>
<td>Amanda Dendy Emily Maas Matthew Tollefson</td>
</tr>
<tr>
<td>11/20/15</td>
<td>Sandy - dog Dobsey</td>
<td>2015</td>
<td>R/Lat. Occ.</td>
<td>2</td>
<td>10</td>
<td>90</td>
<td>Amanda Dendy Emily Maas Matthew Tollefson</td>
</tr>
<tr>
<td>11/20/15</td>
<td>Sandy K9 Doggy</td>
<td>2016</td>
<td>R/Lat Abd.</td>
<td>17</td>
<td>15</td>
<td>82</td>
<td>Amanda Dendy Emily Maas Matthew Tollefson</td>
</tr>
</tbody>
</table>
**Program Name (this is your institution name; not the file naming convention acronym):**  
Camden County College – Blackwood, NJ

**Type of Report (Answer either ANNUAL or BIENNIAL):**  
BIENNIAL REPORT

**Program Director:**  
Peggy Dorsey

**Email:**  
pdorsey@camdencc.edu  
**Phone:**  
8562277200 (enter # with no hyphens)  
ext 4205

**Current President of Institution:**  
Mr. Donald Borden

**President's Email or Address:**  
DBorden@camdencc.edu

Provide title and name of person the program director reports directly to

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dean, Math, Science, and Health Careers</td>
<td>Dr. Jackie Galbiati</td>
</tr>
</tbody>
</table>

**Email:**  
JGalbiati@camdencc.edu

<table>
<thead>
<tr>
<th>Provide current Full-time equivalent (FTE) licensed DVM</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME(s): Mary Wilkes, VMD</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide current Full-time equivalent (FTE) credentialed veterinary technician who is a graduate of an AVMA-accredited program</th>
</tr>
</thead>
</table>
| NAME(s): Peggy Dorsey, MS. CVT (Director)  
Stacie Cantu, VT (Technician) |

---

### SECTION 1

**Has the Program had any USDA inspection reports indicating non-compliant items?**  
Answer YES or NO  
No

If YES, submit a report and describe actions to remedy citation(s) here:

---

**Have any student injuries or accidents occurred that required medical assistance beyond first aid?**  
Answer YES or NO  
No

If YES, describe incident(s) and describe actions to remedy here:

---

### SECTION 2

**Indicate current vacancies in program faculty and if any, efforts to fill the vacancy and plan to meet the teaching and administrative needs of the program. Do not include general education instructors.**  
No vacancies

**Briefly, describe any anticipated program or organizational changes. Note that substantial changes require the submission of a Substantive Change Report. NOTE: New substantive change reporting requirements will be announced January 1, 2017.**  
No Changes
SECTION 3
Submit VTNE summary score reports received since the last annual or biennial report to CVTEA. Include the new CVTEA School Report: ATTACHMENT A

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of first-time candidates passing VTNE</td>
<td>21</td>
<td>9</td>
<td>13</td>
</tr>
<tr>
<td>Number first-time test takers</td>
<td>37</td>
<td>15</td>
<td>15</td>
</tr>
<tr>
<td>VTNE pass percentage = Number of first-time candidates passing / Number of first-time candidates</td>
<td>57%</td>
<td>60%</td>
<td>87%</td>
</tr>
</tbody>
</table>

Provide the website link where outcomes data is reported to the community.
Website Link: http://camdencc.edu/academics/departments/vet-tech/exam-scores.cfm

Please note, programs must publish three-year aggregate data and not individual year data. The following table is an EXAMPLE of what is required to be posted on program’s web page. CVTEA’s expectation is that the data is updated each year on or before September 1.

The three-year pass percentage on VTNE is calculated as follows: X/Y * 100=Three year pass percentage whereby X is the number of first-time candidates that passed the VTNE and Y is the number of first-time candidates that have taken the VTNE.

<table>
<thead>
<tr>
<th>July 1, 2014 - June 30, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of eligible first-time candidates</td>
</tr>
<tr>
<td>Number of first-time candidates that have taken the VTNE</td>
</tr>
<tr>
<td>Three-year VTNE pass percentage</td>
</tr>
</tbody>
</table>

If students take a state veterinary technician exam, submit the summary of results since the last report to CVTEA.
N/A
SECTION 4
Provide retention information for the following academic years by completing the table below.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>E = Enrollment (as of July 1)</td>
<td>79</td>
<td>61</td>
<td>66</td>
<td>88</td>
</tr>
<tr>
<td>NS = New Starts (July 1 to June 30)</td>
<td>36</td>
<td>27</td>
<td>28</td>
<td>43</td>
</tr>
<tr>
<td>RE = Re-entries (July 1 to June 30)</td>
<td>12</td>
<td>2</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>G = Graduates (July 1 to June 30)</td>
<td>22</td>
<td>24</td>
<td>18</td>
<td>30</td>
</tr>
<tr>
<td>EE = Ending Enrollment (as of June 30)</td>
<td>90</td>
<td>66</td>
<td>88</td>
<td>78</td>
</tr>
<tr>
<td>Retention % (EE + G) / (E + NS + RE)</td>
<td>88.18%</td>
<td>100.00%</td>
<td>91.50%</td>
<td>98.84%</td>
</tr>
</tbody>
</table>
### SECTION 5

List all CRITICAL deficiencies (formerly called recommendations) from your last Site Visit Report of Evaluation that requires continued reporting. Provide:

- Details of actions/changes that have taken place to address the specific deficiency since the time of the Site Visit.
- An appropriate timetable for its satisfaction.
- Supporting documentation where appropriate

**Type each CRITICAL deficiency and response to each CRITICAL deficiency here:**

Keep the same numbering as listed in your Report of Evaluation. DO NOT renumber if you are skipping over deficiencies that do not require further reporting. Add as many lines as needed.

<table>
<thead>
<tr>
<th>NONE</th>
</tr>
</thead>
</table>

List all MAJOR deficiencies (formerly called recommendations) from your last Site Visit Report of Evaluation that requires continued reporting. Provide:

- Details of actions/changes that have taken place to address the specific deficiency since the time of the Site Visit.
- An appropriate timetable for its satisfaction.
- Supporting documentation where appropriate

**Type MAJOR deficiencies and response to each MAJOR deficiency here:**

Keep the same numbering as listed in your Report of Evaluation. DO NOT renumber if you are skipping over deficiencies that do not require further reporting. Add as many lines as needed.

| 7. Evidence exist that all students have completed all required skills on live animals and have been evaluated by Program personnel using standardized criteria. Skill assessments include date of completion. (10b, 10e) | Unmet; submit a completed microbiology skills assessment sheet |
| See Page 5 of this report | |
Camden County College Veterinary Technology
Microbiology-Skill Assessment 06-14
Student Name: [Redacted]
Semester: Spring Year: 2017
Course Instructor: [Redacted]

Streak agar plate to obtain a pure culture Date: 4/20/17 Supervisor: [Redacted]
Student labeled the bottom of one nutrient agar plate. Student used an inoculating loop to collect a sample of bacteria from an isolated colony and used the loop to apply the primary streak on an agar plate. The student rotated the plate and used an inoculating loop to streak the second quadrant of the agar plate, being careful to overlap the primary streak 1-2 times. The third quadrant was inoculated being careful to overlap the second streak 1-2 times. The agar plate was inverted and placed in an incubator for 18-24 hours. The student checked the plate after the inoculation period for isolated colonies of growth and recorded the results.

Prepare a gram-stained slide Date: 4/13/17 Supervisor: [Redacted]
Student selected a bacterial sample by touching a sterile wire or loop to one colony on an agar plate (did not scoop an entire colony off the agar plate). Student mixed the sample on a microscope slide with a drop of water or saline; the droplet on the slide was circled with a wax pencil to help identify the area after staining and the slide was allowed to air dry. The student heat fixed the slide by passing it through a flame 2-3 times, specimen slide up. Student held the slide over the sink or placed it on a rack over the sink, flooded the smear with crystal violet, and let stand for 1 minute, the slide was rinsed briefly with water. Student held slide over the sink or placed it on a rack over the sink and flooded the slide with Gram’s iodine and let stand one minute. The slide was rinsed with decolorizer until no more purple color washed off (5-10 seconds) and the smear was briefly washed with water. The slide was held over the sink and was flooded with safranin and let stand for 1 minute. The slide was allowed to air dry or gently blotted dry between paper towels. The student mounted the slide on the microscope and beginning on low power and working up to oil immersion, recorded the morphology and Gram Reaction.

Perform a Catalase test Date: 4/20/17 Supervisor: [Redacted]
The student selected a bacterial sample by touching a sterile loop or wire to the center of one colony on an agar plate. The student applied a drop of 3% hydrogen peroxide onto a microscope slide and smeared the sample in the drop of hydrogen peroxide. The student immediately observed the slide (or loop) for bubbling as well. The student recorded whether the sample was catalase positive or negative.

Perform an Oxidase test Date: 5/4/17 Supervisor: [Redacted]
The student placed a drop of oxidase onto a sterile swab and touched the moistened swab to an isolated colony on an agar plate. The student waited 30-60 seconds for a color change on the swab. The student recorded whether the sample was oxidase positive or negative.

Perform Kirby-Bauer Sensitivity test Date: 5/4/17 Supervisor: [Redacted]
The student selected 4-5 morphologically identical colonies from a blood agar or MacConkey plate and aseptically transferred the selected colonies to a tube of sterile saline with an inoculating loop. The contents of the tube were swirled (not inverting) so that the organisms were uniformly suspended in the saline. The student compared their tube with .5 McFarland nephelometer to ensure the turbidity in the tubes was the same; if needed, the turbidity was adjusted until the tubes were equal by dilution or adding colonies to attain a suspension turbidity equal to .5 McFarland nephelometer. The student used aseptic technique to dip a sterile cotton swab into the saline suspension of the bacteria and rotated the swab against the inner wall of the tube to express excess fluid. The entire surface of a Mueller-Hinton agar plate was swabbed with the swab, the plate was rotated 60 degrees; the surface was re-swabbed, and again rotated. The outside edge of the plate was also completely swabbed. The student applied antibiotic discs with flamed forceps that were allowed to cool between uses; each disc was gently pressed onto the agar surface to ensure complete contact and the discs were at least 24mm apart from center to center and the discs were not moved once contact with the agar surface was made. The student allowed the plate to sit for 1-2 minutes, then inverted the plate and placed in the incubator. After 16-18 hours, the plate was removed and the student measured the cleared zone diameters in and mm recorded the measurements.
Affiliation Agreement between
Our Lady of Lourdes School of Nursing, Inc.
And
Camden County College

BACKGROUND

WHEREAS, Camden County College (hereafter called the “College”) is approved by the New Jersey Commission on Higher Education to award the Associate in Arts, Associate in Science, Associate in Fine Arts, and the Associate in Applied Sciences degrees, is accredited by the Commission on Higher Education of the Middle States Association of Colleges and Secondary Schools, and provides for the needs of Camden County; the State of New Jersey and beyond with respect to public higher education on the level of the first two years of education beyond the high school; and

WHEREAS, Our Lady of Lourdes School of Nursing, Inc. (hereafter called the “School”) is approved by the New Jersey Board of Nursing to conduct a program in Nursing to educate individuals to become Registered Nurses (R.N.) and is accredited by the Accreditation Commission for Education in Nursing (ACEN); and

WHEREAS, the College and School desire to enter into this Affiliation Agreement (this "Agreement"), which is intended to replace, succeed and supersede the Agreement the parties entered into dated July, 2014; and

WHEREAS, it is the goal of the College and the School to provide an educational program that offers the opportunity for students to earn an Associate in Science degree conferred by the College and a Diploma in Nursing conferred by the School, and to do this by combining the best elements of an Associate Degree program with the best elements of a Diploma program by: placing responsibility upon the School for teaching nursing subjects and for providing clinical experience; by placing responsibility for teaching general education courses upon the College; by arranging for the awarding of academic credit by the College for nursing courses offered by the School toward the Associate in Science degree provided these are determined by the faculty of the College to be of the college level; and for the recognition by the School of courses provided by the College toward its’ diploma and toward graduation from the School; and

WHEREAS, it is a further goal of the College and the School to establish this educational program in nursing in such a way that the accreditation of the College by the Commission on Higher Education of Middle States Association of Colleges and Secondary Schools and the accreditation of the School by the ACEN and the New Jersey Board of Nursing will be even more fully justified and enhanced; and

WHEREAS, it is also a goal of the College and the School to establish and operate this program as a mutual cooperative effort of two viable, independent institutions working together to provide an educational program of the highest quality; and

NOW THEREFORE, in consideration of the mutual promises and covenants hereafter contained, the following are the legally binding Articles of Agreement between the College and School:
ARTICLES OF AGREEMENT

I. Program Structure

1. The College and School will jointly and cooperatively conduct and operate an educational program (authorized by the State Board of Higher Education in 1980) leading to an Associate in Science degree (conferred by the College) and to a Diploma in Nursing (awarded by the School) (collectively referred to as the “Cooperative Nursing Program” or “Program”).

2. The College and School agree that the School shall be responsible for teaching nursing subjects and for providing clinical experiences; and the College shall be responsible for teaching all other courses, except those specifically relinquished by the College.

3. The College and School agree that in any marketing or publication (print or electronic) describing or regarding the Program, each party will use the name, logo, and/or other approved service mark of the other party, and of Camden County, in order to fully depict the joint nature of the Program. The parties agree that they will not need to obtain permission in advance for general items such as brochures, course listings, catalogs, signage, print advertising or any publication that is used routinely by either party in maintaining or promoting the Program. However, for items or promotions outside of the ordinary course of business, neither party shall use the other’s name, logo, or other approved servicemark without the express prior written consent of the other party.

4. The School shall file descriptions and syllabi of School courses with the faculty of the College for review and approval for credit toward the Associate in Science degree, and the School agrees that the material actually covered in courses that have been approved by the College shall be substantially that which is set forth in these syllabi. The College shall likewise file with the School descriptions and syllabi of all its courses that are regularly included within its nursing program curriculum.

5. The program of studies must be approved by the Board of Trustees of both School and the College.

6. The College agrees to award to students enrolled in the Program academic credit toward the Associate in Science degree for the courses taught by the School and approved by the College, and the School agrees to accept the courses in this Program provided by the College for credit toward the Diploma in Nursing and toward graduation from the School.

7. The degree of Associate in Science shall be conferred by the College upon each student satisfactorily completing the Program. The award of a Diploma in Nursing shall be exclusively under the jurisdiction of the School. However, the School shall require that each student complete the requirements of the Program (including prerequisites for the Associate in Science degree) as a prerequisite to award of a Diploma in Nursing.

8. (A) Alterations to or modification of the Program leading to the College degree and to the Diploma in Nursing may be made from time to time, provide that both the College and the School mutually agree.
(B) The School will not enter into any RN to BSN articulation agreements with third party institutions without the prior consent of Camden County College.

II. Program Faculty and Governance

9. Full-time faculty of the School may be appointed to clinical rank at the College upon recommendation to the President of the College and approval of College Board of Trustees, but any such faculty so appointed shall not be considered employees of the College, and shall not be entitled to any compensation or benefits from College or rights appurtenant to faculty of the College or under applicable County College law.

10. There shall be established a Joint Advisory Committee (the "Advisory Committee") to consist of the Dean of Nursing, Health Sciences and Human Services, the Director of Nursing Programs of the College, the Dean of the School, and a second representative of the School. Other representatives from education and consumers may be elected by and from those enrolled in the Program. The Advisory Committee is charged with providing consideration and advice regarding questions of an academic or educational character that may arise each college semester. The Advisory Committee shall report its deliberations and recommendations, if any, to the Vice President of Academic Affairs of the College and to the Vice President and Chief Nursing Officer of Our Lady of Lourdes Health Care Services, Inc.

11. There shall be established a Joint Administrative Committee (the "Administrative Committee") which will meet at least once annually and shall consist of the College’s Dean of Nursing, Health Sciences and Human Services, Director of Nursing Programs, and other support department administrators, as well as the Dean and the Associate Dean of the School, and finance personnel from both the School and College. This Administrative Committee shall review all matters concerning student services, finances and reimbursements, and make recommendations to the governing boards of the respective entities.

III. Student Affairs

12. Students in the Program will be admitted to the School by the School and matriculated by the College. Either the College or the School may initiate action concerning withdrawal, dismissal, or readmission of a student, but final action shall be taken only after prior notification of the other party. There will be no discrimination on the basis of race, color, national origin, religion, sex, marital status, sexual orientation or disability. All students of the School have the same rights, privileges, and responsibilities as the students of the College; however, nursing students are also subject to the rules and regulations of the School and each clinical site.

13. All admission criteria regarding acceptance into the cooperative Nursing Program will be printed in the College catalog and shall be reviewed on an annual basis.

14. The College and the School agree to jointly and cooperatively advise students.

   (A) The College will advise all students who are actively seeking a career and who have not yet decided on attending nursing school.
(B) The College will provide general advisement by appointment and walk-in services consistent with normal College business hours and procedures.

(C) The School will provide advisement sessions to pre-nursing students who qualify for and wish to attend School. The School will provide ongoing advisement to students once admitted to the Program.

(D) The School will provide an admissions representative at all College Open Houses.

(E) The School will provide to the College Advisement Center a list of all advisement activities at the beginning of each semester so that it may be circulated to the College’s advisement staff.

15. Each party will provide tutoring for the courses taught by each institution.

(A) The College will provide tutoring for all general education courses.

(B) The School will provide tutoring for all nursing courses.

IV. Payments, Tuition and Fees

16. The College shall establish tuition and fees for all students. The Board of Trustees of the College shall conduct a public hearing, with sufficient notice thereof, so that an opportunity to be heard will be afforded to those members of the College community wishing to address any proposed changes in fees.

17. Notwithstanding the foregoing, nursing differential tuition, nursing and health service fees to be charged for nursing courses in the Program shall be set by the Board of Trustees of the School and must be approved by the Board of Trustees of the College. The Board of Trustees of the College shall conduct a public hearing, with sufficient notice thereof, so that an opportunity to be heard will be afforded to those members of the college community wishing to address any proposed changes in fees.

18. The College will act as the agent for collection of all tuition and all fees for all courses in the Program.

19. The College shall transmit to the School all tuition received by College for all tuition for School courses, including the nursing course fees. The College shall only retain the general service and facility fees and tuition for College courses.

20. (A) The College shall transmit to School an amount equal to 85% of the total semester tuition and fees billed for School nursing courses. The reimbursement will be paid out based on the following schedule:

- for the Fall semester, by November 15 of the same year;
- for the Spring semester, by April 15 of the same year;

Affiliation Agreement
Page 4 of 9
- for the Summer semester, by August 15 of the same year.

(B) The College shall reimburse the School for any remaining tuition and fees collected for the semester, based on the following schedule:

- for the Fall semester, by February 15 of the subsequent year;
- for the Spring semester, by June 25 of the same year;
- for the Summer semester, by September 15 of the same year.

(C) With the initial payment (85% of the total semester tuition and fees billed for School nursing courses), the College shall provide School with an accounting of the names of students enrolled, the number of credits billed to each student and revenues generated. The remaining payment of tuition and fees will exclude student balances that remain outstanding at the time of the College's calculation of the payment due. The School reserves the right to audit the College tuition and fee payment records.

21. The College shall provide the School with notification of students who have outstanding tuition and fee balances, and whether any financial aid is pending relative to the outstanding balance, based on the following schedule:

- for students graduating at the end of the Fall semester, by November 15 of that semester;
- for students graduating at the end of the Spring semester, by April 15 of that semester;
- for students graduating at the end of the Summer semester, by June 30 of that semester;
- for students not graduating at the end of the Fall semester, by December 15 of that semester;
- for students not graduating at the end of the Spring semester, by June 15 following that semester;
- for students not graduating at the end of the Summer semester, by August 15 following that semester.

22. Subject to applicable federal and state laws and College policies:

(A) Registration for individual students will not be permitted unless all tuition and fees from previous semesters are paid.

(B) The College will not allow students who have unpaid tuition and fees to receive official end of semester grades or transcripts, or to complete registration for the following semester.

(C) Students who have not satisfied financial obligations will not be allowed to attend classes or clinical experiences offered by the School.

(D) Upon request, College will provide School with student financial information, such as whether or not a previously unpaid tuition bill has been satisfied.
23. Payments by the College to the School should be made by check payable to:

Our Lady of Lourdes School of Nursing, Inc.
1600 Haddon Avenue
Camden, NJ 08103

and shall be remitted to School Attn: Shirley Richardson, Dean.

V. Compliance; Indemnification

24. (A) Each party shall comply with all federal and state laws, and each party's policies applicable to the Program, including, but not limited to, financial aid, discrimination and employment laws and policies, in all respects.

(B) The School shall comply with all federal and state laws, and College policies, including but not limited to financial aid, discrimination and employment laws and policies, in all respects. The School agrees to indemnify and hold the College harmless from and against any and all claims brought by any person for damages or injury to person or property arising from or out of, directly or indirectly, any alleged violation of any federal or state law or College policy by the School, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the School, even though such claim would otherwise be barred by workers compensation laws.

(C) The School agrees to indemnify and hold the College harmless from and against any and all claims brought by third persons for damages or injury to person or property brought on account of, directly or indirectly, any claim of professional negligence or failure to supervise or educate any student of the School, or arising, directly or indirectly, from any nursing or clinical activity of the School’s students, faculty or administrators, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the School, even though such claim would otherwise be barred by workers compensation laws.

(D) The School agrees to indemnify and hold the College harmless from and against any and all claims brought by any person for damages or injury to person or property arising, directly or indirectly, (1) from or out of this Agreement or (2) any action or failure to act by the School pertaining to any Student, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the School, even though such claim would otherwise be barred by workers compensation laws.

(E) The College agrees to indemnify and hold the School harmless from and against any and all claims brought by any person for damages or injury to person or property arising from or out of, directly or indirectly, any alleged violation of any federal or state law or School policy by the College, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the College, even though such claim would otherwise be barred by workers compensation laws.

(F) The College agrees to indemnify and hold the School harmless from and against any and all claims brought by any person for damages or injury to person or property
arising, directly or indirectly, (1) from or out of this Agreement or (2) any action or failure to act by the College pertaining to any Student, as well as counsel fees and costs of defense of any such claim.

(G) The parties do not intend to benefit any third-Party by any language contained herein, and fully intend to retain for each of themselves all immunities, and other heightened standards of proof which they are each afforded at law, the terms of this document notwithstanding.

VI. Insurance

25. (A) The School shall carry general liability coverage with policy limits of not less than $1,000,000 per occurrence, $2,000,000 aggregate and shall cause the College to be an additional insured on any and all School’s liability insurance policies, excluding professional liability, and cause the policies to provide that such policies may not be cancelled without first providing at least sixty (60) days’ notice to the College.

(B) The School shall provide “per occurrence” professional liability insurance, with policy limits of not less than $1,000,000 per occurrence, $3,000,000 per aggregate.

(C) The School shall provide an umbrella or additional Excess Limits of Liability of not less than $5,000,000 per occurrence, $5,000,000 annual aggregate.

(D) The School shall provide statutory Workers’ Compensation coverage payable in accordance with New Jersey law on coverage A and the following limits of liability for Employers Liability Coverage B: $1,000,000 for each employee, $1,000,000 for each accident $1,000,000 Disease – Policy Limit.

(E) The College shall carry general liability insurance with policy limits not less than $1,000,000 per occurrence $2,000,000 aggregate and shall cause the School to be an additional insured on any and all College liability insurance policies, excluding professional liability, and to cause the policies to provide that such policies may not be cancelled without first providing at least 60 days’ notice to the School.

(F) The College shall provide statutory Workers’ Compensation coverage payable in accordance with New Jersey law on coverage A and the following limits of liability for Employers Liability Coverage B: $1,000,000 each Employee and $1,000,000 for each accident.

VII. Notices

26. All notices and other documents, including reconciliations, financial or student data, required under this Agreement should be sent as follows:

If to School:

Dean, Our Lady of Lourdes School of Nursing
1600 Haddon Avenue
Camden, NJ 08103
If to College:

Camden County College
Office of the President
200 College Drive
Blackwood, New Jersey 08012

Copy to: General Counsel,
Camden County College, Roosevelt 104
P.O. Box 200,
Blackwood, NJ 08012

VIII. Financial Aid

28. The College certifies that it is eligible to participate in the federal Title IV programs. The School agrees that it shall not deliver more than forty-nine percent (49%) of the total credits of the Program. The College’s Office of Financial Aid will administer all financial aid programs in accordance with current federal, state and institutional regulations for students who enroll in the School. The School will provide to the College any information requested to administer the financial aid programs. The School agrees not to administer any financial aid programs.

IX. Term

29. This Agreement shall have an Effective Date of July 31, 2017 and shall remain in effect for a three years term, ending on July 30, 2020. This Agreement shall be reviewed annually by both parties who may amend the terms hereof by mutual consent. This Agreement may be terminated by either party at any time upon one years’ notice in writing. All notices will be sent certified and return receipt requested.

X. Miscellaneous Provisions

30. This Agreement supersedes all prior consortium and/or affiliations agreements between the School and the College including that agreement signed and effective as of July 2014.

31. Both parties reserve to themselves the remedies available to each under the laws of the State of New Jersey for breach of this Agreement. In the event of a breach, the non-breaching party shall give the other party notice of the acts or omissions alleged to constitute a breach and shall allow the other party fourteen (14) days to remedy said breach before instituting any action based upon said breach. Only one cure period is allowed.

32. This Agreement is intended to be fully integrated. This means that it contains all of the terms agreed to by the parties, and that any promise, representation or agreement not contained in this document is of no legal effect.
33. In the event any provision of this Agreement is found to be invalid or unenforceable, the remaining portions of the Agreement shall be considered valid and enforceable, it being the express intention of the parties that this Agreement is entirely severable.

34. This Agreement may only be modified or amended in writing, signed by both of the parties.

35. This Agreement shall be governed by and construed in accordance with the laws of the State of New Jersey without regard to its conflict of laws analysis. Both parties agree to personal jurisdiction of the Superior Court of the State of New Jersey, Camden County. Any action or claim arising hereunder shall be venued in the Superior Courts of the State of New Jersey, County of Camden.

36. Each party has the right to insist upon strict performance of the terms of this Agreement. Any failure to insist upon strict performance on any occasion or number of occasions shall not be considered a waiver of the right to insist upon strict performance in the future.

37. This Agreement may not be assigned by either party. It shall be binding upon the parties, their heirs, successors and assigns. The headings in this Agreement are intended for the convenience only, have no meaning, and shall not add to, modify or alter the terms of this agreement.

38. College represents and warrants to School that College, its officers, directors and employees involved with the Program: (i) are not currently excluded, debarred, or otherwise ineligible to participate in the federal health care programs as defined in 42 U.S.C. Section 1320a-7b(f) or any state healthcare programs (collectively, “Healthcare Programs”); (ii) have not been convicted of a civil or criminal offense related to the provision of healthcare items or services; (iii) are not, nor have ever been included on the Office of Foreign Assets Control, Specially Designated Nationals and Blocked Persons list; and (iv) are not, to the best of School’s knowledge, under investigation or otherwise aware of any circumstances which may result in College being excluded from participation in any Healthcare Programs. This shall be an ongoing representation and warranty during the term of this Agreement and College shall immediately notify School of any change in the status of the representations and warranties set forth in this section. Any breach of this section shall give School the right to terminate this Agreement immediately for cause.

OUR LADY OF LOURDES
SCHOOL OF NURSING, INC.

Mark Nessel
Executive Vice President & COO
Our Lady of Lourdes Health Care Services, Inc.

CAMDEN COUNTY COLLEGE

Donald A. Borden
President
Amendment and Supplement to Agreement with
Camden County College

This document amends and supplements the agreement regarding Our Lady of Lourdes School of Nursing with Camden County College dated July 2017.

Any language in any document, on any website, subscription plan, or anywhere else notwithstanding, the Parties specifically agrees to the following provisions as conditions of contract:

1) The parties agree this contract is written and is to be interpreted under New Jersey law without regard to conflicts of laws; and agree to exclusive jurisdiction and venue in the Superior Court of the State of New Jersey, Camden vicinage; and

2) Terminate for Convenience of the Government: The College may upon no less than 30 days written notice terminate this contract, in whole or in part, when it is in the College’s interest, any other terms herein notwithstanding.

3) Agree that the contract may be executed at a separate time and place by each party; and

4) N.J.A.C. § 17:44-2.2 State Mandated authority to audit contract records. Pursuant to the N.J. Administrative Code, this and all other public entities are required to provide that:
   (a) Relevant records of private vendors or other persons entering into contracts with covered entities are subject to audit or review by OSC pursuant to N.J.S.A. 52:15C-14(d).
   (b) As of November 15, 2010, all covered entities shall insert the following language in any new contract:
       "(The contract partner) shall maintain all documentation related to products, transactions or services under this contract for a period of five years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller upon request."

5) Parties agree to adopt and incorporate herein by reference the Mandatory State Required language attached hereto at:
   a) Attachment A- Non-Discrimination provision;
   b) Attachment B- Americans with Disabilities Act; and
   c) Absence of investment in Iran- Attachment C- Certification.

6) All Requirements and conditions included in any RFQ/RFP or bid package issued on behalf of the College are incorporated herein as if set forth at length.

The parties hereto by their authorized representatives agree to all the above.

For Camden County College

Donald A. Borden
President
Date: 9/14/17

For Our Lady of Lourdes

Mark Nessel
Title: 2UP/COO
Date: 10/3/17

Rev 041116
ATTACHMENT A
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)
N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.
In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

1. Letter of Federal Affirmative Action Plan Approval; or
2. Certificate of Employee Information Report; or
3. Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Public Contracts Equal Employment Opportunity Compliance as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Public Contracts Equal Employment Opportunity Compliance for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:2.
ATTACHMENT B
AMERICANS WITH DISABILITIES ACT
Mandatory Language
Equal Opportunity for Individuals with Disabilities.

The Contractor and the County do hereby agree that the provisions of Title II of the
Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. s12101 et seq.), which
prohibits discrimination on the basis of disability by public entities in all services, programs,
and activities provided or made available by public entities, and the rules and
regulations promulgated pursuant thereunto, are made a part of this contract. In
providing any aid, benefit, or service on behalf of the County pursuant to this contract, the
Contractor agrees that the performance shall be in strict compliance with the Act. In the
event that the Contractor, its agents, servants, employees, or subcontractors violate or
are alleged to have violated the Act during the performance of this contract, the
Contractor shall defend the County in any action or administrative proceeding
commenced pursuant to this Act. The Contractor shall indemnify, protect, and save
harmless the County, its agents, servants, and employees from and against any and all
suits, claims, losses, demands, or damages of whatever kind or nature arising out of or
claimed to arise out of the alleged violation. The Contractor shall, at its own expense,
appear, defend, and pay any and all charges for legal services and any and all costs and
other expenses arising from such action or administrative proceeding or incurred in
connection therewith. In any and all complaints brought pursuant to the County's grievance
procedure, the Contractor agrees to abide by any decision of the County, which is
rendered pursuant to, said grievance procedure. If any action or administrative
proceeding results in an award of damages against the County or if the County incurs any
expense to cure a violation of the ADA which has been brought pursuant to its grievance
procedure, the Contractor shall satisfy and discharge the same at its own expense.

The County shall, as soon as practicable after a claim has been made against it,
give written notice thereof to the Contractor along with full and complete particulars of the
claim. If any action or administrative proceeding is brought against the County or any of
its agents, servants, and employees, the County shall expeditiously forward or have
forwarded to the Contractor every demand, complaint, notice, summons, pleading, or other
process received by the County or its representatives.

It is expressly agreed and understood that any approval by the County of the
services provided by the Contractor pursuant to this contract will not relieve the Contractor of
the obligation to comply with the Act and to defend, indemnify, protect, and save harmless
the Owner pursuant to this paragraph.

It is further agreed and understood that the Owner assumes no obligation to
indemnify or save harmless the Contractor, its agents, servants, employees and
subcontractors for any claim which may arise out of their performance of this agreement.
Furthermore, the Contractor expressly understands and agrees that the provisions of this
indemnification clause shall in no way limit the Contractor’s obligations assumed in this
agreement, nor shall they be construed to relieve the Contractor from any liability, nor
preclude the Owner from taking any other actions available to it under any other provisions of
this agreement or otherwise at law.
Attachment C

DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

PART 1: CERTIFICATION VENDORS/CONTRACTORS/FIRMS MUST COMPLETE PART 1 BY CHECKING EITHER BOX. FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at: http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf

Vendors/Contractors/Firms must review this list prior to completing the below certification. Failure to complete the certification and return it with the required contract paperwork will render a contract proposal non-responsive and the contract will be rejected. If the Director finds a person or entity to be in violation of law, she/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

PLEASE CHECK THE APPROPRIATE BOX:

☑ I certify, pursuant to Public Law 2012, c. 25, that neither the vendor/contractor/firm listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012 c. 25, ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

☐ I am unable to certify as above because the vendor/contractor/firm and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 List. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN - add additional sheets if necessary.

You must provide a detailed, accurate and precise description of the activities of the contracting person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing below:

Name of Entity: ___________________________; Relationship to Bidder: ___________________________

Description of Activities: ________________________________________________________________

______________________________________________

Duration of Engagement: ___________________________ Anticipated Cessation Date: ______________

Bidder/Offeror Contact Name: ___________________________; Contact Phone: ___________________________

Sign Certification - next page
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

VENDOR/CONTRACTOR/FIRM: ________________________________

Certification:

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that Camden County College is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the College to notify the College in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with Camden County College and that the College at its sole option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print): Mark P. Nessel
Signature: ____________________________
Title: Executive Vice President, CFO
Date: ____________________________
Consortium Agreement between Our Lady of Lourdes Institute of Wholistic Studies 
And 
Camden County College

BACKGROUND

WHEREAS, Camden County College (hereafter called the “College”) is approved by the New Jersey Commission on Higher Education to award the Associate in Arts, Associate in Applied Science, Associate in Fine Arts, and Associate in Applied Sciences degrees, is accredited by the Commission on Higher Education of the Middle States Association of Colleges and Secondary Schools, and provides for the needs of the county with respect to public higher education on the level of the first two years of education beyond the high school;

WHEREAS, Our Lady of Lourdes Institute of Wholistic Studies (hereafter called the “Institute”) is approved by the State of New Jersey, and the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) to conduct a program in Massage Therapy to educate individuals to become Massage Therapists;

WHEREAS, Camden County College and Our Lady of Lourdes Institute of Wholistic Studies desire to enter into this Agreement, which is intended to replace and supercede the Agreement the parties entered into dated August 2013;

WHEREAS, it is the goal of the College and the Institute to provide an educational program that offers the opportunity for students to earn an Associate in Applied Science degree or a certificate conferred by the College, and a Diploma conferred by the Institute, and to do this by combining the best elements of an Associate Degree program with the best elements of a Diploma Program, by placing responsibility upon the Institute for teaching Massage Therapy subjects and for providing clinical experience, by placing responsibility for teaching general education courses upon the College, by arranging for the awarding of academic credit by the College for Massage courses offered by the Institute toward the Associate in Applied Science degree and certificate, provided these are determined by the faculty of the College to be of the college level, and for the recognition by the Institute of courses provided by the College toward graduation from the Institute;

WHEREAS, it is a further goal of the College and the Institute to establish this educational program in Massage Therapy in such a way that the accreditation of the College by the Commission on Higher Education of Middle States Association of Colleges and Secondary Schools and the accreditation of the Institute will be even more fully justified and enhanced; and

WHEREAS, it is an additional goal of the College and the Institute to establish and operate this program as a mutual cooperative effort of two viable, independent institutions working together to provide an educational program of the highest quality;
NOW THEREFORE, in consideration of the mutual promises and covenants hereafter contained, the following are the legally binding Articles of Agreement between Camden County College and Our Lady of Lourdes Institute of Wholistic Studies:

ARTICLES OF AGREEMENT

I. Program Structure

1. The College and the Institute, will jointly and cooperatively conduct and operate an educational program (authorized by the State Board of Higher Education in 2001) leading to an Associate in Applied Science degree and a Certificate of Achievement conferred by the College and a Diploma awarded by the Institute.

2. The College and the Institute agree to place responsibility for teaching Massage Therapy subjects and for providing clinical experience upon the Institute, and the responsibility for teaching all other courses, except those specifically relinquished by the College, upon the College.

3. The College and the Institute agree that in any marketing or publication (print or electronic) describing or regarding this Program, each party will use the name, logo, and/or other approved trademark of the other party, and of Camden County, in order to fully depict the joint nature of the Program. The parties agree that they will not need to obtain permission in advance for general items such as brochures, course listings, catalogs, signage, print advertising or any publication that is used routinely by either party in maintaining or promoting the joint Program. However, for items or promotions outside of the ordinary course of business, neither party shall use the other’s name, logo, or other approved trademark without the express prior written consent of the other party which shall not be unreasonably withheld or delayed.

4. The Institute shall file descriptions and syllabi of Institute courses with the faculty of the College for review and approval for credit toward the Associate in Applied Science degree and the Certificate of Achievement, and the Institute agrees that the material actually covered in courses that have been approved by the College shall be substantially that which is set forth in these syllabi. The College shall likewise file with the Institute descriptions and syllabi of all its courses that are regularly included in the Massage Therapy program.

5. The Massage Therapy Program of studies must be approved by the Board of Trustees of both Our Lady of Lourdes Institute of Wholistic Studies and Camden County College.
6. The College agrees to award to students enrolled in this Program academic credit toward the Associate in Applied Science degree for the courses taught by the Institute and approved by the College, and the Institute agrees to accept the courses in this Program provided by the College for credit toward graduation from the Institute.

7. The degree of Associate in Applied Science shall be conferred by the College upon each student satisfactorily completing the Program, provided that the student is recommended for the degree by the faculty of the College, with the concurrence of the faculty of the Institute. Awarding of the Institute’s Diploma shall be exclusively under the jurisdiction of the Institute. However, the Institute shall require that each student complete the requirements for an Associate in Applied Science degree and/or a certificate as a prerequisite to award a Diploma from the Institute.

8. (A) Alterations in or modification of the Cooperative Massage Therapy Program leading to the College degree and to the Institute’s Diploma may be made from time to time, provided that both the College and the Institute agree.

(B) The College and the Institute will work together cooperatively and jointly enter into any and all Bachelor Degree articulation agreements with third party institutions.

II. Program Faculty and Governance

9. Full-time faculty of the Institute may be appointed to clinical rank at the College upon recommendation to the President of the College and approval of the College Board of Trustees, but any such faculty so appointed shall not be considered employees of the College, and shall not be entitled to any compensation or benefits from the College or rights appurtenant to faculty of the College.

10. There shall be established a Joint Advisory Committee to consist of the Dean of Math, Science and Health Careers, the Dean of Lourdes Institute of Wholistic Studies, the Coordinator of the Massage Therapy Program, College’s Coordinator of Allied Health and a second representative of the Institute. Other representatives from Education and Consumers may be elected by and from those enrolled in the Program. To this Committee shall be referred for consideration and advice, questions of an academic or educational character that may arise each college semester and the Committee shall report its deliberations and recommendations, if any, to the Vice President of Academic Affairs at the College and the Dean of Students of the Institute.

11. There shall be established a Joint Administrative Committee which will meet at least once each year to consist of the College’s Vice-President of Academic
III. Student Affairs

12. Students in the Massage Therapy Program will be admitted to the Institute by the Institute and matriculated by the College. Either the College or the Institute may initiate action concerning withdrawal, dismissal, or readmission of a student, but final action shall be taken only after prior notification of the other party. There will be no discrimination on the basis of race, color, national origin, religion, sex, marital status, sexual orientation or disability. All students of the Institute have the same rights, privileges, and responsibilities as the students of the College; however, Massage Therapy students are subject to the rules and regulations of the Institute and each clinical site.

13. Institute specifically acknowledges that it may be privy to information belonging or pertaining to students of the College, the privacy of which is subject to protection by federal, state and local laws and regulations, as well as by case law. By way of example, students’ information is protected by the Family Educational Rights and Privacy Act of 1974, 20 U.S.C. sec. 1232g, commonly known as the “Buckley Amendment.” All such student information is hereinafter referred to as the “Student Private Information.” Institute shall not disclose, permit to be disclosed, or provide access to any person or entity who does not have an absolute need to know, the Student Private Information. Institute agrees to indemnify and hold the College harmless from and against any claim arising, directly or indirectly, from Institute’s disclosure or release of any Student Private Information, including but expressly not limited to compensatory, consequential and punitive damages, fines, penalties, and attorney fees and expenses incurred in the investigation and defense of any such claim.

14. All admission criteria regarding acceptance into the Cooperative Massage Therapy Program will be printed in the College catalog and be reviewed on an annual basis by the Joint Standing Committee on Admissions.

15. The College and the Institute agree to jointly and cooperatively advise students.
   (A) The College will advise all students who are actively seeking a career and who have not yet decided on attending the Institute.
(B) The College will provide general advisement by appointment and walk-in services consistent with normal College business hours and procedures.

(C) The Institute will provide advisement sessions to students who qualify for and wish to attend the Institute.

(D) The Institute will provide an admissions representative at all College Open Houses.

(E) The Institute will provide to the College Advisement Center a list of all advisement activities at the beginning of each semester so that it may be circulated to the College's advisement staff.

16. Each party will provide tutoring for the courses taught by each institution.
   (A) The College will provide tutoring for all general education courses.
   (B) The Institute will provide tutoring for all Massage Therapy courses.

IV. Payments, Tuition and Fees

17. The College shall establish tuition and fees for all students. The Board of Trustees of the College shall conduct a public hearing, with sufficient notice thereof, so that an opportunity to be heard will be afforded to those members of the college community wishing to address any proposed changes in fees.

18. Notwithstanding the foregoing Massage Therapy differential tuition, massage and health service fees to be charged for massage courses in the program shall be set by the Board of Trustees of the Institute and must be approved by the Board of Trustees of the College. The Board of Trustees of the College shall conduct a public hearing, with sufficient notice thereof, so that an opportunity to be heard will be afforded to those members of the college community wishing to address any proposed changes in fees.

19. The College will collect tuition and all fees for all courses in the Cooperative Massage Therapy Program.

20. The College will reimburse to the Institute all tuition including the Massage Therapy tuition differential and all Massage Therapy fees collected by the College. The College will retain the General Service Fees.

21. (A) Pursuant to paragraph 20, the College will reimburse the Institute an amount equal to 85% of the total semester tuition and fees billed for Institute courses. The reimbursement will be paid out based on the following schedule:
   - for the Fall semester, by November 15 of the same year;
   - for the Spring semester, by April 15 of the same year;
- for the Summer semester, by August 15 of the same year.

(B) The College will reimburse the Institute for any remaining tuition and fees collected for the semester, based on the following schedule:
- for the Fall semester, by February 15 of the subsequent year;
- for the Spring semester, by June 25 of the same year;
- for the Summer semester, by September 15 of the same year.

(C) With the initial payment (85% of the total semester tuition and fees billed for Institute courses), the College will provide Institute with an accounting of the names of students enrolled, the number of credits billed to each student and revenues generated. The remaining payment of tuition and fees will exclude student balances that remain outstanding at the time of the College’s calculation of the payment due. The Institute reserves the right to audit the College tuition and fee payment records.

22. The College agrees to provide the Institute with notification of students who have outstanding tuition and fee balances, and whether any financial aid is pending relative to the outstanding balance, based on the following schedule:
- for students graduating at the end of the Fall semester, by November 15 of that semester;
- for students graduating at the end of the Spring semester, by April 15 of that semester;
- for students graduating at the end of the Summer semester, by June 30 of that semester;
- for students not graduating at the end of the Fall semester, by December 15 of that semester;
- for students not graduating at the end of the Spring semester, by June 15 following that semester;
- for students not graduating at the end of the Summer semester, by August 15 following that semester.

23. Subject to applicable federal and state laws and College policies:

(A) Registration for individual students will not be permitted unless all tuition and fees from previous semesters are paid.

(B) The College will not allow students who have unpaid tuition and fees to receive official end of semester grades or transcripts, or to complete registration for the following semester.

(C) Students who have not satisfied financial obligations will not be allowed to attend classes or clinical experiences offered by the Institute.
(D) Upon request, College will provide Institute with student financial information, such as whether or not a previously unpaid tuition bill has been satisfied.

24. Payments by the College to the Institute should be made by check payable to:

Our Lady of Lourdes Institute of Wholistic Studies
and delivered to:

Dr. Frank Pileggi
Dean
Lourdes Institute of Wholistic Studies
1600 Haddon Avenue
Camden, NJ 08103

V. Indemnification

25. (A) The Institute shall comply with all federal and state laws, and College policies, including but not limited to financial aid, discrimination and employment laws and policies, in all respects. The Institute agrees to indemnify and hold the College harmless from and against any and all claims brought by any person for damages or injury to person or property arising from or out of, directly or indirectly, any alleged violation of any federal or state law or College policy by the Institute, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the Institute, even though such claim would otherwise be barred by workers compensation laws.

(B) The Institute agrees to indemnify and hold the College harmless from and against any and all claims brought by third persons for damages or injury to person or property brought on account of, directly or indirectly, any claim of professional negligence or failure to supervise or educate any student of the Institute, or arising, directly or indirectly, from any Massage Therapy or clinical activity of the Institute’s students, faculty or administrators, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the Institute, even though such claim would otherwise be barred by workers compensation laws.

(C) The Institute agrees to indemnify and hold the College harmless from and against any and all claims brought by any person for damages or injury to person or property arising, directly or indirectly, (1) from or out of this Agreement or (2) any action or failure to act by the Institute pertaining to any Student, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the Institute,
even though such claim would otherwise be barred by workers compensation laws.

(D) The College agrees to indemnify and hold the Institute harmless from and against any and all claims brought by any person for damages or injury to person or property arising from or out of, directly or indirectly, any alleged violation of any federal or state law or Institute policy by the College, as well as counsel fees and costs of defense of any such claim. This indemnification shall include any employee, agent or servant of the College, even though such claim would otherwise be barred by workers compensation laws.

(E) The College agrees to indemnify and hold the Institute harmless from and against any and all claims brought by any person for damages or injury to person or property arising, directly or indirectly, (1) from or out of this Agreement or (2) any action or failure to act by the College pertaining to any Student, as well as counsel fees and costs of defense of any such claim.

VI. Insurance

26. (A) The Institute shall carry general liability insurance with policy limits of not less than $1,000,000 per occurrence, $2,000,000 aggregate with a maximum deductible $1,000, and shall cause the College to be an additional insured on any and all Institute liability insurance policies, excluding professional liability, and cause the policies to provide that such policies may not be cancelled without first providing at least 60 days notice to the College.

(B) The Institute shall provide "per occurrence" professional liability insurance, with policy limits of not less than $1,000,000 per occurrence, $3,000,000 per aggregate, and a deductible of not more than $5,000 per occurrence.

(C) The Institute shall provide an umbrella policy of not less than "$5,000,000 per occurrence, $5,000,000 annual aggregate.

(D) The Institute shall provide Statutory Workers’ Compensation Benefits Payable in Accordance with Laws of The State of New Jersey with the following limits of liability: $1,000,000. Each Employee, $1,000,000. Each Accident, $1,000,000.

(E) The College shall carry general liability insurance with policy limits not less than $1,000,000 per occurrence $2,000,000 aggregate and shall cause the Institute to be an additional insured on any and all College liability insurance policies, excluding professional liability, and to cause the policies to provide that such policies may not be cancelled without first providing at least 60 days notice to the Institute.
(F) The College shall provide Statutory Workers’ Compensation Benefits Payable in Accordance with Laws of The State of New Jersey with the following limits of liability: $1,000,000. Each Employee, $1,000,000. Each Accident, $1,000,000.

VII. Notices

27. All notices and other documents including reconciliations, financial or student data required under this Agreement should be sent:
   If to Institute:
   
   Lourdes Institute of Wholistic Studies
   Dr. Frank Pileggi
   Dean, Institute of Wholistic Studies
   1600 Haddon Avenue
   Camden, NJ 08103

   If to College:
   Donald A. Borden, President
   Camden County College
   200 College Drive
   Blackwood, NJ 08012

   With a copy to:
   Camden County College
   Dr. William Lavell
   Interim Dean of Math, Science and Health Careers
   200 College Drive
   Blackwood, NJ 08012

   Karl N. McConnell, General Counsel
   Camden County College
   200 College Drive
   Blackwood, NJ 08012

VIII. Financial Aid

28. Camden County College certifies that it is eligible to participate in the federal Title IV programs. The School agrees that it shall not deliver more than 49% of the total credits of the program. The College’s Office of Financial Aid will administer all financial aid programs in accordance with current federal, state and institutional regulations for students who enroll in the Institute. The Institute will provide to the College any information requested to administer
the financial aid programs. The Institute agrees not to administer any financial aid programs.

29. The Institute agrees to cooperate with College to ensure compliance with all financial aid regulations.

IX. Term

30. This Agreement, dated September 1, 2016 will be for a three year term, ending on August 31, 2019. The Agreement shall be reviewed annually in June by both parties who may amend the Agreement by mutual consent. The Agreement may be terminated by either party at any time upon one years’ notice in writing. All notices will be sent certified and return receipt requested.

X. Miscellaneous Provisions

31. This Agreement supersedes all prior consortium and/or affiliations agreements between the Institute and the College including that agreement signed and effective in August 2013.

32. Default. Both parties reserve to themselves the remedies available to each under the laws of the State of New Jersey for breach of this Agreement. Either party shall give the other notice of the acts or omissions alleged to constitute a breach and shall allow the other party fourteen (14) days to remedy said breach before instituting any action based on said breach.

33. This Agreement is intended to be fully integrated. This means that it contains all of the terms agreed to by the parties, and that any promise, representation or agreement not contained in this document is of no legal effect.

34. In the event any provision of this Agreement is found to be invalid or unenforceable, the remaining portions of the Agreement shall be considered valid and enforceable, it being the express intention of the parties that this Agreement is entirely severable.

35. This Agreement may only be modified or amended in writing, signed by both of the parties.

36. This Agreement shall be governed by and construed in accordance with the laws of the State of New Jersey. Both parties agree to submit themselves to the personal jurisdiction of the State of New Jersey. Any action or claim arising hereunder shall be venued in the Courts of the State of New Jersey, County of Camden.
37. Each party has the right to insist upon strict performance of the terms of this Agreement. Any failure to insist upon strict performance on any occasion or number of occasions shall not be considered a waiver of the right to insist upon strict performance in the future.

38. This Agreement may not be assigned by either party. It shall be binding upon the parties, their heirs, successors and assigns. The headings in this Agreement are intended for the convenience only, have no meaning, and shall not add to, modify or alter the terms of this agreement.

OUR LADY OF LOURDES INSTITUTE OF WHOLISTIC STUDIES

Frank Pileggi PhD
Name
Signature
Dean, LIWS
Title

CAMDEN COUNTY COLLEGE

Donald A. Borden
Name
Signature
President, Camden County College
Title
Amendment and Supplement to Agreement with
Camden County College

This document amends and supplements the agreement regarding Our Lady of Lourdes Institute of Wholistic Studies with Camden County College dated _____________.

Any language in any document, on any website, subscription plan, or anywhere else notwithstanding, the Parties specifically agrees to the following provisions as conditions of contract:

1) The parties agree this contract is written and is to be interpreted under New Jersey law without regard to conflicts of laws; and agree to exclusive jurisdiction and venue in the Superior Court of the State of New Jersey, Camden vicinage; and

2) Terminate for Convenience of the Government: The College may upon no less than 30 days written notice terminate this contract, in whole or in part, when it is in the College's interest, any other terms herein notwithstanding.

3) Agree that the contract may be executed at a separate time and place by each party; and

4) N.J.A.C. § 17:44-2.2 State Mandated authority to audit contract records. Pursuant to the N.J. Administrative Code, this and all other public entities are required to provide that:
   (a) Relevant records of private vendors or other persons entering into contracts with covered entities are subject to audit or review by OSC pursuant to N.J.S.A. 52:15C-14(d).
   (b) As of November 15, 2010, all covered entities shall insert the following language in any new contract:
       
       "(The contract partner) shall maintain all documentation related to products, transactions or services under this contract for a period of five years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller upon request."

5) Parties agree to adopt and incorporate herein by reference the Mandatory State Required language attached hereto at:
   a) Attachment A- Non-Discrimination provision;
   b) Attachment B- Americans with Disabilities Act; and
   c) Absence of investment in Iran- Attachment C- Certification.

6) All Requirements and conditions included in any RFQ/RF or bid package issued on behalf of the College are incorporated herein as if set forth at length.

The parties hereto by their authorized representatives agree to all the above.

For Camden County College

Donald A. Borden
President

Date: 11/29/16

For Our Lady of Lourdes Institute of Wholistic Studies

Title: ________________

Date: 12/8/16

Rev 041116
ATTACHMENT A
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE N.J.S.A. 10:5-31
et seq. (P.L. 1975, C. 127)
N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.
In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

1. Letter of Federal Affirmative Action Plan Approval; or
2. Certificate of Employee Information Report; or
3. Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Public Contracts Equal Employment Opportunity Compliance as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Public Contracts Equal Employment Opportunity Compliance for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:2
ATTACHMENT B

AMERICANS WITH DISABILITIES ACT

Mandatory Language

Equal Opportunity for Individuals with Disabilities.

The Contractor and the County do hereby agree that the provisions of Title II of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. §12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereunto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the County pursuant to this contract, the Contractor agrees that the performance shall be in strict compliance with the Act. In the event that the Contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the Contractor shall defend the County in any action or administrative proceeding commenced pursuant to this Act. The Contractor shall indemnify, protect, and save harmless the County, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The Contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the County's grievance procedure, the Contractor agrees to abide by any decision of the County, which is rendered pursuant to, said grievance procedure. If any action or administrative proceeding results in an award of damages against the County or if the County incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the Contractor shall satisfy and discharge the same at its own expense.

The County shall, as soon as practicable after a claim has been made against it, give written notice thereof to the Contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the County or any of its agents, servants, and employees, the County shall expeditiously forward or have forwarded to the Contractor every demand, complaint, notice, summons, pleading, or other process received by the County or its representatives.

It is expressly agreed and understood that any approval by the County of the services provided by the Contractor pursuant to this contract will not relieve the Contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the Owner pursuant to this paragraph.

It is further agreed and understood that the Owner assumes no obligation to indemnify or save harmless the Contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this agreement. Furthermore, the Contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the Contractor's obligations assumed in this agreement, nor shall they be construed to relieve the Contractor from any liability, nor preclude the Owner from taking any other actions available to it under any other provisions of this agreement or otherwise at law.
Attachment C

DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

PART 1: CERTIFICATION VENDORS/CONTRACTORS/FIRMS MUST COMPLETE PART 1 BY CHECKING EITHER BOX. FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is listed on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at: http://www.state.nj.us.treasury/purchase/pdf/Chapter25List.pdf

Vendors/Contractors/Firms must review this list prior to completing the below certification. Failure to complete the certification and return it with the required contract paperwork will render a contract proposal non-responsive and the contract will be rejected. If the Director finds a person or entity to be in violation of law, she/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

PLEASE CHECK THE APPROPRIATE BOX:

☐ I certify, pursuant to Public Law 2012, c. 25, that neither the vendor/contractor/firm listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012 c. 25, ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

☐ I am unable to certify as above because the vendor/contractor/firm and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 List. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN - add additional sheets if necessary.

You must provide a detailed, accurate and precise description of the activities of the contracting person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing below:

Name of Entity: ___________________________; Relationship to Bidder: ___________________________

Description of Activities: ________________________________________________________________
______________________________________________________________

Duration of Engagement: _______________ Anticipated Cessation Date: _______________________

Bidder/Offeror Contact Name: ___________________________; Contact Phone: ____________________

Sign Certification - next page
DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

VENDOR/CONTRACTOR/FIRM: ____________________________

Certification:

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that Camden County College is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the College to notify the College in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with Camden County College and that the College at its sole option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print): Frank Pacifico, Jr.
Signature: ____________________________
Title: Dean
Date: 12/19/16
Appendix B

CREDIT COURSE CRITERIA
for
Year Three Review of All Remaining Courses Eligible for State Funding

Academic Year 2017-2018

Background

State aid to New Jersey’s community colleges is distributed through a formula that includes funding for the number of credit hours generated in fundable credit courses during the prior fiscal year. FY 2018 state aid will be based on audited FY 2017 credit hours. Similarly, FY 2019 state funding will be based on audited FY 2018 credit hours, and so on.

Credit Course Criteria

The county college shall certify in its transmittal to the CRC that all submitted courses are eligible for state support under the Statement of Auditing and Accounting Standards for County College (see Attachment C). The number of credit hours shall not exceed the number of credits that a student is charged for the course. Additionally, state fundable credit hours are separate and apart from the amount that faculty may be paid for teaching the course.

Credit hours that are assigned to each credit course on the inventory are based on the following criteria:

- One credit hour for each hour per week for 15 weeks of lecture plus one credit for every two hours per week for 15 weeks of formally scheduled laboratory or studio (or the equivalent attained by scheduling more minutes of class activity per week for fewer weeks in the semester).

  Fractions of credits may be awarded for developmental courses that grant institutional credit provided there is congruence between the fractional class time and the fractional amount of credit awarded.

  Whole numbers will continue to be used for credit granted for the completion of general education and specialized courses in academic degree and certificate programs as per current policies and practices.

- A minimum of 45 hours must be completed by a student during a semester or term to earn one (1) credit for practical experiences such as cooperative education, internships, field study, or practicum experiences.

The CRC is NOT conducting a review of curriculum or content; this is a review of adherence to funding eligibility standards only.
### Recommended In-class and Out-of-class Instructional Time

#### Lecture Courses: Faculty Instruction and Outside Student Work (1:1 ratio)

<table>
<thead>
<tr>
<th>Credits awarded</th>
<th>Minimum contact time per week</th>
<th>Minimum instructional time for 15 weeks</th>
<th>Minimum out of class student work per week</th>
<th>Minimum out of class student work total for 15 weeks</th>
<th>Total instructional time and out of class time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>50 contact minutes</td>
<td>750 contact minutes</td>
<td>100 minutes</td>
<td>1500 minutes</td>
<td>2250 minutes (37.5 hours)</td>
</tr>
<tr>
<td>2</td>
<td>100 contact minutes</td>
<td>1500 contact minutes</td>
<td>200 minutes</td>
<td>3000 minutes</td>
<td>4500 minutes (75.0 hours)</td>
</tr>
<tr>
<td>3</td>
<td>150 contact minutes</td>
<td>2250 contact minutes</td>
<td>300 minutes</td>
<td>4500 minutes</td>
<td>6750 minutes (112.50 hours)</td>
</tr>
<tr>
<td>4</td>
<td>200 contact minutes</td>
<td>3000 contact minutes</td>
<td>400 minutes</td>
<td>6000 minutes</td>
<td>9000 minutes (150 hours)</td>
</tr>
</tbody>
</table>

#### Laboratory/Studio/Performance Based Courses: Faculty Instruction and Outside Student Work (2:1 ratio)

<table>
<thead>
<tr>
<th>Credits awarded</th>
<th>Minimum contact time per week</th>
<th>Minimum instructional time for 15 weeks</th>
<th>Minimum out of class student work per week</th>
<th>Minimum out of class student work total for 15 weeks</th>
<th>Total instructional time and out of class time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>100 contact minutes</td>
<td>1500 contact minutes</td>
<td>200 minutes</td>
<td>3000 minutes</td>
<td>4500 minutes (75.0 hours)</td>
</tr>
<tr>
<td>2</td>
<td>200 contact minutes</td>
<td>3000 contact minutes</td>
<td>400 minutes</td>
<td>6000 minutes</td>
<td>9000 minutes (150 hours)</td>
</tr>
<tr>
<td>3</td>
<td>300 contact minutes</td>
<td>4500 contact minutes</td>
<td>600 minutes</td>
<td>9000 minutes</td>
<td>13,500 minutes (225 hours)</td>
</tr>
</tbody>
</table>

#### Cooperative education/Internships/Field Study/Practicum/Clinical Based Courses (1 credit for 45 hours)

<table>
<thead>
<tr>
<th>Credits awarded</th>
<th>Minimum contact time per week</th>
<th>Minimum instructional time for 15 weeks</th>
<th>Minimum out of class student work per week</th>
<th>Minimum out of class student work total for 15 weeks</th>
<th>Total instructional time and out of class time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>150 contact minutes</td>
<td>2250 contact minutes</td>
<td>0 minutes</td>
<td>0 minutes</td>
<td>2250 minutes 37.5 hours</td>
</tr>
<tr>
<td>2</td>
<td>300 contact minutes</td>
<td>4500 contact minutes</td>
<td>0 minutes</td>
<td>0 minutes</td>
<td>4500 minutes 75.0 hours</td>
</tr>
<tr>
<td>3</td>
<td>450 contact minutes</td>
<td>6750 contact minutes</td>
<td>0 minutes</td>
<td>0 minutes</td>
<td>6750 minutes 150 hours</td>
</tr>
</tbody>
</table>
Appendix C

STATEMENT OF AUDITING AND ACCOUNTING STANDARDS
FOR COUNTY COLLEGES
(Recommended by Council of County Colleges for use by Department of Treasury pursuant to N.J.S.A. 18A:64A-22 & 29)

“Accounting Standards” refers to the auditing and accounting standards for State support as set forth in this document.

I. Accounting and Finances:

  (a) The accounting system and reports of a county college shall be maintained in accordance with Chapter 5 of the most recent edition of College and University Business Administration published by the National Association of College and University Business Officers, One Dupont Circle, Washington, D.C. 20036 and any subsequent revisions thereof except where otherwise specified in this Standard. Each college shall adopt a system of accounts consistent with the standards and guidelines of the American Institute of Certified Public Accountants (AICPA). Costs borne by the State and county on behalf of the college shall not be reflected on the financial statements and related reports of the college.

  (b) As required by N.J.A.C.9A:1-1.7(c) and the Single Audit Act of 1984 as amended, not later than December 31, each county college shall annually file with the Commission on Higher Education and with the Office of Management and Budget, Department of the Treasury, (i) a copy of its audited financial statement and management letter(s) (if issued). By November 1 each college shall also file with the foregoing agencies an audit of student enrollment. These audits shall be conducted by a certified public accountant of New Jersey. The financial audit shall be in accordance with the Industry Audit Guide for Audits of Colleges and Universities, as amended by AICPA Statement of Position (SOP) 74-8, Financial Accounting and Reporting by Colleges and Universities, and as modified by applicable Financial Accounting Standards Boards (FASB) pronouncements issued through November 30, 1989, and as modified by all applicable GASB pronouncements cited in Codification Section Co5, Colleges and Universities. The enrollment audit shall be in accordance with these Standards, the New Jersey Administrative Code, and standards established by American Institute of Certified Public Accountants.

  (c) The audit engagement shall require that the lead and reviewing audit partners will rotate off the audit engagement every five years.

II. Appropriated Resources:

The board of trustees of each county college shall not permit the expenditures or projected expenditures of a college to exceed appropriated resources. Appropriated resources shall mean unrestricted revenues and unrestricted current fund balances appropriated to be
expendable in a given budget period.

III. State Support:

(a) No later than June 1 of each year, each county college shall submit credit course
descriptions to the Course Review Committee of the Council of County Colleges. Courses
offered entirely or jointly through contracts with third-party providers shall be separately listed
and identified. The county college shall certify in the transmittal to the Course Review
Committee that all listed courses are eligible for State support under these Accounting Standards.
The Course Review Committee shall review the course descriptions to verify that they meet the
course credit hour criteria for state support (one credit hour per week of lecture and/or one credit
hour for every two hours per week of formally scheduled laboratory or studio). Upon receipt of
the report of the Course Review Committee, the Council of County College shall transmit to the
State Treasurer its recommendations with regard to credit courses that qualify for State support.
The State Treasurer shall make the final decision regarding credit courses that qualify for State
support. The county college shall have the burden of establishing that a credit course is eligible
for State support under these Accounting Standards.

(b) In order to qualify for State support the county college must incur direct costs of
instruction for the credit course and the direct costs must be classified as current unrestricted
expenditures. Direct costs of instruction paid by another educational institution or by a third
party provider shall not be counted in determining State support. Direct costs of instruction will
be determined for each credit course. The direct costs of instruction are defined as:

1. Salaries and benefits of instructors and paraprofessionals paid for the
teaching and grading of courses;

2. Educational supplies used directly by the teacher or the students of a
course; and

3. Contracted educational service agreements for specific courses or
programs.

(c) The number of state-fundable credits for a credit course should not exceed the
number of credits that a student is charged for the course.

(d) When the direct costs of instruction are classified as expenditures of restricted
funds (expenditures restricted to specific purposes by an outside revenue source), these costs are
not eligible to be counted in determining State support.

(e) Where the total direct costs of instruction incurred by the college exceed the
amount of the restricted funds available for the credit course, the percentage of the excess cost is
considered as expended from the current unrestricted fund, and that percentage of the credit-hour
enrollment generated by the course is eligible to be counted in determining State support.

(f) The direct costs of instruction incurred by the college for credit courses that are
offered jointly with another educational agency (public or private) will not be eligible for funding
unless control of the course is vested with the county college. “Control” means ultimate responsibility for development and implementation of curriculum (for example, course objectives, outlines, strategies, and teaching methods); direct or contractual responsibility for evaluating and supervising the faculty including assignment and termination of assignment to courses; and responsibility of the faculty member to a supervisor employed by the college.

(g) Noncredit Courses. The amount of State support for the direct costs of instruction for noncredit occupational, remedial, general education and adult basic education courses shall be allocated to each county college.

1. Occupational courses are courses designed to develop occupational skills geared toward securing initial employment or upgrading occupational skills.

2. Remedial courses are courses in reading, writing, mathematic, and computer literacy skills designed to raise student competence in these skills to the college level.

3. General education development courses are courses designed to prepare students for New Jersey high school equivalency diplomas.

4. Adult basic education courses are courses designed to teach reading, writing, mathematic, and computer literacy skills to adults whose inability to speak, read, or write the English language constitutes a substantial impairment to obtaining or retaining employment commensurate with their ability.

(h) Grant Programs. Credit courses funded by grant programs shall only be counted in determining State support to the extent of the percentage that the actual direct costs of instruction incurred by the college exceeds the grant funding. In making this determination the auditor shall review the grant application and grant contract to determine whether the grant covers the entire direct costs of instruction.

IV. Calculation of Full-Time Equivalent Enrollments (FTEs)

(a) FTE enrollments shall be determined as of the tenth day of the academic session. FTE enrollments shall include only those students who have registered and made payment or a binding arrangement for payment to the college as of the tenth day of the academic session. The foregoing tuition receivable shall be recognized and recorded in accordance with generally accepted accounting principles (GAAP). Annual full-time equivalent student enrollments (FTEs) for all session students shall be calculated by dividing total annual credit-hour and equivalent credit-hour enrollments by 30.

(b) FTE enrollments from an academic term (for example, summer session) which is conducted over a fiscal year end, should be reported totally within the fiscal year in which the term is predominantly conducted.

(c) Fundable credit hours may include international students, out of state students, and senior citizens.
V. **Enrollment Data:**

(a) For credit courses, the tenth-day enrollment shall be used for calculating enrollments during the academic year. The tenth-day enrollment shall be considered the tenth day of classes, excluding weekends and holidays. For summer and other sessions, a prorated point in time shall be used, based upon the duration of the session. Enrollments shall include only those students who have registered and made payment or a binding arrangement for payment to the college as of the tenth day of the academic session.

VI. **Audit Rules:**

In preparing the audited schedule of credit-hour enrollments as required by this Accounting Standard, the audit firm must adhere to the following:

a. The auditor shall review this Accounting Standard, all contracts with third party providers, and grant contracts to determine the State funding eligibility of credit courses.

b. The college shall maintain a clearly defined audit trail to enable the auditor to certify credit-hour reported by the college.

c. Student credit hours shall be reconciled to tuition income, including cash received, accounts receivable, and waivers.

d. The auditor shall send a confirmation letter to a statistically valid sample of students who are listed as having attended courses during the year under audit. The methodology and results of this sample shall be appended to the year end audit report.

e. The auditor shall follow the format for audited enrollment schedule provided by the Department of Treasury.

1. If the auditor plans to deviate from any of the audit procedures, he or she shall obtain prior written approval from the Department of Treasury.

2. Such approval, if granted, shall be valid only for the audit in process.

f. Course outlines shall be made available to the auditors who shall submit sample course outlines along with the credit course category classification assigned to these courses by the college.

1. The auditor shall certify that course outlines are on file for all of the college’s State fundable course offerings and that these courses have been classified and meet course eligibility criteria as defined in these Accounting Standards.

2. The Course Review Committee of the Council of County Colleges may request and review all official course outlines.
3. The county college shall have the burden of establishing that a course has been properly classified as a credit course.

4. Upon review of the recommendation of the Council of County Colleges, the decision to approve or reject the classification and eligibility of a credit course for State support rests with the Department of Treasury.

g. Based upon examination of the college’s audit trail including registration records, attendance records, and course descriptions, that the auditor shall in an opinion letter accompanying the schedule of credit hour course categories eligible for State support, certify that:

1. the audit trail is valid and adequate for certification of the schedule of credit-hour enrollments;

2. the schedule of credit-hour is accurate;

3. the eligible portions of grant and third party funded courses are calculated and reported accurately;

4. the review of the documentation underlying the calculation of credit hours is valid and adequate for the certification of the credit-hour enrollment schedule.

5. he or she has reviewed and has completed the enrollment audit in accordance with the provisions of these Accounting Standards.