



**Wharton County  
Junior College**

**PAID PROFESSIONAL  
ASSIGNMENT (PPA)  
REQUEST FORM**

TO: Leigh Ann Collins  
 DATE: 1-20-2026  
 FROM: Carol Derkowski  
 DIV or UNIT: Dental Hygiene/Allied Health  
 SUBJ: PPA request for: Pam Dobbs  
 Title of PPA activity: Clinical Technology Specialist  
 Dates (or semesters) of activity: Spring 2026

A. **Activity and Expected Outcomes.** Provide a brief narrative description plus a list of tasks and expected outcomes (append add'l pages if necessary). If PPA duties are described in a college-approved job description, simply refer to that document.

The Dental Hygiene Program is implementing a clinical evaluation and record-keeping software system. Pam Dobbs has been appointed to serve as the liaison between the program and Upscale as we work collaboratively with the vendor to customize the platform to align with our established clinical grading system. This implementation and customization process has proven to be significantly more complex and time-intensive than originally anticipated.

Activities and Expected Outcomes include:

1. Providing ongoing support to faculty and students in the effective use of the software system.
2. Serving as the primary software expert and point of contact for troubleshooting issues and communicating with the software vendor.
3. Modifying and maintaining the software to ensure alignment with the program's clinical grading system and compliance with evaluation criteria as published in course syllabi.
4. Serving as Radiation Safety Officer to ensure compliance with Texas State Department of Health – Division of Radiation Control requirements, including maintenance of equipment usage and service records, documentation of student and patient radiation protection measures, and accurate tracking of all radiographic images taken in the clinic to support state inspections and accreditation compliance.

B. **Cost**

Type PPA	# PPA Pay Hours	PPA Salary	Total Costs
ON CONTRACT (release time from teaching)			
ON OVERLOAD (additional compensation)	3 EPH	\$ 800.00	\$ 2,400.00
<b>TOTAL</b>		<b>\$ 800.00</b>	<b>\$ 2,400.00</b>

Budget Number : 1110.14182.6092.102

C. **Approvals**

Supervisor: Carol J. Derkowski, RDH, MAIE  
Digitally signed by Carol J. Derkowski, RDH, MAIE  
Date: 2026.01.20 15:24:39 -06'00' Date: \_\_\_\_\_

VP: Leigh Ann Collins  
Digitally signed by Leigh Ann Collins  
Date: 2026.02.16 11:42:13 -06'00' Date: \_\_\_\_\_

President: Amanda A. Allen  
Digitally signed by Amanda A. Allen  
Date: 2026.02.17 07:38:23 -06'00' Date: \_\_\_\_\_