Advanced Education Committee		
AGENDA		
September 26, 2016	12:00-12:50 p.m. Deans Conference Room	
Dr. Anne Williamson, Chair Dr. Matthew Geneser, Vice-Chair	Recorder: Ms. Michelle Krupp	

Lunch will be served.

Agenda Items	Responsible Individual
1. Approval of the August 22, 2016 Minutes	Williamson
<ol> <li>Report "Referral Letters" – Predoctoral-Advanced Ed Residents Communications; pending e-notifications</li> </ol>	Geneser/McBrearty/ Gehling
<ol><li>Follow-up: Current "Ethics &amp; Professionalism" Curriculum in Adv Programs</li></ol>	Krupp/Southard
4. CODA Documentation	Holloway
<ol> <li>Follow-up: "M&amp;M" Implant Conference – include predoctoral students; Perio &amp; OMFS. (IOWA PIE)</li> </ol>	Williamson/Garcia
6. ADAT Survey	Williamson
7. Comments/Updates	Committee
8. Next Meeting: October 24, 2016	

Action Items			
Status	Action to be taken	Responsible	Due Date
Pending	WG: Industry Access Guidelines		
Pending	Centralized Administrative Support for All Advanced Education Programs	Garcia	On hold
Pending	INDBE – Field Testing 2016	Solow/Garcia	

#### **Advanced Education Committee (2016-2017):**

Anne E. Williamson, Chair Veeratrishul Allareddy Howard J. Cowen Steven L. Fletcher Matthew K. Geneser, Vice Chair Sandra Guzman-Armstrong Ryan W. Hill Julie Holloway Rodrigo Rocha Maia Gustavo Avila-Ortiz

Thomas E. Southard Sherry Timmons John J. Warren EX Officio:

Brad A. Amendt, Associate Dean for Research Lily T. Garcia, Associate Dean for Education Catherine Solow, Associate Dean for Student Affairs Joan T. Welsh-Grabin

Michelle M. Krupp, Director, Education Development Marcella Hernandez, Chair International Committee



#### Advanced Education Committee Minutes – September 26, 2016

<u>Members Present</u>: Drs. Anne Williamson (chair), Matthew Geneser (vice-chair), Howard Cowen, Steven Fletcher, Sandra Guzman-Armstrong, Ryan Hill, Julie Holloway, Rodrigo Maia Rocha, Tom Southard, Sherry Timmons, Lily Garcia, Marcela Hernandez, Dean Cathy Solow, Ms. Michelle Krupp

<u>Members Absent</u>: Drs. Trishul Allareddy, Gustavo Avila-Ortiz, Brad Amendt, Galen Schneider, Ms. Joan Welsh-Grabin

Guests: Mr. Chuck McBrearty

- I. <u>Approval of August 22, 2016 minutes</u> motion to approve the minutes passed.
- II. <u>Report "Referral Letters" Predoctoral-Advanced Ed Residents Communications;</u> <u>pending e-notifications</u>- Dr. Geneser, Mr. Chuck McBrearty, Mr. Jerry Gehling
  - We need to take a closer look at referrals within the predoctoral curriculum and who they are referring patient to or back to for each department (residents). IT to develop workflow and will then present to committee to get approval and buy-in. A workgroup will be formed to see what is needed and what we want.
  - Mr. McBrearty noted that we can consider using tools that exist in Axium to determine where bottlenecks are occurring. Most forms are electronic now and go to clerks first. It would be beneficial to review the process.
  - Dr. Garcia emphasize the need to teach dental students the referral process.
     ACTION ITEM: Chuck will convene work group to continue looking at process. The workgroup will consist of Joni Yoder, Joan Welsh-Grabin, Becky Todd, Chuck McBrearty, Jerry Gehling, Dr. Maia and a clerk representative.
- III. <u>Follow-up: Current "Ethics & Professionalism" Curriculum in Adv Programs</u> –Dr. Southard & Ms. Krupp
  - Dr. Southard has contacted Debra Brandt about the possibility of addressing ethics/professionalism for all residents. The committee agreed that a couple of different all-resident sessions throughout the year would be beneficial.
  - Ms. Michelle Krupp presented a document that collated what each program's standard is regarding ethics and professionalism and how they are addressing it in their curriculum.

ACTION ITEM: Dr. Southard will contact Debra Brandt and Ms. Krupp will work with her to ensure content covers what is needed and can be beneficial to all residents and programs.

- IV. CODA Documentation- Dr. Holloway
  - Dr. Holloway presented a power point that she developed for the program's last sit visit. This was helpful to show site visitors the thought process for the past seven years and direct their attention to key aspects. The PPT went over each area of standards, changes in curriculum, outcomes assessment, short-term and longterm actions and program goals in detail. This also helped to address any

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'issues' upfront. After presenting this information to site visitors, they rarely have questions.

#### V. Follow-up: "M&M" Implant Conference - Drs. Williamson & Garcia

Background: Faculty are struggling to properly make D3-4 students aware of
post-implant placement implications. Restore process needs to be followed so
students can see and learn about what happens post implant. All clinicians (not
just students) would benefit from seeing entire process.

#### VI. <u>ADAT Survey</u> – Dr. Williamson

- Dr. Williamson began to take a survey but aborted it as there was no way to answer that fit her decision-making process and where it is going.
- No one has heard any feedback on the exam thus far.

#### VII. <u>Comments/Updates</u> – Committee

 Dean Solow reminded the group that Cari Anderson is available for counseling for residents.

Next Meeting: October 24, 2016

Minutes recorded by Ms. Michelle Krupp

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# Advanced Programs - Ethical & Professionalism Standards and Curriculum

Academic Environment
Research
Patient Care
Practice Management

	Practice Manager	
Department	CODA Standard	Curriculum - Addressed
DPH (Warren)	IV. Incorporate ethical standards in oral health programs and activities This competency reflects:  1. Applying the acceptable principles of ethical behavior and professional conduct (principles of autonomy, nonmaleficence, beneficence, justice, voracity, and professionalism) as reflected in the code of ethics and standards of professional conduct of public health, dentistry, and employing organizations.	We currently hold a 1-2 hour seminar just for our grad students, which can be difficult to organize, so I'd welcome a joint session for all the grads.
ENDO (Williamson)	1-1 Graduates must receive instruction in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care, and practice management.  Intent: Graduates should know how to draw on a range of resources such as professional codes, regulatory law, and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive, or of public concern.	We address this, while not specifically, but broadly in many areas including: Case Review/Surgery Conference, direct communication and feedback with residents during patient care, with each and every case during monthly case proctoring.
GPR (Hill)	CODA Standard 1-10: The program must ensure that residents are able to demonstrate the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care, and practice management.  Intent: Residents should know how to draw on a range of resources such as professional codes, regulatory law, and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive, or of public concern.	<ul> <li>Residents begin their residency with a general exposure to ethics and professionalism during their hospital orientation.</li> <li>During the departmental orientation the residents are given a professional/ethical code of conduct to use in their interaction with patients and staff.</li> <li>During the residency year the residents will have a seminar given that relates to ethical treatment and discussion making processes in patient care.</li> <li>During treatment planning sessions, the cases will also incorporate ethical discussion making and professionalism.</li> <li>As part of their journal club experience, at least one session will be assigned to discuss ethics and professionalism as they relate to patient care.</li> <li>The program will utilize daily clinical monitoring by attending staff, resident evaluation three times a year, participation in the treatment planning and journal club discussions as they relate to the topic of ethics and professionalism.</li> </ul>

OMFS	Ethics and Professionalism	I try to have a yearly review of the AAOMS and ADA codes of conduct andhave tried to
(Fletcher)	4-19 Graduates must receive instruction in the application of the principle of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care, and practice management.  Intent: Graduates should know how to draw on a range of resources such as professional codes, regulatory law, and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive, or of public concern.	have faculty from bioethics give instruction and revidw issues on a rotating basis.
OPER (Rocha Maia)	No standards. Not an accredited specialty yet.	HR orientation.
OPRM - Path (Timmons)	4-8.1 Graduates must have an understanding of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care, and practice management.  Intent: Graduates should know how to draw on a range of resources such as professional codes, regulatory law, and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive, or of public concern.	At this time pathology does not keep direct documentation for this standard beyond their registration/participation in the Research Methodologies course the first summer in PGY-1 as well as their IRB training for their research projects.
OPRM - Rad		

ORDN	STANDARD 1 - INSTITUTIONAL COMMITMENT/PROGRAM	We currently hold a discussion of ethics in a practice management lecture we have yearly.
(Southard)	EFFECTIVENESS	The same and a discussion of earnes in a practice management rectare we have yearly.
(0.00.000000)	The program must develop clearly stated goals and objectives	
	appropriate to advanced specialty education, addressing education,	
	patient care, research and service. Planning for, evaluation of and	
	improvement of educational quality for the program must be broad-	
	based, systematic, continuous and designed to promote achievement of	
	program goals related to education, patient care, research and service.	
	Ethics and Professionalism	
	1-1 Graduates must receive instruction in the application of the	
	principles of ethical reasoning, ethical decision making and professional	
	responsibility as they pertain to the academic environment, research,	
	patient care, and practice management.	
	Intent: Graduates should know how to draw on a range of resources	
	such as professional codes, regulatory law, and ethical theories to guide	
	judgment and action for issues that are complex, novel, ethically	
	arguable, divisive, or of public concern.	
PEDO	Management of a Contemporary Dental Practice	We address this standard with a combination of things from the list of examples.
(Geneser)	4-17 Didactic Instruction: Didactic instruction <b>must</b> be at the	• Our residents do complete a training module at UIHC that pertains to HIPAA and ethics.
	understanding level and include:	They also complete IRB and CITI training for research. Dr. Wertz's Research Methods
	d. Principles of ethical and biomedical ethical reasoning, ethical	course in the summer addresses ethical behavior as well, I believe.
	decision making and professional responsibility as they pertain to the	• We also do a literature review on ethics and spend a lot of time discussing cases and the
	academic environment, research, patient care and practice	ethical aspect of dentistry always plays a role in this.
	management	
	Intent: Graduates should know how to draw on a range of resources	
	such as professional codes, regulatory law, and ethical theories to guide	
	judgment and action for issues that are complex, novel, ethically	
	arguable, divisive, or of public concern.	
	Examples of evidence may include (d):	
	Participation in courses or seminars involving biomedical ethics	
	and/or informed consent issues;	
	Institutional review boards; and	
	Literature reviews; and	
	Discussion of case scenarios	

PERI	1-1 Graduates must receive instruction in the application of the	The way we meet this is interwoven throughout the program and some of the ways
(Gustavo,	principles of ethical reasoning, ethical decision making and professional	include:
Johnson,	responsibility as they pertain to the academic environment, research,	• Statements in the grad program handbook relative to ethics and professionalism.
Humbert)	patient care, and practice management.	(Discussed with students and they sign)
		Daily patient care, including making ethical decisions re care, critical evaluation of
	Intent: Graduates should know how to draw on a range of resources	options, professionalism as a provider
	such as professional codes, regulatory law, and ethical theories to guide	• Records reviewed and signed by faculty/ includes review of professionalism and ethical
	judgment and action for issues that are complex, novel, ethically	components
	arguable, divisive, or of public concern.	• Lew has given case scenarios and asked how students would deal with making ethical
		decisions
		Case presentations by residents address ethical aspects in decision making and care
		• Regulatory issues, i.e. Medicaid, dwp, insurance. Discussed in daily pt care, policies
		reviews in teaching inservice meetings, business office presentations, collegiate
		presentations
		Research methodology course by Wertz includes ethics in research and plagiarism
		• IRB training
		Application of ethical principles on student research projects for MS
		• at the Chicago Midwinter meeting there is a speaker on ethics and related topics every
		two to three years that the residents have attended
		• we have permission to attend the D-4 Management Course which has ethics lectures
		every year
		• Georgia and I have brought a speaker in to Periodontics every 3 years. That way all the
		residents in a 3 year program can get involved.
PROS	CODA standard for Prosthodontics:	1. 151:210 (Dental Science Research Methodology
(Holloway)	4-13 Instruction must be provided at the understanding level in each of	2. 111:202 (Research Protocol Seminar)
	the following clinical areas:	3. 151:215 (Research Design in Dentistry)
	d. Ethics and professionalism;	4. Graduate Student Orientation
		5. Self-instruction (HIPAA online modules/quizzes)
		6. Faculty Review (2/year minimum)
		7. Resident agreement (documentation)
		8. 084:220-226 (Literature review)
HR Orientation	N/A	1 hr. lecture - Plagiarism - Dr. Christopher Squire



## **Advanced Prosthodontics Program Administration:**



- PLAN
- •**DO**
- •CHEC
- ACT
- •(RECHECK)







# Program timeline since last Accreditation (2004)

- -Dennis Weir retired on July 1, 2008
- -Peter Lund assumed directorship
- -Julie Holloway joined U. Iowa as director July 1, 2011





### Dr. Lund began review of clinical program (mid-2008)

#### Review of clinical program identified the following:

- Difficult to track clinical experiences
- >Student difficulty with systematic treatment planning & sequencing
- >Methods used for patient occlusal records, articulator programming, and
- occlusal treatment were limited
- Low frequency of periodic maintenance exams

# Plan



### Dr. Lund began review of clinical program (mid-2008)

#### >Actions:

- Developed spreadsheet to easily record and track clinical experiences
- Re-implemented requirement for a written structured patient diagnostic presentation
- >Added instruction and clinical distribution requirements for patient occlusal records and procedures
- >Re-implemented comprehensive recall system





### Dr. Lund began review of curriculum (mid-2008)

#### Review of curriculum identified the following:

- Need for curricular objectives in evidence-based dentistry and critical review of the literature
- Need for additional didactic and clinical instruction in TMD examination,
- diagnosis, and treatment
- Need for research experience for non-M.S. students
- Didactic course hours were slightly below CODA guidelines

# Plan





## Dr. Lund began review of curriculum (mid-2008)

#### >Actions:

- >Learning objectives in evidence-based dentistry and critical literature review were added to all prosthodontic courses
- >Formal didactic instruction and clinical requirements were added for TMD examination, diagnosis, and treatment
- Research requirement for non-M.S. students and formally scheduled research time for all students were added
- Didactic course time was increased to meet CODA guidelines



### Dr. Lund began review of program administration (mid-2008)

#### >Review of program administration identified the following:

- >Written program policies were not comprehensive
- Outcomes assessment instruments, while useful, did not provide complete information related to program goals and objectives

#### Actions:

- >Major expansion and revision of written program policies
- >Major revision of outcomes assessment plan





#### **Pre-existing outcomes assessment plan**

#### >Types of measurement instruments largely adequate:

- >Student exit surveys
- Survey of program alumni
- Course and faculty evaluations

#### Many survey questions did not specifically measure:

- >Attainment of program goals and objectives
- >Fulfillment of CODA standards

# Plan



#### Revised outcomes assessment plan

#### All measurement instruments revised:

Most questions relate specifically to program goals and objectives or CODA requirements

#### Measures expanded to include:

- >Knowledge (e.g. didactic grades)
- >Skills (e.g. clinic or laboratory grades)
- >Values/beliefs—what students think (e.g. responses to survey questions)
- >Behavioral—what students do (e.g. student experiences, alumni activities)





### Revised outcomes assessment plan

#### >Specific measurement instruments and measures:

- Alumni and student exit surveys
- Course and faculty evaluations
- >Improvement in individual student's didactic and clinical grades
- >Mock Board examination results (Improvement in scores, Comparison
- to national means)
- >ABP examination results
- >Student experiences while in the program
- Alumni professional activities after graduation





## **Outcomes Analysis (beginning 2010)**

- >Program meeting goals and objectives very well
- Most courses and faculty rated very high; all above average
- >Students and alumni desire:
  - Addition of instruction in surgical placement of implants
  - Additional instruction and experiences in partial coverage restorations
  - Additional instruction in practice management

# Check



## **Outcomes Analysis (2010)**

#### >Actions completed:

- >Joint seminars with operative residents covering indirect veneers added
- Seminar in practice management added

#### Actions planned:

Dr. Holloway will work with College administration to codify implant surgical instruction and experiences





## Dr. Holloway began review of clinical experience in July 2011

#### Change of VA clinical requirements resulted in:

- Loss of some monetary support for the program
- Loss of some removable clinic patients
- →No loss of instructional component, residents were not closely supervised

#### >Action:

- Added additional clinic time (and revenue) in our clinic:
  - PATIENT CONTACT TIME DOES NOT CHANGE
- Pros. program patient pool supports the clinical requirements at this time
- Request made to University hospital for GME funding for Maxillofacial rotation





## Dr. Holloway began review of program curriculum in July 2011

#### The review of Standards identified:

need for <u>instruction</u> in evidence-based dentistry and critical review of literature need for <u>instruction</u> in professional and ethical treatment decision processes

#### Short-term Actions:

Added formal didactic instruction using the ACP Evidence-Based Dentistry series on how to critically review the literature (Summer 2011)

- 10 hours)
- Added instruction in professional and ethical treatment decision processes to treatment planning courses



### **Outcomes Assessment of Program Goals (2010)**

### Outcome Assessment – Program Goal 1:

Multiple measures of values/beliefs and behaviors (type of practice after graduation) show that graduates are prepared to provide specialty-level treatment for prosthodontic patients. (Alumni survey: pages 1, 9; Exit survey: pages 1, 8) Responses on clinical faculty evaluation forms show that faculty are fostering students to provide clinical/laboratory treatment of specialtylevel quality. (Faculty evaluations: question 9)



## **Outcomes Assessment of Program Goals (2010)**

### Outcome Assessment – Program Goal 2:

Multiple measures of values/beliefs and behaviors (self-study activities after graduation) show that graduates are prepared for future independent study and professional growth. (Alumni survey: pages 1, 9; Exit survey: page 1)



## **Outcomes Assessment of Program Goals (2010)**

### Outcome Assessment – Program Goal 3:

Multiple measures of values/beliefs and behaviors (teaching, research, presentations, publications, and service after graduation) show that graduates are prepared for service to the dental profession. (Alumni survey: pages 1, 9, 10; Exit survey: pages 1, 8)



#### Outcome Assessment – Program Objective 1:

Multiple measures of skills, behaviors, and values/beliefs show development of students' abilities in examination, diagnosis, and treatment planning. (Clinic treatment planning grades; Number of treatment plans; Course & faculty evaluations; Alumni survey: pages 1, 6; Exit survey: pages 1, 6)



### Outcome Assessment – Program Objective 2:

Multiple measures of skills, behaviors, and values/beliefs show development of students' abilities in the clinical and laboratory phases for all disciplines of prosthodontics based upon a diversity of philosophies and techniques (Clinic/laboratory grades; Number of clinic and laboratory experiences; Course & faculty evaluations; Alumni survey: pages 1, 5, 6, 7; Exit survey pages 1, 5, 6, 7)





### Outcome Assessment - Program Objective 3:

Multiple measures of behaviors and values/beliefs show development of students' abilities in treatment outcomes evaluation and maintenance (Number of recall/maintenance experiences; Course and faculty evaluations; Alumni survey: pages 1, 5, 6, 7; Exit survey: pages 1, 6)



### Outcome Assessment – Program Objective 4:

Multiple measures of behavior and values/beliefs show development of students' abilities to provide and manage interdisciplinary treatment (Number of interdisciplinary patients; Course evaluations, Alumni survey: pages 1, 6; Exit survey: pages 1, 6)





#### Outcome Assessment – Program Objective 5:

Multiple measures of skills and values/beliefs show development of students' abilities in evidence-based decision making (Grades for didactic application in patient treatment; Course evaluations; Alumni survey: pages 1, 5; Exit survey: pages 1, 5) Responses on faculty evaluation forms show that faculty are fostering students to support clinical decisions with literature or basic science evidence (Clinical faculty evaluations: question 8)



## Outcome Assessment – Program Objective 5a:

Multiple measures of knowledge, values/beliefs, and behaviors show students' understanding of the prosthodontic literature and abilities for critically evaluation (Literature review grades; Oral examination grades; Course evaluations; Alumni survey: pages 1, 5, 9; Exit survey: pages 1, 5, 7; Board pass rate; Mock Board scores)





## Outcome Assessment – Program Objective 5b:

Multiple measures of knowledge, values/beliefs, and behaviors show students' understanding of supporting clinical disciplines, biomedical sciences, and materials sciences (Course evaluations; Alumni survey: page 1; Exit survey: pages 1, 4, 5; Board pass rate; Mock Board scores)





### Outcome Assessment – Program Objective 6:

Multiple measures of knowledge, values/beliefs, and behaviors show that students are prepared to take the ABP certification examination (Oral examination grades; Course evaluations; Alumni survey: page 1; Exit survey: pages 1, 7; Board pass rate; Mock Board scores)



### Outcome Assessment – Program Objective 7:

Multiple measures of behavior and values beliefs show development of students' teaching skills (Number of teaching experiences; Alumni survey: pages 1, 4, 9; Exit survey: pages 1, 5, 8)





#### Outcome Assessment – Program Objective 8:

Multiple measures of behavior and values/beliefs show development of students' abilities in presentation of prosthodontic topics and patient

treatments (Number of oral/slide presentations; Course evaluations; Alumni survey: pages 1, 10;

Exit survey: page 1)



# **Outcomes Assessment (Long-range assessment)**

#### Institute more quality assurance measures:

- Revise some program objectives to make them more quantifiable
- >Formalize exit exams, ongoing patient questionnaires
- Institute chart review and clinic utilization guidelines

## Prepare for future changes in Standards:

- Course in implant surgery (recruit expert faculty)
- Reinforce professional and ethical treatment decision processes
- >Implement competencies