

Members Present: Drs. DC Holmes (Chair), Sandra Guzman-Armstrong, David A. Jones, Zeina Al-Salihi, Paula Weistroffer, Leonardo Marchini, Natalia Restrepo-Kennedy, Michael Murrell, Fabricio Teixeira, Brian Howe, Nidhi Handoo, Sherry R. Timmons, Anne Williamson, Ms. Michelle Krupp, Layton Fritsch (D2) and Andrew Richter (D4)

Absent: Drs. Tad Mabry, Maged M.E. Abdelaal, Darren Hoffmann, Lily T. Garcia and Carl Reitz (D3)

Guest: N/A

Meeting called to order 12:05 p.m.

- I. **Approval of March 7, 2018 Minutes:** – Dr. DC Holmes
April 4, 2018 meeting cancelled.

MOTION: to approve the minutes as submitted and seconded.
MOTION APPROVED.

- II. **Office for Education Update** – Ms. Michelle Krupp

A. CODA Accreditation

- Predoc and advanced education self-studies are in full production. The heavy load is now on Sean Kelley (please respectfully protect his time, 1 month to printer). We are currently on track, and going through a lot of fine details. Site visit schedule is going to be updated and sent out to everyone in the next 2 weeks. Site visit prep meetings will be taking place over the next few months. Outlook invites for both the prep meetings and September visit will be sent out in the near future. Please respond quickly to the outlook invites.

B. Self-study document availability

- The final document will be on the shared drive in June.

C. AEFIS – Renew/revise course syllabi

- The Office for Education will lead a meeting for course directors to update on changes in AEFIS.
- The approved collegiate grade scale will be implemented for the 2019-2020 academic year, as the only grade scale to be used.

- III. **Round Table Comments: Reflection on our self-study; shaping our future** – Committee

- A. Curriculum improvements made over the past five years have been significant. Dr. Holmes expressed a desire to continue this momentum and discussions, particularly after the CODA Site Visit is completed. Dr. Holmes acknowledged Michelle's considerable efforts and coordination in this preparation for the CODA site visit. Dr. Holmes noted that he has been at this institution through several CODA accreditation cycles, and he feels that we have never been as well-prepared for a site visit as we are this time. But, he cautioned, the conduct of the CODA site visits seems to have gotten more rigorous over time, so we should take nothing for granted.
- B. We have had great enthusiasm and success in this committee and want to continue to harness that energy. In the round table discussion, we ask the committee to reflect on curriculum strengths, weaknesses, gaps, and redundancies brought to light through the self-study process; and to brainstorm initiatives for the committee to

discuss as we move forward and continue to improve. Some responses are as follows:

- Dr. Holmes – Have all students experience the special care/geriatrics clinic. It is a spotlight experience and it addresses our CoD competencies, but only 2/3 of the D4 students get to experience.
- Dr. Timmons – The students would like to have some sort of external business component, similar to dental public health track.
- Dr. Teixeira – Endo believes molar treatment in D4 should not be mandated.
- Dr. Murrell – Acknowledged how FamD faculty, adjuncts as included, respond great to changes.
 - ✓ There have improvements to align competencies, making assessments electronic; changes are instituted and the faculty are adjusting.
 - ✓ Would like to see more digital dentistry. Recent tour of dental labs in Cedar Rapids shows that 30% of lab submissions are electronic. Students would like to see this as well. Currently Ortho is having IT issues delaying implementation.
 - ✓ There may be a need in the future to have an intraoral scanner in every operatory readily available.
 - ✓ Only lab technician is supporting the COD (running all over the building).
- Dr. Howe – The CODA process has helped connect the curriculum and coordinate faculty better. Suggested having a COD lab in-house vs. off-site labs; might be financially beneficial to have a removable lab technician. Maybe Kirkwood could use this as well.
- Dr. Jones – Would like to see how Ortho could function better with FamD to interact with D4s more.
- Dr. Weistroffer – CODA makes you really look at every detail very purposefully.
- Layton Fritsch (D2) – Minor operative clinic does not have enough patient flow. A lot of requirements are hard to complete on actual patients; need to address ways to obtain more patients and for “good” experiences.

ACTION ITEM: Committee members go back to department to get ideas on innovations for the curriculum.

Next Meeting: Wednesday, June 6, 2018

Minutes recorded: Ms. Lauren Moniot