

ORAL RESEARCH PRESENTATION ABSTRACTS

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TEACH: A Model for Distributed Faculty Development

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Background/Purpose/Objectives of Program/Innovation

Since 2006, >2800 practitioners from >545 organizations across Canada have registered in TEACH, a cessation training program for health professionals. To build capacity and meet demand, a plan for supporting development of local faculty in Alberta using a distributed learning model was piloted in 2008-2009.

Methodology

Local practice leaders/subject matter experts were identified based on skills, knowledge of best practices/current research, and facilitation experience. TEACH created a Facilitators' Toolkit, and faculty progressed through a five-step process: (1)co-facilitation with a "mentor" with videotaping; (2)written, structured self-reflection on video recording; (3)review of videos and self-assessments by TEACH senior faculty; (4) debriefing teleconference with all prospective faculty; (5)acceptance and independent course facilitation by new faculty.

Results/Impact/Outcomes

Faculty identified concrete areas of strength and improvement. Formative evaluations support the effectiveness of this faculty development approach, where quantitative results were above 4.0 out of 5.0, indicating "Very Good" or "Excellent". Qualitative results support these data, and the process resulted in local, expert faculty for Alberta TEACH.

Conclusions and Discussion

This faculty vetting process was carried out primarily via distributed learning, allowing for time and cost efficiencies. Faculty noted structured self-assessment of facilitation strengths and weaknesses was a useful learning tool and personally and professionally valuable. Careful preliminary selection of prospective faculty and classroom-based mentoring were key. Ongoing faculty debriefing of subsequent course evaluations helps ensure CQI and checks that high standards for TEACH facilitation are sustained. This presentation shares the assessment and evaluation tools developed by TEACH, relevant to other CME programs.

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Collaborative Professional Learning Between Dentistry and Education Students in Delivering an Oral Health Program to Disadvantaged Queensland Schools

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Background

Poor oral health impacts adversely on educational outcomes and consequently life chances, particularly for socially disadvantaged Indigenous and low income families. This equity project involves intersectoral and interprofessional partnerships to embed an oral health focus into the work integrated experiences of undergraduate Dentistry and postgraduate Education students. In 2011, through shared learning sessions on campus and within classrooms, students have the opportunity to participate in real world experiences that will improve potentially oral health and educational outcomes in disadvantaged children.

Methodology

Students will deliver an educationally sound, oral health program to school children with diverse cultural backgrounds and abilities. This program aims to enable strong, authentic, interprofessional collaboration and teamwork while engaging students in a community outreach program.

Evaluation will employ mixed methodologies 1) Pre and post implementation surveys of students' perceptions of their capabilities, knowledges and attitudes 2) Peer evaluation 3) School teachers' ratings of individual student's performance.

Preliminary findings are not available at the time of submission as the project commences in 2011.