SCHOOL OF DENTISTRY
ALUMNI SOCIETY BOARD OF GOVERNORS MEETING
School of Dentistry, Faculty/Alumni Lounge, 7th Floor
Thursday, March 5, 2009
12:30 p.m. – 4:00 p.m.

AGENDA

Lunch 12:30 p.m. – 1:00 p.m.

I. Call to Order 1:00 p.m. – 1:15 p.m.
   • Dr. Josephine Weeden—Chairperson
     ○ Welcome to guests
     ○ Approval of November minutes

II. Vision Implementation Committee 1:15 p.m. – 2:15 p.m.
   • Peter J. Polverini, DDS, DMSc, Professor and Dean
   • Dennis E. Lopatin, MS, PhD, Professor and Senior Associate Dean
   • Paul Krebsbach, DDS, PhD, Professor and Chair Biologic and Materials Sciences
   • Charlotte M. Mistretta, MS, PhD, [chmist] Professor and Associate Dean
   • Stephen C. Bayne, MS, PhD, FADM, Professor and Chair Cariology, Restorative Sciences & Endodontics
   • Philip Richards, DDS, MS, Clinical Professor in Periodontics and Oral Medicine
   • Jaques Nor, DDS, MS, PhD, Professor in Cariology, Restorative Sciences and Endodontics

Break 2:15 p.m. – 2:30 p.m.

III. Alumni Relations Report 2:30 p.m. – 2:45 p.m.
   • Ms. Carrie Towns—Alumni Office Board Liaison
     ○ Homecoming Report
     ○ Hall of Honor Report

IV. Committee Reports 2:45 p.m. – 3:00 p.m.
   • S.D.A.S. Awards Committee--Ms. Jemma Allor
   • Student Alumni Relations Committee--Dr. Daniel Edwards
   • Board Nominations--Dr. Samuel Bander
   • Alumni Association Liaison Report--Ms. Janet Souder Wilson

V. Dental Student Report 3:00 p.m. – 3:15 p.m.
   • Dental Student T.B.D.

VI. New Business 3:15 p.m. – 3:45 p.m.
   • Ms. Carrie Towns—Alumni Office Board Liaison
     ○ Fall Meeting Date
     ○ Future Meeting Topics

VII. Committee Breakout Meetings 3:45 p.m. – 4:00 p.m.
   • All

VIII. Adjournment of Meeting 4:00 p.m.
   • Dr. Josephine Weeden
Clinical Implementation Team

Team Leader: Phil Richards

Members:
Dan Edwards, Mark Fitzgerald, Mary Garrelts, Wendy Kerschbaum, Laurie McCauley, Marianella Sierraalta, Steve Stefanac, Nikki Sweier

14 one-hour meetings have been convened since January
Clinical Implementation Team

**Overarching Goal:** Excellence in patient care delivered by clinical care teams

**Objectives:**
- Patient families managed by student teams directed by Team Leaders
- Discipline-specific competencies achieved in specialty teams
- Referrals back to specialty teams for advanced care based on discretion of generalist team leader following guidelines set by disciplines
- Centrally managed scheduling and appointing of operators
- Strengthen linkages with other health care providers
- Maintain basic science and medicine concepts throughout clinical care

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**Disciplines**

- Graduate students
- Select D3s, D4s - mini-rotations
- D2s, D3s, D4s from comp care clinics with referred patients/cases
- D1 & D2 clerkships - initial competency assessment

**General Dentistry Teams**

- Specialty referral decisions made by team faculty.
- Students: D2s, D3s, D4s who have demonstrated initial competency
- Provide comprehensive patient care
Standard Assumptions

• Perio chairs - RED = 24
• Prosth chairs - BLUE = 24
• Operative chairs - GREEN = 40
• Tx Planning chairs - YELLOW = 20
• Endo chairs - GRAY = 7
• Hygiene chairs - PINK = 12
• Open or unscheduled – (white) = 17

Current Configuration
Proposed Three-Plus-One Configuration

Team composition

- Clinic Groups (group practices): 3 per clinic
- Teams: 3 per Clinic Group
- Microteams: groupings of one D1, D2, D3 and D4 student
- DH3 and DH4 students also assigned to Clinic Groups
General Dentistry Clinics:
3 Groups

Team functions

- General dentistry teams will develop systematic relationships that mimic a group practice

- D4 students will play important organizational and leadership roles in their teams
  - Real life critiques of their own clinical activities as well as practice/team management effectiveness

- Team activities will constitute a primary basis for a revised practice management curriculum
  - Mark Fitzgerald is working on establishment of criteria for assessment tools
Recent discussions of organizational structure

- Complex curriculum and large student body may benefit from enhanced central management

- Clinic groups also more numerous than current structure
  - More reliance on faculty for coordination of team and patient care activities

- Proposed creation of new administrative roles:
  - Director of Predoctoral Education
  - Assignment of more Clinic Group Leaders
    - (in lieu of Clinic Directors)
Ongoing efforts

• Disciplines and general dentistry leaders will be specifying design criteria for:
  – Learning needs
  – Instructional specifications
  – Performance goals (flexible, not by class level)
  – Competency measures
  – Entry criteria (by discipline) to enable efficient function in the general practice teams
  – Patient care standards
  – Graduate clinic and predoctoral clinic treatment assignment criteria
Vision Implementation
Objectives

- Create an enhanced teaching and learning environment that results in student independent decision making and critical thinking

- Develop new, flexible learning tracks that provide for expanded professional opportunities

- Realize excellence in a financial model that is fiscally sound and sustainable
Vision Implementation Steering Committee

- Paul Krebsbach, Chair
- Steve Bayne
- Dennis Lopatin
- Charlotte Mistretta
- Jacques Nor
- Phil Richards
Teams

• Science Foundation Team
• Clinical Foundation Team
• Clinic Implementation Team
• Track Implementation Team
Science Foundation Team

Overarching Goal: Design a curriculum that empowers the graduating dentist in using scientific methods and evidence that informs diagnosis, treatment planning and patient care

Objectives:

• provide advanced contemporary science knowledge
• demand critical thinking in clinical problem solving
• integrate oral and systemic health concepts throughout 4 yrs
• allow flexibility for Michigan curriculum (tracks)
• generate opportunities (alternative learning paths that allow independent study) for students “out of sync” with core curriculum
• curriculum is owned, designed and executed by school of dentistry faculty with expert colleagues from other schools and disciplines
Science Foundation Team

Team Leaders: Jacques Nor
Carol Anne Murdoch-Kinch

Members:
Dave Brzezenski, Ron Heys, Jan Hu,
Vesa Kaartinen, Eric Krukonis
Integrative courses (multidisciplinary)

Systems

Time:

Year 1

- Cell & Molec Biology
- Infection & Immunity
- Anatomies (HN, dental)

Parallel Themes

- Oral Health & Disease (Sciences) (normal, disease, treatment)
- Grand rounds: 1 patient, 1 clinician, 1 basic scientist
- Case studies: Online, smaller groups, outside the classroom

Clinical foundation

Clinic
Clinical Foundation Team

**Overarching Goal:** Performance based progression

**Objectives:**
- Enable significantly accelerated progression to patient care
- Apply patient care concepts continuously from day one
- Shift selected preclinical learning to the clinics
- Improve coordination of foundational and clinical learning
- Increase efficiencies in content, delivery and faculty effort
Clinical Foundation Team

Team Leader: Mark Snyder

Members:
Renee Duff, Bob Eber, Dennis Fasbinder, Furat George, Gisele Neiva, Tilly Peters, Woosung Sohn
• Pre-D-1 assignments for students so they arrive prepared with basic information

• Computer based patient simulations for use throughout foundations curriculum

• Develop and apply technology for the teaching/learning process

• Develop “must have” chart for D-1 year prior to seeing patients in clinic

• Move initial perio skills course earlier in curriculum to begin developing and applying patient care skills during the D1
Clinical Implementation Team

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Dental Specialties

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- D1 & D2 clerkships - initial competency assessment

Preclinical program

Comprehensive Care Teams

- Specialty referral decisions made by team faculty.
- Students: D2s, D3s, D4s who have demonstrated init. competency
- Provide comprehensive patient care
Proposed Three-Plus-One Configuration
General Dentistry Clinics:

3 Groups

3 Teams per Group
Track Implementation Team

Overarching Goal: to enhance the dental curriculum with the choice of one of three learning tracks

Objectives:

– D.D.S. curriculum characterized by depth in advanced dentistry, alternative practice models, pre-specialization or research (4 year program)

– D.D.S. curriculum with pursuit of M.S., certificate, year out (5+ year program)

– D.D.S. curriculum with pursuit of PhD (7+ year program)
Track Design Team

Team Leader: Will Giannobile

Members:
Nan Hatch, Cathy Krull, Charlotte Mistretta,
Bill Piskorowski, Russ Taichman,
Marilyn Woolfolk
A Vision for the Future of the University of Michigan School of Dentistry
Next Steps

- How best to communicate with students? How and when do students want to be heard? Need for a broader forum?
- How much information do students want? When to get information?
- Why make changes?
- What will it look like when we are done?
- How is this going to affect me?
Vision of U-M School of Dentistry

- Create an enhanced teaching and learning environment that results in student independent decision making and critical thinking
- Develop new, flexible learning tracks that provide for expanded professional opportunities
- Realize excellence in a financial model that is fiscally sound and sustainable
University of Michigan leading the profession

Graduates shape the future of dentistry

Understanding of patients with increased complexity

Must be prepared to practice in different ways

Developing academic leaders and leaders in health care delivery

Graduates work towards creating solutions for health disparities

Training critical thinkers (diagnosticians) while maintaining technical excellence

Depth and excellence in modern biology
Vision of U-M School of Dentistry

- Science Foundation Team
- Clinical Foundation Team
- Clinic Implementation Team
- Track Design Team
Science Foundation

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A Vision for the Future of the University of Michigan School of Dentistry

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Rationale

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Vision Implementation

- Science Foundation
- Clinical Foundation
- Clinic Implementation
- Tracks (paths)

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Next Steps
- Continue to communicate and engage
- How best to communicate with students? How and when do students want to be heard? Need for a broader forum?
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Science Foundation Team (SFT)

- **Members:** Vesa Kaartinen, Eric Krukonis, David Brzezinski, Ronald Heys, Jan Hu, Carol-Anne Murdoch-Kinch (co-Chair), Jacques Nör (co-Chair).

- **Charge (from VIT):** Design a curriculum that empowers the graduating dentist in using scientific methods and evidence that informs diagnosis, treatment planning, and patient care.

- Weekly meetings since April/2009.
- SFT met with new D3s, new D4s, and with faculty of IMS I.
- Co-Chairs met with Marilyn Lantz, neuroscience group, and VIT.

Science Foundation Team (SFT): Principles

- **Underlying Principle:** Teach what a dentist (who uses critical thinking & sound evidence to guide his/her clinical decisions) needs to know.

- **Excellence!**

- **Enhanced learning experience** for dental students:
  - Work on independent decision making, enable students to become self-learners
  - Integration of the science foundation with preclinical and clinical experiences

- **Flexibility** (tracks, electives, ability to “test-out” from specific disciplines): to create some - limited - level of individualization of the curriculum

- **Critical (classroom) content** taught in the first 3 years: to allow for enhanced learning opportunities and for “out-of-school” experiences in the 4th year

- **De-compress** delivery of content in the classroom: we have days with 5+ hours of lectures; or 2-3 hours of lectures on the same topic (no time to “digest” the content)

- **Less faculty/more commitment** from each faculty: more ownership, more credit, more accountability. Also, better integration/coordination, less unplanned repetition

- **Curriculum:** sustainable, continuous assessment/development.
Vision

Integrative courses (multidisciplinary)

Parallel Themes

Oral Health Sciences (normal, disease, treatment)

Clinic

Clinical foundation

Grand rounds: 1 patient, 1 clinician, 1 basic scientist

Case studies: Online, smaller groups, outside the classroom

Cell & Molec. Biology

Infection & Immunity

Anatomies (HN, dental)

Genetics?

Time:

Year 1          Year 4

Clinical foundation

Oral Health Sciences (normal, disease, treatment)

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Clinic

Vision

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Clinic

Vision
Vision

Year 4

Integrative courses (multidisciplinary)

Systems

Year 1

Cell & Molec Biology
Infection & Immunity
Anatomies (HN, dental)
Genetics?

Clinical foundation

Oral Health Sciences (normal, disease, treatment)

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Grand rounds: 1 patient, 1 clinician, 1 basic scientist

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Time:

Year 1          Year 4

Clinical foundation Cell & Molec Biology

Oral Health Sciences (normal, disease, treatment)

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Parallel Themes

Vision

Year 4

Integrative courses (multidisciplinary)

Systems

Year 1

Cell & Molec Biology
Infection & Immunity
Anatomies (HN, dental)
Genetics?

Clinical foundation

Oral Health Sciences (normal, disease, treatment)

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Grand rounds: 1 patient, 1 clinician, 1 basic scientist

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Time:

Year 1          Year 4

Clinical foundation Cell & Molec Biology

Oral Health Sciences (normal, disease, treatment)

Grand rounds: 1 patient, 1 clinician, 1 basic scientist

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Vision

- Integrative courses (multidisciplinary)
- Systems
- Parallel Themes
  - Oral Health Sciences (normal, disease, treatment)
  - Grand rounds: 1 patient, 1 clinician, 1 basic scientist
  - Case studies: Online, smaller groups, outside the classroom
  - Clinical foundation
  - Clinic

Critical Thinking

- We want to create dentists who know how to think, access and apply new knowledge, adapt their practice and make sound ethical and clinical decisions
- Starting in the foundation sciences, reinforced and applied through the clinical sciences and in the clinics and beyond
- A key component for integration of basic and foundation sciences into clinical decision making
- A key component to professional development and ethical decision making
- Providing the tools for self assessment, life long learning, and practicing evidence-based dentistry
- Consideration of this important concept has generated several important pedagogical and curriculum management questions
Our Questions

- **How best to teach** critical thinking skills in the foundation sciences? In the pre-clinic? In the clinics?
- Use of technology to create a **more active learning** environment, **flexibility** in the curriculum
- **How will we assess this learning?**
  - MCQ’s probably won’t be adequate
  - Measuring behaviors as well as content knowledge
  - Level-appropriate expectations for performance? Timing of assessments?
  - Short answer, essays, oral/practical examinations, reflective journals?
  - Online testing?
- **How will the outcomes of the new curriculum be evaluated?**
  - How will we accomplish this and meet the new CODA standards? Accreditation will be 5 years after this is launched, self-study will need to be done 4 years from launch
- **Faculty development?**
- **Culture change?**

The Good News-We Are Not Alone!

- ADEA Commission on Innovation and Change
- Marilyn Lantz informed us about this great resource
- CCI Liaisons Summer Conference
  - David Brzezenski, Renee Duff, Carol Anne Murdoch-Kinch, Bill Piskorowski represented UM
  - We are way ahead of most schools
  - No one else has a vision as innovative and ambitious as ours
  - Very few have the resources we have
  - Everyone is concerned about the “How Do We Do it?” part
  - Assessment is a major focus
  - Use of technology to enhance learning is a major focus
  - Integration of biomedical and clinical sciences, collaborative education between health professions another major focus
Final Thoughts

- We have a tremendous opportunity with the Vision for the New Curriculum
- Details, details, details = success or failure
- Pedagogy and Curriculum Management need to be included in any new design
  - From this, decisions can also be made about resources needed, faculty recruitment and development, and outcomes assessment for ongoing curriculum management and CODA accreditation
  - All committees (not just SFT) need to consider these as they move forward
- Culture change may be needed to fully and successfully implement this plan
Philosophy of Curriculum

D1 Fall Semester, July 2010

- What is our desired educational outcome?
  (the U-M Graduating DDS)
- Professional responsibility of health care provider
- Orofacial complex as an integrated system; the gateway to the body
- Knowledge in content areas should be conveyed in the context of critical thinking that leads clinicians and scientists to devise next steps against a background of evidence and alternative explanations – the steps that generate testable alternative hypotheses and differential diagnoses
Defining Characteristics of the U-M Graduate

The U-M DDS graduate is a highly skilled and self-motivated clinician who applies scientific knowledge and critical thinking to achieve optimal oral health

The U-M dentist:

- has a deep knowledge and understanding of the science that underpins diagnosis, risk assessment and management, and treatment in the practice of dentistry;

- practices with the understanding that the orofacial complex is the gateway to the body with principal roles in regulating life-essential functions;

- interacts within other health professions to represent and promote oral health as a key component of total health;

- is prepared to influence policy for the profession through the ability to evaluate competing claims and positions, and through active participation in local and national organizations;

- models integrity and professional responsibility through ethical behavior in professional practice and daily life.
D1 Fall, July 2010

- Orientation
- Gross Anatomy – Head (64 h) (structure and some cases)
- Dental anatomy/ (46 h)
- Function (25 h + cases)
- Professional responsibility (10 h)
- Skills for critical thinking and problem solving
- GR/cases (critical thinking and decision making) (12 h + 12 h outside class)
- Patient interview, data collection, (med and dent hx)
  - physical diagnosis (oral, head and neck exam and med hx) (12 h)
- Pathway time (selectives) (24 h)
- Free – read, think, weigh and consider, reflect, collaborate (24 h)

- Initial orientation to clinics, infection control
- (preclinic experience? Maybe, if time)
**FIRST DRAFT**
D1 Summer Weekly Schedule

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<td>Flexible time</td>
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<td>Head and Neck Anatomy</td>
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<td>Basic Clinical Skills</td>
<td>Grand Rounds Case Study</td>
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Footnotes:
Students excited to be in dental school
Students given a context for future detailed study
Integrative courses (multidisciplinary)

Systems

Oral Health Sciences
(normal, disease, treatment options)

Grand rounds: 1 patient, 1 clinician, 1 basic scientist

Case studies: Online, smaller groups, outside the classroom
Oral Health Sciences
(orofacial function and pathophysiology)

• Series of linked courses over 4 years
  (lecture + case study + Grand rounds)
• Dotted line is September D1 year
• Numbers are course leaders
• Arrow represents continuity and glue (cases, GR, communication)
• Leaders meet regularly to assure continuity of content, assessment and delivery methods
All course content is integrated
Communicate philosophy and broad map of curriculum

Describe how faculty will shape the rest of the story

Hear and understand reactions of faculty

Describe the vote to affirm broad concept map (Jan. 2010)

affirmation will result in engagement of all faculty in curriculum implementation
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All course content is linked

- Science Foundation
- Collaborate

- Integrate
- Systems

- OHS
- Excell
Introduction to the Orofacial Complex as a System

Function of the Orofacial Complex
- Development
- Neurobiology
- Muscular function
- Vascular biology
- Immune function
Oral Health Sciences
(orofacial function and pathophysiology)

Module (course) leaders 1-7 meet regularly to assure continuity of content, assessment and delivery methods
All course content is linked
Executive Committee
Update from Vision Implementation Steering Committee

Retreat - December 18, 2009

Communication philosophy and broad map of curriculum

Hear and understand reactions of faculty

Describe how faculty will shape the rest of the story

Describe the vote to affirm broad concept map (January 2010)

Affirmation will result in engagement of all faculty in curriculum implementation
Objectives

- Create an enhanced teaching and learning environment that results in student independent decision making and critical thinking.

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- Realize excellence in a financial model that is fiscally sound and sustainable.

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- models integrity and professional responsibility through ethical behavior in professional practice and daily life.

Vision Implementation Teams

- Science Foundation
- Clinical Science Foundation
- Clinical Foundation
- Clinic Implementation
- Pathways (Tracks)
Current Curriculum

Proposed Curriculum Map
Our desired educational outcome (the U-M Graduating DDS) is guiding the design.

Professional responsibility of health care provider.

Orofacial complex as an integrated system; the gateway to the body.

Teach to learn by creating curiosity (rather than just teaching a lesson)
Students excited to be in dental school
Students given a context for future detailed study

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<td>Head and Neck Anatomy</td>
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<td>Basic Clinical Skills</td>
<td>Grand Rounds Case Study</td>
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Footnotes:
Oral Health Sciences
(orofacial function and pathophysiology)

• Series of linked courses
  (lecture + case study)
• Dotted line is September D1 year
• Numbers are courses
• Arrow represents continuity and glue (cases, GR, communication)

Content experts meet regularly to assure continuity of content, assessment and delivery methods

Retreat - December 18, 2009

Affirmation will result in engagement of all faculty in curriculum implementation

Describe the vote to affirm broad concept map (January 2010)

Describe how faculty will shape the rest of the story

Hear and understand reactions of faculty

Communicate philosophy and broad map of curriculum
D1 Fall, July 2010

- Orientation
- Gross Anatomy – Head (64 h) (structure and some cases)
- Dental anatomy/ (46 h)
- Function (25 h + cases)
- Professional responsibility (10 h)
- Skills for critical thinking and problem solving
- GR/cases (critical thinking and decision making) (12 h + 12 h outside class)
- Patient interview, data collection, (med and dent hx)
  - physical diagnosis (oral, head and neck exam and med hx) (12 h)
- Pathway time (selectives) (24 h)
- Free – read, think, weigh and consider, reflect, collaborate (24 h)
- Initial orientation to clinics, infection control
- (preclinic experience? Maybe, if time)
Science Foundation

Overarching Goal: Design a curriculum that empowers the graduating dentist in using scientific methods and evidence that informs diagnosis, treatment planning and patient care.

Objectives: Want to design a science foundation that:

• provides advanced contemporary science knowledge
• demands critical thinking in clinical problem solving
• integrates oral and systemic health concepts throughout 4 yrs
• allows flexibility for Michigan curriculum (pathways)
• generate opportunities (alternative learning paths that allow independent study) for students “out of sync” with core curriculum
• Is owned, designed and executed by school of dentistry faculty with expert colleagues from other schools and disciplines

Clinical Foundation Design Team

Overarching Goal: Performance based progression

Objectives:

- Enable accelerated progression to patient care
- Apply patient care concepts continuously from day one
- Shift selected preclinical learning to the clinics
- Improve coordination of foundational and clinical learning
- Increase efficiencies in content, delivery and faculty effort
### Clinical Design Team

**Overarching Goal:** Excellence in patient care delivered by clinical care teams

- Patient families managed by student teams directed by Team Leaders
- Discipline-specific competencies achieved in specialty teams
- Referrals back to specialty teams for advanced care based on discretion of generalist team leader following guidelines set by disciplines
- Centrally managed scheduling and appointing of operatories
- Strengthen linkages with other health care providers
- Maintain basic science and medicine concepts throughout clinical care

### Clinical Science Foundation Team

- Identifies what clinical science knowledge is required by students to be competent by graduation.
- Identifies the best sequence for students to acquire this knowledge.
- Identifies means to have a more substantive and efficient clinical science curriculum by eliminating redundancies and examining to deliver course content.
- Identifies how all clinic science courses can foster improved diagnostic/critical thinking/problem solving skills for students.
Pathways

- **Overarching Goal**: to enhance the dental curriculum with the choice of one of three learning tracks

- D.D.S. curriculum characterized by depth in advanced dentistry, alternative practice models, pre-specialization or research (4 year program)

- D.D.S. curriculum with pursuit of M.S., certificate, year out (5+ year program)

- D.D.S. curriculum with pursuit of PhD (7+ year program)
CURRENT (old) CURRICULUM

- Bridging Courses
- Clinical Sciences
- IMS
- Clinical Foundations
- Outreach

(overlap of pre-clinical and clinical activities)
Curriculum Concept Map

- Grand Rounds
- Clinical Sciences
- Science Foundation
- Outreach
- Selectives
- Clinical Foundation
- Flexible Time
Path to New Curriculum

FACULTY ANALYSIS
- Completion of SAFCo Self-Study
- Town Hall Faculty Mtg
- Creation of VIT
- Creation of 5 Faculty Planning Teams
- Student Leaders
- Faculty Retreat 1
- Faculty Retreat 2

2008
- Vision Statement from Dean
- Deans and Dept Chairs Retreat

2009
- VIT Presentation and Faculty Discussion at Fall Convocation

2010
- Faculty Vote to Affirm

CONCEPT DEVELOPMENT
- START of Phase 1 of New Curriculum
- Creation of Faculty Planning and Implementation Teams
Academic Calendar

Current DDS Calendar

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D1

Wks: Mixed

D2

Wks: 16

D3

Wks: 14

D4

Wks: Mixed
Implementing a Vision for the Future of the University of Michigan School of Dentistry

- Create an enhanced teaching and learning environment that results in students becoming independent decision makers and critical thinkers
- Create options for flexible learning pathways that provide a range of expanded professional experiences for all students
- Create a model of both excellence and financial sustainability
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Academic Calendar

• **Opportunities**
  – Spreads out content across year to allow flexibility in curriculum
  – Enhance patient management (continuity of care)
  – Increase the options for clinic rotations
  – Improve opportunities for shared courses with Dental Hygiene
  – Allow time for pathways

• **Challenges**
  – Concern about changing culture with use of time (year), faculty/students need to adapt to changes
  – Need to consider manpower and scheduling throughout year.
  – ITDP during summer. Will this interfere with use of simulation lab?
  – May limit time to refresh/maintain clinics
  – Opportunities for student research rotations further constrained
# Proposed D1 Fall Schedule (draft)

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<tr>
<td>8:00</td>
<td>Basic BioMat</td>
<td>Flexible Time</td>
<td>Grand Rounds</td>
<td>Pt with caries</td>
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<tr>
<td>9:00</td>
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<td>Behav Sci</td>
<td>Grand Rounds</td>
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<td>Inf and Imm</td>
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<td>Intro to Prof</td>
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### D1 Summer 2010 (Class of 2014)
#### First Year Dental Students

**5/25/2010**

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<td>8</td>
<td>July 5</td>
<td>Orientation</td>
<td>DENT 517 G378</td>
<td>DENT 545 Head &amp; Neck</td>
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<td>Orientation</td>
<td>DENT 504 Pathways / Tracks G378</td>
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<td>12</td>
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<td>Orientation</td>
<td>DENT 521 Dental Anat G360</td>
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<td>DENT 521 Dental Anat G360</td>
<td>DENT 517 Groups A,B,C,D,E,F,G</td>
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**Date:**

- **July 12:** Orientation, Orientation See Schedule, Lunch
- **July 13:** DENT 509 G322, DENT 521 Dental Anat G360
- **July 16:** Orientation See Schedule, Orientation See Schedule, Lunch
- **July 19:** DENT 509 G322, DENT 517 G378
- **July 22:** DENT 509 G322, DENT 517 G378
- **July 25:** Orientation See Schedule, Orientation See Schedule, Lunch
- **August 2:** DENT 504 Pathways / Tracks G378, DENT 504 Pathways / Tracks G378
- **August 5:** DENT 545 Head & Neck Anatomy Med Sci II, DENT 545 Head & Neck Anatomy Med Sci II
- **August 8:** DENT 504 Pathways / Tracks G378, DENT 504 Pathways / Tracks G378
- **August 11:** DENT 504 Pathways / Tracks G378, DENT 504 Pathways / Tracks G378
- **August 14:** Flex Time, Flex Time, Flex Time
- **August 17:** DENT 517 Groups A,B,C,D,E,F,G
- **August 20:** Final Exams, TBA

**Notes:**

- CPR will be held on Saturdays 7/10 & 7/17; session from 8-noon and 1-5 pm
- Orientation
- DENT 517 Introduction to Clinical Skills
- DENT 501A Introduction to the Dental Profession (Mentor 1 & 2 Sindecuse Atrium)
- DENT 521 Dental Anatomy & Occlusion 1
- DENT 505 Grand Rounds
- DENT 504 Intro to Pathways in the DDS Curriculum
- DENT 509 Intro to the Function of the Orafacial Complex
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models integrity and professional responsibility
We are developing a new curriculum that incorporates the following key concepts:

• Empowers graduating dentist in using scientific knowledge and evidence that informs diagnosis, treatment planning and patient care
• Integrates oral and systemic health concepts throughout 4 yrs
• Enhances critical thinking and clinical problem solving skills
• Applies patient care concepts continuously from day one
• Enables accelerated progression to patient care
• Achieves flexibility for alternative learning pathways

Need to connect the dots
Need to integrate in new ways