



# ADEE Site Visit Report



**Erciyes University, Faculty of Dentistry**

**Kayseri, Turkey**

**22<sup>nd</sup> – 25<sup>th</sup> April 2014**

## School Details

### Address

Erciyes Üniversitesi Diş Hekimliği Fakültesi

Melikgazi 38039Kayseri, TURKEY

Web: [www.dent.erciyes.edu.tr](http://www.dent.erciyes.edu.tr)

### Dean

Prof . Dr. Alper ALKAN

[dralperalkan@hotmail.com](mailto:dralperalkan@hotmail.com)

## ADEE Visitation Team

### Prof. Deborah White (Chair)

University of Birmingham, UK

[d.a.white@bham.ac.uk](mailto:d.a.white@bham.ac.uk)

### Dr. Eilis Delap (Rapporteur)

Trinity College, Dublin, Ireland

[Eilis.delap@dental.tcd.ie](mailto:Eilis.delap@dental.tcd.ie)

### Dr. Annemarie Verhoef

ACTA, Amsterdam, Netherlands

[a.verhoef@acta.nl](mailto:a.verhoef@acta.nl)

### Prof. Rui Amaral Mendes

The Catholic University of Portugal, Porto, Portugal

[ramaralmendes@crb.ucp.pt](mailto:ramaralmendes@crb.ucp.pt)

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## Section 1: General Information

### Prologue

*The aim of an ADEE visit is not to judge a school but to offer the opportunity for visitors and the host school to exchange views on many aspects of curricula which is of mutual benefit and ultimately will lead to harmonisation of dental education within the European Union (EU) and beyond.*

*The visiting panel from the Association of Dental Education in Europe (ADEE) would like to commend Erciyes University Faculty of Dentistry on a well-produced, detailed and extensive ADEE self-assessment document.*

*The visitors strongly emphasise the importance of the **process** of the production of the self -assessment document to the Faculty of Dentistry and the entire Faculty of Dentistry community.*

*The obvious teamwork and preparation of the Faculty of Dentistry in the production of the self -assessment document for the ADEE visit is very much appreciated and greatly maximised the visit by the ADEE panel of visitors.*

*The visitors very much appreciated and were greatly aided by the openness and frankness of all the staff and students of the Faculty of Dentistry. The warmth of the welcome towards the visitors and the hospitality was overwhelming. The visitors wish to thank all those involved.*

## Introduction

The self-assessment document, followed by the visit of the ADEE panel of visitors, contributed to a greater understanding of the Faculty of Dentistry itself, an understanding of the Faculty of Dentistry not only within the Erciyes University and the Kayseri Region but also within the entire country of Turkey.

The Erciyes University, Kayseri, in Turkey is to be commended on their Faculty of Dentistry. The Faculty of Dentistry is privileged by having the full support of the University and collaboration with other Faculties within the university.

The overall impression of the visitors is that the Faculty of Dentistry, Erciyes University is comparable with many dental schools in Europe. The continual advances that have occurred there since it's foundation in 2001, particularly in terms of infrastructures, are all to the highest standard and in the right direction. The facilities of the Faculty of Dentistry are amongst the most modern, the staff of the Faculty are extremely enthusiastic and committed. The staff are open to change and improvements wherever possible. The availability of patients for teaching purposes is excellent.

The main suggestions for improvement lie within the areas of teaching, learning and assessment and also on the Faculty commitment to undergo further national and international collaboration with other dental educational establishments. Their participation in this ADEE site visit is welcomed, their peer review aiding the Faculty of Dentistry but also all those involved in ADEE and dental education in other parts of the world. It is through this collaboration that harmonisation of dental education to the highest standard can be achieved throughout the world.

The support of the Ministry of Health by providing free healthcare privileges to all Turkish residents throughout the country through their Turkish Identification Number (TIN), which is also their social security number, is commendable but does not fully address the oral health care needs of the population. The panel of visitors acknowledge that the Faculty of Dentistry recognises the oral health care needs of the population and would welcome the faculty being involved at a higher level to improve the oral health situation of Turkish citizens. This is in line with the mission of the Faculty of Dentistry.

The collaboration of all the oral health care professionals should be utilised for an extensive and nationwide prevention programme of public dental health.

The visiting panel from the Association of Dental Education in Europe (ADEE) was impressed with the modern Faculty of Dentistry itself, its position within the Erciyces University setting, the close proximity of the Faculty of Dentistry to the General Medical Hospital and the Medical Faculty, the School of Nursing, Educational Faculty, and the Research Centre.

The changes that have occurred physically in the Faculty of Dentistry in recent years will allow further integration of the management structure and provide the opportunity to revise curricular strategies. There is a wonderful openness and atmosphere of change within the entire faculty.

Revised curricular strategies would encourage the integrated education of all health care providers.

It would be ideal also to have Dental Nursing- Hygiene Programmes located within the new Faculty of Dentistry building. This would further facilitate the team approach of the oral health professional and mimic their future professional life.

The production of this document and the support for the document shows the commitment of the Erciyces University and the desire of the College of Dentistry to lead in the education of dental professionals within the Kayseri region and beyond.

## Section 2: Curriculum in General

‘The mission of the Faculty of Dentistry is to educate dentists who will provide the best oral and dental health care: to improve the oral health of the population and ethical character in every endeavour while demonstrating the highest quality in clinical knowledge and expertise’.

‘The vision of the Faculty of Dentistry is to be a nationally recognised dental school known for an innovative educational programme, committed to cultural diversity, discovery, transfer of scientific knowledge, the superior skills of diploma holders and highest degree of oral health service’.

It is obvious to the visitors that the entire faculty of the Faculty of Dentistry, University of Erciyes, is committed to the mission and vision of the Faculty.

With this mission and vision in sight the visitors believe that the Faculty of Dentistry are aiming in the right direction in order to achieve the realisation of both. However, some improvements should be made in order to achieve this.

The visitors acknowledge the presence of some educational training and development for the staff of the Faculty and note that by June 2014 all academic staff have completed an ‘education of educators and education skills’ course. We would recommend that this should be embedded as an ongoing feature and academic staff should be encouraged to undertake further training in education leading to formal qualifications.

The visitors would recommend the promotion of a student centred curriculum, promoting life-long learning and self-reflection.

The visitors would recommend improving the consistency and coherency of the dental curriculum by expanding the multidisciplinary approaches, adapting the workload and assessment activities to a continuing education model that favours the learning curve, extending teaching and assessment methods.

It is noted that there is a division of the five-year course into the three years of preclinical studies and two years of clinical studies, with no significant dental activity in the preclinical years. The visitors would recommend the inclusion of greater clinical activity in the preclinical years.

The strong emphasis placed at present on the theoretical aspects in the clinical entities, particularly the lecture courses, should be reduced to achieve a better balance with clinical activities. The curriculum is over dependent presently on the traditional teaching method of lectures. The visitors would recommend the implementation of other methods of teaching such as small group teaching and guided self-directed learning.

The panel of visitors acknowledge the limited integration of certain subjects in certain areas within the curriculum at present and would recommend greater emphasis of the integration of the basic sciences into the clinical situation in later years of the course.

In the clinical course the introduction of the concept of teamwork, involving perhaps 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> year students working on integrated patient care, would have the potential to allow maximisation of practical experiences. This concept exists presently in some clinical aspects of the periodontology course.

The visitors commend the planned integrated clinic where patients can be treated as if in general dental practice. An integrated approach to patient care is desirable as it mimics future professional life.

The number of examinations in the dental undergraduate course appears to be excessive. The purely written format of multiple discipline based examinations is inconsistent with the concept of integrated patient care.

The need to maintain close links between clinical training and theoretical teaching is better achieved by the horizontal and vertical integration throughout the curriculum.

It is widely accepted that 'assessment drives learning' and therefore it is desirable and equally important that assessment methods have an integrated approach also in order to maximise learning by the students.

The visitors commend the student evaluations throughout the entire course and especially at the end of each academic year with the potential to influence curriculum change.

The visiting panel would like to encourage the incorporation of independent study time and time for reflection within the curriculum timetable.

Both national and international collaboration with other dental faculties should be encouraged and promoted. This national and international collaboration should be extended to both staff and students.

The visitors would recommend the adaption of the number of patients that are accepted to uphold high quality and safe treatment and ensure quality of student education.

The visitors were overwhelmed by the number of available patients for staff and student care. There is often a shortage of patients available for education of dental students presently in many other countries. This availability of patients is probably as a result of the lack of a Public Dental Health policy within Turkey. However the number of patients attending the Faculty of Dentistry could also be due to the reputation of the Faculty of Dentistry in the Kayseri region and beyond and the quality of care the patients receive and the wonderful atmosphere created within the hospital setting.

It is important to balance the number of patients accepted for treatment with the educational needs of the dental student group and the time available for the treatment of same.

The provision of care by the clinicians, while at the same time covering the teaching of clinical dentistry to dental students, the dental students carrying out clinical procedures on the own assigned patients (often advanced procedures for the first time in a clinical situation) is not desirable. It is essential for safety that clinical teaching by clinical teachers should focus on the dental students and their assigned patients.

### **Section 3: Curriculum Content and Methods**

The curriculum delivery is largely based upon traditional lectures with some small group teaching within the clinical setting. The sole dependence on the lecture method has the capacity to promote rote learning and limits the learning experience of the student. The visitors would encourage a change to a more student centred, life-long learning method.

The curriculum is, as in many other dental schools throughout the world, in danger of overload, with additions being made continuously and little being removed.

The courses in general are individual courses and although there are some topics taught through multidisciplinary approaches most are taught and assessed individually. An integrated approach to assessment would be in line with an integrated approach to patient care preparing the dental students for their future professional careers in dental practice.

The visitors commend the plans to introduce an integrated dental care clinic. This will prepare the students for the future professional life, mimicking general dental practise and the provision of 'integrated' dental health care to the patient.

The visitors would also recommend an integrated approach to teaching and learning. This integrated approach would contextualise the learning for the student and will aid with critical thinking and lifelong learning.

Individual assessment of individual courses can lead to an overload of assessment also. The integrated assessment would provide an opportunity to reduce the number of examinations.

It is also important that all assessments (including clinical assessments) have clearly defined criteria and marking or grading schemes that should be set out and communicated to students and staff. On the clinical level, the criteria for clinical assessments should include an estimate of performance in the various dimensions of competence (knowledge, skills, observed behaviour and safety).

In modern society, the ability to source information widely is a necessary skill and the undergraduate dental students should be encouraged to do this and to ensure that the information is evidence based. It is also imperative that the students acquire the necessary skills of critical thinking which can be applied in their future professional careers.

It is important for the student that objectives and learning outcomes are set for all aspects of the dental curriculum. This is necessary to direct learning and reassure the student that all aspects of their curriculum are covered.

The ADEE self-assessment document provides a written document with an overview of the entire curriculum and the assessments which is of value to the entire faculty community.

Horizontal and vertical integration of many aspects of the dental curriculum is important to lead to greater understanding and learning in context and therefore encourages lifelong learning.

Overall, different methods of assessment should be used and multiple samples of performance should be taken, implementing both formative and summative assessments. This takes into account students' different styles of learning.

It is highly recommended that, throughout the teaching-learning process, the students receive feedback on their academic, clinical and professional performance. Thus the students must be given tools that promote reflection; critical thinking and continued learning, such as self- or peer-assessment and portfolios should be in place.

The visitors would recommend that the good practice of training in pedagogical principles for all academic staff is embedded as continuing professional development at appropriate intervals and academic staff should be encouraged to undertake further training in education leading to formal qualifications.

The visitors commend the student evaluations throughout the entire course and especially at the end of each academic year. The students are the ultimate stakeholders and their input into course planning and development is invaluable. The visitors would recommend their involvement in the various committees involved in all aspects of the school. The existence of a

pedagogical Committee with representatives of both senior and junior dental faculties, as well as students – all designated by their peers – would be welcomed. Such a committee not only would be able to oversee all the educational activities, but, most importantly, would provide a thorough and integrated insight on the outcomes of the curricular model adopted by the governing bodies of the Faculty.

It is noted that there is a division of the five-year course into the three years of preclinical studies and two years of clinical studies, with no significant dental activity in the preclinical years. The visitors would recommend the inclusion of greater clinical activity in the preclinical years.

The visitors would recommend the Dental Faculty becoming involved in the leadership for continuous professional development among dental graduates.

## **Section 4: Facilities**

The visitors found new, modern expanding facilities centrally located on the Erciyes University campus, in close proximity to the General Medical Hospital and the Medical Faculty, Nursing Faculty, Educational department and University Research facilities.

The clinical facilities and environment are excellent. The clinical facilities are extremely suitable for purpose and accessibility-friendly. The visitors were highly impressed by the cleanliness of the entire clinical setting. The facility is spacious and impressive with modern chairs and cabinetry. This creates an optimal clinical environment for patients, students and staff.

The facility is enhanced by an innovative computer-based record system (PACS).

There are 165 dental units with information technology connectivity to a centralised database and hospital information system. Each department is equipped with periapical radiograph units and there is a portable unit in the Paedodontic department.

The Radiology Department was located on the ground floor of the hospital and was well equipped.

Sterilisation facilities are excellent and this process is on-site but is outsourced. It is supervised by a Clinical Microbiologist . There is emphasis placed on sterilisation and infection control procedures throughout the entire Faculty of Dentistry. Although sterile clinical gowns are provided for students and staff, the visitors noted that there were inconsistencies in the way that some staff wore these and would recommend that guidance for wearing gowns is provided.

The facility includes a new library within the Faculty of Dentistry building and a research facility equipped with the latest technological equipment. This research facility is managed by a biological laboratory assistant.

There were two Operative Laboratories with advanced simulation phantom heads. There was capacity to facilitate 110 students in each of these facilities which could be used for restorative dentistry, periodontics, prosthodontics and endodontics. The newer of the two operative laboratories greatly simulated the clinical situation.

The lecture theatres were well equipped and of adequate size for the student numbers. A variety of meeting rooms were located on-site which were suitable for small group learning.

The visitors visited the new library within the Faculty of Dentistry building with online connection to the main university library. The visitors were informed of the more extensive library located in the nearby Medical Faculty. As in many other countries, there are a limited number of dental texts and journals available in the national language which puts the students at a disadvantage. Most medical and dental texts are written in English. The courses in English, provided by the Faculty of Dentistry, are therefore an essential component of the curriculum.

The Oral and Maxillofacial Surgery Department and facility are impressive with great detail placed on the design and layout. Treatment is provided under general anaesthetic provided by anaesthetists. In this facility, there is a 110 person conference room, which has a video link to the theatre. Students and

staff can receive detailed live footage of procedures being carried out in theatre.

There is an on-site production laboratory.

There was a 'student affairs' office on site with another located elsewhere on campus.

The administrative and staff offices located onsite are convenient both for clinical activity and also to support the student personal tutor system.

The facilities are all suitable for the training of dental surgery assistants.

The music and drama facilities for broader curricular activities are commended by the visitors and it is hoped that students are given sufficient time to use these.

## **Section 5: Organisation**

The visitors commend the Faculty of Dentistry on its organisation. The work of the various committees and subcommittees were evident as was the leadership and teamwork involved in the organisation. The visitors would like to recommend student involvement on the various committees as the students are the ultimate stakeholders and their input would be very beneficial. Students expressed an eagerness to be involved.

## **Section 6: Staff**

The visitors were highly impressed with the staff and their enthusiasm and commitment. The leadership and teamwork are to be commended.

It is important that a staff development plan should be in place. This development plan should include the embedding of education training, building upon the excellent foundation of 'education for educators and education skills' which will have been completed for all academic staff by June 2014.

The visitors were surprised that the staff had to supervise student treatment sessions and at the same time treat their own patients. Presently financial reward appears to be primarily for clinical dentistry, perhaps at the expense of teaching and research. The focus of financial reward for clinical dentistry mainly, creates the undesirable situation of qualified clinicians treating their own patients while at the same time teaching students treating other patients. The provision of care by the clinicians, while at the same time covering the teaching of clinical dentistry to dental students, is highly undesirable. By rewarding financial remuneration for clinical teaching the clinical teachers can focus on the dental students and their assigned patients which would be of mutual benefit to all.

Given the relatively young age of both junior and senior Faculty and the need to expand the number of tenured teachers committed to an academic career, clinical teaching personnel, particularly if enrolled in doctoral and/or specialisation programmes, should be encouraged to undergo pedagogical training. They should also be provided with an adequate career path that enables and promotes teaching –driven activities.

## **Section 7: Biological Sciences**

The visitors were impressed with the staff involved in planning, organising and delivering the biological sciences to the undergraduate dental students. The biological science subjects appeared to have been approached with much relevance made to dentistry. This approach to learning aims at preparing the dental students for future professional practise by contextualising the medical sciences in the dental setting.

It would be desirable if more biological science subjects could be integrated both horizontally and vertically within the entire undergraduate dental curriculum.

It would also be desirable if the assessment of these biological science subjects could have an integrated approach. It is widely accepted that ‘assessment drives learning’ and therefore it is equally important that assessment methods

have an integrated approach also in order to maximise learning for the students.

The visitors wish to commend the teaching staff involved in this section of the biological sciences who appear to be committed to the Faculty of Dentistry and the mission of the faculty. Their enthusiasm for their subject and the application of these subjects to the future careers of the dental students was evident.

## **Section 8: Medical Sciences**

As in section 7: The visitors were impressed with the staff involved in planning, organising and delivering the medical sciences to the undergraduate dental students. The medical science subjects appeared to have been approached with much relevance made to dentistry. This approach to learning aims at preparing the dental students for future professional practise by contextualising the medical sciences in the dental setting.

It would be desirable if more medical science subjects could be integrated both horizontally and vertically within the entire undergraduate dental curriculum, thus emphasising an educational model that fosters a truly holistic approach to the patient. This will, in turn, improve outcomes in health care, increase patient safety and promote a most needed multidisciplinary approach with other health care professionals.

It would also be desirable if the assessment of these medical science subjects could have an integrated approach. It is widely accepted that 'assessment drives learning' and therefore it is equally important that assessment methods have an integrated approach also in order to maximise learning for the students.

The visitors wish to commend the teaching staff involved in this section of the medical sciences who appear to be committed to the Faculty of Dentistry and the mission of the faculty. Their enthusiasm for their subject and the application of these subjects to the future careers of the dental students was evident.

## **Section 9: Public Dental Health and Behavioural Sciences**

The oral health care situation within Turkey would benefit enormously from the implementation of a public dental health policy within the country. This public dental health policy could be initiated by the Ministry of Health and should involve the collaboration of all the dental health care professionals. This public dental health policy should focus on prevention. The Faculty of Dentistry, Erciyes University could be among the leaders in the initiation of such a programme.

The visitors would highly commend an emphasis on Public Dental Health within the curriculum of the Faculty of Dentistry.

The visitors would recommend the horizontal and vertical integration of public dental health within the dental curriculum.

The introduction of oral health education presently in the curriculum is to be commended and the visitors were pleased to hear about the field trainings done during the community dentistry course for 4 years and about the fact that the school is preparing a larger scale dental public health project. This will involve a preventive treatment for a greater number of participants, pre-clinical students and other stakeholders including civil social groups and ministers of health and education.

Presently it was noted by the visitors that the focus was on the treatment of disease rather than the prevention. This could be as a result of the insurance scheme within the country and the payment plan for treatment rather than preventive interventions.

The presence of epidemiology and behavioural science within the curriculum is commendable; however the curriculum hours of both epidemiology and behavioural science are limited. The visitors not only recommend the extension of these subjects throughout the curriculum, but further advise that this is done in extension activities involving actual collaborations with relevant outside non-academical institutions in society, such as schools and nursing homes.

## **Section 10: Restorative Dentistry**

This section includes restorative dentistry, endodontics and prosthetic dentistry.

The Erciyes University Faculty of Dentistry is privileged by the number of patients. However the number of patients accepted must be balanced with the number of staff. Also the staff should not have to treat their own patients while supervising student clinical sessions.

The visitors commend the planned introduction of the integrated clinic.

## **Section 11: Orthodontics and Paedodontics**

The visitors were impressed by both the teaching of Orthodontics and Paedodontics to the undergraduate dental students. Both clinical areas were impressive and thoughtfully designed for the provision of oral health care to children. The orthodontic clinical area was suitable for both adult and child patients.

There appeared to be good collaboration between both specialties for the provision of oral health care to the child patient.

The orthodontic teaching of the undergraduate dental students appears to be at a level appropriate for orthodontic needs at general dental practice level.

The visitors would recommend strongly that each student working on a paediatric patient would have chair-side assistance at all times. The visitors make the suggestion that this could be a trainee dental nurse *or* perhaps a dental undergraduate student from the earlier, preclinical years. The latter would serve as an opportunity to introduce the undergraduate dental student to the clinic at an earlier stage and also would enable them to directly observe the more senior undergraduate dental students on clinics and thus provide an invaluable contextual learning experience.

The visitors were impressed with the area especially allocated for the delivery of preventive dental education. However, the visitors would strongly emphasise the enormous benefit of the introduction of a national or even regional public health dental programme and would encourage the Faculty of

Dentistry to be leaders to initiate such a programme. The Faculty of Dentistry should collaborate with the Ministry of Health on this matter and also with the other dental schools in Turkey and with other health care professionals.

## **Section 12: Oral Diseases of Bone and Soft Tissues**

The subjects included in this section are Oral and Maxillofacial Surgery, Periodontics, Oral and Maxillofacial Radiology.

Again the visitors commend the wonderful facilities and the continuous atmosphere of change and improvement.

The visitors commend the integration of the topics vertically in the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> clinical years.

The large number of patients attending these clinics is impressive in comparison to countries where there is a shortage of patients attending for undergraduate treatments. There needs however to be a balance of clinical treatment with the number and suitability of patients from an educational perspective.

As mentioned previously, the visitors were surprised that the staff had to supervise student treatment sessions and at the same time treat their own patients. Presently financial reward appears to be primarily for clinical dentistry, perhaps at the expense of teaching and research. The focus of financial reward for clinical dentistry mainly, creates the undesirable situation of qualified clinicians treating their own patients while at the same time teaching students treating other patients. The provision of care by the clinicians, while at the same time covering the teaching of clinical dentistry to dental students, the dental students carrying out clinical procedures on the own assigned patients (often advanced procedures for the first time in a clinical situation) is highly undesirable. By rewarding financial remuneration for clinical teaching the clinical teachers can focus on the dental students and their assigned patients which would be of mutual benefit to all.

Time for research needs to be made available and once again financial recognition is necessary to protect the time allocated for same.

There appear to be several methods of assessment in this area with the main focus on written assessment with some practical and verbal assessment including case report presentations.

The visitors commend the Community Oral and Dental Health undergraduate training programme involving the community project and would recommend an extension of this project to include the recognised preventive measures, with epidemiological data collection to monitor future oral health and disease patterns in the Kayseri region. The visitors were pleased to hear that the school is preparing a larger scale dental public health project. This will involve a preventive treatment for a greater number of participants, pre-clinical students and other stakeholders including civil social groups and ministers of health and education. This may strengthen the case for the Ministry to introduce a National Public Dental Health Policy.

This Community Oral and Dental Health undergraduate training programme also is important in the practical application of topics such as epidemiology in addition to the practical application of an example of teamwork. This initiative has to be commended in that it also brings the Faculty of Dentistry to the community and introduces the concepts and education of prevention of disease to all involved.

### **Section 13: Multidisciplinary Topics**

The visitors commend the Faculty of Dentistry on the introduction of some multidisciplinary topics and would recommend for this initiative to be expanded. The multidisciplinary topics are a good example of integration and there practical application could be a realisation in the newly planned integrated clinics.

The visitors wish to commend the initiative of the teaching of 'how to manage and coordinate a business in health science'.

## **Section 14: Scientific Education and Development**

The scientific education appears to be vertically integrated to a certain extent within the curriculum. The existence of the 'Graduation Thesis' for the final year students is to be commended by the visitors and helps reinforce the scientific principles acquired in the earlier years of the dental course.

The visitors would recommend the development of the graduation thesis to include a wide range of subjects assigned to the individual students and the delivery of the research results to be shared by the student body and staff in order to maximise learning. However, regulations should be developed and enforced so that uniform criteria are adopted, both in terms of development of the thesis as well as in its subsequent grading. The Faculty should also consider whether these theses should be written in English.

## **Section 15: Integrated Dental Care**

The visitors commend the plans to introduce an integrated dental care clinic. This will prepare the students for the future professional life, mimicking general dental practise and the provision of 'integrated' dental health care to the patient.

The visitors would also recommend an integrated approach to teaching and learning. This integrated approach would contextualise the learning for the student and will aid with critical thinking and lifelong learning.

As mentioned previously it is widely accepted that 'assessment drives learning' and therefore it is equally important that assessment methods have an integrated approach also in order to maximise learning for the students.

## Section 16: Other Influences and Student Affairs

The visitors were impressed by the free tuition afforded by the Ministry of Education for undergraduate education. This provision of free tuition gives access to all students reaching the academic standard necessary for entry to the Faculty of Dentistry, the dental students having achieved academic recognition in the top 10% in Turkey.

The visitors were alarmed with the high level of disease pattern in Turkey. (Ref Gokalp et al. The Oral Health Profile of Adults and Elderly, Turkey -2004 Hacettepe Dishekimligi Fakultesi Dergisi (2007) 31:4,11-18) and the lack of a national Public Dental Health programme focusing on prevention. The visitors would recommend the initiation of such a preventive programme. The focus for all dental health educators and professionals should be on prevention rather than cure.

The visitors commend the existence of the personal tutor system within the Faculty of Dentistry and recommend the expansion of this system to include feedback for student on various aspects of their evaluation, assessment and critical thinking.

The visitors commend the Faculty of Dentistry on their innovative drama and music facilities for the broader curriculum for students and would hope that the students are given sufficient time to make use of these.

The visitors also commend the staff-student social activities promoting relations and teamwork within the faculty.

The visitors commend the University on the health care service that exists for all staff and students and on the provision of medical expenses for same.

The provision of food relatively cheap or free is also commendable.

**Exchange:** The visitors commend the faculty on MEVLANA, a project sponsored by Higher Education Council in Turkey and its participation in the Socrates-Erasmus scheme. These experiences internationally are integral components of personnel and professional development. The visitors would recommend these exchanges to expand to include students and also recommend the

participation of the dental students in the European Student Dental Association (ESDA) which has strong links with ADEE.

The visitors commend the Faculty of Dentistry on the provision of optional courses and were pleased to hear about additional elective courses which will be available in the next academic year. However, it is important that students are allowed sufficient time in the curriculum to take these courses. The course in English is especially important as many dental texts and journals are not available in Turkish and so the ability to resource information is limited with limited English.

The visitors would recommend that the existing student representatives in each year be involved on various planning committees within the Faculty of Dentistry. The dental students are the ultimate stakeholders and their involvement in many aspects will enrich the course and provide invaluable information for future curriculum planning and development.

The student affairs office on site within the Faculty of Dentistry is unique and is an invaluable asset which could be expanded to include many aspects of course planning and evaluation.

The visitors would recommend the provision of courses for auxiliaries to be located within the Faculty building which would promote a teamwork approach to dental health.

## **Section 17: Research and Publication**

The visitors commend the gradual increasing number of publications since the establishment of the Faculty of Dentistry in 2001.

The visitors would recommend a balance between clinical, research and teaching activities within the faculty.

The visitors would also recommend the financial reward to be provided for all three activities, clinical, research and teaching, in order to encourage this balance. Presently financial reward appears to be primarily for clinical dentistry, perhaps at the expense of teaching and research. The focus of financial reward for clinical dentistry mainly, creates the undesirable situation of qualified clinicians treating their own patients while at the same time

teaching students treating other patients. The provision of care by the clinicians, while at the same time covering the teaching of clinical dentistry to dental students, the dental students carrying out clinical procedures on the own assigned patients (often advanced procedures for the first time in a clinical situation) is undesirable. By rewarding financial remuneration for clinical teaching the clinical teachers can focus on the dental students and their assigned patients which would be of mutual benefit to all.

Teaching personnel currently carrying out their doctoral programmes and interested in pursuing an academic career should be encouraged.

## **Section 18: Quality Management**

The visitors would like to acknowledge the recognition of Quality received by the Faculty of Dentistry upon receipt of an ISO 9001-2008 certification.

There is no legal management control system available in Turkey.

The visitors commend the faculty on the introduction of patient 'satisfaction' questionnaires.

The visitors commend the faculty on the introduction of student questionnaires to evaluate student satisfaction and student evaluation of individual lecturers.

Further and continuous evaluation of the course is recommended which can be utilised in future curriculum planning and development. This evaluation will be carried out by a new company carrying out ISO 9001-2008 and the agreement will also cover the quality control processes for education in dentistry.

## Section 19: SWOT Analysis

### 1. Strengths

- Excellent support from the Rector and University
- Dynamic atmosphere within the University and the Dental School
- Strong and forward-thinking leadership
- Highly motivated, enthusiastic and committed staff
- Highly motivated and self-confident students, accepted from the top 10% within the country of Turkey
- Central location within Turkey
- Wonderful modern facilities
- Proximity to the General Medical Hospital
- Social security insurance system, covering dental treatment, for all Turkish citizens
- Great number of available patients from the city and the surrounding areas
- Openness to change
- Eager to improve curriculum and incorporate modern educational methods
- Open feedback from students and staff
- Eagerness to develop research ethos and wonderful collaboration within the University
- Wonderful research facilities within the University
- Collaboration with educational department within the University
- Post Graduate programmes
- Student evaluation
- Quality recognition awarding the ISO 9001-2008 certification
- Language studies for students fostering an international outlook

### 2. Weaknesses

- Lack of Public Dental Health Policy within Turkey
- Health Prevention and Public Health not prioritised
- Relatively late patient contact in clinical dentistry
- Over-emphasis on lecture-based teaching methods
- Dominance of lecture courses in all years

- Limited integration of subjects within the curriculum
- Number and format of existing examinations
- Educational training for all academic staff has taken place as a one-off experience, but needs to be embedded consistently in staff development plans.
- Lack of free/ study/reflection time for students within the timetable
- Inter-departmental integration not ideal
- Majority of patient-care not integrated
- Lack of career pathway within the faculty

### 3. Opportunities

- To become leaders of Public Dental Health in Turkey
- Potential for more collaboration with other schools within Turkey and internationally
- Ideally positioned as a role model for surrounding area
- New facility of an integrated clinic
- Student-centred learning, life-long learning
- The possibility of building on the existing educational training for academic staff by embedding this in staff development plans and encouraging staff to undergo further training leading to formal qualifications.
- Opportunity for integrated assessments and to introduce range of assessments methods, including more modern assessments methods
- Graduate education and continuous professional development

### 4. Threats

- Lack of a Public Dental Health Policy in Turkey
- Increasing number of dental schools in Turkey may compromise quality of dental education
- Pressure to increase dental student number by the Higher Education Council creating difficulty in planning and curriculum development. Increasing number of dental students may also compromise the quality of their dental education

- Increasing number of patients demanding treatment as a consequence of the social security system (may be a strength but may also be a threat as the pressure to see more patients may impinge on the time necessary for teaching and learning within the clinical situation)
- Difficulty of balancing local population dental treatment needs with appropriate student training
- Overloading curriculum and overloading assessment of students.