Interactive and Innovative Strategies for Curriculum Change

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The Challenge: Oral Health, Chronic Medical Disorders, and Collaborative Practice Requires a New Approach to Dental Education

Dentistry today is challenged by the need to respond to an increasing number of patients with chronic medical disorders, including geriatric patients who are taking multiple medications, young patients who are medically compromised, and the developmentally disabled. All these patients require greater expertise by the dental practitioner to provide dental care within a collaborative team of health care providers.

Creating interprofessional educational approaches is challenging in terms of professional culture and curricular scheduling. The development of interprofessional approaches to educating students and practitioners requires community engagement and creative disruption of traditional educational practices. The use of tools collectively called Liberating Structures has been shown to open dialogue across diverse individuals with shared goals. Thus, these approaches offer a way to engage educators in creating the coordinated curricula that is necessary and yet challenging.

The Approach: Community Dialogue that Liberates Innovation

This workshop is organized to simultaneously explore collaborative learning around oral health in patients with chronic medical disorders, to design innovative approaches to learning, and to tap into the collective intelligence of participants using rapid prototyping around a series of Liberating Structures:

1. Speed Connecting immediately engages participants in the purpose and importance of the topic while learning more about the audience as a whole.
2. TRIZ (from the Russian acronym for the Theory of Inventive Problem Solving) analyzes a whole system from the perspective of its components as they contribute to reliable failure. Through creative destruction of these components, small and powerful solutions to seemingly unsolvable dilemmas are discovered.
3. 1-2-4-Whole Group builds consensus and specificity as individual ideas are molded by group discussion and community adaptation.
4. Five Why’s dig deep into purpose and meaning of proposed actions
5. Conversation Café’s employ listening skills around meaningful questions
6. 25 Gets You 10 Crowd-sourcing filters “best ideas” from any size group
References and Resources


Gender and Ethnic Medicine Project: Oral Health
http://webcampus.drexelmed.edu/gem/OralHealth/default.htm

https://services.aamc.org/publications/index.cfm?fuseaction=Product.displayForm&prd_id=238&cfid=1&cftoken=47ADB09D-FB9D-24D0-8F6A34C76E294DE9

Social Invention Group, Liberating Structures.
http://socialinvention.net/liberatingstructures.aspx

4. Executive Leadership in Academic Medicine (ELAM) Adapting Liberating Structures to Academic Communities, A report of the 2010 Forum on Emerging Issues of the Executive Leadership in Academic Medicine program for women (Downloadable PDF available in section on Past Forums at
http://www.drexelmed.edu/Home/OtherPrograms/ExecutiveLeadershipinAcademicMedicine/Forum.aspx