

Faculty Committee/Workgroup Annual Report Form

- 1) Indicate type of committee: Steering Standing Workgroup/Ad hoc/Sub-Committee
Interim (6 month) report Final Report
- 2) Committee name: **Curriculum Committee**
- 3) Charge and/or responsibilities of the committee or workgroup:

Standing committee charge (from UFCD Constitution):

As stated in the Constitution and Bylaws, it is the responsibility of the committee to evaluate, revise, and recommend policies to implement the pre-doctoral curriculum. As dean, I have empowered the committee to oversee all pre-doctoral curricular issues in the college.

Additional charge from the Dean for 2014-2015:

I am requesting that the Curriculum Committee or ad hoc groups established by this committee accomplish a number of important activities this year and be a conduit of information through our Faculty Advisory Board (FAB). FAB will appoint a liaison to your committee to help with this communication and any issues that need to be brought up to the faculty. Attachment (1) is a new reporting tool that will ask for a six month and yearly report of this committee's activity.

The following activities should be grounded in student learning outcomes and can be addressed during the recommended time period:

1. Continue your participation in the accreditation process including a review of the current competency document, its alignment with CODA Standards and current competency certifications.

The CODA site visit has been rescheduled to September 29, 30 and October 1, 2015. The appointed Self-Study Committees in collaboration with the Office of Education has documented, reviewed and submitted the fourth revision of Standard 2 to the Dean's office on July 2, 2015. The Curriculum Committee had a mini-retreat on May 21, 2015 to summarize what was learned during the self-study, review the documentation for the new standards and propose next steps including subcommittees to 1) revise the UFCD competencies for the New Dental Graduate to better align with accreditation standards and 2) review the total number, criteria standards and outcome measures of all of UFCD competency assessments.

2. Reevaluate proposed curriculum revision plan and develop a detailed curriculum revision plan and timeline to start after accreditation.

In conjunction with the Curriculum Committee, a work group was created in May 2012 to review the existing curriculum. This workgroup completed an extensive review of the DMD curriculum and proposed major revisions that increase small group learning, decrease lecture time, more fully integrate the basic sciences throughout the curriculum, and provide

DMD students earlier clinical experiences. The curriculum revision goals were reviewed and ranked at the accreditation retreat in April 2014 and the revision was put on hold until the accreditation self-study was concluded. This decision was made due to multiple factors including, the changes in college leadership, extension of the self-study, and the multiple revisions to the iNBDE implementation time line. In hindsight this proved to be beneficial to the college as it offered the opportunity to pilot test several of the elements proposed in the revision. These include, 1) a proposed series of high stakes evaluations at the conclusion of each academic year as milestones for students to demonstrate their preparation for moving forward, 2) implementation of small group case based learning integrating clinical and biomedical sciences instruction across the curriculum, and 3) college-wide grand rounds case presentations to faculty and students. We have learned a great deal from these pilot initiatives which will augment the next phase of curriculum revision.

3. Appoint a "Student Assessment Workgroup" that aligns with the curriculum revision efforts.

As indicated above one of the curriculum revision efforts proposed a series of high stake examinations at the conclusion of each academic year. DEN7961, Clinical Examination I is a current assessment course in Semester 6 of the UFCD Curriculum which required revisions this academic year. For the Class of 2016 students participated in an oral exam, a written exam and psychomotor exams in Operative, Endodontics, and Prosthodontics similar to the year prior. A change to the evaluation of these assessments for this class was that the student had to remediate the entire exam if they failed one section. One of the outcomes of this change was that if students failed one section it delayed student entry into clinical patient care across all disciplines, with some students being more than a full semester behind their peers. Based on the fact that many students need to integrate experience to learn, a Clinical Examination 1 Workgroup was organized. A new Course Director was appointed and this group collaborated on revising and implementing these assessments from May 22-29, 2015. In summary, the psychomotor assessments were changed to better align with early patient clinical experiences. The oral exam questions were also aligned to early clinical decision and communication skills. Faculty team panels were organized allowing most TEAM leaders to be part of their student's faculty panel. Dr. Kelowitz reported on July 9, 2015 that all students in the Class of 2017 needing remediation had completed this remediation and had full clinical privileges. The Curriculum Committee will further evaluate and monitor the student outcomes of these course assessments.

4. Evaluate "completed cases" clinical education grading model(s) and assist departments in integration.

The Divisions of Treatment Planning and Prosthodontics integrated a completed case competency assessment presentation with the Class of 2015. The Office of Education met with Dr. Echeto, Department of Restorative Sciences and Dr. David Barnes, Course Director for Clinical Treatment Planning courses to discuss their experience with the combined assessment, student outcomes and plans for next year. Both Dr. Echeto and Dr. Barnes were supportive of the assessment. The evaluation rubric was aligned well with all of the criteria expected of the students. One student from the Class of 2015 did not pass and had to remediate their completed case presentation board. Dr. Barnes supported transitioning the treatment planning rubric to a pass/fail competency assessment to align with other college

competency assessments. The Curriculum Committee will further evaluate and monitor the student outcomes of this completed case presentation course assessment.

5. Complete evaluation of rotations and develop recommendations. Implementation of the intramural rotations recommendations from last year's evaluation.

Based on the 2014 Curriculum Committee recommendations for Intramural rotations, Dr. Sposetti and Gail Childs met with Dr. Dolwick to reduce the Hospital Dentistry rotation by a half day. Radiology rotations for the Class of 2018 will begin after students have completed their radiology lab in DEN6301C. These earlier radiology rotations assist in closing the gap between this course in semester 3 and patient assignment in semester 6. Based on the senior exit interview summaries for the Class of 2015 (not yet published) students had no recommended changes for the Pediatric Dentistry clinical rotations. Additionally, a new workgroup will be appointed to review all UFCD clinical expectations and make recommendations that will be best accommodate the Class of 2017 and 2018 in meeting TEAM comprehensive patient care and rotational experiences. The Curriculum Committee will continue to evaluate and monitor intramural and extramural rotations and their impact on case completion in the TEAM program.

Ongoing

1. Employ adult learning teaching and assessment principles including a greater emphasis on active learning strategies in and out of the classroom.

Currently the college has one Team-based learning course, DEN7413C; two blended (online/small group courses DEN8263 and DEN8303), twenty-six preclinical/practical courses, twenty-five TEAM clinical courses, thirteen intramural rotation courses, five courses with integrated small group case-based learning (DEN5210, DEN5221, DEN6430, DEN6251, DEN7413C) which includes researching evidence, four community rotation courses, four interdisciplinary service learning courses (DEN5010, DEN6011, DEN7012, DEN8019) of which two include interdisciplinary experiences, two clinical examination courses (DEN7961L, DEN8960L), one course with standardized patients (DEN5221), one course with ethical decision making cases (DEN5013), one course with evidence-based dentistry assignments (DEN6001), one course with an avatar emergency patient assignment (DEN7433), one course with axiUm treatment planning patients (DEN6302C) and one course with practice management case assignments (DEN8321). (88/100 courses) The Curriculum Committee will continue to evaluate and monitor adult learning teaching and assessment principles which include greater emphasis on active learning strategies.

2. Continue to monitor Community Based Program rotations and evaluations and review for any further action items and the possibility of expanding the time students are on rotation.

Dr. Gibbs provided an annual report at the November 2014 meeting. Please see #5 above for additional information.

3. Monitor proposed centralization of educational technology and support at the HSC IT services and identify potential integration of emerging UF technology resources, such as E-Learning, portfolios, etc.

The University has migrated to Canvas as the E-Learning Platform. Several of our courses have course components in Sakai and Canvas. Canvas has a eportfolio component. The HSC IT services worked with the colleges of Dentistry, Medicine, Nursing, Pharmacy and Vet Medicine to obtain a renewed contract with Examsoft. Our student licence fee will be reduced from \$60 to \$45 in 2015-2016 and \$40 in 2017-2018. The XAM system in the testing center will not be supported after December 2015. Two new Mediasite appliances were purchased through the Dean's office and installed July 6th 2015. Crestron and Polycom hardware and software used in our Distance Learning program are aging. UFCD Instructional support will continue to monitor and consult with IT when maintenance or replacement is needed.

4. Recommend potential programs for consideration by the Faculty Development Committee.

The Curriculum Committee continues to support the HRSA small group case-based learning faculty training and the HSC Team based learning workshops. In this academic year ten COD faculty members also participated in the Medical Educational Research Certificate (MERC) workshops offered by the HSC. There is increasing integration of Faculty Development at the University level and across the HSC. These opportunities are distributed to the college.

Each standing faculty committee is charged with reviewing relevant outcome measures from the college's strategic plan. The committee should develop a rubric of when these measures will be reviewed and proposed actions from the data reported. The measures which should be reviewed by the Curriculum Committee in 2014-2015 include:

- DMD student pass rate-NBDE Parts I and II
The Class of 2016 has 100% pass rate on NBDE Part I.
The Class of 2014 has a pass rate of 96% on NDBE Part II.
Action taken: None required.
Future action: Continue to monitor.
- DMD student pass rate-Florida Licensure Examination.
The Class of 2014 had a 93% pass rate on the Florida Licensure Examination and 99% pass rate on any state licensing examination.
- Student Satisfaction (Senior Exit Interviews)
Action taken: In 2013, concerns emerged regarding initial NERB Curriculum Integrated Format (CIF) Exam. Seniors wanted the ability to retake the exam while still enrolled. A second iteration was monitored to confirm this as an ongoing issue. In 2014, similar concerns emerged. The timing of the CIF was changed for 2015 after dialog with and input from class.
Future action: Continue to monitor.

- Student Satisfaction (Alumni Periodic Survey)
An alumni survey was conducted in 2013 for the Classes of 2006-2010. Areas that alumni reported “not at all prepared” by the training included; Implant Dentistry 56%, Orthodontics 48%, Practice Management 30%(above threshold, but ranked 3rd))
Actions taken: Implant Dentistry competency assessment implemented for C/O 2015; Orthodontics: New course director appointed in Summer 2013; Practice Management: New course director and course revision in Fall 2014.
Future action: Continue to monitor.
- DMD students accepted/applied in advanced and graduate education programs
The Class of 2014 overall acceptance rate all programs was 81%. (Threshold 50% of applicants)
Action taken: No action required.
Future action: Continue to monitor.
- DMD Program Tuition and Fees and Educational Debt
DMD student tuition and educational debt will not increase more than 15% annually.
Action taken: Tuition was not increased in 2014-15.
Future action: No tuition increase is planned for 2015-16. Monitor trends to inform decision making.
- **Individual Faculty Member Responsibilities:** The members of this committee are expected to attend regularly scheduled meetings of the full committee which will generally last from 1 to 2 hours. Additionally, members may be asked to assist with subgroup or project work at the chairperson’s discretion.

4) Dates of all meeting during the past year:2014: 7/10, 7/17, 8/7, 8/26, 9/4, 9/18, 10/2, 11/6, 12/4 2015: 1/8, 2/5, 3/19, 4/2, 4/23, 5/7, 5/21, 6/4

5) Agenda established by the committee for the past year: **Posted on committee website.**

6) Outcome measures: **noted above**

7) Obstacles to following an agenda and/or completing the outcome measures: **Lack of clarity on some outcome measures indicted in the committee charge. Lack of a quorum to conduct business at some meetings.**

8) Has this committee or workgroup submitted an interim report at 6 months?

Yes (To whom?) **FAB**

No (If not, why?)

9) Did this committee or workgroup submit any recommendations to the UFCD FAB during this year?

No

Yes (If yes, what was/were the issue(s) and was action taken?)

Curriculum Committee approval to release Mediasite recordings by 6 pm of the day it is recorded.

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