

Community-Based Dental Education in Bristol and Boston

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In July 2016 we travelled to Boston to complete our elective project. The main aim of our observational project was to describe how community based dental education (CBDE) contributes to the education of dental students in both Bristol Dental School (BDH) and Boston University Henry M. Goldman School of Dental Medicine (BUGSDM).

We both had an interest in visiting the USA and in particular, gaining an insight into how dental schools operate in the USA. We emailed several universities and received an enthusiastic response from BUGSDM. We were particularly interested in CBDE and BUGSDM had a large part of the curriculum devoted to this type of teaching. BUGSDM were so helpful in arranging our project and made us feel at home when we arrived in Boston.

Throughout our time in Boston we recorded our experiences by both individually keeping a diary of observations and student/staff feedback. We had meetings with various members of staff each of who gave us lots of information on the course structure and in particular what they include in their element of community based teaching in their curriculum.



The staff at BUGSDM

We also met with students in a variety of year groups and conducted focus groups in order to gain more information on their feelings towards CBDE. We had an opportunity to observe fourth year dental students on their externship programme at different outreach sites. We spent a day at Boston Health Care for the Homeless; observing the students carrying out treatments on a variety of patients. This is a site where patients of no fixed abode can seek respite pre and post hospital admission. Alongside providing basic support for vulnerable patients, the facility has ten dental chairs which enable dental students from different Boston based universities to carry out treatment. We also spent a day in Geiger Gibson Community Health Centre where we observed another student. This facility has been placed in an area identified as having more limited access to healthcare. The sites differed in oral health needs, treatment available and attendance rates.



The students at BUGSDM

One of the most interesting elements of our elective, outside of our project aim, was learning about how the American healthcare system works and how dental care fits into the bigger picture. Medicaid is the government run program for those who are unable to afford healthcare. At the Federal level there is no minimum requirement to provide dental care in this package. Luckily, Masshealth (Massachusetts version of Medicaid) provide comprehensive dental care although patients still have to pay for some of their care (even at the Dental Hospital). We really appreciated the level of care that is provided by the NHS and dental hospitals across the U.K

At BDH, we gathered data from our own experience of CBDE at South Bristol Community Hospital and Charlotte Keel Health Centre. We also held focus groups to gain responses from others students with regards to their opinion of CBDE.

Our results show that dental students enjoy working in the community environment. They feel it exposes them to a wider patient demographic. They feel that CBDE improves their clinical skills, communication skills and ability to work as part of a team.

Comparing BDH and BUGSDM; BUGSDM offers more opportunities for students to work in the community environment. However, BDH allows students to treat patients on an ongoing basis in a centre specially designed to reach members of the public in need of access to dental care, whilst nurturing the education of students in this environment throughout the duration of their final years of study. Students from both dental schools thoroughly enjoy this aspect of teaching and find it thoroughly beneficial to their learning experience.

With the patient population continually increasing in diversity, it is more important than ever that we are educating dental students to have the clinical competency and interpersonal skills to best treat the patients to which they provide care. CBDE is an excellent teaching modality and a valuable part of the curriculum for dental students. It enables practical clinical experience benefitting an underserved population whilst educating students to become altruistic, clinically efficient and socially aware healthcare professionals.

Recommendations

- **We hope that both dental schools continue to enhance their CBDE as it provides an essential bridge between dental school and working in practice.**

- We suggest that BDH examine different ways that a greater population in need can be reached by using dental students as a vital resource.
- We encourage BDH to form links with charitable projects and establish opportunities for students to volunteer.
- We would hope that BUGSDM consider the implementation of a clinical record which allows for more formalised feedback to students.

We thoroughly enjoyed completing our elective project at Boston University. It was so interesting to be able to experience a dental school in a different country. It gave us an insight into both dental teaching and care provided in the USA. We felt so welcomed and know the links we have established there will remain for years to come. We had a fantastic trip and combined our project with travelling the east coast of America. We visited Cape Cod, Boston, New York and Miami. We would not of been able to complete our trip without the generous support of BDAA. Thank You!

