大学の世界展開力強化事業

東南アジア医療・歯科医療ネットワークの構築を目指した大学間交流プログラム

国際シンポジウム Ⅴ

東南アジアにおける口腔保健と歯学教育の動向

International Symposium V

Oral Health and Dental Education in Southeast Asia

2015年10月21日



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International Symposium

Oral Health and Dental Education in Southeast Asia

The purposes of this symposium are to exchange information about oral health status, oral health services, oral health delivery system and dental education of different countries. Evidence based oral health promotion refers to the development, implementation, and evaluation of effective programs and policies in population through application of evidence. In the seminar, we would like to share our experience and evidence in Vietnam, Indonesia, and Thailand, and discuss effective oral health promotion programs.

Date: October 21st, 2015 (Wed), 10:00~11:30 **Venue:** Lecture Room, Dental Building South, 4th floor

Speakers:

Caries Prevention in Ho Chi Minh City, Vietnam: New Challenges and Solutions Assoc Prof. Hoang Trong Hung (Assistant Dean for International Affairs, University of Medicine and Pharmacy, Vietnam)

From Interprofessional Education to Interprofessional Collaboration: UI Experience **Dr. Melissa Adiatman** (Head of Public Relations and International Affairs, University of Indonesia, Indonesia)

Challenging Dental Curriculum at New Dental School - Interprofessional education and Transformative learning-

Prof. Yupin Songpaisan

(Dean, Faculty of Dentistry, Suranaree University of Technology, Thailand)

平成27年度大学の世界展開力強化事業

国際シンポジウム

東南アジアにおける口腔保健と歯学教育の動向

本シンポジウムでは、大学の世界展開力強化事業で招聘した研究者を中心に、タイ、インドネシア、ベトナムの歯科保健状況、歯科保健システム、歯学教育などの現状と課題、動向について情報交換を行います。多くの皆様のご参加をお待ちしております。

日時:2015 年 10 月 21日(水) 10:00~11:30 場所:歯科棟南 4 階演習室



連絡先:健康推進歯学分野 川口陽子(内線 5475)





川口先生からスピーカーの先生方に感謝状を贈呈



ユピン先生 Prof. Yupin Songpaisan Dean, Faculty of Dentistry, Suranaree University of Technology, Thailand



メリッサ先生 Dr. Melissa Adiatman Head of Public Relations and International Affairs, University of Indonesia, Indonesia



フン先生

Assoc Prof. Hoang Trong Hung Assistant Dean for International Affairs, University of Medicine and Pharmacy, Vietnam

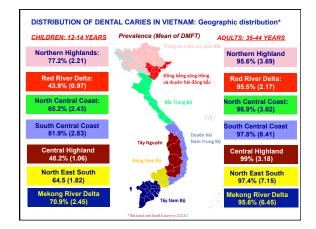


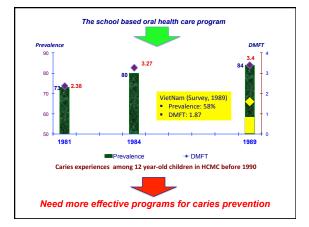
1. Dr. Hoang Trong Hung

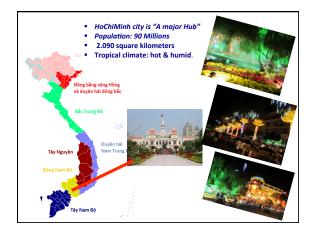
(University of Medicine and Pharmacy, Vietnam)

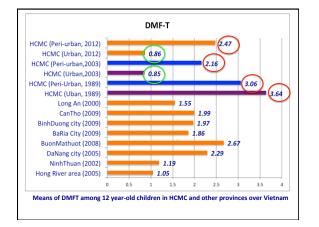
CARIES PREVENTION IN HO CHI MINH CITY, VIETNAM: NEW CHALLENGES AND SOLUTIONS

Department of Dental Public Health Faculty of Odonto-Stomatology, University of Medicine and Pharmacy Ho Chi Minh city, Vietnam

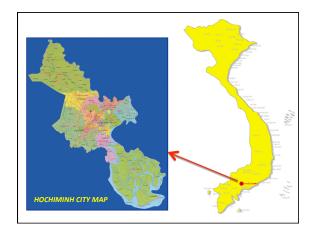


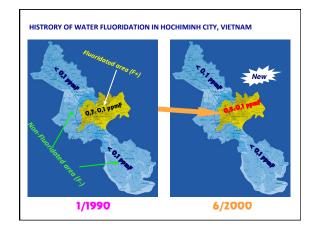


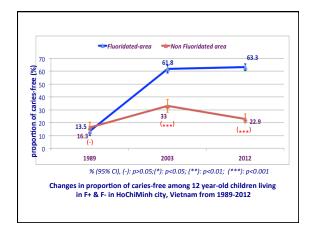


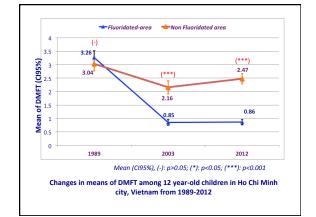


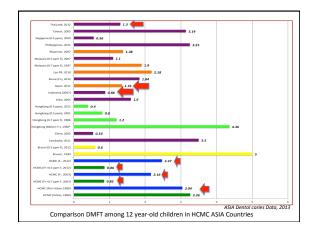


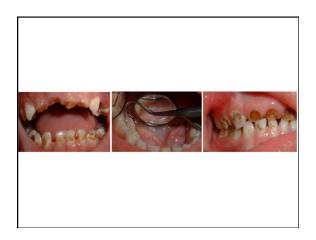


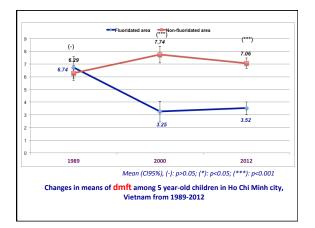


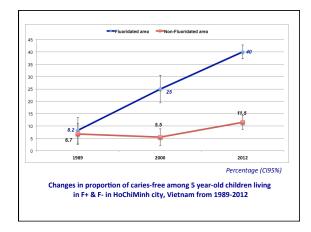


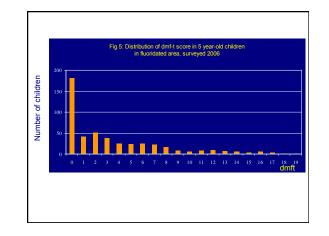


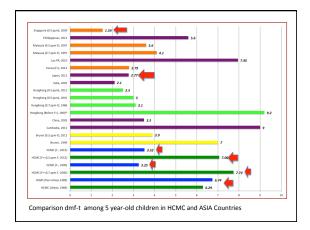


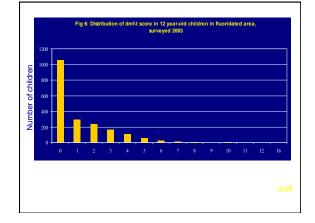


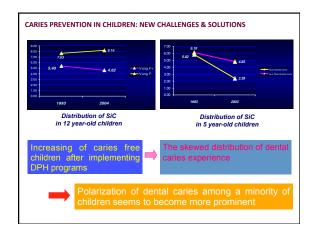


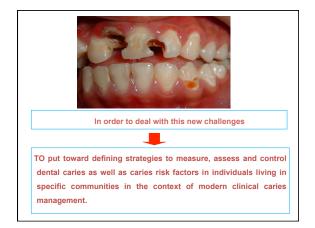














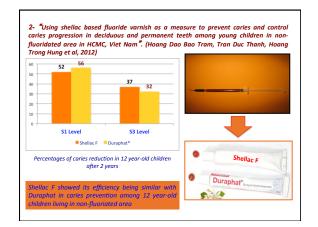


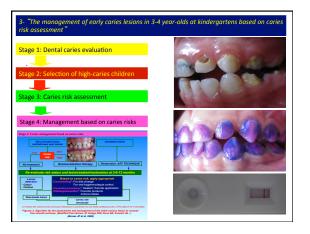
 "A survey of risk factors for dental caries among 12 year-old children in Ho Chi Minh city: Linking community-based and individual-based evidence" (Hoang Tu Hung et al, 2005)

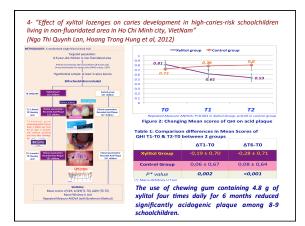
Parameters P	ercentage of children	0	Crude OR	Adjusted OR (**)	P yah
	with D.MFS=7.* N (%)	coefficient	(95% CI)	(95% CI)	
					=0.6
	22 (51.4)	2.14			
				(1.48:48.9)	
Selivery consistency					
	44 (55.7)	1.14	2.4	2.14	0.01
Watery, Shiry Him on Boar			(1.88-6.47)	(1,3-7,6)	
Oral hygiene status (OHIS					
	14 (70)	1,78	(1.25-9.26)	6.00	
Salizary buffering capacity					
	67 (48.65		2,63	2.87	0.11
High					
tactobacili > 10° CZU					
	63 (45,1)		2,02	0.35-3.53)	0.85
SSS ²	10 (50)	-0.28	1.352		0.57
	63 (43,4)		(0.51-3.32)	0,75	
Salivary volume					
sanvary volume	55 (45 10	-0.47			0.49
	19 (41.3)		10.6-2.40	(0.16-2.39)	
	and				
					0.63
< twee a day			10.46-1.713	(0,48-3,22)	
	18 (51,4) 56 (42,7)	-0.55	0.75 (0.33-1.49)	0.57	0.26
> Twice/a day					
	45 (50)	-0.52	0.66 (0.24-1.29)	0,59	0.29
<1.000,000 VND per month? >1.000,000 VND per month?					
	54 (48.6)	0,58	1.52	1,80	0.95
Upper highschool	15 (28,5)		(0,72-2,19)		
Mother's education					
Less highschoot?!	21(25.3)		10.69-3.56)	1,04 (0,21-2,53)	0,4
Upper highschool					
(+) Cutting point: percentil					

 - a level of Mutans Streptococcus >10⁵, poor aral hygiene and high salivary viscosity were the associated factors in children having over 7 carious surfaces among 12-year-old chidren.living in non-fluoridated area of Ho Chi Minh city.

among 12-year-oia chiaren.iving in non-fluoridated area of Ho Chi Minh city. - The evidence of carious dentin lesions is highly predictive of caries accurrence within 2 years. The strategy for caries prevention should take into account the control of identified risk factors.

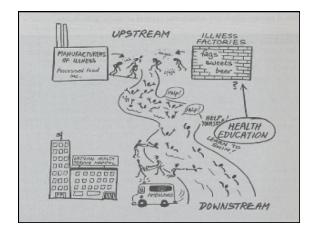






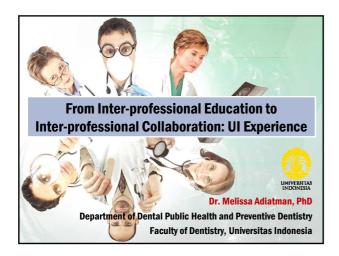
CONCLUSIONS:

- Water fluoridation have significantly reduced dental caries experience in young children,
- The lack of coverage by water pipe system over the city and the recent polarization of dental caries within a smaller group of subjects are emerging oral health issues.
- The results of the given research projects will be evidences to orient new strategies in caries prevention among young children in Ho Chi Minh city, Vietnam.



2. Dr. Melissa Adiatman

(University of Indonesia, Indonesia)





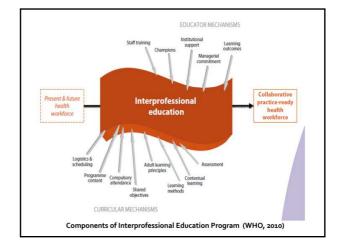
Background IPE needs to be implemented in health professions education Research has proven its benefits Global environmental scan worldwide and varied application of IPE Evidence-based best practices of IPE are available

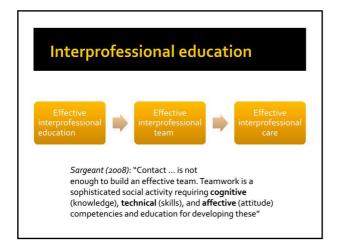
Why IP Teamwork? Why Now?

- Demographic Changes, aging population
- Chronic health conditions needing complex care
- Technological advances
- Specialization in healthcare
- Patient Safety & Quality agenda
- Workforce pressures and gaps
- Healthcare and payment reforms

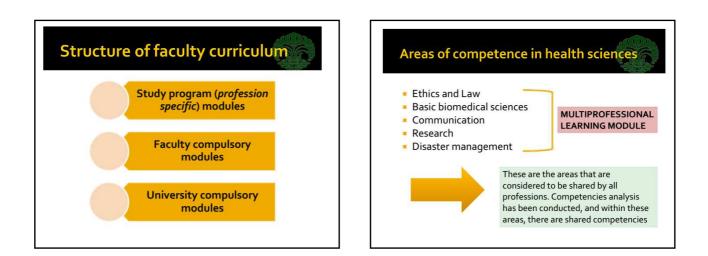
UK Centre for the Advancement of Interprofessional Education (CAIPE)

- Multiprofessional education → 2 or more professions learn together, for various purposes
- Interprofessional education → 2 or more professions learn from and about each other (*not learn with*), to improve collaboration and health care services









Shared learning modules		
COMPETENCY	MODULE	CREDIT (in SKS)
Ethics and Law	Ethics and law in health profession	2
Basic biomedical sciences	Basic biomedical sciences	3 (theory) + 1 (practical)
Communication	Effective communication in healthcare services	2
Teamwork and collaboration of healthcare team	Teamwork and collaboration of healthcare team (preclinical and clinical)	2 (preclinical) + 1 (clinical)
Research	Research	3
Disaster management	Disaster Management	2

Module: Teamwork and collaboration of healthcare team

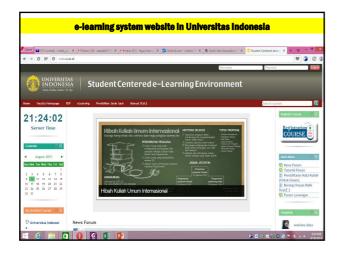
Specific objectives

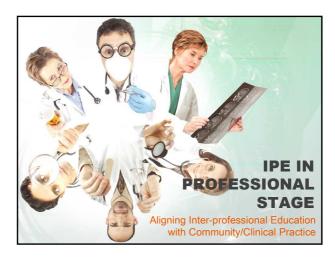
- identify the concept of collaboration in the healthcare management
- identify problems in collaborative healthcare management
- identify the roles of each profession in collaborative healthcare management
- apply the roles of each profession and interact in the management of health problems
- evaluate the process of collaborative healthcare management

	collaboration of healthcare am
 Teaching methods Introductory lecture Collaborative learning Question based learning Case based discussion Plenary presentation 	Assessment system Self reflection Tutor & peer assessment Written exam (in group) Group project

MODULE PREPARATION

- Each team consist of <u>representatives</u> from each profession:
 - Develops an instructional design (rancangan pengajaran) for each learning module (6 modules):
 - Learning objectives
 - Teaching and learning method
 - Student assessment
 - Further arrangement, for:
 - Training of tutors (staff)
 - Plan of program evaluation

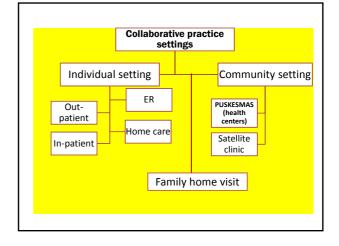




We divide the students into 3 settings:

- 1. Community Service Projects
- 2. Clinical Component Settings
- 3. Family home visits

At the end of the program they have to share their experience through poster presentations



What we need to prepare

- 1. Identification of schedule that is suitable for each faculty
- 2. Guideline for tutor
- 3. Determine the Field coordinator who take care the paperwork and communicate with the staff
- 4. Made the MoU and Agreement of Implementation with related institutions
- 5. Funding

Interprofessional Practice

Multiple *health workers* from different professional backgrounds providing comprehensive health services working with patients, their families, caregivers and communities to deliver the highest quality of care across settings.



Interprofessional Collaboration

"... the process of developing and maintaining effective working relationships with learners, practitioners, patients/clients/families and communities to enable optimal health outcomes. Elements of collaboration include respect, trust, shared decision-making, and partnerships."

Canadian Interprofessional Health Collaborative, 2010



Interprofessionality is not

- Simply sharing electronic health records
- Sole profession teams (neurologist, pulmonologist, radiologist)
- Learners hearing a talk about another profession
- Reporting out at interdisciplinary team meetings
- Co-location without intentional collaboration
- Decision-making without client/patient input



Evidence for Teamwork

- Better continuity of care, access to care, and patient
- Satisfaction*
- Higher patient-perceived quality of care⁺
- Superior care for diabetes patients‡
- Improved blood pressure control
- Reduction in medication side effects and improved adherence+

*Stevenson K, Baker R, Farooqi A, et al. Features of primary health care teams associated with successful quality improvement of diabetes care. Fam Pract 2001;18:21-26.

[†] Campbell SM, Hann M, Hacker J, et al. Identifying predictors of high-quality care in English general practice: observational study. BMJ 2001;323:1-6.

[‡] Bower P, Campbell S, Bojke C, et al. Team structure, team climate, and the quality of care in primary care: an observational study. *Qual Saf Health Care* 2003;12:273-9.

+ lezzoni, Ll. Make no assumptions: Communication between persons with disabilities and clinicians. Assist Tech 2006; 18(2): 212-219.



Competency Domain 1:	Values/Ethics for Interprofessional Practice
Competency Domain 2:	Roles/Responsibilities
Competency Domain 3:	Interprofessional Communication
Competency Domain 4:	Teams and Teamwork

Roles & Responsibilities

- Know one's own role and those of team members
- Communicate team roles and responsibilities
- Engage diverse healthcare professionals to meet the needs of patients
- Use the full scope of knowledge, skills, and abilities of available health professionals and health care workers to provide safe, timely, efficient, effective, and equitable care
- Use respectful health care practices





Values & Ethics

- Recognize and respect the unique cultures, values, roles/responsibilities and expertise of other health professions
- Work in cooperation with those who receive care, those who provide care, and those who contribute to or support the delivery of prevention and health care services
- Place the interests of patients and populations at the center of interprofessional health care delivery



Communication

- Use respectful and appropriate communication in all situations
- Organize and communicate information with patients, families, and health care team members in a form and format that is understandable, avoiding jargon
- Listen actively and encourage ideas and opinions of all team members.



Teams & Teamwork

- Work with others to deliver patient-centered, community-responsive care
- Engage when possible in shared patient-centered problem solving
- Integrate knowledge and experience of other professions to inform effective/ethical decisions
- Apply leadership and facilitation practices that support collaboration and team effectiveness



Patricia Chalmers, 31

Patricia (Pat) Chalmers is a 31-year-old woman who prides herself on self-sufficiency and resourcefulness. She works part-time as a bookkeeper and gets paid to take care of her aging grandmother with whom she lives.

Pat describes herself as having been a caretaker since adolescence. It is therefore difficult for her to acknowledge her own needs or to seek others for help.

Pat is tired of people commenting on her weight, diet, and need to exercise. She avoids health care as much as possible because she knows she'll be told to lose weight or be blamed for "being fat" (her words). "I know what risks I face" she says. "But I've tried everything and nothing works. I've accepted my size and would like others to respect that."

Pat found herself in the ED with a broken ankle several months ago. The break was significant enough to require surgery. Labs revealed elevated glucose levels and surgery was put off until further tests could be done to determine whether Pat might have diabetes. When asked about this possibility, Pat reacted strongly. "I don't have the time or money for diabetes," she explained.



Group Discussion

- What do we know about Pat?
- What role would your profession play on Pat's team?
- What role will the other professions play on the team?
- Describe the role of the following professions on Pat's team:

Pharmacist, Nurse, and Medical doctor Social Worker Physical Therapist

Occupational Therapist

Facilitate IP Team Meeting

- Orient learners to goals of the session
- Prompt learners to discuss their observations
- Encourage a non-judgmental environment
- Make interprofessional learning explicit (e. g. let's get the [discipline] view of Pat's needs)
- What do we know about Pat?
- What information is missing and where might we find it?
- Capture teachable moments
- Prompt self-reflection model
- Encourage closure and final case determinations

Facilitation Video

- Observe group facilitation process
- Write down observations and critique
- What were the facilitator's strengths
- What could have been handled better?



the way forward...

• In each placement:

- Tutors' guidance and supervision
- Discussion and reflection upon the experiences
- Tutor assessment and feedback
- Peer assessment and feedback
- Evaluation
 - students, teachers satisfaction \rightarrow QA purpose
 - students' learning achievement







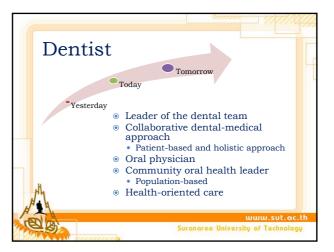
3. Dr. Yupin Songpaisan

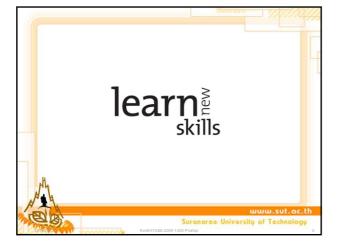
(Suranaree University of Technology, Thailand)





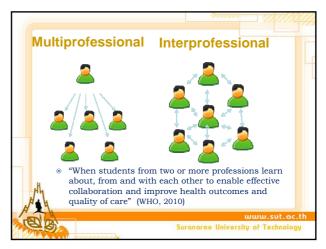


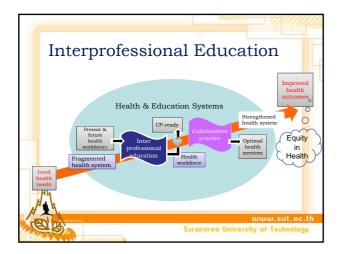




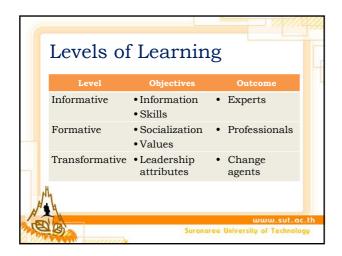


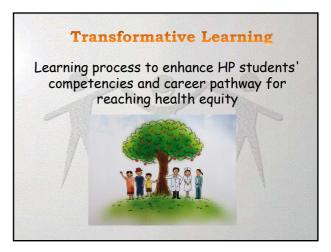


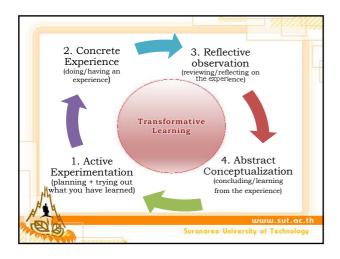












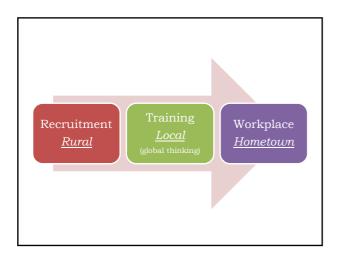




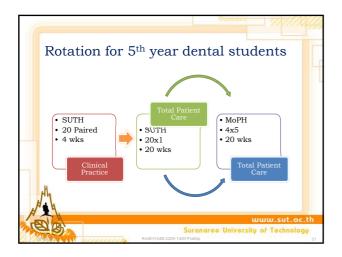


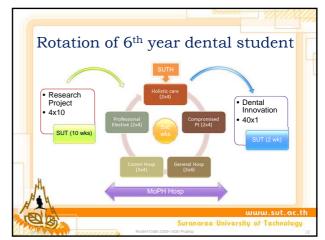


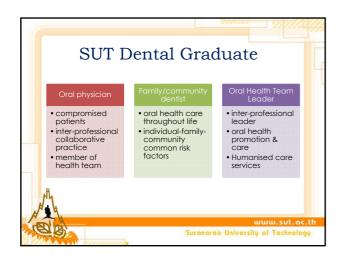




1 st Year			
General education for all university students	2nd & 3rd Yez Basic med sciences (pre- clinic) and community medicine with med students	4 th Year Basic dental sciences + Simulation skill development laboratory	5 th & 6 th Year Clinical practice at University Hospital and Community Hospitals + Professional elective











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大学の世界展開力強化事業運営委員会

「国際シンポジウムⅠ」ワーキンググループ

竹原祥子 金澤利哉 川口陽子



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