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It is not uncommon for students to present to your office with questions about challenging learning issues and after a one-on-one dialogue, a resolution to their problem usually ensues. A hopefully happy student leaves your office hopefully somewhat wiser. However, there is a problem. The meaningful, fruitful teaching moment is lost to the rest of the class. Quite often such questions and problems are common to many students meaning that others would have benefited if they were present at that teaching interaction. The solution? Record the learning moment and upload the video to be shared for the broader student community.

Over several years I have uploaded these Communal Consultation videos onto the learning management system with the intent to support students as they progress from the theory and skills practice of my fixed prosthodontics course in year 4 to the 5th year when they provide clinical care on their own patients. These videos have captured dialogic exchanges about questions or problems students have in context of the treatment care they are providing clinically. These videos are categorised by degree of difficulty and with clinically relevant key words so that students can identify the right video for their learning needs.

Recently I have extended the Communal Consultation videos to include the capturing of clinical competency skills assessments or Key Skills. These recordings reveal the dialogic exchange of students' case presentation before the skill performance and afterwards during their self-evaluation. Students have found these invaluable in preparation for the competency test in opening the black box of assessment and in highlighting assessment standards through the use of exemplars.

Similarly, part-time teaching staff have also gained insights seeing the scope and nature of the assessment and the expected standards which can help in calibration. The Communal Consultation is now being used for other competency Key Skills assessments in the Faculty.



STUDENTS' WORDS OF APPRECIATION

The series of communal consultation videos that Dr Botelho innovated readily connect formal, informal and collaborative learning. It is on-demand, stress-free, flexible and caters well to when and where I am ready to learn. This readily accessible database of videos has tremendously assisted me in preparation for my written and clinical practical examinations throughout my final years in the BDS curriculum.

The case discussion videos provide an opportunity for me to go through the cognitive process of assimilating what I have learnt into answering questions being raised in the video either by my peers or instructor and often give me new perspective in approaching a problem. It has helped me to affirm and strengthen possessed knowledge while clarifying misconceptions. The communal consultation videos also allow us to visualise and learn from the mistakes of our peers made in clinics and exams, in such we would have a better understanding of the exam requirements and what is expected from us.

Melissa FOK

BDS 2015

I find the RBB course videos very useful and new to me. I can try to guess the answer when my colleagues start to present the case in the video. It is quite fun because I will not be afraid of answering it wrong. Also, there is no one voicing out the answer beside me so I can spend time thinking about the case. This is good for learning as everyone can learn according to their own pace. The RBB overview videos, which are concise and clear, are particularly helpful for the start of the course and before final exam as they review different aspects of RBB. Viewing a short video is easier to start with when compared with reading a chapter of a book and this keeps me motivated. Lastly, the consultation videos are helpful when I want to do treatment planning for my patient. They give a more detailed explanation while showing more case-by-case variations than what is stated in the texts.

Tracy LEE Cheuk Sze

BDS, current student

TEACHING INNOVATION AWARD

From my experience, the series of communal consultation videos have been a tremendously useful aid throughout the learning process over the provision of RBB [Resin-Bonded Bridges] prosthodontics. By means of a case by case approach, it stimulates my thinking process as the questions raised during the consultation have high implications to our daily clinical practice. The consultation about Key Skills also plays an important role to standardise and visualise the criteria of preparation work that we were taught to achieve. The videos are categorised in a user-friendly manner, allowing us to choose suitable ones according to personal interests. What's more, uploading these videos enables us to easily access and enhances our learning motivation, when compared to the traditional ways of teaching. It would be of great benefits to us if this kind of online learning platform could be extended to other disciplines under dentistry, or even other faculties.

Dennis CHEUNG Kwan Pui

BDS, current student