

APPENDIX 4.7

Fictitious names have been used throughout the interviews

INTERVIEWS – STUDENTS 7

Start: 4:43:27

Pansy; Tshepo; James

We'll start with the Techniques programme and how that has helped to move to the clinics. But starting with the Techniques, how is it? Is the space properly, is it adequately equipped, planned,

****Ok**, I've personally seen that the materials aren't sufficient there. We always having a problem sharing and then there aren't spatulas and you're busy like you know running around and then,

Uh at the same time you're busy

Because of that we start using different you know, like for example you need to use a certain spat, plastic spatula to mix you use something else and you end up using other instruments and improvising, you know because there's a shortage of materials

Yeah. And then how has that frustrated your progress?

You start doing things haphazardly and just start taking things

Doing things not properly

Yeah

Then you start taking material from this person then that person and it's different colours and different consistencies and you it's just, it becomes very frustrating

And the Frascasco Heads also, all of them are not working. So we've had a problem with that. Uh I personally feel like the demos should be given in smaller groups coz sometimes I feel that we're too many standing there, and you can't see what's happening

Is it the demos that have been given?

Not, not for everything

The things is with the demos, because some students are slower than others I find that usually the, with the students that are faster and are ahead of the class, always get the first demo and then we lag, people that are behind

We end up learning from the students

We start learning from the students, you know, because then we don't get to see the demos because we're a bit behind

And then with the supervisory input, do the supervisors then assist you in walking you through the procedure if you're left behind?

They do, yeah if you go to them. If you go to them for help then they do help

Ok. But uh do you also get supervisors who don't, who expect that because the demo has been given therefore you need to know how to do it and they don't hold your hand through the procedure, or don't show you how to do a particular aspect that they're requiring of you – of the procedure?

Uh, not really. I think if we go to the supervisor, especially with me uh personally, if I went to a supervisor and asked for help, they have always given me the help and then shown how to do it. Uh, yeah

So you haven't had problems with supervision where you feel that you need that extra help and when you go to a supervisor you don't really get it or you feel short changed?

I don't ??

Ok. So you're a good group, good lot! Or the supervisors are a good lot (laughter). How do the supervisors, on that note, how do the supervisors motivate you to do it?

Well, according to me well whenever I go to the supervisor really they sought of like take me through to, they take me through on what we're supposed to do, having shown me what I get wrong about the particular procedures. So we end up, again they give you, they give you another chance to be able to practice by yourself and re-do it if you done it wrong again and again until you get it right. So I, supervisors I think are quite Ok

Uh also, an experience with doing things again and again. I know there was a problem with having shortage of teeth and because we were given just a certain amount of teeth, we are now pressed, you know what I mean we are a bit stressed because we wannna get it right the first time coz we know we don't have other teeth

Uh

So, we're a bit afraid to make mistakes because we know we're not going to have enough teeth to practice on, so I feel if we're given more teeth and then we're not afraid you know to try and see what works for us or doesn't.

Anything else?

The good thing I think is that they tell you do step work and then come back to me and go back and come back. It really does help you rather than doing the whole thing and then going there and their like: ooh, Ok. But they are, they have been once or twice when a supervisor has said: Ok go and finish this whole thing and then come back to me. But I felt that the other method is much better where there is

Ok. And how do supervisors as well motivate you? In what ways do you find motivation from the supervisors?

?? them to encourage you when you do do it right finally, I think. So that, I don't know. And

Coz that's the question that I was going to come to after Tshepo's comment, that: is the feedback that you get more negative, focusing on the things that you get wrong, or is it also focusing on the things that you're getting right? So that there is a balance between what you're doing right and what you're need to correct

No, it's more on what you did wrong

It's more, yeah

It's not

There's not much

More on what you did wrong

So the 'right' only comes at the end? (Laughter)

Yeah

Right

Well there has to be, there has to be quota to be signed off. Ok, so where I'm sitting, I'm thinking that it therefore means that the supervisors then need to give a balanced view, where there is, they point out what's good about it and what needs to be corrected so that it is not

Yeah

Always what is wrong, uh, to keep you engaged and motivated

And you think after a while you keep going to a supervisor and you keep and they keep telling you: this is wrong, that is wrong, you know you sort of like you want to give up, coz it's like, nothing is right, everything is just wrong! So maybe if they do point out the positives that would be much better.

And then the presence of e-books, and the presence of the demo on the computer, does that help?

Yeah

Yeah, I think it is a big help

But this whole week I haven't seen that

Yeah

Yeah, but then that helps. We do have it there, coz you usually end up reading it – sometimes you get this you get that ?? it certainly helps.

And when you see pictures it helps more than the article, so

Any comments on that – any more comments? In the clinics now, how is Pros in the clinics – the learning, the supervision, the set-up, the patients?

Coz we've only done Removable, but I I feel that like the different supervisors they've got. I don't know, they're very varied with their opinions and what's right and what's wrong and different methods that they use they're very different. You maybe you're maybe using one method and then they're like: who taught you that? You're supposed to be doing it this way and you feel like

The change of supervisors like from one block to the next, say one block you're working with the patient and you're doing things according to that supervisor and the way the supervisor has shown you, and then the next block you have a different supervisor and then suddenly everything is wrong coz: how you're supposed, why are you doing this, who taught you that and then you know it bothers us

But having the manuals to help with that, or to lay down how it needs to be done, hasn't that helped you? Or doesn't that help the situation where you then refer, or the supervisor and the student refer to the manual? Coz I know there is a standing rule in the Department that students need to have the manual on them

Yes

Uh.

For the normal ?? form there isn't uh, I mean for partials I don't think

Isn't there?

No, there's a manual

Is it?

??last year ??

And

I got my ?? and the rest of the class

The Department did not give everybody

No

We had ours so, but then we had to get it from

I had to, I went, they said, the secretary, you personally need to.

And this was .. You know why I'm flabbergasted because I'm in the Department and I know that manuals are supposed to be distributed to students and if they run out, then the Department needs to know and the secretary needs to make more copies. So if students had to make other students copies it's a bit scary

Yeah

I made a copy

And I got a new copy, there was a new uh copy for the Removable, for the Full/Full

That we all got

Yeah. No, but the partial

Not the partial dentures one

Is it? And did you make the Head of Department or the year, the component coordinator aware of that?

No

UUUH! Why not? You see, that's the principle, one of the principles of PBL where you take ownership and you keep engaging with the management as to what's going on in the programme, so that there's less frustration. Ok. So please, this year do that, do that OK. In the clinics?

The Clinics, I think it's OK. It's just, it doesn't really happen often, but it happened during, uh more towards the end of the year where uh material, there was material shortage, you know then. It takes up time and you then, you don't do what you were supposed to do in that session coz you end up looking and searching for materials and going from this Poly Clinic to that Poly Clinic

And the Dental Surgery Assistants are they helpful in that regard, in terms of

Yeah, towards the end

Certain of the nurses are very good, but

And then do you take that up with the Poly Clinic, that particular Poly Clinic uh Controller?

Yeah, they know but then they say they can't do anything. It's just

Yeah, shoo! Interesting

That's also frustrating

Yeah

Then you can't find things and you, you know, especially towards the end of the year

And in the fourth block, the fourth session

Yeah, the fourth session it's usually, there's no nurses

You know for Perio at the end of last year coz we had it last session and sterilisation closes early and we never ever could get ?? from sterilisation

Now on that, on that note do you make the Dental Council aware of that to report to EDUCOM or the School Management on those things?

Our supervisor report it, so I we didn't take it up

I think it might be incumbent to just let the Dental Council or the student reps on EDUCOM take your concerns to those. Coz that's the body that you students have a forum on, so that the challenges that they experience during the training are addressed, coz it's easy enough for, you know, as a supervisor you might not be aware, you might know but not really be aware of the frustrations that you guys are suffering and not take it up in the Department, you know. And I'm one of, I greatly believe in bombarding with, even if it's the same issue, at some point something will get done. Anything else? Yearbooks – how have the provision, how has the provision of yearbooks impacted..

This year we haven't yet received it.

Every year we usually

Like usually we get, we'll be receiving them

And do they help?

Yeah they do help because they outline what is expected, what's the expectations and the objectives of whatever particular course we are doing, so. Well it's, it's dependent on you that you do as students whether you made it ?? but if you've read it you'll know what is required of you

Has there ever been a situation where say the yearbook that the component, the course says that you have to do 5 assessments and you end up doing 2 and that's fine?

No, there has been situations like that

Is it?

Yeah

Ok, coz what's coming through is uh there has been, there is more of the other situation where you end up doing extra assessments

Yeah

That's true

Uh. Oh, OK. And uhm, how has the the provision, how has having yearbooks helped you particularly, you as an individual to plan your year?

It outlines exactly what you need to have, exactly what, it has the requirements so you uh sort of you know what direction, it leads you to the right direction, You, I sort of plan: Ok I need to do this, I need to have done ?? See if there were no yearbooks then we'd be a bit lost, you know, not knowing what to do

And do you work to the yearbook or do you set your aim higher or at the yearbook's level?

I think at the yearbook's level

Just because (laughter)

Because if you look at it in Pros, if you look at Removable, you sort of want to get that minimum quota that they have ?? because you find out that sometimes to even just do one patient alone can take you even more sessions, maybe about 8 or 9 sessions on a patient

Why?

Sometimes there are certain procedures, steps in dentures where you just have to redo like jaw registrations in Removable Pros and so like calculating what the yearbook has outlined you might sometimes feel as if you know maybe the quota, the minimum quota that you have to do is even too much for you so most of us try to aim to just get the minimum quota and that's it.

But then you get students who get much more than the minimum quota. How do you think they manage that?

I think also it's a lot to do with your patient.

Some patients

Yeah

With certain patients things just don't go right – the Lab, I know lots of times the Lab has confused or lost your, you know they haven't done things properly and then it, you waste a lot of time with that and also patients, some patients they don't come for their appointments, they don't pitch up

And do you outline to the patients at the beginning what you require of them?

Yes

Is it!

Yeah, always tell my patients

And is there, what process have you then taken, what recourse have you taken if a patient, you've outlined what it is that you need out of them and they don't deliver? What do you do?

We usually just, you record it in their files, and then we, I mean we always finish them. I always finish the procedures coz I've had lots of problems with patients, always had difficult patients, but I always finish the case but uh make a record in the file and

Coz with the Fixed Pros side one of the things we do is screen the patients and the ones that you get to see are the ones that we think are suitable for your level. So you don't have to do the screening yourselves whereas I know that with the other sections, you know the patients are just from the general, say Removable waiting list, There hasn't been a Prosthodontist screening

I think that helps

Yeah

That would really help us

It happened to me

They come back one session

And then they have to go for an extraction, I mean

?? I had a really difficult case and it wasn't, I couldn't do that, and the week after I had a patient with teeth in her mouth. I think I wasted like 4 weeks coz I had different, I couldn't do any of the patients coz they had teeth, I had difficult cases,

And how do you get uh the patients allocated to you?

We hand the patient request form in the Receptionist and the Receptionist would just scroll the book

It's just the Pros book – it doesn't say they need partial; they need removable

I don't think they're screened from the, I think the front they should be a Prosthodontist that screens Pros patients initially. That can say they are suitable for 3rd, years, 4th years, 5th years and that should be written down, because sometimes they give you like I don't know, the very difficult cases that you can't do. Like you have to give one to one of the Post Grads to do it

Is it?

Yeah, yeah

Look I know with me all of my patients that I did last year for Pros, I had to screen them myself at emergencies, like I got patients from emergencies, so which is somehow disadvantages patients who have come before and have been on the waiting list at some point in time

Uh

You find a patient, you see the patient and you say: Oh this one is suitable for what I want to do you know and then you take it from there like meanwhile there are hundreds of other patients who've been on the waiting list for a long period, but you know it's situations like that you end up you know

And has this kind of, have these kind of issues come up amongst you guys, discussion, discussions amongst you guys for the student reps to feed to EDUCOM and to feed to the School Management, those on the Council about such challenges so that there is a win win situation for

everybody, because like Tshepo has just said there are patients who get disadvantaged and students also get disadvantaged because they get to screen their own patients and that takes, that makes the process a lot longer?

I think that may solve the problem. We don't have anybody ?? looking at our problems, that I think problem as students we don't take things up

Coz I'm thinking, you know, it's a recurring issue that keeps coming up in all the groups that have come, most of you that have come and interviewed you know, that there isn't that communication between the component, the course reps, the Council, EDUCOM and the School and it would just help for a body. But one of the concerns that come up is that students think that they are not being listened to when they do take issues up. Any burning issues with regard to Pros, the programme, the teaching?

?? Let me say to my personal experience, I look at all other departments I think Pros department is the one of the most organised department I know. Whichever course we did in Dentistry you know, because they outline whatever that you want you have to do especially as students and also they deliver as to maybe lectures, tutorials, whatever whereas maybe some other departments, you know, still have that lack ?? but in terms of organisation the department is generally well outlined

And the amount of assessments that they give – do you feel it's adequate or could be reduced or increased? And how could it be modified?

I think it's adequate

Coz on average you have – no, not on average, you have, yeah, on average, you have say 1 and a half assessments per teaching block

It's adequate because ?? it helps with the students as well to see whether the students is progressing or not progressing ?? In other courses where you have just have 1 exam only at the end of the year, you don't know really whether you are doing the right thing or the wrong thing or how are you studying, you know. So I think quite honestly

How many components are there this year – is it still 8?

?? OHSC

Or 10?

With regards to ?? I think it's 10

Now if you look at the number of components, right, and say with the continuous assessment strategy / principle if you have 1 assessment per teaching block from each, how would that impact on the overall number of assessments?

Yeah, it gets to you

Last year, I think by the end of the year I was

Everyone was

It was heavy

I think we wrote 2 or every week. It gets quite

Hectic

Tiring

So you're just learning for the short-term, it's not about for the long term

Yeah

And the thing is they won't spread out the assessments. Most of them are in the 3rd and 4th block. I don't think we wrote many in the 1st and 2nd block

So you only wrote Pros

Laughter

Remember Pros!

Yeah, that's true

Oh

Yeah and everything you know, started ?? we need to do this ?? they put everything into 3rd and 4th teaching block. You even got crammed ?? 3rd and 4th block

And was this fed through to EDUCOM

I think they had

No, I think they ?? because this year they will try and do, to set out and like fix the dates and you know everything

Shoaw! OK. Coz I mean in the Department we feel that 1 and ½ assessments per teaching block is adequate for the programme, however, personally I think that it might also be slightly too much especially given that the BEST system is supposed to be engaging and assisting you on a continual basis in the clinics and if you have, say you have 1 Fixed Pros session a week and 1 Removable Pros session a week, it therefore means that you have 2 assessments every week, you see. That's just counting the written and the WCTs and and ... So you guys have not looked at it that way, I can see

Laughter

?? Clinics are one particular

Yes

But if you go back to the objectives of the BEST system, you will realise that it is an assessment system and you, actually it is an assessment system because you get a mark – the clinical ranking mark – so maybe when you start engaging with uhm EDUCOM, the Council and EDUCOM, come from that angle when you're negotiating every, the re-alignment of the assessments. You see, because most of the clinical departments use some form of continuous assessment in the clinics – for the clinical ranking mark. And therefore it means that you need to engage more with your patients and what it is that you're doing and understand why to get a better clinical ranking. Not that it ever, people get you know students get low clinical ranking marks. Anything else? Or I've given you food for thought. Which I shouldn't have , you need to be giving me food for thought. Anyway thank you guys.

4:44:44-5:02:41- 5:06:00 – 5:08:28)