

APPENDIX 4.1

Fictitious names have been used throughout the interview

INTERVIEW STUDENTS - 1

Ok, it's recording. It should be recording now. We've got 8hrs of recording time. What I want to do, is really get an essence – do you have any yearbooks on you? Any of you?

Some inaudible mumbling from the 4 students

Ok, fine, that's fine. I just wanted to get an essence of your take on the programme. Your take on the programme

(Pause) with respect to?

Prosthodontics and dentistry

Fixed pros in general or the whole of PBL?

Yeah – the whole dentistry, because what I want to find out for my project is to find out whether we are doing what it is that we said we are going to do. Because, remember that the new curriculum is informed by the new principles of interactiveness of students in tutorials and empowering students to find information and not feeding them information, and giving uh, giving timely constructive feedback alongside continuous assessment and all the new ways of teaching. So I want your take on that. You can, you can, you can lead me through how the PBL programme is helping with respect to Pros and, say that particular PBL that I sat through – the last one

We haven't had any uhm, tutorials to do with fixed pros .itself we haven't done anything in Fixed Pros. like bridges we haven't had like a patient come in for fixed pros... but with PBL we haven't had uhm

No, no the Pros programme does not have a PBL programme specific to it, it would have, there would what we tend to do, what we try to do is to use the principles of the new curriculum in how we teach, say during the Pros tutorials, are they interactive; during the Pros uhm course is there interaction and is there timely feedback – those kind of things; and are you being empowered enough to feel that you can ask when you want to ask and you can get as much as you can from the facilitators, from the teachers-let me not say facilitators because

I think it actually signed off, that we have to do .as such.

Because you have dates, you have to get everything done by a certain date, so you're working ahead. You know what to do

And I think you guys are quite strict which actually is good at the end of the day which actually is good... when we get into the clinic we are better prepared so we're not going to be stuck when we get to see patients there. We can make our mistakes now and we get a chance to you check it

And I think with PBL has actually brought us up to speed because in those groups you're like almost forced to speak, they're like if you don't speak, they'll ask you to speak you know. And usually people who're quiet they start speaking more and I think it's works better like when you go down into the clinics, you'll be better with your patients and with your supervisors and everyone else. So I think it does get to help a bit

In your groups as well.. in large groups coz you get people.. who tend to speak up above the rest

I think it helps you build up your confidence actually, you know, say you're in a small group first and then at the end of the day you have to speak to the whole class. But first you're with that small group that helps you you know help you build up your confidence

It also helps you with real life situations as well – you have to deal with..

So now, if you try to translate what you've learnt from PBL and translate it to say the fixed pros techniques how has that helped? Coz there you're in a larger group but do you feel that even though it's a larger group like what Ms Kajil* has just said, that you can speak out if you need to, or are there still, is there still a sense of uhm certain students overpowering

Well I think you can just go up and basically work at your own time anyway, so in a way set your own pace.. you can actually do it

You were going to say something Ms Khadija*?

I was just saying you can if we I think if we needed to come up to speak now I think we're not scared or intimidated as we would be

Usually we are (Laughter)

I have something that I forgot, uh I should have made a note of it, I've just thought of something now. Ok with respect to the Pros tutorials, you've said you haven't had any tutorials

With fixed pros or with PBL?

Or with PBL-

like how we have all this with PBL where they give us a situation with a patient – we haven't had one with fixed pros where a patient comes in and .. so we can't really relate it to fixed pros itself

Ok

We'll start because we've had in Restorative, Partial dentures, aesthetics, occlusion and all of that, but we haven't had one on Fixed Pros itself

In the final year you get the case presentation uhm sessions where you look at patients, at treatment plans and you – or cases – treatment cases and you plan them and you plan them accordingly and they'll give you the different options to look at

And I guess that

But with the the Pros tutorials that you've had, say the fixed pros tutorials that you've had and the removable pros tutorials that you've had how how how have those been?

Those, I think those have helped us a lot with understanding the stuff uhm more better, because if you're going to read in the textbook and then you come (link up) to the tutorial it's just helps you more better to understand the the work

You don't always understand what you read in the text book the first time around and then you discuss it amongst your friends, you find that actually you understand it a lot better

Do you discuss that before or after the tutorials

(laughter)

When we have a problem when we get stuck.. when you've realised that what you've read what she's read is two different things .. we've understood in two different ways

And does the discussion happen continuously or is the discussion informed by the assessment, when you have when you have tests to do, is that when you discuss or would you discuss normally in the course of the day

We've got so much work to do with all the other subjects so if you're stuck with something that day then you'd discuss it at least you know

Ok ok, so you do speak Dentistry when you're out of the

(laughter)

Yeah we have to

That's interesting. Ok, now the tests, let's go to the tests. Ok does having, having the dates beforehand help

Yeah, much help – it helps a lot

And when do you get the dates. When do you normally get the dates of the tests

We'll for most of the subjects

Well basically at the beginning of the year

And do most do most courses do that?

Most of the courses do that – but we wanted to - we haven't had that and we've had problems like two weeks before you find that you have an exam and that's stressful because you can see the position – you're doing all the other subjects as well so you have to concentrate on everything and then all of a sudden you have another exam coming up which is like, the day before and if you have the dates set from the beginning, even if I have two papers one day after each other, it wouldn't stress me out as much because

Like last night

And on average how many, how many tests do you have a week, or have you had a week say since the beginning of the year

At least one, one a week

Is it? So there hasn't been a week that you

In the beginning of the year we've had some free time, and then but these last two blocks these last uhm – third and fourth block – we've had no free time, nothing in the last six months we've had

Is it? And in the last two teaching blocks on average how many tests a week

I think we're writing about three

Three a week

Like we'll have like an oral exam and we'll have another on another subject

And then that uhm bringing in the clinical time – how does that help OK say the the clinical time in the sense that when you're doing your clinics you're supposed to be engaging with the supervisors for them to continually assess your understanding of the subject matter as applied clinically.

Doesn't that help with the written assessments – written tests?

For me uhm with like Restorative and stuff I I don't think so

But with Pros I do find it helps a lot

With Restorative why don't you think so

Uhm maybe restorative I just coz we're so used to it I think with restorative we've done it for the last two years we've been in the clinics so, because we've been in the clinics for the last two years we're like almost know exactly what to do what's going on and the reason why you do this why you're doing that so with pros itself like with Partial dentures and stuff it's really helped to be in the clinics, understanding it, once you've seen it in the mouth, how it works and stuff you understand it much more better

Especially because partial dentures you don't have a technical course to it, so you just get, you have to do it following reading about it. Ok. And and do do the, or does the quality of the teachers say in in with Partial Dentures, does the quality of the teachers help

Yeah it does

In what sense

Every supervisor is different, I think it depends on what supervisor you get as well

That's what I've been thinking

(laughter)

How, how, how how how is how is how is the supervisor knowledge or attitude helping or not helping your learning in the clinics

difficult, every supervisor have different ideas, see you can have one supervisor telling you to do something it one way and then you have another supervisor wanting you to do it a different way but then the supervisor before that so you do tend to have a bit of a clash in that sense, but I think it does help you overall because then you get an overall understanding of what everyone one wants you to do

Now where does, the fact that you do you do have a manual? And is that a Partial Denture manual?

Yeah

And, you're supposed to be working according to the manuals, so how then do you if if there is a clash with how supervisors tell you how to do it say with clashing with the manual, how do you overcome that coz essentially if the manual is supposed to be the one that is guiding you and you're supposed to do it by what the manual says

(Laughter)

It's a hard one

Have have you been in that kind of situation

No

Ok maybe not partial dentures, with the complete denture manual

Well complete dentures I think everyone follow the manual

Even the supervisors

I found that with the partial denture, the manual was not as easy to read, not as good as the full. The full denture we had a proper manual, but with the partial denture we didn't. We had beautiful pictures in our partial denture manual and the full denture was like I think everyone knew it, everyone knew exactly what was going on yeah, but I think it's coz we've maybe got that fixed that partial denture book

That's the bible

We've got that book (lots of laughter) so I think that's why we don't have such a manual

Ok, ok, and then what the book prescribes is what is being taught

Yeah

And that helps

Yeah

Ok now with fixed pros? And the e-book; i-book; e-book?

I think the i-book does help because the pictures and stuff if you're reading the pictures same time you're reading

And are you reading it

Yes

(laughter)

I've got the e-book so to a certain point and we don't have any other stuff – the metal stuff, I don't know what the latest stuff

What's the latest stuff

Like what we're doing now like the post and core and stuff like, we don't have stuff like that

Is it in there

Are they still doing the CD

I'm not sure

We don't have those

I find it difficult with my post and cores compared to when we started off in the beginning when we had those ceramo-metal

I think it helps having that, that's what is needed now with post and cores

Uhm, because the copies of the, I don't have the e-books, I don't know. The copies of the e-books that I have the chapter, that I suppose you'll all have is the: veneer prep, the class II inlay, the ceramo-metal, and the occlusal splints – and the full gold crown, you don't have? Or was it the demo on the lecture

We've got, we've got

And the fact that the fact that you had to give back the CDs for them to be updated did that did that ever materialise?

Yes it did and we did

The new ones?

Not the new stuff that we're doing now

No, no back then when they had to update the when they had to update the CDs

We had to give them in

That was quite a few weeks ago – July/August August, early September

Laughter

And then the condition of the the condition of the space that you have to use for Techniques, any comments on that

Uhm, I think it's adequate

At the moment, yeah, it's just that that's some of the heads are not working, so that, otherwise

(seems as if the students had not really given the condition of the lab much thought on how it impacts on their study and delivery of the work expected of them)

But even with the fact that with the heads you cannot move them to the to the height and the angle that you want and the foot

Ok that has been a problem

I think, I think

(laughter)

You know, I'm not like bearing in mind that the Lab has to be it's supposed to be a simulation of the clinical setting

Oh yeah definitely

Ok, in your own experience without me leading you on, what are the challenges that that particular space poses on you in the way you work

what we're trying to see whereas in the clinic we're not going to have to do that, coz we can move the chair any way we want

Even with the lighting, like uh like I find like in the Lab the lighting isn't that good. Like you can't actually see, even for my test I really did struggle with the lighting, so I'm sitting at the place that I'm actually sitting now like it's got a few lights like where it's like but the other places like where you guys are and stuff the light you can't move it you can't you know you can't get the light properly to where you want it

Ok and then in uhm the fact that the heads are also not don't have the same structures as a real person has that hindered or facilitated positively the way you work

I think negatively in a way I guess with the head we just turn it however we want like she said we like pull it all the way back, you can't do that with a patient's head

But the fact that there is no tongue, there is no cheek, there's no saliva?

I think it's a good way to actually start off we have to start somewhere, so rather than putting teeth on the table and drilling like coz I think that's more of a reflection of what we need to deal with clinically

It just helps us with practising it

Makes it a bit easier when you're practising

Yeah, it would because you don't have to contend with the tongue, with the cheeks, you know with the saliva so you can work in a dry field except the position. You know you're not getting used to positioning the head properly. Now, if you go to if you go to the stuff, the instruments and the tools that you use – the teeth, the models – what is your experience

My main thing was like the teeth, that we don't have enough teeth like we use one and if you make a mistake it's like we don't have another one to practise on and the only way to get better is by practising

(Laughter – some inaudible comments)

You can't make a mistake

So how then how then have you managed that challenge for yourselves, especially if you have to use sixes, which are a premium

(Laughter)

It's like take off a little, take off a little

Haven't you been advised to use other teeth that are not premium teeth to try and

I've I don't think there's enough for the whole class to actually even practise on

Is it

We have practised, like practised on the lower teeth and like centrals, like for a bridge and stuff

Yeah it does help but (laughter) it's like even time as well

And when you, when you bring these concerns to the course coordinators what happens? Or have you thought of bringing the concerns up?

Actually we've never like sit down and discuss it in the class which nobody

Haven't really thought about it that far?

I think we need to address that

And then the models? The issues with the models?

(lots of laughter)

So we can't even practise because we don't have the models

That's an ongoing issue that I raised in 2005, 2004? When did I come back? 2005, that you know the two classes should have their own own sets of instruments or, or armamentarium so that we don't have to interchange. Back then it was uhm coz I was only dealing with the BDS 4 back then was you know having uhm prosthodontics have its own things and not sharing with Restorative coz the models were being shared with Restorative BDS 2

Maybe maybe the students should be issued with their own instruments at the beginning of the year coz then

You'll be able to look after them and not

And if you lose it then you'll have to buy another one

That's fair

It's fair coz you know

But with the cost of the course so high? I mean how much is your tuition

About forty thousand

And then still then you have to buy handpieces, you have to buy sets of instruments, would that also include sets of teeth, sets of models uhm? By the end of that you'll be paying a hundred thousand for the programme maybe. Now given that you know that these are the challenges especially with the instruments, I mean you have instruments that are a minimum optimal right and say the the mixing bowls that you most of the students don't look after, they just leave snap or set acrylic in there, how how knowing what you know now, how would you try and manage as students with this reality?

Well I guess it's like you have to have all the students in this. It can't just be one or two who's cleaning up after themselves because if the other students don't do it then it going to end up being messed up – the bowls are going to be a mess. So you have to be like almost like teamwork over us, like once you've used it you clean it up

Doesn't matter

But with the with the with the uhm (what's the word) encouragement that you get from the supervisors, myself included, that you need to keep the instruments clean, isn't that message not filtering?

It does, but I think speaking to everybody

So

For example I don't like to use a bowl that dirty, but unfortunately is not my instruments in that bowl so you just work with it like that, no matter what you say

But even that the new curriculum, (this is not really new anymore) the curriculum that you're doing is supposed to empower the students to be able to address those kind of issues with the course coordinators what has the class done about it

I think

But amongst yourselves

No, I think coz we've got so much else on our minds at the moment like everyone's got tests and just tests and tests and tests so ... the small things like we don't have time to think about it coz we're so busy with everything else

And the small things and we really don't pay attention to the small things the bigger

My motto is if you pay attention to the small things the bigger things take care of themselves and looking at the fact that we started in July the fixed pros techniques started in July and you provisionalising as early as then when it wasn't as hectic as later were you as a class not aware of the challenges and try you know at least even informally discuss that discuss it amongst yourselves

I think people might have

We don't have any

People we're like how can you leave it like this, how can you leave it like that?

Nobody ever owns up to I did that?

Laughter

No

Is it, that's interesting, so now, OK. Given what you've gone through this year, how would you then propose it changes for next year, or make it better for others next year – improve it for future years

We'll be working in the clinics I think is a different situation because we've got people to sterilise the instruments for you, keeping them clean; well we'll clean them ourselves before they've been to sterilisation hopefully they do come in clean. I mean to look after them

How

You've got people to sterilise instruments No we'll clean it ourselves before I mean you actually look after them and stuff

But do you in the clinics, do you clean, don't you clean the instruments, not clean as such, but don't you tidy up

people will take it to sterilisation

So if you get to clinics right, and you get a mixing bowl that's full of uhm set acrylic, who's going to be

I know we've had a situation where we were in Pros had we just came to we had a pros session and we were coming in and everything was a mess – there was alginate all over and stuff. There was nothing we could do – we went to the nurse and asked we were like who was working here coz we wanted to speak to the person who was working here and like you'll find some students will walk there, they will know who it is but they won't tell you like who was working there. They just won't tell you

So I don't know, maybe they don't want to get their friends into trouble or something

We've had that, we've had that

Is it

We've had that. We're like uh: who, who, who's been working

Other students?

Who's working here, coz they had the session there before us. Who was working here coz because we don't leave it like this so when we come there it should be like neat and tidy like how we leave it

They wouldn't tell us who left it like that

We went looking around; we went we went all over asking everyone do you know who was working there?

But doesn't it affect your other patients schedule in the clinics

Yeah but, you know, I don't know, they ask also, then they have a free session and then they there was someone, I don't know who was working there

***There's a chair: you know what Dr Boitumelo sits and does those chair allocation schedules. So you'd know who's supposed to be. Well technically, we should all know who's supposed to be in what chair at what time. So the first port of call would be to check the uh chair allocation and then check if that particular student was there**

Yeah, but I think the problem was that difficult if they didn't have a session that time – so it wasn't their session; they just came in during their free time or something like that.

Ok, then I would ask: do the students then adhere to the chair allocation schedules, or not?

Yeah, most of the time they do

We don't

Is it? Because I know that when I used to do Removable Pros supervision, students did not adhere to that: At the beginning of the year, in the middle of the year, and even towards the end of the year, unless the supervisor insists that you know, you are allocated to rosette 3 chair 1

During our session times, we we definitely are at our at the chair we're meant to be – but when we do extra session or when we come in during our extra time, I don't think people will sit at the chair they're meant to be at

Ok

I think but during the session that we are there we sit in the chair we're allocated,

But otherwise, because I've had instances where I well I've been in a session and students are in and out with the Removable Pros where students are not in the chairs that they're supposed to be and I ask myself then what's the point of having a chair schedule; allocation schedule if we're not going to abide by

But then in our class, like during our session we're all in the chair we are allocated

That's the whole point. That's the whole point, excepting on a Friday.. in Poly 2 where on a Friday you get whole lot of BDS 5 students on Restorative chairs – and I wonder where the restorative patients/students are

Laughter

Because, funny we don't have any – restorative – we only have it on a Tuesday

... situation, or there has been a situation where BDS 5 students go in a Friday morning and use Restorative allocated chairs where students are supposed to be there – restorative students – and yet they are not there. Because space space is tight to accommodate all the students and all the clinics during the hours that we have.

Ok, now the yearbook, we go to the year book – we haven't touched on that. Uhm, does it help that you get you get an outline of the objectives and do you get an outline of the objectives and outcomes for each course at the beginning of the year?

Yes, we do

We do, except for one or two subjects we didn't get in the yearbook

And then when did you get it? Did you get it at the beginning of the year or at the beginning of the course?

No, in one or two subjects it wasn't in yearbook and then I think the subject itself had to give us

Which subject was it that wasn't in the year book

Uhm which subject was it – general surgery and stuff. What was it? I can't remember now

Let's not – the Dental subjects?

Oh the Dental subject were all there

Even the Fixed Pros – the Fixed Pros course was in the year book?

Ok. So you don't use the yearbook as a constant reminder of what is

Laughter

in the beginning of the year if you need it, if you need it

Is it? I would have thought that you're you're constantly referring to it coz it outlines what it is that you need to do; uhm what the promotion requirements are; and all the assessments assessments that you need and the weightings of the assessments and

Laughter

This year's yearbook looks very complicated and

Is it

This year most of my class think everything was tidy and it was like two A4 pages and 1 page, so it's squashed up into 1 page

I couldn't

Like last year was easy we had each compartment separated like Restorative and Pros. Each one was

We had each one there, it was just like

How

It was like

Laughter

I definitely found I found that one was too hard even with Radiology, like some of the and stuff

Ok. Interesting stuff. And then do you have uh do you ever get either at the beginning or maybe in the final year I guess I don't know. Would you, or have you had global outline of what is expected of you, not per year, but globally for the course? I suppose you'd get that

In a file, which sort of ties everything up – but not Dentistry

And those are the three things that you need to do. But in terms of Dentistry, what what the Dental School or the Faculty of Health expects you to do or to know or to have for the Dental degree to come out as Dentists?

I can't remember

What did you get in first year?

Is it marks?

Pardon? No, no what information did you get in first year at orientation say or registration?

We had a meeting with the Dean where he told us exactly what the course was about what was expected of us. I mean

Were the different components addressing you – do you remember that was some time ago

I know the first day we got here we had like I think we didn't really we didn't

I know Dr Manana was there, she was uhm she scheduled a whole lot of, a whole lot of people come speak to us

(Laughter)

Like we don't know where we are

(Laughter)

Ok

We did have, I think we did have some people come speak to us – some lectures I can't even remember

If I go back to the scheduling, in terms of what you need to do in a day is it too much, do you have time breathing time in the course of it

(Laughter)

It was quite

Did you have any sessions where you were free, and if so how many a week did you have

One week

One a week

One a week

Yeah

They gave us one session a week that was like two hours and the rest of the time we were full – we were scheduled – till 6 o'clock.

On Tuesday, Thursday, I think twice a week we're usually here from 6am

No No No Tuesday Wednesday, Thursday

Only three days

Fridays we finish early and then

And the early is what-4 o'clock

(Laughter)

Do you start, did you start uhm each day at half past seven or is it some days

Some at seven some

Like the clinics we start at half past eight and we had lectures like on Friday morning

we had lectures like on Friday morning and on a

Oh oh Thursdays

So twice a week you come in at half past seven

And in sometimes terms of

Yeah. So we'll have our test at half past seven

Oh

and the day carries on as normal, you don't

And how is it And with respect to the tests how, have, uhm say if you, if the students want to change the test date. If you are given a schedule at the beginning, how does that impact on the plan or your each individual's plan for studying?

I think our whole class, we would when it comes to test dates, we always speak as a class. We discuss the test dates. We always have to like, we be in agreement

And then, have you changed a lot of test dates this year?

We have changed a few, quite a few

Yeah

Because it was like, I think it was starting to be too much from having two tests a month. And that's because they weren't scheduled in the beginning of the year

Ok

These tests just came up in the middle of the year

That was my next question, you know if they had been scheduled at the beginning of the year it would have been a different situation

Suddenly you'd have another test – it was too much to handle

Ok. And what's your take on that with respect to planning for the tests schedule each year

I think it should be organised from the beginning of the year. We should have a whole test schedule from day one

Yeah

And it shouldn't change, but, and they shouldn't be tests added even in the middle of the year – like listen we have to have one more test on this or you have to have two more tests on this, I think it should be scheduled from the beginning of the year and there shouldn't be just added in

you submit your test dates for the whole year and then they just come up with a

Because the problem comes in where you have to add in tests dates. And when you're add in test dates they get just themselves and there is just too many too close to each other, that's why we fail the test

Ok. Now the year book is supposed to have a list of the schedule of the tests even if they don't give the dates, so if you get the year book with the list of all the tests that you need to do surely doesn't that help in alerting you to the number of tests that you need to have

I think you get to the end of the term and then you realise Ok we haven't done a test in this subject and

Ok, now with that challenge that you face how has your class's participation in the Education Committee, in EDUCOM, helped for these kinds of situations coz there should be a student rep in EDUCOM for each year

There is yeah

There is people but

Has that helped

they go to the meeting and they come and discuss it with us

Yeah

Usually they discuss what they spoke about and stuff

they don't really have anything they'll do about it they'll discuss what goes on in EDUCOM and they come back and discuss it with us and then

No decision are taken

Uhm no decisions take. Coz that's one way to highlight the issue with the schedules. Because the idea the whole idea of having the year books and being upfront with everything that you need to do and are going to be assessed on is so that things are planned and everybody knows as and when it's going to happen

Coz you know where you stand

Exactly

Yeah

Exactly

How to prepare

Now if you get the schedules if you get the schedules right in an ideal world you get the year books, you get all the schedules set out and uhm you find out say towards the end of the year by the third teaching block you might get you might get the majority of the class not meeting those requirements, how would then adding extra dates assessments hamper or help? I've been trying to get you think out of the box, coz one of the comments that you made was that uhm –Khadija* made – was that uhm adding on of tests dates

Yeah I think it just stresses you out more if you are already behind with the work and then you have more test dates as well as with like I know, if you you you did bad in one subject you did really well in the one subject you wanna you gonna start concentrate on in this subject and you're gonna slack off in the other subject, you know you, it's just I think I think it's hard

Uhm. Coz we just had a situation where we set out the the the number of assessments that needed to be done and by the middle of year we knew we're not going to we're not going to get it. You know, so we've had to remediate and add extra tests and this is just on one course so if there are more courses doing that

It's just going to make it

It just makes it, it compounds the stress

Yeah, it just makes it very stressful

Laughter

So the challenge is for the students to be on top of things. So, but then you get what is required at the beginning of the year

things like projects, sometimes patients don't come and then you try to concentrate on your studying and you put extra time in the clinics to see more patients coz the you're running behind in the clinic

Is it? And then why why is the the the the issue of patients not coming – which clinic is most affected?

I think Resto

For me it was restorative in the beginning of the year. First I had some patients who just didn't come. It was really frustrating

You'd phone and you'd phone and then the patients, they say they're coming and they don't come

And do you get access to phones, to call patients in

I just we use my cell phone. And then you can use the clinic's in the clinic you can use the phone, but then by the time you get through to the switchboard – switchboard, and

we have problems as well

It takes forever to get through so, so I end up using my cellphone, because I just get, I can't wait for so long

So if you don't have a cellphone as a student

Yeah, (laughter)

Yooh! Ok and in Pros any issues with patients not coming

It's been all right

Yeah. I had a bit of a problem but then I still I got my quota

Ok, and the amount of quota that you need to get for Pros, what do you think of it

For Pros, we have 1 full, 1 full and then 2 partials

Because the the angle that the Department comes from is that it is minimum you know, it's not even moderate. It's minimum requirement so it's the basic basic numbers

I think they should change and look at who have got quota who have actually got more more or a lot more

The problem is I think also with the patients. Some people it's just it's it depends on your luck as well. Some patients are like really good and they come all the time and then a patient just might not come

they'd rather delay treatment coz they're going on holiday, something like that..

Some people, it's like it depends on your luck as well, you might not have the good patient, you might have the bad patient

And the supervisors, do the supervisors help in managing the patients if you have difficult patients like that, putting expectations upfront to the patients that because of the teaching institution and they are they're being treated by students who are limited by schedule they need to make a commitment to come in on those times that the students are limited to

I think also the idea that at the beginning to actually tell your patient that 'I need you'

Obviously they'll say 'Yes' to you

Yeah

But do the supervisors come in and then re-enforce that message to the patients for you, or do they let you leave you to do that patient management stuff by yourself

I think that when it starts getting off hand then they come in, it's like you know if there is two or three sessions that a patient hasn't the supervisors do come and say 'hey listen, you don't want the treatment stop being well just get a new patient and you have to go on the waiting list again' and some people get too scared

And then the files?

Oh!

(Laughter)

I have my own opinion on that, but I want your own views on that – how do you manage all that?

you didn't put it to me

(Laughter)

Oh the students always have the files even though we are not allowed to like you'll ask, you'll go to the to the Reception and the Reception will sort of tell them – the students has the file – but we don't have the file, we're not even allowed to leave with it because Dan checks out our bags all the time, the Security guard. We're not allowed to take any of the files

So what about making copies of them

Yeah, we do do that

Is it standard for the whole class or is it individuals who do that

No we were told that, I guess everyone because everyone I think we've all had the experience where a file has gone missing at some time ourselves

It delays our start, if it's missing you have to start all over again from the beginning

So I guess everyone ??

So this year hasn't been too much uh an issue

Yeah, no this year for me I've actually it wasn't much of an issue

We've learnt the hard way

Yeah, we've learnt the hard way. Like the year before the last one

No files get misplaced quite easily. In fact I'm sitting with a problem file. I need to write a report, so. Coz my my my advice to students is to make copies of the records and also make sure that they write what happened at each session so that you know whoever, even if you have a different supervisor or even if somebody else uhm takes on that case, everything is there they don't need to be asking 'what happened'. But there're there're few cases where patients are seen, there's

nothing, what the file number is, the intake notes, or the procedure sheet isn't there, the file is there, but the procedure sheet is not there or nothing – the procedure sheet is there, the patient was seen, but nothing gets recorded. So you guys are not guilty of that

They are legal documents

Coz they are legal documents and they don't belong to us, they belong to the Hospital. You can make copies of. And I find I find that I find that with radiographs if a patient has a panalipse done, I find I find it safer to put all the intraorals in the panalipse envelope and then send it to radiology, coz Radiology is good with their records, they don't normally go missing

They are organised

They are really organised with their radiographs. I would never I would never leave the periapicals back in the file coz they'll go missing

Ok, any other thing you want to enlighten me on. What do you think I should consider

I think just the time, time is the most I think stressful part to us coz there is just so much in so little time. I think that's the only thing I

But the time is constant. What's what's changing is the amount that you need to do

Yeah

And also and what changes is that you're getting more mature, so by the time you hit this level you should have developed study techniques to help you deal with all the extra load, unlike in first year where we, you know the School takes, the curriculum takes it into account that you know it's new, the different way of learning and you they don't bombard you with too much, by the time you hit fourth, fifth year you're mature. Especially because you've been you're in the clinics already and it's just a matter of applying what did in the tutorials or what you read. But do you read extra to extra on what you're supposed to read?

If you don't understand something, I think if I don't understand something then I'd read to try and get a different idea of what it is

And you get a book list

Yes we do

Yeah

Ok. Thank you, it's been most enlightening (0:47:31 ended)