

Reporting on “Student Selection”

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Enrichment of Applicant Pool

- *To meet the vision and goal of the Faculty because different schools have different issues based on regions or needs*
- Active recruitment of the “best” students
 - from rural locations, maturity of gender
- Demand for places vs freedom of movement of dentists
- “No professor and no profession”
- Dental students with PhD may not be good clinical dentists. Prefer to encourage dental students to do intercalated science course

Criteria for Admission

- Manual dexterity test is not considered as an essential criterion for admission to Dentistry
- The admission of students with blood borne diseases to Dentistry depends on the individual University's policy

Recommendation

need to do more research on the correlation of admission criteria to student career outcome

Selection Process of Dental Students

- Interview is a useful tool for admission of students – structured interview and group interview are preferred than individual interview

Selection: Nursing

Global and National variations

Government interventions

Workforce driven

Level of the Institution

Nature of the programme

Rehabilitation

What do we do at the moment

	Melb'n	UBC	B'ham	Queens	N'ham
GPA	+	+ +	+	+	+
Psych T	+	- -	-	-	-
Interview	-	+ -	-	-	-
Volun Exp	-	+ +	-	-	-
Reports	-	- +	+	-	+
Pos Recr	+	+ +	+	+	+

Disadvantaged students What do we do at present

- All have some positive selection in some form
- Melbourne 8%
- B'ham ~10%
- UBC 15%
- Q'land 5%
- N'ham ~10%

Development with time

- Adaptability
- Life long learning
- Communication skill
- Problem Solving
- Ethical Consideration

- Seem very similar across specialities
- Seems similar to other professions

CONCLUSIONS

- **What do we select for – not just for entry tests need to be just for today**
- **Lots of overlap between professions and professionals possible collaboration at entry**
- **Widening access dependant on funders universal problem**
- **Possible first year joined basic course**

Building Research Capacity

BUILDING RESEARCH CAPACITY Medicine

- Observations and views

Role of medical schools in basic/clinical research
(**important training ground**)

Change in direction to incorporate Health Care
Service-related research (**disagreement**)

What needs to be done?

- Make medical schools relevant?
- Attract extramural funding
 - Lobbying
 - Alliances with RIs and Biotechs

How to go about it?

- Put words to action
- Compare notes on existing practices
- Set up a working committee of 4 Deans with a special staff to work with Lorraine on preparing a paper specifically addressing funding issues

Topic One

- Details about this topic
- Supporting information and examples
- How it relates to your audience

Topic Two

- Details about this topic
- Supporting information and examples
- How it relates to your audience

Topic Three

- Details about this topic
- Supporting information and examples
- How it relates to your audience

Real Life

- Give an example or real life anecdote
- Sympathize with the audience's situation if appropriate

What This Means

- Add a strong statement that summarizes how you feel or think about this topic
- Summarize key points you want your audience to remember

Next Steps

- Summarize any actions required of your audience
- Summarize any follow up action items required of you

BUILDING RESEARCH CAPACITY

Dentistry

Key Issues

- Develop a research culture to attract high quality staff and students
- Balancing research and clinical teaching
- Lobbying the importance of dental research
 - water fluoridation

Building Research Capacity

Recommendations

- Ensure that staff have appropriate research time
- Intercalated research year for undergraduates
- Lobby public health services and govt funding agencies eg. Dental Research Fellows
- Career paths for research only staff

BUILDING RESEARCH CAPACITY

Nursing

- Draft benchmark framework
- National Research Assessments
- Uni and / or multidisciplinary research?
- Nursing benchmarking current research activity commencing

Rehabilitation

REHABILITATION SCIENCES -

Building research capacity

Issues:

- Critical mass
- Career structure
- Funding – Limited access
- Logistics of grant applications –
administration of research projects
- Time commitment for academic and
clinical research

Recommendations:

- Research training support –
PhD qualified staff; post doctoral
- Promote research leaders
- Pump priming
U21, professional bodies, inter-university
project groups
- Linked projects with clinical centres
- Use Learning Objects (LRC) as a focus for
increasing research capacity

Academics of the Future

Academic Job Planning

Benchmarking

Benchmarking: Nursing Clinical Teaching & Learning

- Principles of lowest or highest common denominator?
- Governance of clinical practice
- Accreditation of Faculty and Clinical agency
- Teaching and learning in clinical agency

Benchmarking of Teaching and Research: The Global Perspective

Benchmarking

- In 2002 a template for benchmarking was agreed to.
- Template involves:
 - Student numbers for academic year (undergrad, graduate entry, postgraduate coursework)
 - Research higher degrees
 - Profile of graduates – number of graduates per year.
 - Profile of students (gender, local/international)
 - Staff profile (tenure, gender, qualifications, admin staff, academics)

Benchmarking

- Template continued
 - Research profile (publications, grants, consultancy, patents)
- Template piloted
- To be completed by several U21 institutions for UQ 2004 Review SHRS.
- Likely to add to template selection processes, outcomes in 2004.