Taking the Mountain to Mohammed: A Dental Residency Example

Workshop’s Goal and Description: The workshop’s goal is to help educators develop strategies to successfully develop and implement service-learning programs. The workshop will take participants through the process of designing, implementing, evaluating, improving, and sustaining a dental residency service-learning project. This program’s outcomes will be presented and the challenges faced during implementation will be examined and other implementation and outcome options will be discussed.

Objectives: After the completion of this workshop participants will be able to:

- Describe an innovative method to enhance teaching and learning.
- Compare and contrast service-learning with the traditional clinical training approach.
- Explain the advantages of the services-learning model above and beyond volunteer work and traditional practice experiences.
- Identify, define, and discuss potential learning, service, and research outcomes of the service-learning approach.
- Identify and discuss potential challenges that could make the process difficult.
- Identify and discuss options and approaches to reach successful collaboration and positive education outcomes.
- Describe and illustrate strategies for building and strengthening partnerships and collaborations with community agencies to enhance education and service.

Workshop Agenda

3:30-3:45  
Introduction and Didactic Presentation  
Brief overview of service-learning in the health professions

3:45-4:00  
Large Group Discussion  
Identification and discussion of potential challenges

4:00-5:00  
Presentation and Large Group Discussion  
Success stories: Discussion and illustration of examples for building and strengthening partnerships and collaborations with community agencies to enhance education and service.

- The triumphs and challenges of integrating caring: The community partner’s perspective.
- A Harlem Story: The community
- We Care: The Faculty’s Perspective
- Why the Harlem United Experience is just right for me!: The trainee’s perspective
Potential Challenges or the Devil is in the Detail

- Competing priorities: academic institution (teaching/learning) vs. community-based organization (service). Time constraints and scheduling difficulties.

Success Stories
The Community Partner’s Perspective:
The Triumphs and Challenges of Integrating Caring from Harlem United
(see handout)

The Community

A Harlem Story
On a nice and sunny day, as I walked down the street to Harlem United, a middle aged gentleman with a long beard untidy hair, and dressed in old raggedy clothes was feeding the birds. He was talking to them and throwing breadcrumbs on the ground. I smiled and said hello to him.

“Those are happy birds,’ I said.
“They make me happy,” he answered. “Do you know what it does to people when they give to those in need? It makes a person really happy!’

I waved goodbye to him and thought; if only we could teach the joy of giving to many others, the world would be a happier place.

The Faculty’s Perspective: My personal Reflections on the SDOS-Harlem United Linkage Through the ‘We Care’ Mobile HIV Oral Health Program

1. A Harlem Story (see above)
2. Lessons learned at Harlem United, where people with HIV/AIDS receive integrated primary care services:
   a. Getting to know one another, providers and clients eat together at breakfast and lunch.
   b. When communication improves and barriers are removed, services are more likely to reach the neediest patients!
   c. Teaching in this environment is very powerful and the experience can become truly transforming.
   d. The compelling need for continuous program involvement; when trainees, clients, and colleagues work together, it becomes a reality.
   e. The quality of the teacher’s life improves; it is possible to make a real difference where it is needed the most!

The Trainee’s Perspective: Why the Harlem United Experience is Just Right for Me!

Key facts described by Dr. Darlington:
1. Being accepted by the clients as a part of the Harlem United family “it feels like home.’
2. Working as a primary care team member with physicians, nurses, nurse practitioners, case managers, social workers, psychologists, etc.
3. Participating in morning rounds and care planning conferences and learning about the holistic approach to care.
4. Practitioner/patient relationship develops as trust is gained.
5. Clients prefer to receive integrated services; they do not have to disclose all over again that they have HIV/AIDS!
6. My career plans have changed, I want to get an MPH and work with underserved populations. Had I not had this experience, I would have sought out either a private or group practice.