OUTREACH TEACHING IN MANCHESTER

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Manchester Outreach

- Birthplace of modern outreach
- Teaching model for most UK hospitals
- 11 centres currently
- Housing 166 students every year
- Providing 6245 clinical hours a year
DISCIPLINES

• **PAEDODONTICS**

• **ADULT**

• **TEAMWORKING (FAMILY)**
PRINCIPLES OF DENTAL TEAM WORKING
THE DENTAL TEAM (2006)

- IS A GROUP OF PEOPLE WHO TOGETHER PROVIDE CARE FOR A PATIENT

- TEAMWORK MEANS WORKING TOGETHER TO PROVIDE GOOD-QUALITY DENTAL CARE

- SHARE KNOWLEDGE AND SKILLS WITH OTHER TEAM MEMBERS IN THE INTERESTS OF PATIENTS
THE FIRST FIVE YEARS – THIRD EDITION (INTERIM) 2008

GENERAL DENTAL COUNCIL
The importance of team working with opportunities for student dentists to train and work with other dental professionals

Co-operation with members of the dental team and other health care professionals in the interests of patients
DEVELOPING THE DENTAL TEAM – SECOND EDITION (INTERIM) 2009
The importance of dental team working, with opportunities for student and trainee DCPs to train and work with other dental professionals.
'Curricula must include opportunities for students from different but related professions to have appropriate opportunities to learn together to help their understanding of TEAMWORK and communication.'

TEAMWORKING
THE MANCHESTER MODEL

What is it?

- Brand new concept
- Conceived in Manchester
- Pioneered at Ashton-under-Lyne Outreach
- Initiated by Prof Mackie
- Led By Dr. A. Roberts
ASHTON PRIMARY CARE CENTRE
ELEMENTS

- 4 students
- From different years and disciplines
- Bsc OHS student, 3rd, 4th, & 5th year dental students
- Captain
- Scope for expanding the scheme and adding further DCP’s
- 14 week tenure
THE TEAM
PROTOCOL

New patients seen by 5th yr

Treatment plan by 5th year

Referral within the team

Act in the interests of the pts
ADVANTAGES

• Lack of peer pressure
• Exchange of knowledge
• Team approach
• Beneficial
• Empowered
• Respect
• Appropriate and adequate referral
DISADVANTAGES

- Students at different levels of education
- Different levels of experience
- Treatment limitations
- Initial isolation
- Difficulties in building patient rapport
- Lack of knowledge of Hygienist-Therapist scope of practice
- Difficult to evaluate
THANK YOU FOR LISTENING

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