EDUCATIONAL GUIDE DURING THE COVID PANDEMIC

This guide has been prepared to inform the organizations that have applied for accreditation about distance education and alternative evaluation and curriculum changes in accordance with AADE policies and operations.

In this process

1- Ensuring the safety of our students, patients, and employees, as well as our academics and dentists, should be our priority. The decisions of the Ministry of Health, CHE and local administrations should be followed closely. These decisions should be implemented, and feedback on the process and result should be conveyed to the relevant unit. Changes made in education based on these decisions should be reported.

2- Suggestions should be submitted through the council of deans and relevant stakeholders to support and supervise distance education by CHE, to provide opportunities for universities in terms of education and infrastructure preparations in this regard, and to introduce certain conditions for students to have equal opportunities at a minimum.

In addition, the issues of "ensuring data security" and "determining the future of data" should be strategically planned. The studies of our academicians on this subject should be supported, R&D teams should be formed and opportunities should be created for teachers who want to work voluntarily.

3- It has become important to act quickly to adapt to the updated authority decisions, make the right planning, implement the plan, control the results and take measures to eliminate the problems in the cycle.

4- It should be ensured that decisions are based on the best available scientifically validated information and current clinical practice and infection control protocols and act collectively to contain the situation.

5- In the transition process to online education, students and academicians should be given time for adaptation, necessary training should be given at regular intervals within the framework of a plan, all kinds of technical support should be provided and feedback should be received. These feedbacks are important for revealing and eliminating the deficiencies in the functioning of the system.

6- Organizations should produce "lecture video recording materials" for their students, update them in a timely manner, and share these materials in a way that allows students to use these materials in cases where they cannot attend the lecture or during repetitions.

7- Guidance services should be provided to students to eliminate their fears and concerns when necessary.

8- Our suggestion for the COVID pandemic is that the faculties make a new emergency lecture planning that will meet the graduate qualifications defined in the program. This process should be flexible and each faculty should act according to its possibilities; however, it should be presented as a report, in which planning and how the defined graduate competencies are applied, controlled, and measured, and how measures and improvements are made for the results.

9- In online education, giving theoretical lectures synchronously or asynchronously is provided in many faculties. However, the rapid transmission of this virus through the respiratory tract and the high incidence of nosocomial infections, especially in dental treatments due to saliva, water, and air droplets, make risk management quite difficult in dentistry clinical training, which requires one-to-one practice as well as theoretical lessons. Clinical practice courses required for the third, fourth and fifth grades and pre-clinical practices in simulation laboratories that require motor skills cannot be performed.

10- The most important issue for online education is to ensure that all stakeholders have access to the necessary and recommended resources (lecture notes, journals, books, etc.) in the electronic environment. For this reason, it is important for organizations to review library facilities and activate remote access.

11- Accessing information on the internet presents a disadvantage as well as an advantage. It is a reality accepted by everyone that there is information pollution in the internet environment. It is impossible to expect them to discern correct information at the student level. Resources should be supervised, and students should be guided about resources.

12- In the light of today's technological developments and as a requirement of modern education methods, pre-clinical courses based on high-level motor skills are expected to be carried out with virtual reality or artificial intelligence methods. However, the high cost of these systems and a large number of students may pose an obstacle to integrating these practices into national standards.

13- A formative education model can be considered in pre-clinical applications that require low-level motor skills. Students are sent step-by-step instructional videos prepared by the instructors. For each stage, the student can send back the skill that has been done at home to the instructor as a video, and the instructor can follow until he/she does it right. In organizations with a large number of students and a low number of lecturers (for situations where there are more than 8 students on average per instructor), the high workload may make it difficult for both students and educators to apply this method.

14- In online measurement and evaluation systems, "formative" evaluation based on monitoring in stages should be preferred rather than evaluation with a result-based (summative)-education with a single exam at the end of the education process. The target level of the questions should be high. Questions should be asked in such a way that they can be answered by thinking, not by remembering; Protection should be

provided from practices that do not serve the learning outcome, such as students copying each other's work. Evaluations can be made orally and in small groups in the recording environment and in a way to provide a face-to-face image with the student.

15- Feedback should be received from instructors and students for measurement and evaluation activities. Necessary changes in the system should be planned with feedback. Exam results and success should be evaluated and feedback should be given to instructors.

16- Distance education requires different education and evaluation models from face-to-face education methods, and it requires preparations and programs in the subjects of "Educator's training" and "Student's education" such as introducing the instructors and students to modern and technological computer-aided systems and performing applications.

17- Since the decisions taken by the relevant authorities may change in this process, rapid action should be taken to ensure adaptation to the decisions taken, and program evaluation meetings should be held more frequently. The Faculty Administrative Board should meet online once a month.

18- Thanks to the gains this pandemic has given us, important steps will be taken in the transition to the blended-face-to-face and online education system, which is already the education system of the future, and the necessary preparations will be planned and implemented.

19- To carry out clinical applications, it will be necessary to establish summer schools and make a new lecture plan/emergency plan. For this, the necessary infrastructure should be prepared and a plan should be made to meet the graduate qualifications. The teaching staff should also be informed in advance to plan the necessary preparations. If summer school cannot be opened if this pandemic covers the summer term, whenever practical courses are completed for the 3,4th and 5th grades, opening the new term after this date (October, November, or December) can also be considered as an alternative plan.

20- The failure of senior students to perform clinical practices will cause them not to graduate and not to participate in the "Dentistry Specialty Exam (DSE)", which will be held after graduation. It is also important to plan changes such as ensuring that students participate in the exam by completing the remaining clinical applications with an accelerated program, in case the process extends beyond the expected date, they are exempted from clinical applications or the exam date is postponed so that students do not lose their rights. It would be beneficial to contact senior management regarding this issue.