

Dr. Gerald Niznick College of Dentistry URA Faculty Participation

Dr. Robert Schroth

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Research Description:

Dr. Schroth's main research interests include early childhood caries (ECC) (i.e. tooth decay) and the role that prenatal and early childhood factors, including nutrition and microbiome, have on infant and preschool oral health. He is also involved in other ECC epidemiological work involving Indigenous, rural, newcomer, and low-income preschool populations. Dr. Schroth co-leads the Healthy Smile Happy Child initiative, which is guided by the pillars of community-development, oral health promotion/education, and research/evaluation. This project has partnered with communities to produce needed oral health promotion resources and has undertaken both quantitative and qualitative studies relating to preschool oral health in Manitoba. He currently leads prevention studies, including a randomized clinical trial of silver diamine fluoride as a non-restorative option to managing ECC. In addition to his research program he practices part-time at two community clinics where he cares for many young children with ECC. Dr. Schroth holds a CIHR Embedded Clinician Research salary award in "improving access to oral health care and oral health care delivery for at-risk young children in Manitoba".

Dr. Gayle Halas

Rady Chair in Interprofessional Collaborative Practice

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Research Project 1 meets the criteria of being community-based.

My research focuses on team-based primary health care, and the communication and interactions that enable collaborative practice, particularly for addressing complex patient needs and care. It has been widely acknowledged that multiple health professions working as a team provide comprehensive, patient-centred care. Yet, we also are acutely aware of the narratives from individuals who 'fall between the cracks' or who are 'lost in the system' and did not get the care they needed. These deficits in the system become more evident when care recipients need to navigate among multiple providers or transition from hospital to community-based care. By examining the experiences and perspectives of patients, informal caregivers and health care providers involved in team-based care, we will have a greater understanding of the weaknesses and challenges, what works well

and/or how clinics and clinic settings operationalize collaborative care. Two project options are available for interested students:

Research Project 1: Trainees will conduct interviews with people who are the 'system users' (i.e., patients and/or informal caregivers) to help us gain a better understanding of what works and what does not work well when receiving care from multiple health care providers. This fundamental question is the first step toward being able to seek out solutions.

Research Project 2: Trainees will conduct interviews and/or focus groups with University of Manitoba health professional alumni within their first three years of practice to glean insights into how their participation in a 2-year Interprofessional Education (IPE) curriculum during their pre-licensure education has translated into their current practice. Participants will also be asked to discuss the ways in which their current practices and practice environments support effective interprofessional working relationships and processes that positively impact patient outcomes.

Students who have an interest in primary healthcare, teamwork, communication and/or patients' experiences of care are invited to join my research team. Trainees will benefit from working alongside a core group of interdisciplinary researchers, educators, and students in an environment that nurtures experiential learning by sharing ideas, and hearing about other related studies while pursuing one's own individual research projects related to interprofessional collaborative care. Working with our research team will equip motivated students with valuable research skills and an understanding of the entire research process – from proposal development, ethics submissions to data analysis and writing.