



International
Society of
Dental Regulators

International Society of Dental Regulators Proposed Dentist Accreditation Standard

Foreword

Dental regulators must contribute to and monitor the education of its members. The International Society of Dental Regulators (ISDR) has developed accreditation standards for dentistry programs that provides a core framework for ISDR members, and other jurisdictions where dentistry is taught. The framework can be further refined by individual jurisdictions to align with education system, regulatory and legislative differences.

To assist the educational programs in dentistry, the standards for educational programs must address:

1. Public safety
2. Academic governance & quality assurance
3. Program of study
4. Student journey
5. Assessment.

The ISDR Dentist Accreditation Standard is based upon the following definition of a dentist:

The dentist as a practitioner is concerned with the health needs of the public. The dentist's education shall provide the knowledge and skills necessary for carrying out prevention, assessment, diagnosis and treatment of conditions and diseases of the orofacial complex and associated tissues, within the scope of the practitioner's approved education, training and competence, including consultation with, or refer to, other health care providers when appropriate for the best interest of the patient. A dentist is educated in the basic and clinical sciences as well as in related health subjects.

A set of competencies for a dentist has been developed by the ISDR, and supports the ISDR Dentist Accreditation Standards.

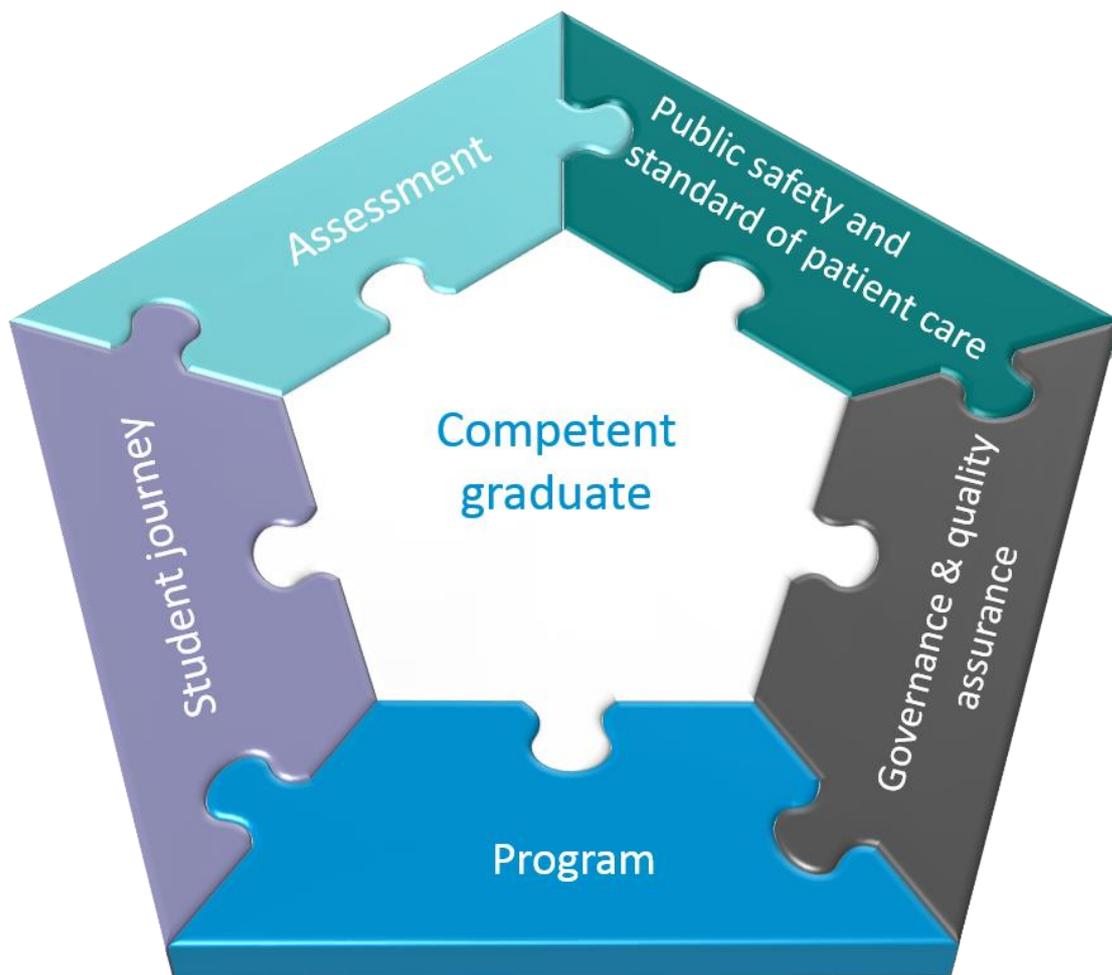
The total lengths of different programs vary in each education system but must be equivalent to at least five (5) academic years of tertiary education.

In recognising the need for universally accepted standards the ISDR acknowledges the education systems are part of the culture of any geographic region. The ISDR Dentist Accreditation Standard is a principle-based framework developed to set a benchmarking standard for dental education. This is of particular importance to achieve alignment in standards to protect the safety of the patients in a global marketplace that results in increasing student and staff mobility.

It is the expectation by ISDR that all members will employ the core framework as the minimum basis for accreditation of dental education programs, as this supports the ISDR mandate to encourage best practices among dental regulatory authorities worldwide in protecting, promoting and maintaining the health and safety of the public by ensuring proper standards for the dental professions. The ISDR Dentist Accreditation Standard can be used by accreditation bodies to develop and implement accreditation standards as part of application to ISDR membership.

ISDR is the final arbiter and interpreter of the content of these Standards.

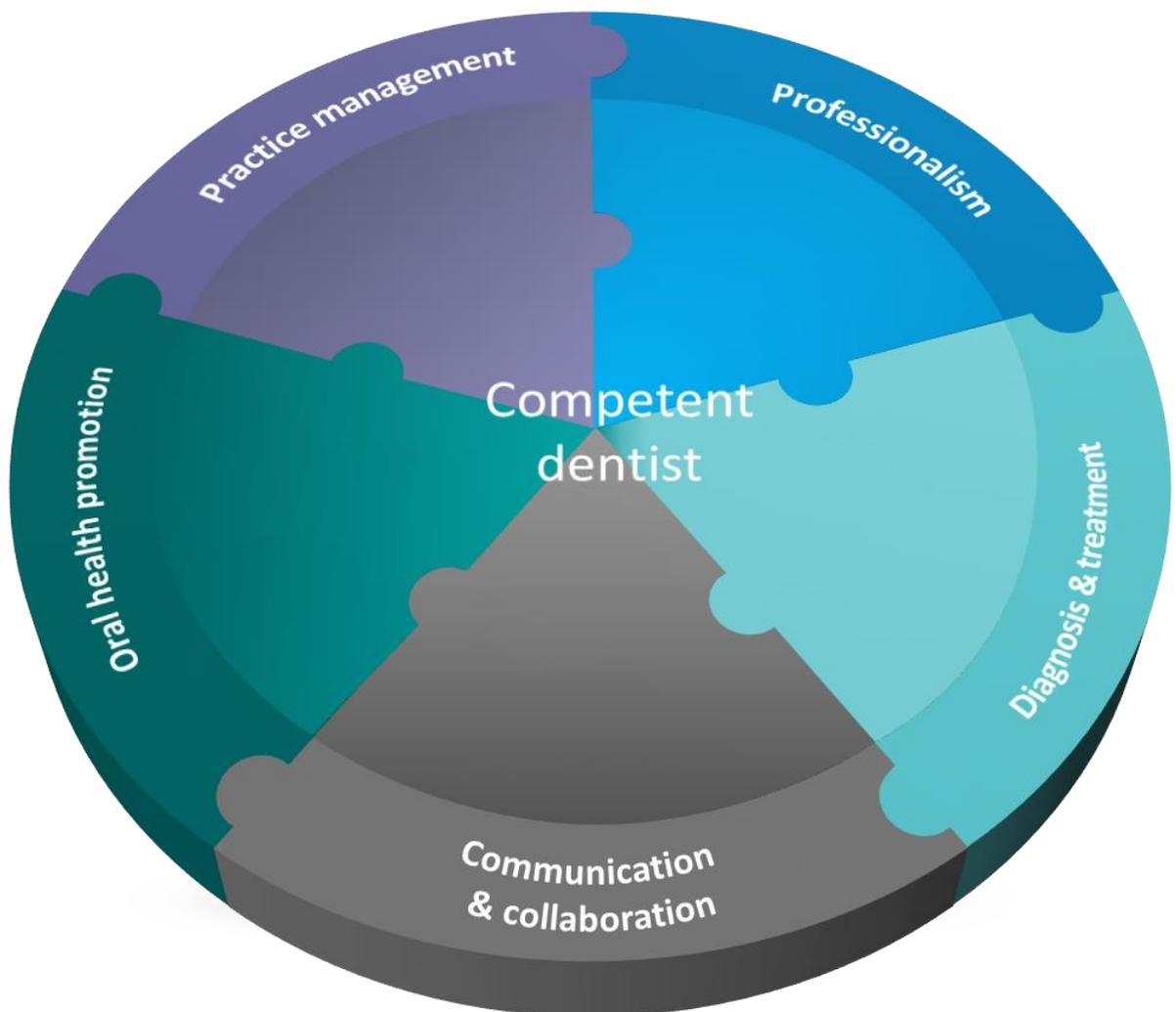
Proposed ISDR Dentist Accreditation Standards



	Accreditation Domains	Standard
1	Public safety and standard of patient care	<ul style="list-style-type: none"> • Clinical education must emphasise patient safety, contemporary practice and professional standards • Patient management must be based on the principles of patient-centred care, comprehensive patient care, and informed consent • All staff must be appropriately qualified and clinical teaching staff must be registered • There must be clearly defined outcome criteria to determine when a student is competent to advance from pre-clinical education to patient treatment • There must be quality assurance processes to monitor the standards of care provided by students, including the appropriateness, necessity and quality of care. There must be mechanisms to identify and address deficiencies in care. • There must be effective student health screening and management processes • The dental education provider must ensure patient care is delivered in a safe environment that complies with relevant regulations regarding health care. • There must be effective processes addressing areas of occupational health and safety (including radiation safety), management of medical emergencies, patient complaints, and confidentiality of patient information
2	Governance & quality assurance	<ul style="list-style-type: none"> • The dental education provider must have autonomy for program delivery within an institution • The dental education provider must have appropriate academic leadership • The dental education provider must show integration and interaction with higher education structures to facilitate provision of broad based education • The dental education provider must be integrated with the broader health sector to apply the principles of patient-centred care • There must be effective internal and external quality improvement processes (incl staff professional development and performance evaluation) to ensure adequacy of program delivery, quality improvement and linkage to contemporary practice • There must be a defined governance structure and stakeholders (incl staff, students, external) must be represented on committees

	Accreditation Domains	Standard
3	Program	<ul style="list-style-type: none"> • The dental education provider must have an educational philosophy (mission/purpose statement) based on evidenced based teaching, research literacy, inter/intra professional learning, and preparation of a caring, knowledgeable graduate practitioner who can practise safely, competently and independently • The curriculum must cover the relevant biological, biomedical, behavioural, cultural, technical and clinical sciences in order that learning objectives achieve expected ISDR Dentist Competencies. • The clinical exposure and management of patients must be sufficient to achieve competence across the full range of learning outcomes and ISDR Dentist Competencies • The curriculum must prepare students to undertake self-directed learning during professional practice • The program resources, such as facilities, staff/student ratio, budget and administrative support, must be appropriate to deliver the program • The program duration must be sufficient as to achieve the outcome of a practitioner who can practise the expected ISDR Dentist Competencies safely, competently and independently
4	Student journey	<ul style="list-style-type: none"> • Defined admission selection criteria must encourage recruitment of a diverse student population, be transparent and followed fairly • Students must have access to comprehensive program information, such as curriculum, learning objectives, assessment details • The education provider must have in place an effective student grievance process, academic and personal student support, and must observe the principles of equity and diversity
5	Assessment	<ul style="list-style-type: none"> • Assessment criteria and processes must be clear, transparent, valid and reliable • Assessments must be mapped to all learning objectives and ISDR Dentist Competencies • Multiple assessment tools must be used including student self-assessment, direct clinical observation and involvement of examiners external to the faculty • There must be appropriate processes for assessor calibration, evaluation and moderation

Proposed ISDR Dentist Competencies



Introduction

“The term “competent” has been defined by Chambers (1993) as “the behaviour expected of the beginning practitioner. This behaviour incorporates understanding, skill, and values in an integrated response to the full range of requirements presented in practice”.

Lachiver and Tardif (2002) expanded on the definition of competence as follows: “A competence could be defined as a complex ability to act based on effectively mobilizing and using a set of resources. This ability highlights that each competence is active in nature, allowing an individual to implement a set of reflections, process, strategies, and actions in performing a given task. It helps distinguish competence from a simple procedure, preventing competence from becoming misconstrued as a synonym of know-how. It therefore endows competence with comprehensive role and character.”

Tardif (2006) adds that competence involves knowing “how to act” based on calling-up and combining various internal and external resources within a group of situations.

Epstein and Hundert (JAMA, 2002;287:226-35) defined competence in Medicine as “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individuals and communities being served”.¹

In 2008 Licari & Chambers defined competency as “the ability to combine evidence based knowledge, personal attitudes, and clinical skills to undertake holistic dental care.”²

“Personal attributes may include creativity, ethics, aesthetics, and critical sense. Kramer et al. (2009) emphasized that personal attributes include a desire for patient wellbeing and to self-evaluate the effectiveness of the treatment.

As life-long learning becomes a crucial attribute for all modern clinicians, the ability to self-assess performance and identify future learning goals is an essential skill that needs to be developed in a modern healthcare curriculum. Self-assessment, self-reflection and self-regulation can promote a deeper understanding in current knowledge.”³

The definition of competence adopted for the purpose of the ISDR Dentist Accreditation Standards and the ISDR Dentist Competencies is the ability of a dentist graduate *to combine evidence based knowledge, personal attitudes, and clinical skills to undertake comprehensive dental care.*

The ISDR Dentist Competencies supports the ISDR Dentist Accreditation Standards as the benchmark competencies to be achieved by dentist graduates of ISDR member jurisdictions. Similarly to the ISDR Dentist Accreditation Standards – individual jurisdictions can refine and further develop these competencies to meet individual jurisdiction statutory, educational or patient-health needs.

¹ Proposal to Revise the “Competencies for a Beginning Dental Practitioner in Canada”; April 2013

² Licari FW, Chambers DW. Some Paradoxes in Competency-Based Dental Education. J Dent Educ. 2008;72(1):8-18

³ Manakil J, George R. Reviewing Competency in Dental Education. International Journal of Dental Clinics. 2011;3(2):33-39

A competent dentist must:

Professionalism

- Recognise the value of self-assessment, critical thinking, and self-directed learning to maintain clinical competence during the practising career
- Understand and apply the principles of ethical practice and professional responsibility.
- Establish the principle of leadership within the dental team to facilitate patient-centred care.

Diagnosis and treatment

- Understand scientific principles and apply the knowledge of biological, biomedical, behavioural, technical and clinical sciences to the management of patients.
- Obtain, record and interpret a comprehensive and contemporaneous patient history.
- Obtain information and establish an individualised treatment plan.
- Within the dentist scope of practice, be able to:
 - Apply the principles of disease prevention in the management of oral and dental disease and overall patient welfare
 - Manage diseases and conditions of the periodontium and supporting tissues
 - Manage tooth tissue loss by restoring the dentition
 - Manage the loss of teeth by rehabilitating the dental arches
 - Manage pulp and periapical diseases and conditions
 - Extract teeth and other minor oral surgical procedures
 - Manage diseases and conditions of the oral hard and soft tissues
 - Manage dental trauma
 - Understand the management of maxillofacial trauma
 - Manage skeletal and dental occlusal discrepancies
 - Manage medical emergencies
 - Recognise and take account of the needs and preferences of different patient groups
- Recognise those treatments that are beyond his/her skills and experience, and refer appropriately.

Communication and collaboration

- Communicate effectively to obtain informed consent and facilitate patient-centred care.
- Respect and manage patients and colleagues from diverse backgrounds and beliefs without prejudice or discrimination.

Oral health promotion

- Recognise the determinants of oral health issues in populations, and the role of dentists in planning oral health care for communities.

Practice management

- Be aware of and comply with all legal and regulatory requirements related to the provision of oral health care.
- Manage and maintain a safe working environment.
- Understand the different models of oral health care management and delivery systems within the jurisdiction of registration.
- Be competent in the use of contemporary information technology and ensure patient information is protected.

Glossary – ISDR Dentist Accreditation Standards

Accreditation	Granting of recognition that the educational program meets and maintains minimum standards to achieve competent dentist graduates.
Appropriately qualified	Teaching staff have the relevant qualifications and experience at the required level, to ensure teaching is contemporary, based on evidence-based science and at the level required for the qualification offered.
Assessments	A variety of methods to evaluate, measure, and document the academic readiness, learning progress, and skill acquisition of students.
Clinical	Any treatment provided in a pre-clinical setting or on patients, including obtaining medical histories, treatment planning and oral health promotion.
Competence	Ability of a dentist graduate to combine evidence based knowledge, personal attitudes, and clinical skills to undertake comprehensive dental care.
Dental education provider	A provider delivering an accredited dentist program, meeting any tertiary educational requirements set by the jurisdiction
Diversity	The recognition of and respect for individual differences, these could include race, ethnicity, gender, sexual orientation, socio-economic status, age, physical and mental abilities, religious, political or other beliefs.
Equity	Fairness or justice in treating people.
Governance	The establishment of policies and processes, and continuous monitoring of their proper implementation, by the members of the governing body of the educational institution.
Informed consent	Obtaining permission from a patient before performing a procedure, informing the patient that care could be provided by a student, explaining the reason for the procedure, the nature of the procedure, potential benefits and associated risks, expected costs, and ensuring the patient understands the information provided and have an opportunity to ask any questions to inform his/her choice to proceed, or not, with the procedure. Informed consent is not a once-off process and must be repeated for any new or changed treatment plan.
Jurisdiction	The geographical area which a dental regulatory authority governs dentists, including the dentistry programs.
Learning objectives	Brief statements that describe what students are expected to learn by the end of a defined period.
Quality assurance	Assurance of a desired level of quality in patient care delivered, by reviewing the various stages of delivery, including whether policies and procedures are correctly and consistently followed.

<p>Management process – as referenced in standard “There must be student health screening and management process”</p>	<p>Measures put in place to monitor and support a student with a known health condition or disability, whilst protecting the safety of the patients and public.</p>
<p>Occupational health and safety <i>also known as workplace safety</i></p>	<p>The safety, health and welfare of the staff, students, patients and the public in the setting where dental care is provided.</p>
<p>Patient-centred care</p>	<p>The primary concern of care delivered is the patient.</p>
<p>Patient management</p>	<p>To “manage” the oral health care needs of a patient include all actions performed by a health care provider that are designed to alter the course of a patient’s condition. Such actions may include providing education, advice, treatment by the dentist, treatment by the dentist after consultation with another health care professional, referral of a patient to another health care professional, monitoring treatment provided, but also may include providing no treatment or observation. “Manage” assumes the use of the least invasive therapy necessary to gain a successful outcome in accordance with patient wishes.⁴</p>
<p>Practice management</p>	<p>The assessment of information and the leadership of a general dental practice to facilitate patient-centred care.⁵</p>
<p>Pre-clinical</p>	<p>Simulation laboratories, treatment not delivered on patients.</p>
<p>Professional standards</p>	<p>Standards set by a regulatory body or legislature to assure a minimum standard, and includes ethics and professionalism.</p>
<p>Referral</p>	<p>Identifying a symptom, condition or disease that falls outside of the professional’s knowledge, skills and experience, and sending the patient to an appropriate health practitioner/professional for further treatment; providing the other practitioner with the relevant medical information.</p>
<p>Registered</p>	<p>A healthcare professional registered or licensed with the appropriate regulatory body that enables the dentist to practise dentistry in that jurisdiction.</p>
<p>Research Literacy</p>	<p>To undertake at least a small-scale research project, using appropriate research methodologies, relevant to the area of practice; and to critically reflect on literature of clinical nature and to use the literature effectively in clinical decision making.</p>

⁴ Proposal to Revise the “Competencies for a Beginning Dental Practitioner in Canada; April 2013

⁵ Proposal to Revise the “Competencies for a Beginning Dental Practitioner in Canada; April 2013

Self-directed learning	in its broadest meaning, describes a process in which individuals take the initiative with or without the help of others, in diagnosing their learning needs, formulating learning goals, identifying resources for learning, choosing and implementing learning strategies and evaluating learning outcomes. ⁶
Student journey	The experiences of a student during studying, includes support and interest beyond academic needs – includes personal, financial, health and wellbeing support.
Student grievance process	A process where a student can lodge a complaint against students, staff, patients, or the program; and the complaint is dealt with in a timely fashion, with discretion, without prejudice or retaliation.
Tertiary Education	(Formal) education, following secondary education at a school, at a college or university.

⁶ Knowles, M. S. (1975) *Self-directed learning: A guide for learners and teachers*, Prentice Hall, Englewood Cliffs, New Jersey.