

GUIDELINES FOR ACCREDITATION AND
TRAINING IN PAEDIATRIC DENTISTRY

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INTRODUCTION

Paediatric Dentistry is defined as: *"an age defined speciality that provides both primary and speciality comprehensive care and therapeutic oral health care for infants and children, through adolescence, including those with special health care needs."* (American Academy of Pediatric Dentistry, 1994)

Unlike other dental specialist branches, Paediatric Dentistry centres on a particular group of individuals rather than a specific group of clinical problems. This is very similar to our paediatric colleagues, who have been recognised as a separate medical Speciality for many years. Other dental specialists concentrate their skills on particular aspects of dentistry, the paediatric dentist needs the skills to undertake most aspects of these different specialities for the child patient and is not confined to any particular clinical problem.

1. INSTITUTIONAL RELATIONSHIPS AND COMMITMENTS

Basic and higher specialist training in Paediatric Dentistry in Hong Kong should be a joint endeavour between the Faculty of Dentistry, University of Hong Kong and the Government School Dental Care Service.

The University and Government should demonstrate a commitment to the programme, and respective responsibilities, including the provision of teaching staff, the contribution of each institution, the period of assignment and the financial commitment should be identified.

The programme content should be consistent with that of other internationally recognised Paediatric Dentistry Programmes.

Clinics to be used for the programme must be accredited by the Education Committee of the College of Dental Surgeons of Hong Kong.

2. CURRICULUM AND TRAINING REQUIREMENTS

The full time specialist training in Paediatric Dentistry should be for a minimum duration of 6 years, with an Intermediate Examination after 4 years followed by a 2-year Higher Training programme leading to the Exit Examination.

The programme should consist of a comprehensive study of applied clinical sciences in a graduated sequence of clinical training appropriate to Paediatric Dentistry.

2.1 CURRICULUM

The curriculum should be constructed on the basis of the existing BDS undergraduate course, in Hong Kong, and the additional requirements based upon the intermediate and exit examinations.

The above are based on the following:

- The BDS degree is the basic qualification allowing entry into Paediatric Dentistry basic training programme.
- Admission to the Higher Specialist Training programme in Paediatric Dentistry will be based on successful completion of the Intermediate Examination.
- That an integrated educational programme is essential, and which progress from the undergraduate BDS level through to graduate level. It must be designed to provide adequate basic, then higher specialist training.

The curriculum should be constantly reviewed and revised as current philosophies or the requirements changed.

2.1.1 SEQUENCE OF TRAINING

1. A basic dental degree from the University of Hong Kong or equivalent institution approved by the College will be the entry requirement for the full time basic training in Paediatric Dentistry. Candidature in the training programme will only be confirmed after successful completion of Conjoint Part 1 M.Paed.Dent. (R.C.S. Ed.) or equivalent.
2. In year 1 of the training programme, the candidate is expected to gain appropriate experience in general/hospital dentistry at the University of Hong Kong, Department of Health Dental Services, or other supervised practices.
3. During year 1, the candidate is required to attend lectures, specific or continuing education courses and conferences of no less than 30 CME hours. The candidate must submit evidence of these hours to the Specialty Board in Paediatric Dentistry before admission to year 2 of the training programme.
4. Year 2 to 4 should be a full time, structured, institute based training programme in Paediatric Dentistry in approved training institutions.'
5. Before entry into the Higher Training programme, the candidate must have successfully completed the Intermediate Examination in Paediatric Dentistry of the College of Dental Surgeons of Hong Kong, which is a conjoint examination with the Membership in Paediatric Dentistry of the Royal College of Surgeons of Edinburgh.
6. Year 5 and 6 of the Programme should be a structured Higher Training period in an approved programme at a training institute or approved practice in conjunction with a training institute.
7. Before accreditation as a trained specialist, the candidate, having fulfilled all other requirements of specialty training in Paediatric Dentistry as determined by the Specialty Board, must successfully completed an Exit Examination in Paediatric Dentistry conducted by the College of Dental Surgeons of Hong Kong.
8. Final exit examination (**Appendix II**).

3. ACADEMIC DEVELOPMENTS AND RESEARCH

It is essential to maintain a University link within the training programme in Paediatric Dentistry. This may include the acquisition of a postgraduate master's degree in Paediatric Dentistry as an additional option within the programme. This degree course should be structured to include the basic and applied clinical science components, as well as research methods, as currently available within the University.

There should also be a significant commitment to research methods and activities, including experimental studies, investigative laboratory and clinical research and statistical analysis of clinical material.

4. PROGRAMME SUPERVISION AND STAFFING

The supervisor of training must be a Paediatric Dentist accredited by the Education Committee of the Hong Kong College of Dental Surgeons.

The supervisor must have sufficient authority and time, to fulfil administrative and teaching responsibilities, in order to achieve the educational goals of the programme. In addition, it is the supervisor's responsibility to ensure that trainee, completing the programme, have achieved the standards of performance established for the programme, and for practice in the specialty.

The major components of the specialty instruction and supervision should normally be conducted by Paediatric Dentists. In addition, it is strongly recommended that individuals who provide instruction and supervision specific to any other specialty area, should be fully qualified in that specialty.

- 4.1 The supervisor must ensure that the following responsibilities are properly carried out:
 - a. Selection of trainees.
 - b. Development and implementation of the curriculum.
 - c. Ongoing evaluation of programme content, faculty teaching and trainees' performance.
 - d. Programme administration.
 - e. Planning and operation of facilities used in the educational programme.
 - f. Evaluation of trainee's supervision and activity in affiliated institutions.
 - g. Maintenance of records related to the educational programme.
 - h. Responsibility for overall continuity and quality of patient care.

- 4.2 The size and time commitment of the trainers should be sufficient to ensure:
 - a. Continuity of instruction.
 - b. Exposure of trainees to a broad range of diagnostic and treatment modalities.
 - c. Trainers participation in all teaching activities, including conferences and seminars.
 - d. Trainers review of patient evaluation, treatment planning, management, complications and the outcome of all cases treated by the trainees.
 - e. Adequate supervision of all clinical activity. The degree of supervision should be related to the aptitude and experience of the trainee.

- 4.3 Supervisors, as well as Paediatric Dentists appointed as trainers, should have a real and demonstrated interest in teaching; personally provide the necessary time and effort to the educational process, and set an example by engaging in scholarly pursuits such as (1) Participation in their own continuing education. (2) Participation in regional or national paediatric dentistry societies. (3) Presentation and publication of scientific studies, and (4) Demonstration of an active interest in research, as it pertains to their own Paediatric Dentistry interests.

- 4.4 Instruction and supervision, within the specialty of Paediatric Dentistry, must be conducted by individuals who are fully qualified and accredited.

Paediatric Dentists who are appointed as trainers must have adequate experience and demonstrated competence in the chosen subspecialty for which the appointment is made.

The teaching and supervisory staff should have specific and regularly scheduled sessions. There should be regular sessions for presentation of cases and participation in peer review.

It is recommended that trainers be evaluated annually to determine the quality of their performance. While the supervisor must be responsible for teaching staff evaluation, it is highly desirable that trainees also participate in this process.

4.5 The policy regarding privilege and responsibility for trainees in the Higher Training programme of Paediatric Dentistry, parallels that enunciated by other Colleges of the Hong Kong Academy of Medicine:

- a. Each trainee in the Higher Training programme will normally be supervised in an approved training centre in Paediatric Dentistry. However, with the recommendation of the Specialty Board in Paediatric Dentistry and approval by the Education Committee, 2 years of supervised practice is also acceptable.
- b. In a supervised practice situation, the supervisor and trainee need not work in the same practice. There will be regular contacts between the clinical supervisor and the trainee to provide training, treatment planning, treatment evaluation and advice on patient care, practice management and professional development. The trainee should be attached to the training centre of the clinical supervisor for at least three sessions per week.
- c. The clinical supervisor will make regular, not less than once every four months, practice visits to the trainee's practice to assess and then give feedback on the practice profile, record keeping and management.
- d. Supervision and increasing responsibility of trainees should extend to all areas of Paediatric Dentistry, including multidisciplinary treatment.
- e. Trainees in Paediatric Dentistry should be allowed limited privileges commensurate with their level of training and with their personal clinical skills.
- f. Trainers must at all times ensure that trainees are not undertaking, at any level of supervision, activities that are beyond their level of competence.
- g. Each trainee in the Higher Training programme are required to attain a minimum of thirty CME points per year.

Responsibilities and activities of the trainees should be recommended by the Supervisor of training, based on the following criteria:

1. Performance in the preceding period of training.
2. Log book evidence of training to date.
3. Competence in clinical judgement and techniques.
4. Personal reliability and responsibility.

5. PHYSICAL FACULTIES AND RESOURCES OF AN ACCREDITED TRAINING UNIT

Institutional facilities and resources must be adequate to provide the educational experiences and opportunities required to fulfil the needs of the educational programme as specified in these standards. These include, but are not limited to, facilities and personnel resources for trainees to carry out their patient care and personal educational responsibilities, administrative offices, and an adequate library providing access to standard reference texts and current journals, and sufficient space for instruction.

5.1 Clinical facilities must be properly equipped for performance of all clinical procedures relevant to Paediatric Dentistry.

5.2 There must be an adequate supply of paediatric dentistry patients for all trainees.

5.3 **EDUCATIONAL RESOURCE AIM**

It is a commitment of every accredited training unit to contribute fully to the development of an Educational Resource Data Base.

This will include:

- i Documentation and periodic review of all facilities and resources.
- ii Continued development and ready access to advanced educational material including clinical management and techniques.
- iii Availability of relevant material from special courses and conferences.
- iv Periodic evaluation of the log of clinical experience.
- v Library.

6. **CONTINUING EVALUATION OF TRAINEES**

There must be documentation of progressive evaluation and advancement of trainees. The system should assure that, through the supervisor of training, each programme.

- a. Progressively assess the accumulated log of activities maintained by all trainees, in the approved log book.
- b. Periodically, but at least biannually, evaluates the knowledge, skills and professional growth of its trainees, using appropriate criteria and procedures.
- c. Provides to trainees an assessment of their performance, at least biannually. More evaluations and documentation of such evaluation should be made if it is determined a trainee may not properly be motivated or eligible for advancement or retention in the programme.
- d. Advanced trainees to undertake more complex cases only on the basis of an evaluation of their readiness.
- e. Maintains a personal record of evaluation for each trainee which is accessible to the trainee and available for periodic review by an Specialty Board in Paediatric Dentistry of the College of Dental Surgeons of Hong Kong.

6.1 Trainees' performance must be formally evaluated and documented in all aspects of the programme.

7. **ROTATIONS**

The concept of appropriate rotations is encouraged on the basis of:

- a. Extending the clinical training and experience of trainees as defined by the minimal clinical requirements, especially where specific strengths or deficiencies are identified within the respective programmes.
- b. Promoting and developing consistent standards and cooperation between programmes.
- c. Developing international relationships and recognition.

Rotations between accredited programmes should normally not exceed six months.

Any programme that rotates trainees to other programmes or affiliated institutions, must submit all supplementary documentation to the Advisory Committee on Training.

8. REVIEW

Each programme must regularly evaluate the degree to which its goals are being achieved through internal assessment.

It is also essential that each programme submit adequate documentation of organizational and training commitments and trainee status and experience to the Specialty Board in Paediatric Dentistry.

APPENDIX I

Scope of the Intermediate Examination in Paediatric Dentistry

The aim of the basic specialist training in Paediatric Dentistry is to provide the candidate with general practice and clinical experience in Paediatric Dentistry, and exposure to other specialties having a close interaction with Paediatric Dentistry.

The scope of the examination is broadly divided into the following sections:

1. **Diagnosis and treatment planning.** A detailed knowledge and evidence of not less than three years experience in diagnosis and treatment planning for children from infancy to adolescence.
2. **A detailed knowledge of an experience with appropriate restorative techniques including dental traumatology for healthy children and for children with special needs.**
3. **A thorough knowledge and experience of paediatric oral medicine, pathology and minor oral surgery together with a working knowledge of the principles of Maxillofacial Surgery.**

A detailed knowledge of paediatric dental radiography including a detailed knowledge of potential hazards and appropriate safety measures and legislation.

An awareness of the common manifestations of non accidental injuries to children especially in relation to the face to mouth and to be familiar with the procedures to be followed in the management of such a patient.

4. **A detailed knowledge of preventative dentistry including the epidemiology and aetiology of dental caries and the prevention and management of periodontal disease. A working knowledge of health education and a detailed knowledge of dental health education and promotion.**
5. **A working knowledge of general behavioural concepts and child psychology with a detailed knowledge of their application to children requiring dental treatment especially those with special needs.**
A working knowledge of dental sedation and anaesthesia.
6. **A working knowledge of general paediatrics and children with special needs.**
7. **A working knowledge of a biological sciences relevant to orthodontics, orthodontic diagnosis, treatment planning and procedures including multidisciplinary procedures.**
8. **A working knowledge of research methodology (including epidemiology and bio statistics), adult, quality assurance and quality standards.**

A knowledge of how to prepare and write an expert witness report.

- 9. A working knowledge of current ethics and legislation of relevance to paediatric dentistry.**

APPENDIX II

Scope of the Exit Examination in Paediatric Dentistry

The clinical training in Paediatric Dentistry should have equipped the trainees with a complete, progressively graduated sequence of experience. The candidates admitted for the exit examination should demonstrate competence in the full scope of Paediatric Dentistry. The scope of the exit examination in Paediatric Dentistry is outlined below.

1. The candidate should have knowledge of somatic growth and its variations and adolescent growth spurt and its relationship to growth of the craniofacial complex.
2. The candidate should be fully competent in diagnosis and treatment planning for the normal child patient, and those with special needs.
3. The candidate should be competent to:
 - Perform an analytical review of research papers.
 - Prepare a protocol for a research project.
 - Interpret research findings and present them in an oral and written form.
4. The candidate should be familiar with the principles of classification of syndromes and genetic disorders in relation to aetiology, prognosis and reaction to treatment.
5. The candidate should be familiar with the medical, social, educational, and behavioural problems of the special need patient. The candidate should be competent in the delivery of comprehensive dental care to such patients.
6. The candidate should have knowledge of:
 - Multidisciplinary approaches especially in the role of the Paediatric Dentist in the treatment of cleft lip and palate patients.
 - Indication, timing and application of multidisciplinary treatment of cleft lip and palate patients.
7. The candidate should have knowledge of the aetiology and diagnosis of malocclusion. The candidate should be familiar with the indication, design and use of removable, functional and fixed orthodontic appliances. The candidate should be competent to carry out interceptive orthodontic treatment in the developing dentition.
8. The candidate should be competent in the diagnosis, treatment planning and management of dental trauma in the primary and permanent dentitions.
9. The candidate should have knowledge of all aspects of the management of a practice specializing in Paediatric Dentistry.