Commission on Dental Accreditation

At its Summer 2016 meeting, the Commission directed that the proposed revisions to Endodontics Standard 1 and new Standard 2-6 be distributed to the appropriate communities of interest for review and comment, with comment due June 1, 2017, for review at the Summer 2017 Commission meeting.

Written comments can be directed to snowj@ada.org or mailed to:

ATTN: Ms. Jennifer Snow, 19th Floor
Manager, Advanced Specialty Education
Commission on Dental Accreditation
211 East Chicago Avenue
Chicago, IL 60611

Proposed Revised Standards Additions are Underlined; Deletions are Stricken.

Accreditation Standards for Advanced Specialty Education Programs in Endodontics
STANDARD 1 - INSTITUTIONAL COMMITMENT/PROGRAM EFFECTIVENESS

The program must develop clearly stated goals and objectives appropriate to advanced specialty education, addressing education, patient care, research and service. Planning for, evaluation of and improvement of educational quality for the program must be broad-based, systematic, continuous and designed to promote achievement of program goals related to education, patient care, research and service.

The program must document its effectiveness using a formal and ongoing outcomes assessment process to include measures of advanced education student/resident achievement.

Intent: The Commission on Dental Accreditation expects each program to define its own goals and objectives for preparing individuals for the practice of endodontics and that one of the program goals is to comprehensively prepare competent individuals to initially practice endodontics. The outcomes process includes steps to: (a) develop clear, measurable goals and objectives consistent with the program’s purpose/mission; (b) develop procedures for evaluating the extent to which the goals and objectives are met; (c) collect and maintain data in an ongoing and systematic manner; (d) analyze the data collected and share the results with appropriate audiences; (e) identify and implement corrective actions to strengthen the program; and (f) review the assessment plan, revise as appropriate, and continue the cyclical process.

The financial resources must be sufficient to support the program’s stated goals and objectives.

Intent: The institution should have the financial resources required to develop and sustain the program on a continuing basis. The program should have the ability to employ an adequate number of full-time faculty, purchase and maintain equipment, procure supplies, reference material and teaching aids as reflected in annual budget appropriations. Financial allocations should ensure that the program will be in a competitive position to recruit and retain qualified faculty. Annual appropriations should provide for innovations and changes necessary to reflect current concepts of education in the advanced specialty discipline. The Commission will assess the adequacy of financial support on the basis of current appropriations and the stability of sources of funding for the program.

The sponsoring institution must ensure that support from entities outside of the institution does not compromise the teaching, clinical and research components of the program.

Examples of evidence to demonstrate compliance may include:

- Written agreement(s)
• Contract(s)/Agreement(s) between the institution/program and sponsor(s) related to facilities, funding, and faculty financial support

Advanced specialty education programs must be sponsored by institutions, which are properly chartered, and licensed to operate and offer instruction leading to degrees, diplomas or certificates with recognized education validity. Hospitals that sponsor advanced specialty education programs must be accredited by an accredited organization recognized by the Centers for Medicare and Medicaid Services (CMS). Educational institutions that sponsor advanced specialty education programs must be accredited by an agency recognized by the United States Department of Education. The bylaws, rules and regulations of hospitals that sponsor or provide a substantial portion of advanced specialty education programs must assure that dentists are eligible for medical staff membership and privileges including the right to vote, hold office, serve on medical staff committees and admit, manage and discharge patients.

United States military programs not sponsored or co-sponsored by military medical treatment facilities, United States-based educational institutions, hospitals or health care organizations accredited by an agency recognized by the United States Department of Education or accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS) must demonstrate successful achievement of Service-specific organizational inspection criteria.

The institution/program must have a formal system of quality assurance for programs that provide patient care.

The authority and final responsibility for curriculum development and approval, student/resident selection, faculty selection and administrative matters must rest within the sponsoring institution.

The position of the program in the administrative structure must be consistent with that of other parallel programs within the institution and the program director must have the authority, responsibility and privileges necessary to manage the program.

Ethics and Professionalism

1-1 Graduates must receive instruction in the application of the principles of ethical reasoning, ethical decision making and professional responsibility as they pertain to the academic environment, research, patient care, and practice management.

Intent: Graduates should know how to draw on a range of resources such as professional codes, regulatory law, and ethical theories to guide judgment and action for issues that are complex, novel, ethically arguable, divisive, or of public concern.
AFFILIATIONS USE OF SITES WHERE EDUCATIONAL ACTIVITY OCCURS

The primary sponsor of the educational program must accept full responsibility for the quality of education provided in all affiliated institutions-sites where educational activity occurs.

All arrangements with sites where educational activity occurs, not owned by the sponsoring institution, must be formalized by means of current written agreements that clearly define the roles and responsibilities of the parties involved.

Documentary evidence of agreements, approved by the sponsoring and relevant affiliated institutions, must be available. The following items must be covered in such inter-institutional agreements:

- a. Designation of a single program director;
- b. The teaching staff;
- c. The educational objectives of the program;
- d. The period of assignment of students/residents; and
- e. Each institution’s financial commitment.

Intent: An “institution (or organizational unit of an institution)” is defined as a dental, medical or public health school, patient care facility, or other entity that engages in advanced specialty education. The items that are covered in inter-institutional agreements do not have to be contained in a single document. They may be included in multiple agreements, both formal and informal (e.g., addenda and letters of mutual understanding).

For each site where educational activity occurs, there must be an on-site clinical supervisor who is qualified by education and/or clinical experience in the curriculum areas for which he/she is responsible.

If the program utilizes off-campus sites for clinical experiences or didactic instruction, please review the Commission’s Policy on Reporting and Approval of Sites Where Educational Activity Occurs found in the Evaluation and Operational Policies and Procedures manual (EOPP).
STANDARD 2 - PROGRAM DIRECTOR AND TEACHING STAFF

The program must be administered by one director who is board certified in the respective specialty of the program. (All program directors appointed after January 1, 1997, who have not previously served as program directors, must be board certified.)

Intent: The director of an advanced specialty education program is to be certified by an ADA-recognized certifying board in the specialty. Board certification is to be active. The board certification requirement of Standard 2 is also applicable to an interim/acting program director. A program with a director who is not board certified but who has previous experience as an interim/acting program director in a Commission-accredited program prior to 1997 is not considered in compliance with Standard 2.

Examples of evidence to demonstrate compliance may include:

- For board certified directors: Copy of board certification certificate; letter from board attesting to current/active board certification
- (For non-board certified directors who served prior to January 1, 1997: Current CV identifying previous directorship in a Commission on Dental Accreditation- or Commission on Dental Accreditation of Canada-accredited advanced specialty program in the respective discipline; letter from the previous employing institution verifying service)

The program director must be appointed to the sponsoring institution and have sufficient authority and time to achieve the educational goals of the program and assess the program’s effectiveness in meeting its goals.

Documentation of all program activities must be ensured by the program director and available for review.

2-1 The sponsoring institution must appoint a program director who: a) is a full-time faculty member and b) whose time commitment is no less than twenty-four hours per week to the advanced education program in endodontics.

Intent: To ensure that the program director has sufficient time to participate in all aspects of the program including direct student/resident contact in didactic and clinical activities.

2-2 Responsibilities of the program director must include:

- Development of mission, goals, and objectives for the program;
- Development and implementation of a curriculum plan;
c. Planning for and operation of the facilities used in the endodontic program;

d. Student/resident selection unless the program is sponsored by a federal service utilizing a centralized student/resident selection process;

e. Ensuring ongoing evaluation of student/resident performance and faculty teaching performance;

f. Evaluation of teaching program and faculty supervision in affiliated institutions;

g. Maintenance of records related to the educational program, including written instructional objectives and course outlines;

h. Overall continuity and quality of patient care as it relates to program;

i. Ongoing planning, evaluation and improvement of the quality of the program;

j. Preparation of graduates for certification by the American Board of Endodontics; and

k. Ensuring formal (written) evaluation of faculty members at least annually to assess their performance in the educational program.

Intent: To ensure that the program director has complete authority to administer all aspects of the advanced education program and that all administrative records are maintained within the institution.

2-3 The number of faculty and the professional education and development of faculty must be sufficient to meet the program’s objectives and outcomes.

2-4 There must be attending faculty responsible for all clinical activities.

2-4.1 Attending faculty must have specific and regularly scheduled clinic assignments to provide direct supervision appropriate to a student’s/resident’s level of training in all patient care.

2-5 Program directors and full time faculty must be provided time and resources to engage in scholarly pursuits, which may include:

a. Participation in continuing education in endodontics;

b. Participation in regional or national endodontic societies;

c. Participation in research; and

d. Presentation and publication of scientific/clinical studies.

2-6 All faculty, including those at major and minor educational activity sites, must be calibrated to ensure consistency in training and evaluation of students/residents that supports the goals and objectives of the program.