At its Summer 2016 meeting, the Commission directed that the proposed revisions to Periodontics Standard 1 and new Standard 2-5 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 Periodontics
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 periodontics and that one of the program goals is to comprehensively prepare competent individuals to initially practice periodontics. 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.

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.

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 accreditation organization recognized by the Center for Medicare and Medicaid (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 ensure 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 authority and final responsibility for curriculum development and approval, student/resident selection, faculty selection and administrative matters must rest within the sponsoring institution.

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

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.
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.

1-2 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.

1-3 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 and means for calibration where competency assessments occur;
c. Availability and adequacy of staff;
d. Student/Resident oversight and responsibility;
e. The educational objectives of the program;
f. The period of assignment of students/residents; and
eg. 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).

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 program director should be an experienced educator in periodontics and should be a full-time faculty member with a primary commitment to periodontics.

2-2  The program director must have primary responsibility for the organization and execution of the educational and administrative components of the program. The director must devote sufficient time to the program to include the following:

a.  Utilize a faculty that can offer a diverse educational experience in biomedical, behavioral and clinical sciences;
b. Promote cooperation between periodontics, general dentistry, related dental specialties and other health sciences;

c. Select students/residents qualified to undertake specialty training in periodontics unless the program is sponsored by a federal service utilizing a centralized student/resident selection process;

d. Develop and implement the curriculum plan;

e. Evaluate and document student/resident and faculty performance;

f. Document educational and patient care records as well as records of student/resident attendance and participation in didactic and clinical programs; and

g. Responsibility for the quality and continuity of patient care.

2-3 The program director must prepare graduates to seek certification by the American Board of Periodontology.

a. The program director must track Board Certification of program graduates.

2-4 A combination of full-time and part-time faculty is most desirable. The number and time commitment of faculty must be sufficient to provide didactic and administrative continuity. Part-time faculty should contribute to the didactic as well as the clinical component of the program.

2-5 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.

2-56 Faculty must be assigned for all clinical sessions and immediately available for consultation with students/residents and patients. There must be direct faculty supervision of students/residents who are performing surgical procedures.

2-67 Faculty must take responsibility for patient care and actively participate in the development of treatment plans and evaluation of all phases of treatment provided by students/residents.

2-78 Faculty must be formally evaluated at least annually by the program director to determine their effectiveness in the educational program.

2-89 In addition to their regular responsibilities in the program, full-time faculty must have adequate time to develop and foster advances in their own education and capabilities in order to ensure their constant improvement as clinical periodontists, teachers and/or researchers.
2-910 The program director and faculty should demonstrate their continued pursuit of new knowledge in periodontics and related fields.

2-101 The program director and faculty must actively participate in the assessment of the outcomes of the educational program.