Commission on Dental Accreditation

At its Summer 2016 meeting, the Commission directed that the proposed revisions to General Practice Residency (GPR) Standards 1-5, 2-8, 3-4, 3-9, and new Standard 3-10 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 soeldnerp@ada.org or mailed to:

ATTN: Ms. Peggy Soeldner, 19th Floor
Manager, Postdoctoral General Dentistry
Commission on Dental Accreditation
211 East Chicago Avenue
Chicago, IL 60611

Proposed Revised Standards Additions are Underlined; Deletions are Stricken

Accreditation Standards for Advanced Education Programs in General Practice Residency
PROPOSED REVISIONS TO ACCREDITATION STANDARDS FOR ADVANCED EDUCATION PROGRAMS IN GENERAL PRACTICE RESIDENCY

(underline indicates addition; strikethrough indicates deletion)

STANDARD 1 – INSTITUTIONAL AND PROGRAM EFFECTIVENESS

1-5 Arrangements with all sites not owned by the sponsoring institution where educational activity occurs must be formalized by means of current written agreements that clearly define the roles and responsibilities of the parties involved.

Intent: Sites where educational activity occurs include any dental practice setting (e.g., private offices, mobile dentistry, mobile dental provider, etc.). Institutions include entities such as private practices. 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). Affiliated institutions or extramural facilities where only didactic instruction is provided are exempt.

Examples of evidence to demonstrate compliance may include:

Written agreements

STANDARD 2 – EDUCATIONAL PROGRAM

2-8 For each assigned rotation or experience in an affiliated institution or extramural facility, there must be:

a) objectives that are developed in cooperation with the department chairperson, service chief, or facility director to which the residents are assigned;

b) resident supervision by designated individuals who are familiar with the objectives of the rotation or experience; and

c) evaluations performed by the designated supervisor.

Intent: This standard applies to all assigned rotations or experiences, whether they take place in the parent sponsoring institution or a major or minor activity site in an affiliated institution or extramural facility. Supplemental activities are exempt.

Examples of evidence to demonstrate compliance may include:

Description and schedule of rotations

Objectives of rotations

Resident evaluations
STANDARD 3 – FACULTY AND STAFF

3-4 All sites where educational activity occurs must be staffed by faculty who are qualified by education and/or clinical experience in the curriculum areas for which they are responsible and have collective competence in all areas of dentistry included in the program.

Intent: Faculty should have current knowledge at an appropriate level for the curriculum areas for which they are responsible (e.g., the faculty member responsible for endodontics is not required to be an endodontist. Instead, it could be someone with current knowledge and appropriate level of experience in endodontics). The faculty, collectively, should have competence in all areas of dentistry covered in the program.

The program is expected to develop criteria and qualifications that would enable a faculty member to be responsible for a particular specialty teaching area if that faculty member is not a specialist in that area. The program is expected to evaluate non-specialist faculty members who will be responsible for a particular specialty teaching area and document that they meet the program’s criteria and qualifications.

Whenever possible, programs should avail themselves of specialists as trained consultants for the development of a mission and curriculum, and for teaching.

Examples of evidence to demonstrate compliance may include:
- Full and part-time faculty rosters
- Program and faculty schedules
- Completed BioSketch of faculty members
- Criteria used to certify a non-specialist faculty member as responsible for a specialty teaching area
- Records of program documentation that non-specialist faculty members as responsible for a specialty teaching area

3-9 At each site where educational activity occurs, adequate support staff must be consistently available to ensure:

a) residents do not regularly perform the tasks of allied dental personnel and clerical staff,
b) resident training and experience in the use of current concepts of oral health care delivery and
c) efficient administration of the program.
**Intent:** This statement is meant to emphasize the importance of a well-balanced dental staff that can help address aspects of the delivery of dentistry and the business of dentistry. The areas that are considered current concepts would be scheduling, insurance, dental assisting, dental hygiene and lab procedures. The program should determine the number and participation of allied support and clerical staff to meet the educational and experiential goals and objectives. Allied support may include dental assistants, dental hygienists, dental laboratory technicians and front desk personnel as needed.

**Examples of evidence to demonstrate compliance may include:**

Staff schedules

The program must provide ongoing faculty calibration at all sites where educational activity occurs.

**Examples of evidence to demonstrate compliance may include:**

Methods used to calibrate faculty as defined by the program

Attendance of faculty meetings where calibration is discussed

Mentored experiences for new faculty

Participation in program assessment

Standardization of assessment of resident

Maintenance of existing and development of new and/or emerging clinical skills

Documented understanding of relevant aspects of teaching methodology

Curriculum design, development and evaluation

Evidence of the ability to work with residents of varying ages and backgrounds

Evidence that rotation goals and objectives have been shared