ACCREDITATION STANDARDS FOR ADVANCED DENTAL EDUCATION PROGRAMS IN GENERAL PRACTICE RESIDENCY

Frequency of Citings Based on Required Areas of Compliance

Total Number of Programs Evaluated = 75
August 5, 2022 through October 31, 2024

Standard 1 – Institutional and Program Effectiveness (22 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
2	**1-1**	Each sponsoring and co-sponsoring institution **must** be 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).
	1-8	The program **must** develop overall program goals and objectives that emphasize:
		a) general dentistry,
		b) resident education,
		c) patient care, and
2		d) community service
		and include training residents to provide oral health care in a hospital setting.
1	**1-9**	The program **must** have a formal and ongoing outcomes assessment process that regularly evaluates the degree to which the program's overall goals and objectives are being met and make program improvements based on an analysis of that data.

Standard 2 – Educational Program (68 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
	2-1	The program **must** provide didactic and clinical training to ensure that upon completion of training, the resident is able to:
		a) Act as a primary oral health care provider to include:
		1) providing emergency and multidisciplinary comprehensive oral health care;
		2) obtaining informed consent;
		3) functioning effectively within interdisciplinary health care teams, including consultation and referral;
		4) providing patient-focused care that is coordinated by the general practitioner; and
		5) directing health promotion and disease prevention activities.
1		b) Assess, diagnose, and plan for the provision of multidisciplinary oral health care for a wide variety of patients including patients with special needs.
		c) Manage the delivery of patient-focused oral health care.
	2-2	The program **must** have goals and objectives or competencies for resident training and provide didactic and clinical training to ensure that upon completion of training the resident is able to provide the following at an advanced level of skill and/or case complexity beyond that accomplished in pre-doctoral training:
		a) operative dentistry;
		b) restoration of the edentulous space;
2		c) periodontal therapy;
		d) endodontic therapy;
		e) oral surgery;
		f) evaluation and treatment of dental emergencies; and
		g) pain and anxiety control utilizing behavioral and/or pharmacological techniques.

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
	2-5	Residents **must** be assigned to an anesthesia rotation with supervised practical experience in the following:
		a) preoperative evaluation;
		b) assessment of the effects of behavioral and pharmacologic techniques;
1		c) venipuncture technique;
		d) patient monitoring;
		e) airway management;
		f) understanding of the use of pharmacologic agents;
		g) recognition and treatment of anesthetic emergencies; and
		h) assessment of patient recovery from anesthesia.
	2-11	Residents **must** receive training and experience in the management of inpatients or same-day surgery patients, including:
		a) reviewing medical histories and physical examinations;
		b) prescribing treatment and medication;
1		c) providing care in the operating room; and
1		d) preparing the patient record, including notation of medical history, review of physical examination, pre- and post-operative orders, and description of surgical procedures.
2	**2-12**	Formal patient care conferences **must** be held at least twelve (12) times a year.
1	**2-17**	The goals and objectives or the competencies for resident didactic and clinical training in the optional second year of training must be at a higher level than those of the first year of the program.
	2-19	The program's resident evaluation system must assure that, through the director and faculty, each program:
4		a) periodically, but at least three times annually, evaluates and documents the resident's progress towards achieving the goals and objectives or competencies for resident training using appropriate written criteria and procedures;

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
2		b) provides residents with an assessment of their performance after each evaluation. Where deficiencies are noted, corrective actions **must** be taken; and
		c) maintains a personal record of evaluation for each resident that is accessible to the resident and available for review during site visits.

Standard 3 – Faculty and Staff (13 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
1	**3-1**	The program **must** be administered by a director who has authority and responsibility for all aspects of the program.
	3-9	At each site where educational activity occurs, adequate support staff **must** be consistently available to ensure:
2		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.

Standard 4 – Educational Support Services (11 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
	4-5	The program's description of the educational experience to be provided **must** be available to program applicants and include:
1		a) A description of the educational experience to be provided,
2		b) A list of goals and objectives or for resident training, and
1		c) A description of the nature of assignments to other departments or institutions.

Standard 5 – Patient Care Services (8 Required Areas of Compliance)

Non-Compliance Citings	Accreditation Standard	Required Areas of Compliance
1	**5-3**	The program **must** conduct and involve residents in a structured system of continuous quality improvement for patient care.
3	**5-4**	All residents, faculty and support staff involved in the direct provision of patient care **must** be continuously recognized/certified in basic life support procedures, including cardiopulmonary resuscitation.