

REPORT OF THE REVIEW COMMITTEE ON PEDIATRIC DENTISTRY EDUCATION TO THE COMMISSION ON DENTAL ACCREDITATION

Committee Chair: Dr. Jessica Lee. Committee Members: Dr. Clarice Law Eyre, Dr. Ana Keohane, Dr. Tad Mabry, Ms. Lisa Mayer, and Dr. J.C. Shirley. Guests (Open Session Only, Virtual): Dr. Sheila Brear, chief learning officer, American Dental Education Association (ADEA); Dr. Leila C. Younger, executive director, American Board of Pediatric Dentistry (ABPD); and Dr. Leola Royston, manager, Education Development and Academic Support, American Academy of Pediatric Dentistry attended the policy portion of the meeting. Staff Members: Ms. Taylor Weast and Dr. Yesenia Ruiz, managers, Advanced Dental Education; Ms. Peggy Soeldner, senior manager, Administration and Committees; and Ms. Michele Kendall, senior project assistant, Commission on Dental Accreditation (CODA). The meeting of the Review Committee on Pediatric Dentistry Education (PED RC) was held on January 7, 2025 via a virtual meeting.

CONSIDERATION OF MATTERS RELATED TO PEDIATRIC DENTISTRY EDUCATION

Informational Report on Pediatric Dentistry Programs Annual Survey Curriculum Data (p. 1200): At its Winter 2025 meeting, the Commission directed that all Review Committees consider the informational report on aggregate data from the Curriculum Section of the Annual Survey in years when this data is available. At this meeting, the Pediatric Dentistry Review Committee (PED RC) reviewed the informational report on aggregate data from the Curriculum Section for the pediatric dentistry programs conducted in August/September 2024, without comment.

Recommendation: This report is informational in nature and no action is required.

Consideration of Proposed Revisions to Anesthesia Standards of the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry (p. 1201): At its August 2021 meeting, the Commission on Dental Accreditation directed the establishment of a multidisciplinary Ad Hoc Committee composed of current and former Pediatric Dentistry Review Committee (PED RC) members as well as representation from the Dental Anesthesiology Review Committee and the Oral and Maxillofacial Surgery Review Committee to study the use of sedation in patient management, including the potential need for revision of the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry, as applicable. The Ad Hoc Committee held meetings in November 2021 and submitted proposed revisions for consideration by the PED RC and Commission in Winter 2022. A summary of activity related to this matter occurring Winter 2022 through Winter 2024 is found in **Policy Report p. 1201**.

Summer 2024 Review Committee and Commission Meetings: As directed in Winter 2024, the PED RC met virtually on April 30, 2024. Following review of the Commission's charge, the

PED RC further discussed the action of the Winter 2024 meeting. The PED RC discussed the various perspectives of the Commissioners that led to the decision to direct reconsideration of including patient age categories and required numbers of experiences in patient age categories, related to the anesthesia requirements, in the pediatric dentistry Standards. The PED RC also discussed its decision to not include age requirements in the “must” statement but to strengthen the Standard through the revised intent statement.

The PED RC discussed various ways that data regarding patient age categories and numbers of experiences could be gathered from pediatric dentistry education programs to obtain information on how the Standards are currently being achieved without revising Standards at this time. One option discussed was to review the Self-Study Guide used by programs, including Exhibits, to ensure alignment with the Standard and, as appropriate, consider modifying Exhibits to include specific sedation experiences. Another option discussed was to modify the pediatric dentistry Annual Survey to include information on the number of experiences by age group which could be used to determine whether there is an issue related to variability of patient experiences. The PED RC was reminded that the curriculum section is part of the upcoming 2024 Annual Survey, which will be distributed in August 2024, and the next curriculum section will occur in 2026.

Through further discussion, the PED RC concluded that, to provide baseline data, a question to the pediatric dentistry programs via the CODA Annual Survey would be helpful and believed the new survey question could be incorporated into the curriculum section of the Annual Survey. The PED RC concluded its discussion affirming that no changes should be made to the Standards until additional information is gathered through the Annual Survey to determine if revisions are warranted.

At its Summer 2024 meeting, the PED RC further reconsidered patient age categories and the number of required experiences in patient age categories, related to the anesthesia requirements within the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry. In doing so, the PED RC considered the Standards adopted at the Winter 2024 meeting and an unsolicited comment received related to Standard 4-7 b, as well as the recommendation of the PED RC following its April 30, 2024 meeting to add a new question to the Annual Survey with future consideration of data.

The PED RC carefully reviewed the proposed addition to the Annual Survey and noted that program directors may not understand what information/procedure numbers are being requested. Therefore, the PED RC further modified the proposed survey question by clarifying what experiences are being requested and for what age groups. Following lengthy discussion, the PED RC determined the proposed new survey question should be added to the curriculum section of the CODA Annual Survey for pediatric dentistry education programs. The PED RC was reminded that the curriculum section of the Annual Survey will be distributed in August 2024 and, after that distribution, the next curriculum section will be included in the 2026 Annual Survey.

The PED RC noted that following collection of data through the Annual Survey Curriculum Section, the Committee would have additional information to make an evidence-based decision on the need to further revise Standard 4-7 b to include age requirements, or to retain the Standard as written. The PED RC would consider the data of the new Annual Survey question during the Winter 2025 meeting, with an additional report to the Commission at that time. At its Summer 2024 meeting, the Commission concurred with the recommendation of the PED RC and directed the addition of a new survey question to be added to the Curriculum Section of the 2024 CODA Annual Survey.

Winter 2025 Review Committee Meeting: As directed by the Commission, the new question within the Curriculum Section of the 2024 CODA Annual Survey was distributed to all pediatric dentistry programs in August 2024, with data analyzed in relation to a potential revision of Pediatric Dentistry Standard 4-7 b (**Appendix 1, Policy Report p. 1201**).

At this meeting, the Review Committee on Pediatric Dentistry Education (PED RC) considered the data collected from the 2024 Annual Survey with focused attention on the newly added question to determine whether a potential revision of Pediatric Dentistry Standard 4-7b was warranted. The Review Committee noted that zeroes (0)s were reported and discussed the possible reasons for this, noting concern that one (1) or more programs reported zero (0) experiences in minimal or moderate sedation (**Appendix 1, Policy Report p. 1201**). Following discussion, the PED RC concluded that using the “mean” response data rather than the minimum or maximum experiences might be a more appropriate way to evaluate the data, to determine whether programs are providing adequate patient encounters. The PED RC discussed previous concerns that programs may be exclusively focused on “older” children; the Committee noted the data provided does not support that concern. The data indicates that patient encounters are occurring across a variety of age groups with a focus on the age four (4) to nine (9) group, as would be expected for pediatric dentistry education programs. The PED RC further discussed options for revising a standard or an intent statement to further clarify age expectations. However, the PED RC recalled that previously the PED Standard 4-7 intent statement was revised to add language regarding pre-school or school-age patients.

Following consideration of the data, the Review Committee determined that it appears programs are treating a variety of patients using minimal and moderate sedation, including young children. Therefore, the PED RC recommended there be no revision to Pediatric Dentistry Standard 4-7b.

Recommendation: It is recommended that the Commission on Dental Accreditation direct there be no revision at this time to Standard 4-7b of the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry.

Consideration of Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry Related to Administrative Oversight at Major Sites Where Educational Activity Occurs (p. 1202): At its Winter 2024 meeting, the Commission on Dental Accreditation (CODA) directed an Ad Hoc or Standing Committee to investigate in-person, on-site work

expectations for program directors to determine if changes are needed in the discipline-specific Accreditation Standards for dental education, advanced dental education, and allied dental education programs. As directed, in advance of the Summer 2024 CODA meeting, the Ad Hoc Committee, which was comprised of all current CODA Commissioners, reviewed the background materials, which included the Commission's action leading to the Ad Hoc Committee, and the Standards for each discipline related to program director (**Appendix 1, Policy Report p. 1202**). The Committee noted that while all CODA Standards have a requirement for clinical supervision at all educational activity sites, most Standards do not address overall administrative oversight of the program, by the program director or a designee, at all sites where a student spends a majority or all their time. The Committee discussed whether virtual oversight or assignment of a responsible individual would be appropriate at all educational sites. The Committee believed there must be consistency in the educational program at all program sites. Following consideration, the Ad Hoc Committee concluded that each Review Committee that does not currently have a Standard related to administrative oversight at major educational activity sites (e.g., off-campus sites where students spend a majority or all their time) should review this topic and determine whether a Standard is needed to address the Commission's expectation for administrative oversight, for consideration by the Commission in Winter 2025. In considering this matter, the Commission noted that inclusion of Intent Statements, in conjunction with proposed Standards, could further clarify the flexibility permitted for programs to oversee educational sites in a variety of ways, while ensuring administrative oversight and consistency in the educational program across all sites. At its Summer 2024 meeting, the Commission on Dental Accreditation concurred with the recommendations of the Ad Hoc Committee.

At its Winter 2025 meeting, the Review Committee on Pediatric Dentistry Education (PED RC) considered the pediatric dentistry Accreditation Standards (**Appendix 1, Policy Report p. 1202**) related to administrative oversight at major educational activity sites (e.g., off-campus sites where students spend a majority or all their time) to determine whether revisions are needed to address administrative oversight. The Review Committee noted that the current Standards 1-3 and 2-2 are related to administrative oversight and discussed the practicality of requiring in-person, administrative oversight at all major educational activity sites. The PED RC noted that Standard 2-2 focuses specifically on administrative oversight and the intent statement focuses on remote programs and resources. The PED RC agreed that the pediatric dentistry Accreditation Standards already address administrative oversight but believed an addition to the intent statement for Standard 2-2 would add clarity and emphasize that remote programs are expected to have administrative oversight.

Following consideration, the Review Committee determined that the Standards require modification to address overall administrative oversight of the program, by the program director or a designee, at all sites where a student/resident spends a majority or all their time. The proposed revision to the Pediatric Dentistry Accreditation Standards is found below. The PED RC did not believe circulation to the communities of interest was warranted, since the revision to

the intent statement added clarity to the Standard. Therefore, the PED RC recommended adoption of the proposed intent statement to Standard 2-2 with immediate implementation.

Proposed Revision to the intent statement of Standard 2-2

Additions are Underlined.

STANDARD 2 - PROGRAM DIRECTOR AND TEACHING STAFF

- 2-2 Administrative Responsibilities: The program director must have sufficient authority and time to fulfill administrative program assessment and teaching responsibilities in order to achieve the educational goals of the program including:**

Intent: Program directors with remote programs have resources to visit these programs. The program director ensures administrative oversight at all major sites where educational activity occurs.

Recommendation: It is recommended that the Commission on Dental Accreditation adopt the proposed revision to the intent statement of Standard 2-2 of the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry related administrative oversight at major sites where educational activity occurs, with immediate implementation.

Consideration of Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry Related to Diversity and Humanistic Culture and Learning

Environment (p. 1203): On December 1, 2023, the Commission received a letter from The National Coalition of Dentists for Health Equity (TNCDHE) (**Appendix 1, Policy Report p. 1203**), which provided short-term and long-term suggestions to CODA to improve diversity in all academic dental, allied dental, and advanced dental education programs. In Winter 2024, each Review Committee of the Commission provided comment to CODA on TNCDHE letter. Following consideration of Review Committee Reports, the Commission directed establishment of an Ad Hoc Committee composed of all Commissioners who chair the discipline-specific Review Committees in dental, allied dental, and advanced dental education, and additional CODA Commissioners, to study the Accreditation Standards for possible revision related to the letter from TNCDHE.

In advance of the Commission's Summer 2024 meeting, the Ad Hoc Committee, which was comprised of all current CODA Commissioners, reviewed the background materials, which included the prior work of the Commission on this topic, the letters from TNCDHE, CODA Standards related to diversity and the humanistic culture including proposed revisions, Annual Survey data on dental programs related to diversity, and information from other accrediting agencies. The Committee noted that this is an important topic, but other considerations must also

be acknowledged including differences among institutions related to missions, resources, funding, state and federal regulations, and legal considerations. It was noted that some states do not permit initiatives focused on diversity, and the Commission cannot impose Standards that would conflict with state or federal law. As such, the Committee noted the proposed predoctoral dental education Standard revision, which discusses diversity efforts, would be consistent with university policy and state law. At its Summer 2024 meeting, following consideration of the Ad Hoc Committee Report, the Commission directed that all Review Committees consider the proposed revisions for the Dental Standards 1-2 and 1-3 and revisions for the Oral and Maxillofacial Surgery Standards 1-11 and 2-1.7 (adopted Summer 2024), for possible inclusion of similar Standards within the Review Committee's own discipline(s) to address diversity and the humanistic culture, with a report to the Commission in Winter 2025.

At its Winter 2025 meeting, the Review Committee on Pediatric Dentistry Education (PED RC) considered the pediatric dentistry Accreditation Standards, and reference materials including the proposed Dental Standards 1-2 and 1-3 and adopted revisions for Oral and Maxillofacial Surgery Standards 1-11 and 2-1.7 (**Appendix 2, Policy Report p. 1202**) for possible inclusion of similar Standards to address diversity and the humanistic culture and learning environment. The Review Committee noted that the standards in pediatric dentistry address recruitment, non-discrimination, and advocacy, but additional language focusing on the humanistic culture and learning environment may be warranted. The PED RC discussed the current political climate and believed attention should be given to ensuring that revisions to the Standards do not conflict with state or federal law. The PED RC discussed the desire for common language across all Review Committees, but in the absence of common language, if revisions are warranted, the PED RC would consider language that is aligned with proposed revisions for the Dental Standards 1-2 and 1-3 and revisions for the Oral and Maxillofacial Surgery Standards 1-11 and 2-1.7. Following lengthy discussion regarding Oral and Maxillofacial Surgery Standard 2-1.7, the PED RC determined modifications to the Standard language, including the intent statement and examples of evidence, would be appropriate.

Following consideration, the Review Committee determined that the Standards require modification to address diversity and the humanistic culture and learning environment. The proposed revision to the pediatric dentistry Accreditation Standards is found in **Appendix 1**. The Review Committee recommended that the proposed revision be circulated to the communities of interest for review and comment for one (1) year with Hearings conducted in conjunction with the American Dental Education Association (ADEA) Annual Session and American Dental Association (ADA) Annual Session, with review of all comments received by the Review Committee and Commission in Winter 2026.

Recommendation: It is recommended that the Commission on Dental Accreditation direct the proposed revision to the Accreditation Standards for Advanced Dental Education in Pediatric Dentistry (**Appendix 1**) related to diversity and the humanistic culture and learning environment be circulated to the communities of interest for review and comment for one (1) year with Hearings conducted in conjunction with the American

Dental Education Association (ADEA) Annual Meeting and American Dental Association (ADA) Annual Session, with review of comments received by the Review Committee and Commission in Winter 2026.

**CONSIDERATION OF MATTERS RELATING TO
MORE THAN ONE REVIEW COMMITTEE**

Matters related to more than one review committee are included in a separate report.

**CONSIDERATION OF SITE VISITOR APPOINTMENTS TO THE
COMMISSION ON DENTAL ACCREDITATION IN THE AREA OF PEDIATRIC
DENTISTRY EDUCATION**

The Review Committee on Pediatric Dentistry Education (PED RC) considered site visitor appointments for 2025-2026. The Committee's recommendations on the appointments of individuals are included in a separate report.

CONSIDERATION OF MATTERS RELATED TO ACCREDITATION STATUS

Matters related to accreditation status of programs are included in a separate report.

Respectfully submitted,

Dr. Jessica Lee
Chair, Review Committee on Pediatric Dentistry Education

Commission on Dental Accreditation

Proposed Revisions to Standard 5 Rights and Responsibilities
(New Standard 5-2)

Additions are Underlined

Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry

1 **STANDARD 5 - ADVANCED EDUCATION STUDENTS/RESIDENTS**

2
3 **RIGHTS AND RESPONSIBILITIES**

4
5 At the time of enrollment, the advanced dental education students/residents **must** be apprised in
6 writing of the educational experience to be provided, including the nature of assignments to other
7 departments or institutions and teaching commitments. Additionally, all advanced dental education
8 students/residents **must** be provided with written information which affirms their obligations and
9 responsibilities to the institution, the program and program faculty.

10
11 ***Intent:** Adjudication procedures should include institutional policy which provides due process for*
12 *all individuals who may potentially be involved when actions are contemplated or initiated which*
13 *could result in disciplinary actions, including dismissal of a student/resident (for academic or*
14 *disciplinary reasons). In addition to information on the program, students/residents should also be*
15 *provided with written information which affirms their obligations and responsibilities to the*
16 *institution, the program, and the faculty. The program information provided to the student/*
17 *residents should include, but not necessarily be limited to, information about tuition, stipend or*
18 *other compensation; vacation and sick leave; practice privileges and other activity outside the*
19 *educational program; professional liability coverage; and due process policy and current*
20 *accreditation status of the program.*

21
22 5-1 Programs **must** define the scope of supervision and responsibility for students/residents
23 in the various components of their program for various stages of their education.

24
25 ***Intent:** As students/residents advance in the program, they may and should assume differing levels*
26 *of responsibility defined by their educational progress and skill acquisition. Programs, by their*
27 *individual institutional rules and policies may grant independence to students/residents for specific*
28 *procedures and situations. Programs should be able to demonstrate changes in roles of advanced*
29 *students/residents.*

30 5-2 The program **must** have a stated commitment to a humanistic culture and learning
31 environment.

32 ***Intent:** The program ensures collaboration, mutual respect, cooperation, and harmonious*
33 *relationships between and among administrators, faculty, students/residents, and staff.*

34 Examples of evidence to demonstrate compliance may include:

- 35 • Established policies regarding ethical behavior by faculty, staff, and students/residents.
36 • Student/resident, faculty, or patient groups involved in promoting diversity, professionalism,
37 or leadership support for their activities.
38 • Focus groups or surveys directed towards gathering information on student/resident, faculty,
39 or patient perceptions of the cultural environment.