

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

Committee Chair: Dr. Jessica Lee. Committee Members: Dr. James Boynton, Dr. Tad Mabry, Ms. Lisa Mayer, and Dr. Anupama Tate. Dr. Ana Keohane was unable to attend the meeting. 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. Ed Ginsberg, president, American Board of Pediatric Dentistry (ABPD), attended the policy portion of the meeting. Staff Members: Ms. Peggy Soeldner, manager, Advanced Dental Education; Ms. Yesenia Ruiz, manager, Advanced Dental Education; and Ms. Michele Kendall, senior project assistant, Commission on Dental Accreditation (CODA). Dr. Sherin Tooks, senior director, CODA, attended a portion of the meeting. The meeting of the Review Committee on Pediatric Dentistry Education (PED RC) was held on July 9, 2024 via a virtual meeting.

CONSIDERATION OF MATTERS RELATED TO PEDIATRIC DENTISTRY EDUCATION

Informational Report on Frequency of Citings of Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry (p. 1200): The Review Committee on Pediatric Dentistry Education (PED RC) considered the report on the frequency of citings of the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry implemented July 1, 2021. Since the implementation date, 48 site visits have been conducted by visiting committees of the Commission from July 1, 2021 through October 31, 2023. The report indicates a total of 22 citings of non-compliance have been made. The most frequently cited pediatric dentistry-specific area of non-compliance, with four (4) citings, is Standard 4-7b2a, completing a minimum of 50 patient encounters in which sedative agents other than nitrous oxide (but may include nitrous oxide in combination with other agents) are used, of which each student/resident acting as sole primary operator in a minimum of 25 sedation cases. The second most frequently cited pediatric dentistry-specific area of non-compliance, with three (3) citings each, is Standard 1-1 a, c, d, and e, related to items required in inter-institutional agreements. The Commission will continue to receive reports annually summarizing the updated data on the frequency of citings of individual Standards.

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

Consideration of Proposed Revisions to Accreditation Standards for Advanced Dental Education Programs Related to Sponsoring Organization and Authority to Operate (p. 1201): At its Winter 2022 meeting, the Commission on Dental Accreditation (CODA) directed the formation of an Ad Hoc Committee of all advanced dental education Commissioners to consider the changing landscape of health care delivery centers that may sponsor advanced dental education programs. The Ad Hoc Committee, which met on December 5, 2022 and January 25, 2023, was charged with two (2) primary considerations: 1) the topic of institutional

sponsor, whether a sponsor is an academic institution, hospital, or health care organization, and 2) review of the standard found in some advanced dental education disciplines that requires the sponsor to have proper chartering/licensure to operate and offer instruction leading to a degree, diploma or certificate with recognized education validity. A summary of the work of the Ad Hoc Committee and Summer 2023 Review Committee and Commission review is found in **Policy Report p. 1201**.

At its Summer 2024 meeting, the Review Committee on Pediatric Dentistry Education (PED RC) considered the proposed revision to the Accreditation Standards related to the Definition of Terms for Health Care Organization and to chartering and licensure to operate (**Appendix 1, Policy Report p. 1201**). The Review Committee also considered all comments received by the Commission prior to the June 1, 2024 deadline (**Appendices 2 and 3, Policy Report p. 1201**). The Review Committee noted that the Commission received one (1) comment at the virtual hearing in conjunction with the 2023 ADA Annual Meeting. The Commission received no (0) comments at the virtual hearing in conjunction with the 2024 ADEA Annual Session. The Commission office received seven (7) written comments prior to the June 1, 2024 deadline.

The Review Committee concluded that the proposed revisions provide further clarification of the types of institutions that may sponsor advanced dental education programs and the requirements related to the authority to operate. Further, the PED RC believed that the inclusion of the proposed definition and revisions in the Pediatric Dentistry Accreditation Standards could have a positive impact on the discipline by expanding the types of institutions that are eligible to sponsor pediatric dentistry education programs. The Review Committee also considered potential revisions developed by Commission staff, provided at the meeting, to address the general concerns expressed among all comments received for the advanced dental education Standards. The comments received indicated that additional organizations may fulfill the requirement for an institutional accreditor (e.g. Health Resources and Services Administration Operational Site Visit), and there is a need to further clarify the method by which a program demonstrates its authority to operate and authority to confer a certificate and/or degree.

Following consideration, the Review Committee on Pediatric Dentistry Education believed that the proposed Standards found in **Appendix 1**, which include additional wording to address the general comments received by CODA, should be implemented January 1, 2025, and all related Commission documents be updated accordingly. The Review Committee did not believe that circulation of the revision was warranted since the additional revisions further clarified the intent of the Standards.

Recommendations: It is recommended that the Commission on Dental Accreditation adopt the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry related to the Definition of Terms for Health Care Organization and to chartering and licensure to operate (**Appendix 1**) and direct revision of all related documents, for implementation January 1, 2025.

Consideration of Proposed Revisions to Anesthesia Standards of the Accreditation

Standards for Advanced Dental Education Programs in Pediatric Dentistry (p. 1202): 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. A summary of the work of the Ad Hoc Committee and Summer 2022 Review Committee and Commission review is found in **Policy Report p. 1202**.

Summer 2023 Review Committee and Commission Meetings: At its Summer 2023 meeting, the Pediatric Dentistry Review Committee considered the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry and the comments received prior to the June 1, 2023 deadline.

Through review of the written comments received, the PED RC noted comments from the state of California related to the state's requirement for minimal and moderate sedation permits. Other comments addressed the proposed revisions related to required patient encounters in which sedative agents are used and their relation to the current ADA Guidelines for Teaching Pediatric Pain Control and Sedation to Dentists and Dental Students, particularly as they relate to providing sedation to patients eight (8) years of age or younger. The comments indicated that the requirements in the Standards are less stringent than the ADA Guidelines and that the Accreditation Standards should at least meet or exceed the ADA Guidelines to ensure pediatric dentistry program graduates have more advanced training requirements than that of dental students or general dentists.

Following lengthy discussion, the PED RC believed the proposed revisions required further consideration and should not be approved at that time. Further, the PED RC believed a workgroup of the members of the Review Committee, including the current and incoming Review Committee chair, should further consider the proposed revisions with a report to the Winter 2024 meetings of the PED RC and Commission. At its Summer 2023 meeting, the Commission concurred with the recommendation of the PED RC.

As directed, the Ad Hoc Committee conducted a virtual meeting on November 13, 2023 and discussed the Summer 2023 deliberations of the PED RC. Following discussion, the Ad Hoc agreed further consideration of the revisions of Standard 4-7.b.1, related to providing sedation to patients 13 or under was warranted.

The Ad Hoc Committee discussed the proposed revision and believed identifying specific ages/age groups in the requirement is overly prescriptive. Further, the Ad Hoc Committee discussed that since pediatric dentistry patients could include individuals up to 18 years of age, programs should be encouraged to provide pediatric dentistry students/residents with educational

experiences for patients between the ages of 13 and 18, not only those 13 or under as proposed in the initial Ad Hoc Committee's revision. Therefore, flexibility is warranted. In addition, the Ad Hoc Committee believed programs should be encouraged to provide training to ensure competency in providing sedation to younger patients, including both pre-school or school-age patients and determined a sentence clarifying this should be added to the intent statement. Following discussion, the Ad Hoc Committee determined the proposed revision to Standard 4-7.b.1 should be further modified and a correlating "intent" statement be modified.

Winter 2024 Review Committee and Commission Meetings: At its Winter 2024 meeting, the PED RC considered the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry, including the modified revisions recommended by the second Ad Hoc Committee. Following discussion, the PED RC agreed the modified revisions recommended by the second Ad Hoc Committee provided the flexibility warranted while still encouraging programs to provide training to competence in sedation to younger patients and believed all of the revisions should be adopted. The PED RC discussed whether the modified revisions warranted additional circulation to the communities of interest and determined additional circulation was not warranted because the modified revisions were not substantial in nature. The PED RC discussed an implementation period for the proposed revisions and believed an implementation date of January 1, 2025 would provide programs sufficient time to ensure compliance with all revisions. Therefore, the PED RC recommended that the Commission on Dental Accreditation adopt the proposed revisions to the Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry and direct revision of all related documents, for implementation January 1, 2025.

At its Winter 2024 meeting, the Commission considered the recommendation of the PED RC. Through lengthy discussion, some members of the Commission expressed concerns about the modified revisions to Standard 4-7b2, specifically related to the lack of age requirements and a required number of sedations. In addition, some members of the Commission disagreed with the recommendation of the PED RC that the modified revisions not be circulated to the communities of interest for review and comment. Therefore, some members of the Commission believed the modified proposed revisions should not be adopted at that time and should be circulated to the communities of interest for review and comment.

Through further discussion, some members of the Commission noted the Standard, before proposed revisions, did not include an age range requirement and that the proposed revisions did not change the existing language in the "must" statement. Additionally, it was noted that the addition of the intent statement further strengthened the Standard. Therefore, some members of the Commission believed the proposed revisions, with the modifications, should be adopted without additional circulation and without further delay.

Following lengthy discussion, the Commission concurred with the recommendation of the PED RC and directed the proposed revisions be adopted and all related documents be revised, with an implementation date of January 1, 2025.

In a separate New Business discussion, at its Winter 2024 meeting, a motion was approved to reconsider the action of the Commission to adopt the proposed revisions to the pediatric dentistry Standards. Additional discussion followed surrounding the decision not to circulate the modified revisions because the PED RC believed the revisions were not significant and did not warrant recirculation. Again, some members of the Commission maintained that because the revisions were substantial and due to the absence of numerical age requirements in the Standard, the modified proposed revisions should have been circulated to the communities of interest prior to the Commission's adoption. Through discussion, the Commission was again reminded that currently, the Standard has no age requirements. Some members of the Commission maintained that minimum requirements in terms of age categories of patients treated and experiences gained in advanced dental education programs are important and that when there are adverse outcomes of sedated children, often due to insufficient training and being unprepared to rescue a patient in trouble.

The Commission was also reminded that, generally, educational programs are competency-based and in previous years there were more quantitative requirements in the Standards. Nonetheless, each discipline typically determines the appropriate minimum number of procedures and other requirements within its Standards, with the expectation that each program in the discipline will ensure its graduates are competent.

Following lengthy discussion of the New Business item, the Commission maintained its previous recommendation to adopt the proposed revisions for implementation January 1, 2025 (**Appendix 1, Policy Report p. 1202**). Additionally, the Commission directed the Review Committee on Pediatric Dentistry Education to reconsider 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.

Summer 2024 Review Committee and Commission Meetings: As directed in Winter 2024, the PED RC met virtually on April 30, 2024. Members of the review committee were: Dr. Jessica Lee (chair); Dr. James Boynton; Dr. Ana Keohane; Dr. Tad Mabry; and Dr. Anupama Tate. Ms. Lisa Mayer was unable to attend. Additionally, Dr. Sherin Tooks, senior director, and Ms. Peggy Soeldner, manager, Advanced Dental Education, CODA, were in attendance.

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 table found in **Policy Report p. 1202** 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.

Subsequent to the PED RC's April 30, 2024 meeting, and through review of written comments received for the proposed revisions related to Institutional Accreditation and Authority to Operate (see **Policy Report, p. 1201**), CODA staff identified an unsolicited comment related to Standard 4-7 b (**Appendix 2, Policy Report p. 1202**), which was provided to the PED RC for consideration.

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 (**Appendix 1, Policy Report p. 1202**) and the unsolicited comment received related to Standard 4-7 b (**Appendix 2, Policy Report p. 1202**), as well as the recommendation of the PED RC following its April 30, 2024 meeting to add a question to the Annual Survey with future consideration of data (**Policy Report p. 1202**).

The PED RC carefully reviewed the proposed addition to the Annual Survey found in **Policy Report p. 1202** 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 survey question provided in **Appendix 2**, as modified, 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 expressed concern that program directors may be unprepared to provide the requested data in the new Annual Survey question and believed notice to the pediatric dentistry

program directors of this addition to the curriculum section of the 2024 Annual Survey is warranted if the new question will be circulated in August 2024. 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 date of the new Annual Survey question during the Winter 2025 meeting, with an additional report to the Commission at that time.

Recommendation: It is recommended that the Commission on Dental Accreditation direct the proposed new survey question found in **Appendix 2** be added to the Curriculum Section of the 2024 CODA Annual Survey, which will be 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, and a report to the Pediatric Dentistry Review Committee and Commission in Winter 2025.

It is further recommended that the Commission on Dental Accreditation direct CODA staff to notify all pediatric dentistry program directors of the additional survey question in the Curriculum Section of the 2024 Annual Survey.

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 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

At its Summer 2023 meeting, the Commission directed that the proposed revisions to Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry be distributed to the appropriate communities of interest for review and comment, with comment due June 1, 2024, for review at the Summer 2024 Commission meeting.

This document represents the proposed revisions based upon review of comment received from communities of interest from August 11, 2023 to June 1, 2024.

This document will be considered by the Commission in Summer 2024.

Revisions in RED, circulated August 11, 2023 to June 1, 2024

Revisions in GREEN, additions following consideration by the Review Committee in Summer 2024

Additions are Underlined;
~~Strikethroughs~~ indicate Deletions

Accreditation Standards for Advanced Dental Education Programs in Pediatric Dentistry

**PROPOSED REVISIONS TO ACCREDITATION STANDARDS FOR ADVANCED
DENTAL EDUCATION PROGRAMS RELATED TO SPONSORING INSTITUTION
AND AUTHORITY TO OPERATE**

Additions are underlined; Deletions are ~~stricken~~

**PROPOSED REVISIONS FOR ALL ADVANCED DENTAL EDUCATION
STANDARDS:**

Definition of Terms:

Health Care Organization: A Federally Qualified Health Center (FQHC), Indian Health Service (IHS), Veterans Health Administration system (VA), or academic health center/medical center/ambulatory care center (both public and private) that is 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).

PROPOSED REVISIONS FOR STANDARD 1 FOR DENTAL PUBLIC HEALTH, ENDODONTICS, ORAL AND MAXILLOFACIAL PATHOLOGY, ORAL AND MAXILLOFACIAL RADIOLOGY, ORTHODONTICS AND DENTOFACIAL ORTHOPEDICS (RESIDENCY), ORAL AND MAXILLOFACIAL SURGERY (RESIDENCY), PEDIATRIC DENTISTRY, PERIODONTICS, AND PROSTHODONTICS:

Standard 1-Institutional Commitment/Program Effectiveness

~~Advanced dental 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 dental education programs **must** be accredited by an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). Educational institutions that sponsor advanced dental education programs **must** be accredited by an agency recognized by the United States Department of Education. Health care organizations that sponsor advanced dental education programs 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) or receive regular on-site inspections through the Health Resources and Services Administration Operational Site Visit (HRSA-OSV) process. The bylaws, rules and regulations of hospitals or health care organizations that sponsor or provide a substantial portion of advanced dental 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.

Examples of evidence to demonstrate compliance may include:

- Accreditation certificate or current official listing of accredited institutions from a United States Department of Education recognized accreditation organization
- Evidence of successful achievement of Service-specific organizational inspection criteria
- Accreditation certificate or current official listing of accredited institution from an accreditation organization recognized by the Centers for Medicare and Medicaid Services (CMS). For example: Accreditation Association for Ambulatory Health Care (AAAHC); Accreditation Commission for Health Care, Inc. (ACHC); American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF); American Osteopathic Association Healthcare Facilities Accreditation Program (AOA/HFAP); Center for Improvement in Healthcare Quality (CIHQ); Community Health Accreditation Program (CHAP); DNV GL-Healthcare (DNV GL); National Dialysis Accreditation Commission

(NDAC); The Compliance Team (TCT); The Joint Commission (JC).

Advanced dental education programs conferring a certificate **must** have state or federal approval to operate and, as applicable, to confer a certificate. Advanced dental education programs conferring a degree **must** have institutional accreditation and authority to confer a degree.

Intent: The educational program demonstrates either: a) documentation of receipt of federal aid as evidence to operate, or b) documentation of a state business license as evidence to operate. Additionally, as required by the state, the program demonstrates authority through an appropriate state agency when issuing a certificate of completion. If conferring a degree, the program demonstrates authorization from its institutional accrediting agency.

Examples of evidence to demonstrate compliance may include:

- State license or federal authority documenting the institution's approval to operate and confer a credential
- Institutional accreditation indicating approval to confer a degree

PROPOSED ADDITION TO THE ANNUAL SURVEY CURRICULUM SECTION FOR PEDIATRIC DENTISTRY EDUCATION PROGRAMS RELATED TO STANDARD 4-7

Additions are Underlined:

What is the average number of experiences per student/resident in using minimal and moderate sedation during the 2023-2024 academic year?

Make sure to enter the number of patients divided by the number of students/residents, NOT the total number of patients for the entire program.

| | <u>Less than 4 years</u> | <u>4 years to less than 9 years</u> | <u>9 to less than 13 years</u> | <u>13 years and above</u> |
|--------------------------|--------------------------|-------------------------------------|--------------------------------|---------------------------|
| <u>Minimal sedation</u> | | | | |
| <u>Moderate sedation</u> | | | | |