Guidance on the core content of an undergraduate curriculum in special care dentistry

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IN BRIEF

- Stresses the increasing likelihood of dental graduates seeing a number of patients with special healthcare needs in their careers.
- Outlines how the International Association for Disability and Oral Health (iADH) has initiated the development of undergraduate curriculum guidance in special care dentistry.

This paper has been previously published in the *Journal of Disability and Oral Health* and provides guidance on the core content of an undergraduate curriculum in special care dentistry by featuring three abstracts, published over the last year in the *European Journal of Dental Education*, on the context and methodological approach to the curriculum process.

Graduates in dentistry are increasingly likely to see a significant number of patients with special healthcare needs in the course of their practising lives. Their confidence and willingness to provide care for this diverse group of patients is closely correlated to the quality and content of their undergraduate education in special care dentistry (SCD).^{2,3}

In response to requests from educators worldwide, the International Association for Disability and Oral Health (iADH) has initiated the development of undergraduate curriculum guidance in SCD through a consensus process involving leading experts in SCD from 32 countries.⁴ The iADH curriculum is defined in statements of learning outcomes and describes learning and teaching methods, assessment and feedback designed to provide undergraduates with the knowledge, skills and attitudes desirable in SCD. The final curriculum document is available for download from the iADH website (www.iadh.org).

Three scientific articles have been published in the *European Journal of Dental Education (EJDE)* over the last year, which document the context and the methodological approach to the curriculum process. The first publication, by Faulks *et al.*, 1 explores education in SCD as a means of

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Accepted 27 June 2013 DOI: 10.1038/sj.bdj.2013.958 [®]British Dental Journal 2013; 215: 349-350 reducing inequalities in oral health for people with disabilities. The second publication by Dougall *et al.*,⁴ details the expert Delphi Process used to produce the iADH consensus document; the recommendations from which are described in the final publication (Dougall *et al.*),⁵ where the suggested curriculum is mapped across all domains of an undergraduate curriculum.

ONLINE ABSTRACTS IN *EUROPEAN JOURNAL OF DENTAL EDUCATION*

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The value of education in special care dentistry as a means of reducing inequalities in oral health

Faulks D, Freedman L, Thompson S, Sagheri D, Dougall A. The value of education in special care dentistry as a means of reducing inequalities in oral health. *Eur J Dent Educ* 2012; **16:** 195–201. DOI: 10.1111/j.1600-0579.201 2.00736.x. Online article available at http://onlinelibrary.wiley.com/doi/10.1111/j.1600-0579.2012.00736.x/full (accessed July 2013).

People with disability are subject to inequality in oral health both in terms of prevalence of disease and unmet healthcare needs. Over 18% of the global population is living with moderate to severe functional problems related to disability, and a large proportion of these persons will require special care dentistry at some point in their lifetime. It is estimated that 90% of people requiring special care dentistry should be able to access treatment in a local, primary care setting. Provision of such primary care is only possible through the education and training of dentists. The literature suggests that it is vital for the dental team to develop the necessary skills

and gain experience treating people with special needs in order to ensure access to the provision of oral healthcare. Education in special care dentistry worldwide might be improved by the development of a recognised academic and clinical discipline and by providing international curricula guidelines based on the International Classification of Functioning, Disability and Health (ICF, WHO). This article aims to discuss the role and value of promoting and harmonising education in special care dentistry as a means of reducing inequalities in oral health.

Developing a dental undergraduate curriculum in special care dentistry-by consensus

Dougall A, Pani S C, Thompson S, Faulks D, Romer M, Nunn J. Developing an undergraduate curriculum in special care dentistry – by consensus. *Eur J Dent Educ* 2013; **17:** 46–56. DOI: 10.1111/eje.12011. Online article available at http://onlinelibrary.wiley.com/doi/10.1111/eje.12011/full (accessed July 2013).

It has been reported that healthcare providers often lack the skills set to provide care for people with disabilities, leading to inequalities in health and reduced access to healthcare. Newly graduating dentists are likely to see a significant number of patients with special healthcare needs in the course of their practicing lives, however, there is evidence of national and international variation in the availability and of education and training at the undergraduate level in this important, emerging area. The quality and content of under-graduate education in special care dentistry has been shown to correlate with students' confidence, and their expressed willingness, towards providing care for

patients with special healthcare needs in their future practice.

The aim of this study was to use information from a three-round Delphi process, continued into a face-to-face meeting, in order to establish consensus on what constitutes the essential core knowledge, skills and attitudes required by a newly qualified dentist, so that they are able to deliver patient care to diverse populations following graduation. A high level of agreement was established among an international panel of experts from 30 countries. The final core items identified by the panel showed a paradigm shift away from the traditional emphasis on medical diagnosis within a curriculum towards an approach based on the International Classification of Functioning (ICF) with patient-centred treatment planning for people with disabilities and special healthcare needs according to function or environment. Many of the core skills identified by the panel are transferable across a curriculum, and should encourage a person-centred approach to treatment planning based on the function, needs and wishes of the patient rather than their specific diagnosis.

Guidance for the core content of a curriculum in special care dentistry at the undergraduate level

Dougall A, Thompson S A, Faulks D, Ting G, Nunn J. Guidance for the core content of a curriculum in special care dentistry at the undergraduate level. *Eur J Dent Educ* 2013; DOI: 10.1111/eje.12054. Online article available at http://onlinelibrary.wiley.com/doi/10.1111/eje.12054/full (accessed September 2013).

Given the rapidly changing demography of populations worldwide, dental professionals of the future need to be able to meet the challenge posed by the evolving landscape in healthcare needs. Leading institutions are now embedding teaching and learning in special care dentistry (SCD) within their curricula, to provide students with the knowledge, skills and attitudes to meet the oral health needs of vulnerable groups within their communities. The International Association for Disability and Oral Health (iADH) has initiated the development of undergraduate curriculum guidance in SCD through a consensus process. The curriculum in SCD is defined in statements of learning outcomes with many of the skills being transferable across the undergraduate course. This curriculum includes examples of teaching and assessment, designed to enhance critical thinking in relation to SCD and to promote positive attitudes towards disability and diversity. The learning outcomes are designed to be readily adapted to conform to the generic profiles and competencies, already identified in undergraduate frameworks by global educational associations, as well as meeting the requirements of professional regulatory bodies worldwide. Suggestions for teaching and learning are not intended to be prescriptive; rather, they act as a signpost to possible routes to student learning. Ideally, this will require that students have a sufficiently diverse patient case mix during their undergraduate studies, to achieve the required levels

of confidence and competence by the time they graduate. Clinical care competencies in SCD emphasise the need for learners to broaden their theoretical knowledge and understanding through practical experience in providing care for people with special healthcare needs. It is crucial to the development of equitable dental services for all members of a community, that these learning outcomes are embedded into evolving curricula but most importantly, that they are evaluated and refined in a dynamic way with shared learning for all teachers.

This paper was first published in the Journal of Disability and Oral Health, Volume 14, Issue 2 (June 2013). The EJDE has very kindly agreed to the abstracts being shared. The abstracts have been reprinted with the permission of John Wiley & Sons Ltd. Professor Michael Manogue, Editor of the EJDE has recommended free access to the selected papers to allow the iADH membership and the wider community access to these publications.

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