



**British Society for
Disability and Oral Health**
UNLOCKING BARRIERS TO CARE

DEVELOPING AN UNDERGRADUATE CURRICULUM IN SPECIAL CARE DENTISTRY

Prepared by a Working Group of the Teachers Group of BSDH:

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July 2004

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There is broad agreement internationally that a holistic approach to patient care, and in particular, the so-called ‘special needs’ patient, is lacking in many dental undergraduates ¹. Periodic evaluation of undergraduate courses reveals an ad-hoc approach to education in Special Care Dentistry ^{2,3}.

It is no longer tenable, within the framework of the Disability Discrimination Act ⁴, the Human Rights Act ⁵ as well as the rapidly changing demographic trends in the population that new graduates can qualify in ignorance of the impact of these for the wider community they serve. Whilst there is general awareness of the pressure on curricula to incorporate newer areas, it is unacceptable that trainee health care professionals are not given optimal exposure to the oral health needs of the most vulnerable members of society. Teachers acknowledge that only a minority of new graduates are likely to have a sustained interest in Special Care Dentistry (SCD) nevertheless, the majority of graduates ought to have sufficient exposure so that they:

“Are able to recognise their duty of care in the attainment of achievable treatment outcomes for patients with specific medical, physical or mental health problems and to know the appropriate pathways for referral of patients whom they are unable to treat or who require further assessment.”

(Thompson et al, 2001) ⁶

The proposed training programmes for postgraduates in Special Care Dentistry (SCD)⁷ has focussed the attention on activities at an undergraduate level, acknowledging that there should be a seamless transition between one stage and another of a person’s career, consistent with the philosophy of lifelong learning ⁸.

Although not explicit, the General Dental Council’s curriculum document, ‘The First Five Years’ ⁸ outlined disciplines and subject matter that must be an integral part of a dental course and those relevant to SCD are listed, together with the relevant section of the document, in Appendix 1.

In order to progress the development of a curriculum for undergraduates, a small group of teachers from most of the UK and Irish Dental Schools met in Birmingham in 2002 at the Spring meeting of the British Society for Disability and Oral Health (BSDH). The mandate for the group was to review teaching and learning activities in the area of SCD and to consider the following:

- ? Course design – partnership between academic and public dental service?
- ? Minimum, core requirements in a course for Special Care Dentistry – or elective?
- ? Number of staff needed to provide a viable course – skills required?
- ? Desirable elements/ remit of Special Care Dentistry?
- ? Concepts of education delivery – lectures, attachments, PBL, case-based?
- ? Assessment methods – reflective log books, competences
- ? What are employers/commissioners’ expectations?
- ? What are the opportunities for research?

What became evident at the meeting was that, with notable exceptions, very few Dental Schools paid much more than lip service to coverage of topics within SCD. Following on this meeting, another was held at the next Spring meeting of BSDH in Edinburgh in 2003, with a remit to review the document produced in 2002 and to further develop a structure to a proposed undergraduate course, in the light of the publication of the General Dental Council document, ‘The First Five years’⁸ as well as the requirements under the QAA Consultation: benchmarking Academic Standards document for Dentistry⁹ (Appendix 1). At the conclusion of the meeting a small working group was established to refine the proposed teaching and learning document.

The Working Group has met to review the topic areas, competencies, teaching, learning and assessment methods and these are presented in outline below. The Executive of BSDH and the Teachers Group have now considered these draft proposals. This revised document was circulated to the remainder of the BSDH members at their meeting in Manchester in May 2004. It is anticipated that the final document will serve as a template for Dental Schools who will be revising their curricula in the light of the General Dental Council publication, ‘The First Five Years’⁸.

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UNDERGRADUATE CURRICULUM IN SPECIAL CARE DENTISTRY

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Objective 1 – Disability Awareness

Major competency

At the end of the course, a competent student will know how to acknowledge the person first and the impairment second. At the time of graduation the competent student will demonstrate positive attitudes towards diversity and have knowledge of managing patients from different social and ethnic backgrounds. The student will demonstrate skills in empathic listening and be able to recognise and manage barriers to communication. They should be able to deal with complaints from patients and/or carers and demonstrate leadership qualities for team management. The student will have the knowledge to make referrals to other professional and support groups.

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|---|---|--|--|---|
| People first, impairment later Clinical years | Greeting the person Acknowledging carer Sensitivity towards the wishes of the person | Impaired people's wishes to be recognised Acknowledging difference Range in presentation impairment Detriment of stereotyping | Presentations from disability equality trainers Chairside teaching | Multiple Choice Questions Short Answer Questions |
| Communication Clinical years | Recognising differing communication needs and organising appropriate help Recognising the role of the carer Recognition of need for empathic approach | Different communication aids Skills required to be empathic Roles of extended interprofessional team including other agencies and support groups involved in the lives of people with disabilities | Chairside teaching Role-play seminars with experienced staff. Video recording of scenarios with actors | Multiple Choice Questions Short Answer Questions OSCE station |

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|---|--|---|---|--|
| Barriers Practice at the chairside – clinical years | Methods to reduce physical barriers Ability to recognise and counter discrimination | Recognition of physical and attitudinal barriers Ways in which society makes an impairment a disability Use of political imperatives to remove barriers | Chairside teaching Case-based learning in senior years | Questions in Final exam paper Review of portfolio – summary analyses of situations where empathy was required |

Objective 2 – Ethics, consent/assent, confidentiality and non-accidental injury

Major competency

At the time of graduation the competent student will be able to obtain informed consent/assent, cognisant of the legal framework in which they work. The student should be able to relay bad news and expedite the next stage of a referral of a suspected case of non-accidental injury, effectively and with empathy so as to minimise distress but to optimise health outcomes for the patient.

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|---|--|--|---|
| Consent/assent Learning Material delivered during pre-clinical courses Practice: all clinical years | Obtaining informed consent for the young person under 16 years and agreement to treat for adults with learning difficulties | Obtaining consent for unaccompanied minors Requirements for assent/agreement for adults with incapacity to consent Role of family and carers | Seminars with actors Chairside teaching | Structured Clinical Operative Test (SCOT) |
| Confidentiality Senior years | Respecting and securing patient confidentiality Resolving ethical dilemmas | When to pass on information to protect patients and/or staff Who to contact and how to seek advice Interface with carers | Seminars with actors Case-based | Multiple Choice Questions OSCE station |

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|--|---|--|--|
| Giving bad news Clinical years | Communicate bad/difficult news with empathy Conveying appropriate optimism without unrealistic prospects Managing distress | Support of team members when bad news is given Voluntary sector support services for patients and carers | Role play seminars with experienced staff and actors | Review of portfolio –summary analyses of situations where bad news was relayed to patient(s) |
| Non Accidental Injury / suspected abuse Senior years | Making an accurate record of events leading to suspicion of abuse Make appropriate referrals Take responsibility for follow-up | Knowledgeable about the existence, prevalence and signs of NAI | Lectures and Seminars Hospital policies | Modified essay questions and/or MCQs at end of year exam papers |

Objective 3 – Legislation

Major Competency

At the end of the course, a competent student will know the requirements of regulatory bodies in dentistry and their responsibilities to them.

The newly qualified dentist will be able to recognise the way in which the requirements of legislation relating to dental practice are addressed, in relation to patient care, employee/employer responsibilities, clinical governance and continuing professional development.

| Subject area and stage in curriculum | Competent in | Knowledge of: | How accessed: | How assessed: |
|---|---|---|--|--|
| Statutory framework Final clinical year | Accessing information about the regulatory bodies and its significance to them as clinicians | Roles and functions of the different regulatory bodies | Presentations from members of regulatory bodies Outside visits to regulatory authorities | Multiple Choice Questions Short Answer Questions |
| Disability Discrimination Act Human Rights Act Health and Safety legislation Equal Opportunities State Disability benefits Clinical years | Recognising the way in which the dentist has to address the requirements of the legislation and how this relates to the provision of care | How to access information on relevant legislation Relevant sections of the legislation which relates to dental practice How the legislation impacts on the provision of dental care | Lectures Seminars Practice visits to see how legislation impacts on the clinical environment (CDS/GDS) | Portfolio Given case scenarios Question on Finals exam paper |

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|---|--|---|---|---|
| Conscious sedation and general anaesthesia Clinical years | Referral of patients for Sedation or GA | Guidelines for the provision of care under sedation and GA Responsibilities of the referring and operating dentist | Lectures Seminars | Question on end of year exam paper |
| Safe handling and lifting Prior to start of clinical course | Safe handling of patients as part of the team, with appropriate aids Positioning the disabled patient to ensure comfort during treatment for both patient and dental team | Guidelines relating to safe handling and moving Methods for safe moving of disabled patients and resources available to facilitate this Ergonomic design features of equipment for providing dental care in a clinic or domiciliary setting | Practical training Seminars with trainers in manual handling | By observing patient management Given case scenarios Video evaluation |

Objective 4 – Public health aspects of Special Care Dentistry.

Major Competency

At the end of the course, a competent student will know the differing prevalence of oral diseases and conditions in people with disabilities and the reasons for these differences.

The newly qualified dentist will have a sound knowledge of the different dental services and the services allied to health which are available for people with disabilities. They will be able to recognise the specific needs of people with disabilities with regard to the delivery of oral care and be aware of the different roles of the dental team in delivering this care. The new graduate will be able to help people with disabilities and their carers make informed choices which are efficient and cost effective.

| Subject Area and stage in Curriculum | Competent in | Knowledge of: | How accessed: | How assessed: |
|--|---|---|---|--|
| Service Provision Clinical years | Recognising the roles of different dental services available for people with disabilities (GDS, CDS, HDS) | The full range of facilities provided by the various service providers How these services exist to complement each other Sources of Oral Health promotion information relevant for different impairment types | Lectures Seminars Visits to out reach clinics and the GDS | Portfolio |
| Support Services Clinical years | Understanding the roles of the significant services allied to health available for people with disabilities | Services provided by social services and voluntary sectors for people with disabilities | Lectures Seminars Visits to voluntary groups; day centres etc | Case presentation Portfolio Question on finals paper |

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|---|--|--|--|---|
| Health Economics Senior year | Helping people with disabilities and their carers to make informed choices that are cost effective and efficient | Relative costs of health care for people with disabilities How financial resources are allocated within the NHS, with particular reference to dental services How funding is allocated for people with disabilities in relation to different impairments and the involvement of user groups. | Seminars Lectures Projects | Question on Finals exam paper |
| Team Work Clinical years | Working as a team member when delivering care to people with disabilities. | The roles and responsibilities of the team who provide care to those with disabilities How the team works together to provide a high level of care to those with disabilities | Seminars Working with hygienists and therapists on clinics Out reach clinics | Case report On clinic continuous assessment |
| Domiciliary Care Clinical years | Deciding when it is appropriate to arrange domiciliary (out of surgery) care for people with disabilities | Guidelines for domiciliary care Health and safety issues relating to domiciliary care Types of treatment available in the domiciliary setting Limitations of domiciliary care Role of the PCD in the provision of domiciliary care Arranging referral of patients for domiciliary care. | Seminars Outreach sessions | Case presentations Portfolio Question on exam paper |

Objective 5 – Understanding of impairments

Major competency

At the end of the course, a competent student will know about the commoner forms of impairment seen in primary dental care. At the time of graduation, the competent student should be able demonstrate a positive attitude to the person with an impairment and know where to obtain further information about different impairment types. The student should be able to locate resources, including patient support groups

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|---|---|--|------------------------------|
| Impairments –general Clinical years | Displaying a positive attitude towards the person with an impairment Distinguishing the features of the commoner impairments Relating the impairment to relevant oral/dental features | A range of different impairments The potential for impairments to be multiple The way in which beliefs and attitudes impose/reduce barriers | Chairside teaching Lectures Online databases | Question in exam papers |
| Impairments –dental Clinical years | Referring to secondary care when unfamiliar oral/dental conditions and/or anomalies encountered Writing a letter of referral and copy to patient | Conditions, habits or specific oral/dental features seen in the commoner impairments | Chairside teaching Lectures Seminars | Question in Final exam paper |
| Information retrieval Clinical years | Searching out relevant information on impairment and disability. | Resources and electronic databases for information on impairments and services | Information and technology skills | Case study |

Objective 6 – Patient assessment –History, diagnosis and treatment plan

Major competency

At the end of the course, a competent student will be able to carry out clinical examination and treatment planning taking sensitive account of acquired or developmental impairments. At the time of graduation the competent student will be able to examine a patient with mild to moderate intellectual and / or physical impairments and to determine adjuncts required to provide dental care. The student will demonstrate an ability to carry out a differential diagnosis and after consultation with the patient and carer (s) produce a pragmatic oral care plan that considers individual needs. They should be able to assess the reliability of recall and the competence of the person to give consent.

| Subject area and stage in Curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|---|--|---|--|
| History and examination Clinical years | Taking a sensitive comprehensive history with consideration of: developmental or acquired impairments, input from carers, adjuncts required for provision of oral care and reliability of recall and competence to give consent. Examination of a patient with mild to moderate intellectual and / or physical impairments | Additional investigations required and interpretation of test results. How to examine a patient with challenging behaviour. | Lectures and seminars Case based studies Chairside teaching | Structured Objective Clinical Tests Portfolio |

| Subject area Stage in Curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|--|---|---|--|
| Diagnosis Clinical years | Producing a differential diagnosis | The commonest oral / dental conditions related to the impairment. Implications of impairment related diagnoses | Lectures and seminars Chairside teaching | MCQs/SAQs in exam papers |
| Treatment planning Fourth / Fifth year | Produce an outline oral care plan Consulting with patient and carer (s) to arrive at a pragmatic oral care plan | The need for adjuncts and contact with other agencies to discuss: time/number of visits to accomplish treatment plan sequelae of treatment (s) proposed. Facilities and services offered in secondary / tertiary care Appropriate care pathways | Chairside teaching Case-based learning in senior years | Question on exam paper OSCE Station SCOT |

Objective 7 – Management of oral/dental conditions seen with impairments

Major competency

At the time of graduation the competent student will be able to provide basic dental care for these people. The student should be able to demonstrate a positive attitude to the person with an impairment.

| Subject area and stage in curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|--|---|---|------------------------------------|---|
| Dental conditions Clinical years | Diagnosing and managing caries in people with disabilities, by routine methods. Managing periodontal disease in non-challenging patients and instructing carers in oral hygiene options for home care. Discriminating between different types of tooth wear and the ability to relate to aetiology in order to manage appropriately | Current methods of caries management. Aids and techniques to help with caries treatment and oral hygiene indices to monitor oral/dental health. Need for inter-professional care for some oral and dental conditions. | Chairside teaching Lectures | Question in exam papers Competence test in final year (SCOT) |
| Self-inflicted trauma Final year | Recognise the condition, its aetiology and refer appropriately for management | Treatment options. The role of primary dental care practitioner in review | Chairside teaching | Question in exam paper |
| Drooling and xerostomia Final year | Recognise the conditions and be able to discuss the options for management. Referral for specialist help | Treatment options, sequelae of treatment. Facilities for secondary care | Chairside teaching | Question in exam paper |

| Subject area and stage in Curriculum | Competent in: | Knowledge of: | How accessed: | How assessed: |
|---|--|---|---|---|
| Malocclusion Clinical years | Recognise the conditions and be able to discuss the options for management. Referral for specialist help | Treatment options, sequelae of treatment. Facilities for secondary care | Lectures Chairside teaching | Question in exam paper |
| Cooperation and behaviour management Clinical years | Basic behaviour management skills; recognise limitation of skills and patient's need for adjuncts. Obtaining consent for procedures under conscious sedation and GA for people with disabilities Assessment of patients for Sedation and GA Management of Sedation and GA related emergencies | Options available to manage cooperation and other behavioural problems. Scope and limitations of conscious sedation and GA. Practical application of conscious sedation. Acknowledgement of the need for continuing training and experience in conscious sedation techniques | Chairside teaching Placements to GA and Sedation units | Question in exam paper Case presentation Log book |
| Preventive care All clinical years | Prescribing appropriate preventive care plans for high risk patients. Toxic doses of fluoride agents. Writing a prescription Advising people with disabilities on the most appropriate practical oral hygiene aids. | Protocols for preventive care for people with disabilities. Risk assessment. Conditions which can influence oral health, including physical disabilities and medical conditions /treatment. Preventative strategies for people with disabilities. Range of oral hygiene aids suitable for people with disabilities. | Lectures Chairside teaching | Question in Final exam paper |

APPENDIX 1

SPECIAL CARE DENTISTRY

Sections of ‘The First Five Years - A Framework for Undergraduate Dental Education’ pertinent to Special Care Dentistry:

- 26: ‘Students should gain an awareness of treating medically + physically compromised patients’
- 63: ‘The Disability Discrimination and the Human Rights Acts’
- 66: ‘Provide appropriate care for vulnerable people’
- 67: ‘Establishing a patient’s capacity to consent’
- 77: ‘Presentation of oral and dental diseases and disorders in elderly people and the range of psychological and social factors involved in such situations’
- 81: ‘Students should be made aware of the special dental needs of children with disabilities....’
- 84: ‘Have an understanding of the social, cultural and environmental factors that contribute to health or illness’
- 104: ‘All students must have a range of practical experience in the administration of inhalation and intravenous conscious sedation’
- 105: ‘All students should receive instruction in the referral of patients for treatment under general anaesthesia in a hospital setting’
- 111: ‘Be familiar with the main medical disorders that impinge on dental treatment’ and
‘Be familiar with the complex interactions between oral health, nutrition, general health, drugs and diseases that can have an impact on dental care and disease’

Quality Assurance Agency for Higher Education: Benchmarking Academic Standards: Dentistry, section of relevance to Special Care Dentistry:

3.22 Special Needs

Graduating students should be able to:

Recognise their duty of care to manage the oral health of the patient with special needs (including the additional considerations for the dental team) and involve the patient’s carer where appropriate.

Manage the dental health care needs of those who may be considered to be socially excluded

Appendix 2

Teachers Group Members (2002-):

| | |
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| Sweeney, Petrina | Glasgow Dental Hospital |
| Wilson, Kathy | South Tyneside CDS and New- -castle Dental School and Hospital |
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The College of Dentistry offers comprehensive and advanced dental education and research opportunities, powered by innovative methods and cutting-edge technology, and enriched by a diverse and collaborative community of faculty, staff and students. Curriculum innovations have resulted in the College receiving the prestigious William J. Gies Award from the American Dental Education Association. Additionally, the College has implemented a sequence of improvements in clinical education to prepare students to provide oral health care to traditionally underserved patients, and to advocate for unive Request PDF | On May 13, 2013, Clive Friedman and others published iADH Develops an Undergraduate Curriculum in Special Care Dentistry | Find, read and cite all the research you need on ResearchGate.Â 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.