General Dental Council



Paediatric Dentistry Specialty Training Curriculum

Approved by GDC Registrar on: 22 June 2023

Foreword

This specialty curriculum sets out the specialist knowledge, skills, and capabilities for the attainment of the award of the Certificate of Completion of Specialty Training (CCST) and admission onto the Specialist List for Paediatric Dentistry.

It also demonstrates how Paediatric Dentistry meets the GDC's Principles and Criteria for Specialist Listing. This standards-driven, transparent approach protects patients, the public, employers, and others through preparation of dentists to deliver high quality, safe, patient, and public-centred care as specialists within the UK healthcare system.

The curriculum has been written by the Paediatric Dentistry Specialty Advisory Committee (SAC), a constituent committee of the Advisory Board for Specialty Training in Dentistry (ABSTD). The SAC is responsible for and owns the specialty-specific content and learning outcomes of the relevant specialty curriculum. They are also responsible for the choice of assessment of both the generic and the specialty-content of the curriculum.

The delivery of the curriculum via training and assessment providers is quality assured by the GDC using the Standards of Specialty Education. Successful completion of the relevant specialty training and assessment will lead to the award of a Certificate of Completion of Specialty Training (CCST) and successful candidates will be eligible to apply for inclusion on the relevant GDC specialist list and be eligible to use the title of "Specialist".

This curriculum will take effect for new trainees from September 2024.

Acknowledgements

The Paediatric Dentistry curriculum was led by Dr Richard Balmer with the following in the working group:

- Ms Andrea Aspinall, Specialist in Paediatric Dentistry
- Dr Richard Balmer, Consultant in Paediatric Dentistry
- Professor Siobhan Barry, Consultant in Paediatric Dentistry
- Ms Sophie Hughes, Consultant in Paediatric Dentistry
- Ms Alison James, Consultant in Paediatric Dentistry
- Ms Fiona Lafferty, Consultant in Paediatric Dentistry
- Ms Gillian Richardson, Consultant in Paediatric Dentistry
- Mr Sanjeev Sood, Consultant in Paediatric Dentistry

with input from members of the Paediatric Dentistry Specialty Advisory Committee across the nations and included a trainee representative.

SECTION A: PURPOSE STATEMENT FOR PAEDIATRIC DENTISTRY

1. Introduction to the Paediatric Dentistry Specialty

The GDC specialty of Paediatric Dentistry is the practice, teaching and research in comprehensive oral health care for children and young people. It is age related, normally regarded as 0-16 years, at which stage the children transition to adult oral health services. The rationale for this distinction is that children and young people are unique in their stages of development, oral disease, behaviour and oral health needs, and identifies oral health as part of general health and wellbeing which contributes to the development of a healthy child.

2. Paediatric Dentistry improving the health of patients and the population

Paediatric dentistry includes the provision of oral healthcare to children and young people with extensive oral disease, those whose oral health care is complicated by intellectual, medical, physical, social, psychological and/or emotional disability, have developmental disorders of the teeth and mouth, have suffered traumatic dental injuries and children and young people who are either too anxious or too young to accept routine dental treatment if required. The specialty also leads on the safeguarding of children in the dental environment.

Delivery of the oral health care management of a child and young person is in an outpatient, primary care, sedation based and general anaesthetic environment.

The specialist in paediatric dentistry supports, leads and provides the pathway of care for children with significant modifying factors including severity of disease or dental anomalies with the possible addition of multi-disciplinary and interdisciplinary care, difficulty to co-operate either due to age or severe anxiety where the adjunct of specific behavioural management techniques, sedation or general anaesthesia is required and medical and social comorbidity and disabilities which require support and links with partner professionals.

The specialist should provide information to inform and support health care professionals and other partners to help improve oral health and provision of services within the wider health care setting.

Teaching, training, and research are important additional responsibilities the Specialist in Paediatric Dentistry supports. This can involve combining their clinical work with research, teaching and training within the differing clinical settings of primary, secondary and tertiary care. Teaching both undergraduate and postgraduate students and other health care professionals are an important part of the speciality, as you oversee the development of future colleagues.

3. Entry to the training programme

Entry to a specialty training programme is through competitive entry and the recruitment process will ensure that applicants are assessed against the essential and desirable criteria contained within the person specification.

A specialty trainee must be registered with the General Dental Council. It is desirable that during previous early years training the individual has experienced work in as many sectors of dental provision as possible. Evidence of excellence in terms of attributes such as motivation, career commitment will be expected, as will an ability to demonstrate the competences and capabilities required for entry to specialist training, either by successfully completing a period of agreed dental foundation/vocational and core training or by demonstrating that those competences have been gained in another way.

4. Outline of the training programme

Training programmes should include suitable placements/rotational arrangements to cover all the necessary areas of the curriculum and may include an appropriate balance between dental teaching hospitals/schools, children's hospitals, district general hospitals, community dental service and specialist clinical environments, such that each trainee gains the breadth of training required for satisfactory completion of the curriculum.

The training programmes are usually based around a training centre, normally comprising a dental teaching hospital/school together with other associated, recognised, and validated training environments.

5. Training specific to Paediatric Dentistry

It is anticipated that 4 years would normally be required to satisfactorily complete the paediatric dentistry curriculum to the required depth and breadth. However, the focus of specialty training is on achieving the HLOs rather than a prescribed duration therefore the RCP process allows for individual adjustments to be made to this where appropriate.

Less than full time training is permitted in accordance with the Dental Gold Guide. Full-time trainees can apply to become LTFT trainees and LTFT trainees can apply to revert to full-time training by arrangement and with the approval of the Postgraduate Dental Dean. For more information, refer to the Dental Gold Guide.

6. Evidence and assessment

The purpose of assessment is to reassure the trainee, their employer and the public that they have achieved the required outcomes associated with their chosen specialty

The Higher Learning Outcomes (HLOs) should not be demonstrated through singular assessments. A programmatic assessment approach should be used in the workplace in which there are multiple assessment points over time, undertaken by multiple assessors with a range of methodologies and sufficient evidence to ensure reliability.

The overall approach to assessment and provision of evidence of attainment in the curriculum is one of flexibility, as far as that is possible. Trainees should focus on 'quality over quantity', utilising assessments which are valid and appropriate to evidence the HLOs.

The principle of Workplace Based Assessments (WPBA) is that trainees are assessed on work that they undertake on a day-to-day basis and that the assessment is integrated into their daily work. The curriculum does not stipulate minimum numbers of assessments for WPBAs. When there is a requirement by specialty, this can be found in the specialty assessment strategy which is available at Higher Specialist Training
Documents and Curricula— Royal College of Surgeons (rcseng.ac.uk).

A full list of WPBAs can be found in the glossary of assessment terms. WPBA tools will include but are not limited to:

- Clinical examination exercise
- Case based discussions
- Direct observation of procedural skills
- Procedure based assessments
- Multisource feedback
- Patient/user feedback

Training courses may be an effective way of gaining the underpinning knowledge and skills for some of the HLOs. However, attendance at a course will not normally be sufficient evidence of competence; assessors will be looking for evidence of competence and how the learning is applied in practice.

Continuous assessment throughout training will be undertaken by the educational supervisor, clinical supervisors and other educators involved in training, using a range of WPBAs. All assessments completed in the workplace have a formative function, with trainees given contemporaneous feedback on their performance, and these all contribute to the decision about a trainee's progress. The assessment process should be initiated by the trainee, who should identify opportunities for assessment throughout their training.

In sections C and D, a list of sources of evidence are provided against each of the HLOs. These are provided as a list of possible sources, and there is no expectation that the full list of sources would be used as evidence of attainment of a particular HLO. Some of the assessments in Section D will be mandatory (for example College examinations), but other forms of assessment should be tailored to the training program/local circumstances/stage of training, and these should be agreed with the Training Provider(s) as part of the RCP process and the Education supervisor(s) as part of a learning agreement. All mandatory assessments are clearly indicated in section D.

In Section C no individual assessment is mandated for all specialties. Further guidance will be provided in the specialty assessment strategy which highlight how the HLOs are best achieved within each programme. This will normally be through application in practice rather than summative assessment, although this may vary by specialty dependent on the range of workplace assessments.

7. Research

Trainees may combine specialty training and academic development with an intention of becoming a clinical academic. The same curriculum outcomes for clinical training are required to be achieved as for any other trainee. Consideration of the required training time will need to be assessed depending on the proposed timetable and academic activities.

Specialists in Paediatric Dentistry are required to understand the principles around research, the skills required in evaluating and interpretation of scientific papers. They should be able to review critically and discuss material from scientific paper and interpret results, analyse data, determine their strength and validity where appropriate. They should be able to use scientific literature, evidence-based dentistry and clinical guidelines to effectively, integrate this information into their clinical practice and where possible be able to contribute and support to the further enhancement of the evidence.

SECTION B: DELIVERING THE CURRICULUM AGAINST THE GDC STANDARDS FOR SPECIALTY EDUCATION

The GDC sets Standards for Specialty Education (<u>Dental Specialty training (gdc-uk.org)</u> and assures that training commissioners and examination providers (collectively referred to as "providers") meet these standards.

The standards relate to:

- Patient protection (training commissioners only)
- Quality evaluation and review
- Specialty trainee assessment

As part of the quality assurance process, the GDC will ensure that training and assessment is designed, delivered and reviewed within a quality framework, that patient safety is at the heart of programme delivery and that assessments are reliable, valid and clearly mapped to the Specialty curriculum learning outcomes. Reports from GDC quality assurance activity are available on the Dental Specialty training (gdc-uk.org) webpage.

SECTION C - GENERIC PROFESSIONAL CONTENT OF THE SPECIALTY CURRICULUM

Section C – Generic Professional Content of the Specialty Curriculum

Domain 1: Professional knowledge and management

Outco	me	Examples
1.1.	Demonstrate they can communicate effectively and respectfully with patients and others and with colleagues	 Effectively and respectfully communicate with patients, relatives, carers, guardians by: consulting with patients and carers in a sensitive and compassionate way giving clear and accurate verbal/oral information with information the recipient wants and needs and avoiding unnecessary jargon giving clear, accurate and legible written information in a form the recipient can understand, with information the recipient wants and needs and avoiding unnecessary jargon making accurate and contemporaneous records of observations or findings in English making information accessible and inclusive by adapting written and verbal communication and tone and adopting appropriate techniques and communication aids/resources to suit others as appropriate assessing their communication support needs and implementing appropriate methods to reduce communication barriers. For example, by using email, video conferencing tools, or any other communication tools suitable for individuals with disabilities or impairments and specifically with patients, relatives, carers, guardians, and others demonstrating ability to communicate effectively and sensitively when delivering bad news recognising own limitations and works within limits of capabilities. Competency in obtaining informed consent
		 Effectively and respectfully communicate with colleagues by: promoting and effectively participating in multidisciplinary, inter-professional team working communicate effectively with referrers regarding patient consultation and treatment ensuring continuity and coordination of patient care and/or management of any ongoing care through the appropriate transfer of information demonstrating safe and effective handover, both verbally and in writing

Outco	me	Examples
1.2.	Demonstrate that they can make decisions, while maintaining professional behaviour and judgement	 They should do this by: maintaining appropriate situational awareness and sensitivity to the impact of their comments and behaviours on others (emotional intelligence) influencing, negotiating, continuously re-assessing priorities and effectively managing complex, dynamic situations and exploring and resolving diagnostic and management challenges
1.3.	Demonstrate they can deal with complexity and uncertainty	 They should do this by: showing appropriate professional behaviour and judgement in clinical and non-clinical contexts demonstrating resilience managing the uncertainty of success or failure adapting management proposals and strategies to take account of patients' informed preferences, comorbidities and long-term conditions supporting and empowering patient self-care and respecting patient autonomy recognises and manages dental emergencies
1.4.	Recognise their legal responsibilities and be able to apply in practice any legislative requirements relevant to their jurisdiction of practice	 They should do this by: understanding, and adhering to, the principles of continuing professional development understanding relevant guidance and law including that relating to equality and diversity, employment, health and safety, data protection etc, with an appreciation that legislation may differ between England, Scotland, Wales and Northern Ireland understanding information governance, data protection and storage and the legal parameters relating to digital and written records in the context of their workplace recognising the need to ensure that publicly funded health services are delivered equitably
1.5.	Recognise and work within the context of a health service and healthcare systems,	They should do this by: understanding the structure and organisation of the wider health and social care systems, including how services are commissioned, funded and audited

	understanding that systems may differ between England, Scotland, Wales and Northern Ireland	 demonstrating an appreciation of how services are deemed to be clinically effective, cost effective or restricted such as on a 'named patient' basis understanding how resources are managed, being aware of competing demands and the importance of avoiding waste having an awareness of how services are held publicly accountable through political and governance systems, public scrutiny and Judicial Review recognise and work towards achieving carbon neutrality within the context of understanding the importance of sustainability in design and delivery of services and demonstrating application of these principles in practice
1.6.	Recognise and demonstrate their role in health promotion, disease prevention and dental population health	 They should do this by: understanding the factors affecting health inequalities as they relate to the practise of dentistry being willing and able to work to reduce health inequalities relevant to the practise of dentistry understanding national and local population oral health needs understanding the relationship of the physical, economic and cultural environment to health and its impact on patients and patient outcomes understanding the role of national and local public health organisations and systems and how the role of a dental specialist supports these organisations in improving the public's dental health
1.7	Recognise the importance of, and demonstrate the ability to practise, personcentred care (PCC), including shared decision making (SDM)	 Understanding that patients are partners with their health care providers providing balanced information about treatment options eliciting the patient's concerns, values and preferences offering support to the patient to help them to reach a decision and making that final decision together. being able to articulate personal values and principles yet show understanding of how these may be different to those of others – patients and colleagues. valuing, respecting and promoting equality and diversity

Outc	iin 2: Leadership and t	Examples
2.1.	Demonstrate understanding of the importance of personal qualities within leadership (focus on self)	 They should do this by: understanding a range of leadership principles and styles and being able to apply and adapt them in practice in a way that is relevant to the work context understanding team dynamics, behaviours and personalities with insight and awareness of own behaviours and their effect on others. Relevant model: NHS Leadership Academy: the nine leadership dimensions
2.2.	Demonstrate understanding of the importance of working with others both within their specialty and the wider healthcare system (working with others).	 They should do this by: being able to seek out the views of others in maintaining and improving specialist services being able effectively to lead/chair multidisciplinary and interprofessional meetings undertaking safe and effective patient handover, both verbally and in writing demonstrating an understanding of leadership responsibilities as a clinician and why effective clinical leadership is central to safe and effective care showing awareness of clinical leadership responsibilities and why effective clinical leadership is central to safe and effective care being confident about challenging and influencing colleagues and the orthodoxy where appropriate being able to lead the process of exploring and resolving complex diagnostic and management challenges leading the formal appraisal process for their teams
2.3.	Demonstrate the importance of planning and an understanding of managing dental specialist services	 They should do this by: understanding and being able to work effectively within the relevant being NHS funding, structures and pathways in their local healthcare system in relation to specialist dental services and the healthcare services they interface with, understanding how to identify, mitigate and manage risk, including understanding local and national risk reporting structures

Outco	ome	Examples
3.1.	Recognise a professional and statutory duty of candour and act accordingly within established governance, legal and regulatory systems, including equality and diversity	 They should do this by: understanding how to raise safety concerns appropriately through local and national clinical governance systems. understanding how to raise concerns where there is an issue with patient safety, dignity or quality of care demonstrating a commitment to learn from patient safety investigations and complaints understanding the process of root cause analysis for investigating and learning from patient safety incidents demonstrating honesty and candour regarding errors in patient care demonstrating familiarity with relevant patient safety directives understanding the importance of sharing and implementing good practice
3.2.	Recognise the impact of human factors on the individual, teams, organisations and systems	 They should do this by: understanding of effects of teamwork, tasks, equipment, workspace, culture and organisation on human behaviour and abilities and the application of that knowledge in clinical settings protecting patients and colleagues from risks posed by problems with personal health, conduct or performance demonstrating an understanding of the learning by reporting and sharing these experiences locally and widely
3.3.	Design and employ quality improvement measures that improve clinical effectiveness, patient safety, care or experience	 They should do this by: using a range of quality improvement methodologies to improve dental services and improve patient care demonstrating understanding the importance of patient and public involvement in decision-making when changes to services are proposed engaging with all relevant stakeholders in the planning and implementation of change working with others to effectively measure and evaluate the impact of quality improvement interventions and their impacts on the wider systems

		 demonstrate_knowledge of additional challenges related to oral health inequalities in minority ethnic populations <u>a</u>nd other groups with protected characteristics <u>i</u>n the UK, assess and recognise impact of cultural and language and other_barriers and strategies for oral health promotion
3.4.	Act to safeguard patients, particularly children, other young people and vulnerable adults in accordance with the requirements of appropriate equality and diversity legislation	 They should do this by: recognising the individual oral health needs of patients with physical, sensory, intellectual, mental, medical, emotional or social impairments or disabilities, or with a combination of these factors understanding the responsibilities and needs of carers as they play an increasing role in healthcare provision recognising and taking responsibility for safeguarding vulnerable patients understanding when it is appropriate and safe to share information on a patient
3.5	Immediate Life Support	Demonstrate competency and undertake annual training in Immediate Life Support
	olarship	ion, training, research and Examples
4.1.	Demonstrate that they can plan and deliver effective education and training activities	 They should do this by: providing safe clinical supervision of learners providing effective educational supervision of learners, including giving supportive, developmental feedback to learners seeking and respecting patients' wishes about whether they wish to participate in the education and training of learners evaluating and reflecting on the effectiveness of their educational activities and changes to improve practice promoting and participating in inter-professional learning (including with members of the wider

4.2.	Demonstrate that they can critically appraise and interpret scientific/academic literature and keep up to date with current and best practice	 They should do this by: demonstrating an ability to critically appraise evidence interpreting and communicating research evidence and data to support patients and colleagues in making informed decisions about treatment appreciating the role of both qualitative and quantitative methodological approaches in scientific enquiry demonstrating an understanding of the strengths and limitations of different approaches to gathering research evidence conducting literature searches and reviews to inform their professional practice locating and using clinical guidelines appropriately demonstrating an understanding of stratified risk and personalised care
4.3.	Understand what is required to participate in research	They should do this by: • demonstrating understanding of clinical research design, ethics processes and research governance (GCP)

Generic Learning Outcomes Assessments Blueprint

HLO Domain 1: Professional knowledge ar	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification (incl PG degrees)	Critical incidents/ complaint reviews	Research or QI/ audit projects	Logbook	Specialty specific summative assessment	Other	CS / ES reports
	iu manageme	ent	1		r	1	1		r	
1.1 Demonstrate they can communicate effectively and respectfully with patients and others and with colleagues	*	*	*	*			*	*	*1	*
1.2 Demonstrate that they can make decisions, while maintaining	*	*	*	*	*			*		*

HLO	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification (incl PG degrees)	Critical incidents/ complaint reviews	Research or QI/ audit projects	Logbook	Specialty specific summative assessment	Other	CS / ES reports
professional behaviour and judgement										
1.3 Demonstrate they can deal with complexity and uncertainty	*	*	*	*	*			*		
1.4 Recognise their legal responsibilities and be able to apply in practice any legislative requirements relevant to their jurisdiction of practice				*		*		*	*9	
1.5 Recognise and work within the context of a health service and healthcare systems, understanding that systems may differ between England, Scotland, Wales and Northern Ireland		*	*	*		*		*		
1.6 Recognise and demonstrate their role in health promotion, disease prevention and population health	*	*				*		*		
1.7 Recognise the importance of, and demonstrate the ability to practise, person-centred care (PCC), including shared decision making (SDM)	*	*	*			*		*		*

HLO	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification	Critical incidents/ complaints review	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other	CS/ ES reports
Domain 2: Leadership and teamwork	ing		1			•	•	•	·	
2.1 Demonstrate understanding of the importance of personal qualities within leadership (focus on self)			*	*		*				*
2.2 Demonstrate understanding of the importance of working with others both within their specialty and the wider healthcare system (working with others).	*	*		*	*	*		*		
Demonstrate the importance of planning and an understanding of managing dental specialist services			*	*	*	*			*9	*

HLO	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification	Critical incidents/ complaints review	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other	CS/ ES reports
Domain 3: Patient safety, quality im	provement a	nd gov	ernance							
3.1 Recognise a professional and statutory duty of candour and act accordingly within established governance, legal and regulatory systems, including equality and diversity	*	*		*		*		*	*2	*

HLO	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification	Critical incidents/ complaints review	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other	CS/ ES reports
3.2 Recognise the impact of human factors on the individual, teams, organisations and systems		*	*	*					*2	
3.3 Design and employ quality improvement measures that improve clinical effectiveness, patient safety, care or experience	*	*		*	*	*		*	*2	
3.4 Act to safeguard patients, particularly children, other young people and vulnerable adults in accordance with the requirements of appropriate equality and diversity legislation		*	*	*			*	*	*2	
3.5 Immediate Life Support				*						

HLO	Patient feedback/ MSF	WP BAs	Reflective reports	Training course or qualification	Critical incidents/ complaints review	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other	CS/ ES reports
Domain 4: Personal education, training	ng, research a	and sch	olarship							
4.1 Demonstrate that they can plan and deliver effective education and training activities		*	*	*				*	*2,3,4,5	

HLO	Patient feedback/ MSF		Reflective reports	Training course or qualification	Critical incidents/ complaints review	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other	CS/ ES reports
4.2 Demonstrate that they can critically appraise and interpret scientific/academic literature and keep up to date with current and best practice		*		*		*		*	*6,7,8	
4.3 Understand what is required to participate in research		*		*		*		*	*2,6,7	

- 1. Case presentation
- 2. CPD
- 3. Education feedback
- 4. Conference presentation
- 5. Observation of teaching
- 6. Journal clubs
- 7. Publications
- 8. Developing protocols
- 9. Objective structured assessments

SECTION D - SPECIALTY-SPECIFIC CONTENT FOR PAEDIATRIC DENTISTRY

Section D - Specialty-Specific Content of the specialty curriculum for Paediatric Dentistry

To be written by the relevant SAC. The following learning outcomes and examples are examples only, to be edited, adapted and finalised by the SAC as appropriate and in conjunction with the specialty-specific content of the curriculum. The learning outcomes need to describe the standards trainees must meet in order to progress and, if successfully passed at the end of their training, to receive a CCST.

Domain 5: Key clinical skills Outcome	Examples	Evidence
5.1. ASSESSMENT OF THE CHILD AND YOUNG PERSON To be able to take a comprehensive history from child/young person and carer with complex needs, request and interpret appropriate investigations, arrive at accurate diagnoses and formulate and communicate a treatment and management plan.	 Engage in and conduct an effective multiple party consultation with regards to communication, consent, confidentiality, equality, and diversity. Use effective communication and listening skills in multiple party consultation and examination including the use of empathy and sensitivity to engage and obtain trust from children and young people and their families. Convey information and advice to children in a way that is appropriate to the individual child's age and stage of development To access and understand the impact of oral disease on oral health related quality of life Demonstrate knowledge and understanding of the available clinical imaging options for the paediatric patient, their advantages and disadvantages and their interpretation. Be able to recognise and discuss the major determinants of child health such as obesity, smoking, mental health issues and substance misuse on oral and general health and be able to signpost patients and parents for help when required Consider all aspects of history, examination and investigations to arrive at a diagnosis and to engage with patient and families in formulating a comprehensive management plan. 	MSF CEX DOPs Logbook College Examination Case presentation Reflective reports Patient feedback

CHILDREN IN SOCIETY To understand the legal and social framework which impacts on the delivery of oral health care to children and young people in the United Kingdom and to be aware of important national programmes which impact on health and oral health.	 Know the principles of the UN Convention on the Rights of the Child, apply these in their own practice and work for the protection of these rights. Know and apply current legislation on consent to treatment and the right to refuse treatment in children with complex social needs. Know the principles of obtaining consent for treatment for looked after children and those in informal fostering arrangements. Be aware of local and national oral health promotion initiatives/ guidance in respect to children and young people. Understand the delivery of paediatric services in the full range of care settings, recognise the differences and to be able to effectively operate in all these settings. Be committed to a policy of advocacy for a healthy lifestyle in children and young people and for the protection of their rights. Be aware of the immunisation programmes and schedules in the UK. Understand the effects of family composition, socio-economic factors and poverty on child health and child oral health. Understand and demonstrate awareness of the diverse family unit Know about screening and surveillance programmes in relation to child oral health, their advantages and limitations and be able to analyse and evaluate their results. Understand the role of dental public health in the development of oral health services for children. Understand the role of Special Care Dentistry and Restorative Dentistry in the transition from paediatric to appropriate adult services. Be aware of the roles of allied health and non-health professionals involved in the care of young people and to be able to effectively collaborate with such professionals. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Reflective reports
5.3 BEHAVIOURAL SCIENCE To be able to appropriately select and deliver the full range of evidenced based, advanced, pharmacological	 Demonstration of non-pharmacological behaviour management techniques Demonstrate and apply the key skills of non-pharmacological behaviour management. Recognise and manage dental anxiety in children and their families 	MSF CEX DOPs Logbook

and non-pharmacological behaviour management techniques and skills accounting for the emotional, physical, social and intellectual condition of the child.

- Understand and describe the principles of child cognitive development and behavioural psychology in relation to behaviour management.
- Recognise when abnormal behaviour requires additional psychological support and be aware of how to access such support.
- Describe how to seek help for those patients with behaviours out with the scope of dental setting.
- Apply knowledge with respect to the ethical and legal aspects of managing child behaviour in the dental setting.
- · Recognise and manage dental anxiety in children and their families
- Describe and detect normal and abnormal behavioural and cognitive development of children and young people and how this may impact of the delivery of oral health care to patients and their families.

Demonstration of pharmacological behaviour management techniques

- Know and understand the guidelines for the safe use of sedation in children and young people.
- Appy knowledge of the facilities necessary for the safe delivery of inhalation sedation.
- Know and apply the key skills to deliver inhalation sedation safely and effectively
 as an adjunct to dental care for paediatric patients and deal with complications or
 emergencies which may arise during inhalation sedation.
- Appraise, support and manage the dental team with respect to the safe delivery of inhalation sedation delivery.
- Know and understand ethical and legal requirements relating to the delivery of sedation.
- Know the alternative (e.g., oral/intranasal/intravenous) sedation techniques appropriate in the management of anxious children and how this should be delivered safely.

Demonstration of the knowledge and skills in Dental General Anaesthesia (DGA)

Know the facilities necessary for the safe delivery of dental care under DGA and the dentist's role in the management of complications/emergencies which may occur during delivery of DGA.

College
Examination (M
Paed Dent)
Case
presentation
Reflective
reports
Patient
feedback

	 Apply the skills to plan and deliver comprehensive restorative care and exodontia for children/adolescents under general anaesthesia. Understand the ethical and legal requirements relating to the delivery of dental treatment under DGA. Understand the risks and advantages of various methods of airway management from both the dental and anaesthetic point of view. Recognise and understand the effect that medical, social and emotional conditions have on DGA provision and be able to plan a DGA to accommodate and minimise the impact they may have. Appraise, support and manage the dental team with respect to the safe delivery of dental treatment under general anaesthesia. 	
MEDICAL To be able to plan and deliver oral health care for children and young people with complex medical conditions including chronic illness, craniofacial abnormalities and syndromes, medical and neurological conditions and mental health and psychiatric illness.	 Demonstrate an understanding of complex medical conditions and how they affect oral health and the provision of oral health care. Develop and deliver appropriate preventive, restorative and surgical treatment for the child with complex medical conditions. Recognise and address specific issues that may complicate the provision of oral health care for the child and young person with additional needs including for treatment under local anaesthetic, general anaesthetic and inhalation sedation. Demonstrate an appreciation of caries risk and how it may be affected by oral and systemic conditions. Describe the genetic basis, transmission, clinical features and diagnosis of common syndromes with significant oral, dental and facial features. Understand the role of genetic testing in paediatric dentistry, be able to consent families for such testing and be able to deliver simple genetic test results. Apply knowledge of genetically determined conditions to the role of the paediatric dentist as part of the multidisciplinary team. Demonstrate an understanding of the background to the cleft service in the United Kingdom. Demonstrate an understanding of normal physical growth in children and young people, recognise abnormal growth, the possible implications of abnormality and appropriate referral pathways for such children and young people. Recognise and respond appropriately to paediatric medical emergencies that may occur in the dental setting. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Reflective reports

5.5 ORAL MEDICINE AND ORAL SURGERY Diagnose and manage soft and hard tissue pathology and to recognise which conditions requires investigation and management with or by other specialties.	 Recognise, investigate and manage localised disease of the oral soft tissues in children and young people. Recognise when oral disease may be a manifestation of systemic disease and refer appropriately to other dental, medical and surgical specialties. Recognise the indications for medications for the paediatric patient and safely prescribe using appropriate therapeutic approaches in line with best practice guidance. Apply pharmacological knowledge to identify medications which may have oral manifestations and/ or complicate dental treatment in the paediatric patient. Recognise conditions which require a surgical approach to management, accurately assess the challenges and refer as appropriate. Demonstrate and apply the principles of good surgical technique, such as planning and raising intra-oral flaps, debridement and suturing and soft tissue and hard tissue management. Demonstrate knowledge of surgical techniques relevant to the management of impacted, ectopic and supernumerary teeth, autotransplanation, retained roots and cystic lesions. Demonstrate an understanding of relevant referral pathways and the necessity to consult and collaborate with colleagues in appropriate dental, medical and surgical specialties where necessary. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Reflective reports
5.6 DENTO-ALVEOLAR TRAUMA To diagnose and manage acute traumatic dental injuries and their long-term complications in children and young people.	 Diagnose and carry out appropriate treatment of acute dental injuries and its complications. Demonstrate a knowledge of aetiology, presentation, investigation and management of primary and permanent dento-alveolar injuries, intraoral/perioral soft tissue injuries and maxillofacial injuries in children and young people. Understand the biological response to oral and dental trauma and its application to management in children and young people. Understand the impact that dental maturity and age have on management of traumatic dental injuries and its complications. Understand and manage the psychological impact of trauma on the child and young person and their families. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Reflective reports

	 Recognise and understand the complications that may arise from these injuries, where there is a need for multidisciplinary input and to liaise with or refer to appropriate specialties. Demonstrate knowledge of current national and international guidance regarding dento-alveolar trauma. Recognise circumstances in which there is increased risk of traumatic dento-alveolar injury and take the necessary steps to minimise such risk. 	
5.7 DEVELOPMENT AND ANOMALIES To understand the development of the face and oral tissues, to diagnose and intercept abnormalities and aid in their prevention and treatment (including surgical intervention) and to recognise situations which require multidisciplinary dental specialty input.	 Describe normal dental, alveolar complex and craniofacial growth and development and identify abnormalities and their aetiology. Demonstrate an understanding of the anatomical differences between the paediatric and adult patient and their impact upon management. Diagnose and manage developmental defects and anomalies of the dental hard tissues and their long-term complications such as, but not limited to, amelogenesis imperfecta, dentinogenesis imperfecta and molar incisor hypomineralisation. Describe the genetic basis, clinical features and diagnosis of genetically determined defects of dental hard tissues and tooth form, size and number and be able to provide basic genetic counselling with respect to this. Understand and manage disturbances of eruption and exfoliation, abnormalities of tooth size, form, number and structure. Understand and apply interceptive orthodontics in preventing and managing dental malocclusions. Be able to prescribe, design and use simple orthodontic appliances and spacemaintainers in the developing dentition. Demonstrate an understanding of the limitations and scope of orthodontic interventions within Paediatric Dentistry and understand when an orthodontic opinion should be sought, or referral made. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Reflective reports
5.8 MANAGEMENT AND PREVENTION OF ORAL DISEASE Construct and deliver effective, evidenced based preventive, restorative (including	 Demonstrate an understanding of the prevention of and complexity of the caries process and how variables may interact to render children and young people caries prone. Understand current diagnostic techniques for dental caries and their advantages and limitations. 	MSF CEX DOPs Logbook

		T =
endodontic) and surgical treatment plans for children and young people with caries, periodontal disease and tooth surface loss.	 Construct and deliver holistic, effective and appropriate preventive, restorative (including endodontic) and surgical treatment plans for children/adolescents with dental caries. Demonstrate and describe the selection, application, delivery and limitations of contemporary intra-coronal restorations, extra-coronal restorations, endodontics, fixed and removable prosthodontic techniques in primary and permanent teeth. Understand the advantages and disadvantages of different techniques to manage aesthetic concerns in the child and young person and be able effectively select appropriate techniques and perform them. Demonstrate and describe the selection, application, delivery, merits and limitations of dental materials used in the treatment of the paediatric patient. Identify, diagnose and manage periodontal disease in children and young people and apply appropriate preventive strategies. Recognise when periodontal disease may be related to systemic disease and refer appropriately for additional specialist opinion and management. Accurately diagnose and manage non-carious TSL in children and young people. Manage the acute oral facial condition in a child/young person. 	College Examination (M Paed Dent) Case presentation Reflective reports Patient feedback
5.9 SAFEGUARDING Independently leads the full process of safeguarding children, including assessment and reporting, in a paediatric oral health care setting.	 Identify general and oral signs and symptoms of child maltreatment including, but not limited to, physical, sexual or emotional abuse or neglect, fabricated or induced illness, domestic abuse, sexual exploitation, grooming and radicalisation, female genital mutilation, modern slavery, gang and electronic media abuse. Recognise signs of dental neglect, understand its impact and be able to devise a dental management plan for children with dental neglect. Act appropriately in managing children who are or may be at risk of child maltreatment. Understand and interact with the full range of professionals and support services for safeguarding children. Lead and advise oral health teams involved in specific child safeguarding cases. Know and understand local and national safeguarding processes and guidelines and be able to contribute from an oral health perspective. 	MSF CEX DOPs Logbook College Examination (M Paed Dent) Case presentation Course completion Reflective reports Patient feedback

Paediatric Dentistry Assessments Blueprint

HLO	MSF	CEX	DOPs	CBD	Logbook	College examination	Case presentation	Course completion	Reflective reports	Patient feedback
5.1. ASSESSMENT OF THE CHILD AND YOUNG PERSON To be able to take a comprehensive history from child/young person and carer with complex needs, request and interpret appropriate investigations, arrive at accurate diagnoses and formulate and communicate a treatment and management plan.	*	*	*	*	*	*	*	•	*	*
5.2 CHILDREN IN SOCIETY To understand the legal and social framework which impacts on the delivery of oral health care to children and young people in the United Kingdom and to be aware of important national programmes which impact on health and oral health.	*	*	*	*	*	*	*		*	
5.3 BEHAVIOURAL SCIENCE To be able to appropriately select and deliver the full range of evidenced based, advanced, pharmacological and non-pharmacological behaviour management techniques and skills accounting for the emotional, physical, social and intellectual condition of the child.	*	*	*	*	*	*	*		*	*

	1			I	I	Ī	1	Γ	ı	
5.4 MEDICAL To be able to plan and deliver oral health care for children and young people with complex medical conditions including chronic illness, craniofacial abnormalities and syndromes, medical and neurological conditions and mental health and psychiatric illness.	*	*	*	*	*	*	*		*	
5.5 ORAL MEDICINE AND ORAL SURGERY Diagnose and manage soft and hard tissue pathology and to recognise which conditions requires investigation and management with or by other specialties.	*	*	*	*	*	*	*		*	
5.6 DENTO-ALVEOLAR TRAUMA To diagnose and manage acute traumatic dental injuries and their long-term complications in children and young people.	*	*	*	*	*	*	*		*	
5.7 DEVELOPMENT AND ANOMALIES To understand the development of the face and oral tissues, to diagnose and intercept abnormalities and aid in their prevention and treatment (including surgical intervention) and to recognise situations which require multidisciplinary dental specialty input.	*	*	*	*	*	*	*		*	
5.8 MANAGEMENT AND PREVENTION OF ORAL DISEASE Construct and deliver effective, evidenced based preventive, restorative (including endodontic) and surgical treatment plans for	*	*	*	*	*	*	*		*	*

children and young people with caries, periodontal disease and tooth surface loss.										
5.9 SAFEGUARDING Independently leads the full process of safeguarding children, including assessment and reporting, in a paediatric oral health care setting.	*	*	*	*	*	*	*	*	*	*

Assessments in red are mandated

Assessments in black are flexible and the trainee can choose whether they wish to use them to evidence their learning

SECTION E: GLOSSARY OF TERMS AND REFERENCES

ABFTD Advisory Board for Foundation Training in Dentistry

ABSTD Advisory Board for Specialty Training in Dentistry

ACAT Acute Care Assessment Tool

ACF Academic Clinical Fellow

AoA Assessment of Audit

ARCP Annual Review of Competence Progression

CAT Critically Appraised Topic

CBD Case-based discussion

CCST Certificate of Completion of Specialty Training

CEX/mini CEX Clinical evaluation exercise

CPA Competence in practice assessment

COPDEND Committee of Postgraduate Dental Deans and Directors

CPD Continuing Professional Development

DDMFR Diploma in Dental and Maxillofacial Radiology

DDPH Diploma in Dental Public Health

DOP/DOPS Direct observation of procedure/procedural skills

DSFE Dental Specialty Fellowship Examinations

EPA Entrustable professional activities

ES Educational Supervisor

ESR Educational Supervisor's Report

F(DPH) College Fellowship in Dental Public Health

F(Endo) College Fellowship in Endodontics

F(Orth) College Fellowship in Orthodontics

F(OS) College Fellowship in Oral Surgery

F(OM) College Fellowship in Oral Medicine

F(Paed Dent) College Fellowship in Paediatric Dentistry

F(Perio) College Fellowship in Periodontics

F(Pros) College Fellowship in Prosthodontics

F(RD) College Fellowship in Restorative Dentistry

F(SCD) College Fellowship in Special Care Dentistry

FRCPath Fellowship of the Royal College of Pathologists

FRCR Fellowship of The Royal College of Radiologists

GDC General Dental Council

HcAT Healthcare Assessment and Training

HEIW Health Education and Improvement Wales

HEE Health Education England

ISCP Intercollegiate Surgical Curriculum Project

ISFE Intercollegiate Specialty Fellowship Examination

JCPTD Joint Committee for Postgraduate Training in Dentistry

MSF Multi-source feedback

NES NHS Education for Scotland

NHSE National Health Service England

NIMDTA Northern Ireland Medical and Dental Training Agency

NTN National Training Number

OoP Out of Programme

OoPC Out of Programme: Career Break

OoPE Out of Programme: non-training Experience

OoPR Out of Programme: Research

OoPT Out of Programme: Training

OoT Observation of teaching

OSCE Objective Structured Clinical Examination

PBA Procedure-Based Assessments

PGDD Postgraduate Dental Deans and Directors

PDP Personal Development Plan

QA Quality Assurance

RCS Ed Royal College of Surgeons of Edinburgh

RCS Eng Royal College of Surgeons of England

RCPSG Royal College of Physicians and Surgeons of Glasgow

RCR Royal College of Radiologists

29

SAC Specialty Advisory Committee

SCRT Specialty Curriculum Review Team

STC Specialty Training Committee

StR Specialty Training Registrar* note, the interchangeable term Specialty Trainee is used in the Dental Gold Guide

TPD Training Programme Director

VTN Visitor Training Number

WPBA Workplace Based Assessment

WR Written report

WTE Whole Time Equivalent

References

- GDC Principles and Criteria for Specialist Listing incorporating the <u>Standards for Specialty Education 2019</u> and <u>GDC principles of specialist listing</u>
- Dental Gold Guide 2021 Dental Gold Guide 2021 COPDEND
- GDC (2015). Preparing for practice: Dental team learning outcomes for registration (2015 revised edition). Accessed on March 21 2021 at https://www.gdc-uk.org/docs/default-source/quality-assurance/preparing-for-practice-(revised-2015).pdf