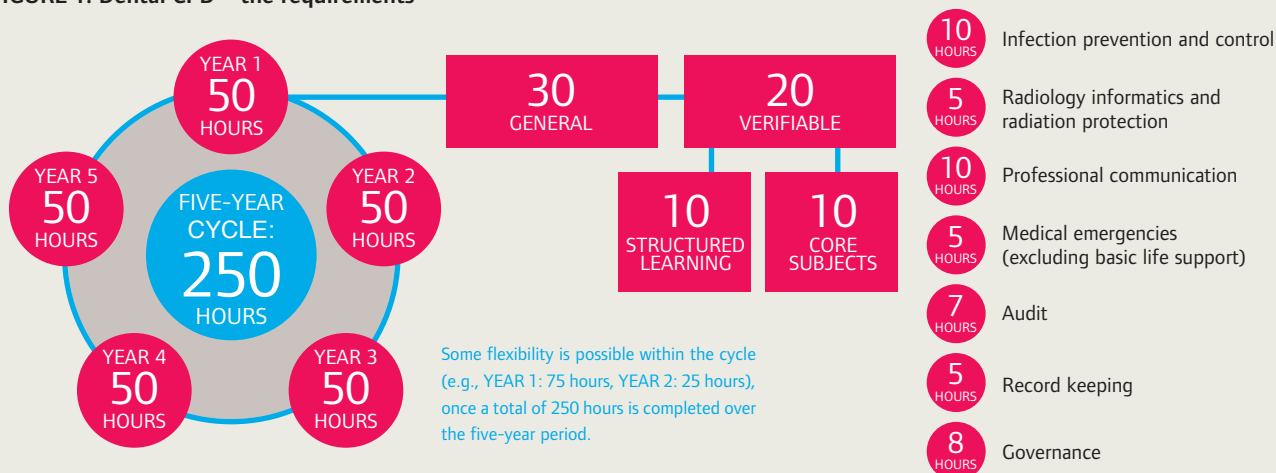


## Moving towards a mandate

Dr Marielle Blake of the Dental Council outlines what's new about the Council's new guide to CPD requirements.

FIGURE 1: Dental CPD – the requirements



By now, every dentist registered to practise in Ireland should have received a copy of the Dental Council's document, Your guide to the Dental Council's Continuing Professional Development requirements. While the new Dental Act is still awaited by the profession, it is expected that the Act will make continuing professional development (CPD) mandatory for continued registration. In order to prepare dentists for this change, the Council has been engaged in an ongoing process of updating guidelines and setting out what dentists should be doing now, and what they will be expected to do to maintain registration in the future. Dr Marielle Blake is Chairperson of the Council's Education and Training Committee, and she explains the thinking behind the document. "At present, all dentists are ethically obliged to maintain their skills. CPD is currently obligatory rather than mandatory, as dentists are obliged to maintain their skills under the Council's ethics guidelines. Within the new Dental Act, it is likely that mandatory CPD will be in place. The Council formulated an introductory CPD document five years ago. The current Education Committee has been working on the principles and the consequential categorisation of required CPD, which is outlined in the new document."

### The hours

The new document sets out the CPD requirement in some detail. Over a five-year cycle, dentists will be expected to complete 250 hours of CPD (approximately 50 hours each year). Of these 50 hours, 20 should be verifiable and 30 general CPD.

What is perhaps most significant about these updated guidelines is that the Council has now identified seven 'core' areas of verifiable CPD, each with a recommended time allocation, which together make up 50% of the required verifiable hours (Figure 1). The other 50% is structured learning CPD, which can cover any area of specific (reasonable) interest to the dentist.

Dr Blake explains the rationale behind this decision:

"In reviewing the Council's fitness to practise cases over the last few years, certain areas were identified, which were causing difficulties with our registrants – these involved communication, record-keeping and conflict resolution. These topics are now included in the core subjects.

"The area of communication, in particular, was generating frequent complaints and is therefore weighted in the new system." (Dentists must complete 10 hours of CPD on communications over a five-year cycle.)

Obviously, these guidelines are a starting point, and will change over time, with the allocated hours increasing or decreasing as the Council deems appropriate. Other core areas that Dr Blake identifies as crucial are record keeping and governance.

"The governance of dentistry has changed and clinicians are now expected to have all the necessary practice documentation to hand. A lot of people may not know the level expected of them. The requirements just for radiology and infection prevention and control alone are significant and have changed greatly in recent years. We need to compile a sample folder and say to people: 'This is what you need to have: your health and safety documents, your fire safety, employee contracts, training records, record-keeping in relation to decontamination, etc.'"

In addition to the CPD requirements, dentists are required to maintain CPR

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*Dr Marielle Blake, Chairperson of the Council's Education and Training Committee.*

certification to BLS (Basic Life Support) level. The time taken to maintain this certification is not included in the 50 hours per year, and it is likely in the future that ongoing Dental Council registration may require proof of CPR certification.

The 30 general hours can include, for example, journal reading, attending a trade show or study club, or any other activity that adds to a dentist's knowledge or skills, but does not meet the criteria for verification.

### Course planners

The Council has also tightened its approach to approving verifiable CPD courses. Course organisers will need to apply to the Council three months in advance and, to be deemed verifiable, programmes must meet four specific criteria:

1. Concise educational aims and activities.
2. Clear anticipated outcomes.
3. Quality control (e.g., opportunity for feedback).
4. Proof of attendance and participation.

Dr Blake draws particular attention to the need for clear and realistic outcomes. "An example of an unrealistic outcome would be the statement that participants in a four-hour introductory course in implant dentistry would be proficient in placement of implants following the course."

Those who are planning courses will now have a strong incentive to target the seven core areas.

"These are the areas that every single dentist in Ireland has to cover on an annual basis so, presumably, course organisers will now identify courses specifically related to these core subjects. Specific training in some of the core courses is not currently available. There is definitely a market for people to come in and deliver this sort of training."

Dr Blake mentions the new infection prevention and control guidelines (see page 120) as an area that will require specific training. She acknowledges that the protection societies are addressing elements of communication and record keeping in their CPD courses, but says that there is scope for a lot more specific training, particularly in the area of governance.

### Monitoring

Obviously, in the absence of a mandatory requirement, there will be no formal monitoring of dentists' CPD as yet, but that doesn't mean that there is no need for dentists to keep their own records.

"At the moment the dentist is obliged to keep the records themselves," says Dr Blake.

"There's a simple pro-forma document that can be downloaded from the Dental Council website. As practitioners attend a course, or go to a conference, the details should be filled in. Two different folders are recommended – one for verifiable CPD and one for general CPD."

Once CPD becomes mandatory, the issue of audit and monitoring will have to be placed on a more formal footing, perhaps as part of renewal of registration. Dr Blake draws comparisons to the Medical Council, which already has systems in place.

"Medical CPD is managed through the various Colleges, for example the ICGP,

College of Physicians, etc. These have specific CPD websites and part of their annual fee goes to the maintenance of that website. It's all centrally stored so from an audit point of view it's much easier to identify clinicians who are falling behind in their CPD requirements.

"Once the new Dental Act is passed, appropriate funding and staffing will be necessary to put equivalent dental CPD structures and monitoring in place."

### Planning

The other key message that the Dental Council wishes dentists to take on board is that from now on they will need to plan their CPD as a five-year cycle, with specific requirements and objectives.

"Dentists need to plan their CPD over the five-year period, and address the core areas within that. To date there were fewer specific areas to be covered, so dentists could choose to complete the verifiable hours in any other areas they wished. The new recommendations specify seven core subjects with defined times over the five-year period."

There are no exceptions – dentists who are working part-time, or who are not working but wish to remain on the dental register, must still complete the full five-year cycle. There is flexibility in when a dentist may engage in CPD, which may help, for example, a dentist on maternity leave, but everyone must complete 250 hours over five years.

The new document offers advice on how to do this in three steps:

- Step 1** Make sure you understand the time requirement in hours.
- Step 2** Plan your CPD activities to fulfil your anticipated professional requirements.
- Step 3** Record your CPD.

Dr Blake reiterates that these core requirements have been developed on foot of identifying deficits in dentists' knowledge, which have led in some cases to Fitness to Practise hearings, or to cases going to the Dental Complaints Resolution Service. "We would anticipate significant benefits to dentists from increasing their skills in these areas. People who keep up with their CPD do not tend to appear in front of Fitness to Practise hearings. Training and education and furthering yourself are hugely important. If a dentist was called to attend Fitness to Practise proceedings, the fact that they were not up to date with CPD would count against them."

While the Dental Act may still be some way off, Dr Blake feels that these guidelines give dentists a strong starting point to begin to fulfill their CPD requirements and to record them accurately.

"Lots of people are probably doing a lot of CPD, but in their areas of interest, so now they will have to plan to cover the core areas as well."



## IDA launches online CPD management system

The IDA launched a new CPD Online Learning Management System at the recent AGM in Cork. This will mean that IDA members will be able to book and pay for CPD courses online, record their own CPD activities, and read and record IDA *Journal* articles. Non-IDA events can also be recorded by members onto the system. To access the system, just log on to the members' section of [www.dentist.ie](http://www.dentist.ie) and click on CPD. A full, detailed 'How to Use' instruction manual will be forwarded to all members in the coming weeks.