

# **Paediatric Dentistry Specialty Training Curriculum**

**Approved by GDC Registrar: 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 General Dental Council's (GDC) 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 for Specialty Education. Successful completion of the relevant specialty training and assessment will lead to the award of a 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.

Input was also received from members of the Paediatric Dentistry SAC 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 multidisciplinary 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 GDC. 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 or 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 or rotational arrangements to cover all the necessary areas of the curriculum and may include an appropriate balance between dental teaching hospitals or 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 or school together with other associated, recognised and validated training environments.

### 5. Training specific to Paediatric Dentistry

It is anticipated that four 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 Higher Level Outcomes (HLO) rather than a prescribed duration, therefore the Review of Competency Progression (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 Less Than Full-Time (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.

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 at the Royal College of Surgeons' [Higher Specialist Training Documents and Curricula](#).

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

- 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 Royal College examinations) but other forms of assessment should be tailored to the training programme/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.

An assessment blueprint is provided within sections C and D which illustrates the WPBAs that can be used to assess the HLOs.

Progress through training is assessed through the RCP process and training is completed when all the curriculum requirements are satisfied and HLOs have been evidenced.

## 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 Dental Education](#) 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 webpage](#).

## Section C – Generic professional content of the specialty curriculum

### Domain 1: Professional knowledge and management

Outcome	Examples
1.1 Demonstrate they can communicate effectively and respectfully with patients and others and with colleagues	<p>Effectively and respectfully communicate with patients, relatives, carers, guardians by:</p> <ul style="list-style-type: none"><li>• consulting with patients and carers in a sensitive and compassionate way</li><li>• giving clear and accurate verbal/oral information with information the recipient wants and needs and avoiding unnecessary jargon</li><li>• 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</li><li>• making accurate and contemporaneous records of observations or findings in English</li><li>• making information accessible and inclusive by adapting written and verbal</li></ul>

Outcome	Examples
	<p>communication and tone and adopting appropriate techniques and communication aids/resources to suit others as appropriate</p> <ul style="list-style-type: none"> <li>• 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</li> <li>• demonstrating ability to communicate effectively and sensitively when delivering bad news</li> <li>• recognising own limitations and works within limits of capabilities</li> <li>• competency in obtaining informed consent.</li> </ul> <p>Effectively and respectfully communicate with colleagues by:</p> <ul style="list-style-type: none"> <li>• promoting and effectively participating in multidisciplinary, interprofessional team working</li> <li>• communicating effectively with referrers regarding patient consultation and treatment</li> <li>• 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.</li> </ul>
1.2 Demonstrate that they can make decisions, while maintaining professional behaviour and judgement	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• maintaining appropriate situational awareness and sensitivity to the impact of their comments and behaviours on others (emotional intelligence)</li> <li>• influencing, negotiating, continuously re-assessing priorities and effectively managing complex, dynamic situations and exploring and resolving diagnostic and management challenges.</li> </ul>
1.3 Demonstrate they can deal with	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• showing appropriate professional behaviour and judgement in clinical and non-clinical</li> </ul>



Outcome	Examples
complexity and uncertainty	<p>contexts</p> <ul style="list-style-type: none"> <li>• demonstrating resilience</li> <li>• managing the uncertainty of success or failure</li> <li>• adapting management proposals and strategies to take account of patients' informed preferences, co-morbidities and long-term conditions</li> <li>• supporting and empowering patient self-care and respecting patient autonomy</li> <li>• recognising and managing dental emergencies.</li> </ul>
1.4 Recognise their legal responsibilities and be able to apply in practice any legislative requirements relevant to their jurisdiction of practice	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding, and adhering to, the principles of continuing professional development</li> <li>• 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</li> <li>• 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.</li> </ul>
1.5 Recognise and work within the context of a health service and healthcare systems	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding the structure and organisation of the wider health and social care systems, including how services are commissioned, funded and audited</li> <li>• understanding that systems may differ between England, Scotland, Wales and Northern Ireland</li> <li>• demonstrating an appreciation of how services are deemed to be clinically effective, cost effective or restricted such as on a 'named patient' basis</li> <li>• understanding how resources are managed, being aware of competing demands and the importance of avoiding waste</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>• having an awareness of how services are held publicly accountable through political and governance systems, public scrutiny and judicial review</li> <li>• recognising and working 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.</li> </ul>
1.6 Recognise and demonstrate their role in health promotion, disease prevention and dental population health	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding the factors affecting health inequalities as they relate to the practise of dentistry</li> <li>• being willing and able to work to reduce health inequalities relevant to the practise of dentistry</li> <li>• understanding national and local population oral health needs</li> <li>• understanding the relationship of the physical, economic and cultural environment to health and its impact on patients and patient outcomes</li> <li>• 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.</li> </ul>
1.7 Recognise the importance of, and demonstrate the ability to practise, person-centred care (PCC), including shared decision making (SDM)	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding that patients are partners with their health care providers: <ul style="list-style-type: none"> <li>○ providing balanced information about treatment options</li> <li>○ eliciting the patient's concerns, values and preferences</li> <li>○ offering support to the patient to help them to reach a decision and making that final decision together</li> </ul> </li> <li>• being able to articulate personal values and principles yet show understanding of how these may be different to those of others – patients and colleagues</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>valuing, respecting and promoting equality and diversity.</li> </ul>

## Domain 2: Leadership and teamworking

Outcome	Examples
2.1 Demonstrate understanding of the importance of personal qualities within leadership (focus on self)	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>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</li> <li>understanding team dynamics, behaviours and personalities with insight and awareness of own behaviours and their effect on others. Please also see the NHS Leadership Academy's <a href="#">Healthcare Leadership Model</a>.</li> </ul>
2.2 Demonstrate understanding of the importance of working with others both within their specialty and the wider healthcare system (working with others)	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>being able to seek out the views of others in maintaining and improving specialist services</li> <li>being able to effectively lead/chair multidisciplinary and interprofessional meetings</li> <li>undertaking safe and effective patient handover, both verbally and in writing</li> <li>demonstrating an understanding of leadership responsibilities as a clinician and why effective clinical leadership is central to safe and effective care</li> <li>showing awareness of clinical leadership responsibilities and why effective clinical leadership is central to safe and effective care</li> <li>being confident about challenging and influencing colleagues and the orthodoxy where appropriate</li> <li>being able to lead the process of exploring and resolving complex diagnostic and</li> </ul>

Outcome	Examples
	<p>management challenges</p> <ul style="list-style-type: none"> <li>• leading the formal appraisal process for their teams.</li> </ul>
2.3 Demonstrate the importance of planning and an understanding of managing dental specialist services	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding and being able to work effectively within the relevant NHS funding, structures and pathways in their local healthcare system in relation to specialist dental services and the healthcare services with which they interface</li> <li>• understanding how to identify, mitigate and manage risk, including understanding local and national risk reporting structures.</li> </ul>

### Domain 3: Patient safety, quality improvement and governance

Outcome	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	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding how to raise safety concerns appropriately through local and national clinical governance systems</li> <li>• understanding how to raise concerns where there is an issue with patient safety, dignity or quality of care</li> <li>• demonstrating a commitment to learn from patient safety investigations and complaints</li> <li>• understanding the process of root cause analysis for investigating and learning from patient safety incidents</li> <li>• demonstrating honesty and candour regarding errors in patient care</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>• demonstrating familiarity with relevant patient safety directives</li> <li>• understanding the importance of sharing and implementing good practice.</li> </ul>
3.2 Recognise the impact of human factors on the individual, teams, organisations and systems	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• understanding the effects of teamwork, tasks, equipment, workspace, culture and organisation on human behaviour and abilities and the application of that knowledge in clinical settings</li> <li>• protecting patients and colleagues from risks posed by problems with personal health, conduct or performance</li> <li>• demonstrating an understanding of the learning by reporting and sharing these experiences locally and widely.</li> </ul>
3.3 Design and employ quality improvement measures that improve clinical effectiveness, patient safety, care or experience	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• using a range of quality improvement methodologies to improve dental services and improve patient care</li> <li>• demonstrating an understanding of the importance of patient and public involvement in decision-making when changes to services are proposed</li> <li>• engaging with all relevant stakeholders in the planning and implementation of change</li> <li>• working with others to effectively measure and evaluate the impact of quality improvement interventions and their impacts on the wider systems</li> <li>• demonstrating knowledge of additional challenges related to oral health inequalities in minority ethnic populations and other groups with protected characteristics in the UK</li> <li>• assessing and recognising impact of cultural and language and other barriers and strategies for oral health promotion.</li> </ul>

Outcome	Examples
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	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• 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</li> <li>• understanding the responsibilities and needs of carers as they play an increasing role in healthcare provision</li> <li>• recognising and taking responsibility for safeguarding vulnerable patients</li> <li>• understanding when it is appropriate and safe to share information on a patient.</li> </ul>
3.5 Immediate life support	<p>they should do this by:</p> <ul style="list-style-type: none"> <li>• demonstrating competency and undertake annual training in immediate life support.</li> </ul>

#### Domain 4: Personal education, training, research and scholarship

Outcome	Examples
4.1 Demonstrate that they can plan and deliver effective education and training activities	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• providing safe clinical supervision of learners</li> <li>• providing effective educational supervision of learners, including giving supportive, developmental feedback to learners</li> <li>• seeking and respecting patients' wishes about whether they wish to participate in the education and training of learners</li> <li>• evaluating and reflecting on the effectiveness of their educational activities and changes to improve practice</li> <li>• promoting and participating in interprofessional learning (including with members of</li> </ul>

Outcome	Examples
	<p>the wider healthcare team in dentistry and in other healthcare professions)</p> <ul style="list-style-type: none"> <li>• demonstrating an ability to use a range of teaching methods for individual and group teaching, including face to face and online teaching and the use of simulation and other technology enhanced learning methods.</li> </ul>
<p>4.2 Demonstrate that they can critically appraise and interpret scientific/academic literature and keep up to date with current and best practice</p>	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• demonstrating an ability to critically appraise evidence</li> <li>• interpreting and communicating research evidence and data to support patients and colleagues in making informed decisions about treatment</li> <li>• appreciating the role of both qualitative and quantitative methodological approaches in scientific enquiry</li> <li>• demonstrating an understanding of the strengths and limitations of different approaches to gathering research evidence</li> <li>• conducting literature searches and reviews to inform their professional practice</li> <li>• locating and using clinical guidelines appropriately</li> <li>• demonstrating an understanding of stratified risk and personalised care.</li> </ul>
<p>4.3 Understand what is required to participate in research</p>	<p>They should do this by:</p> <ul style="list-style-type: none"> <li>• demonstrating understanding of clinical research design, ethics processes and research governance (GCP).</li> </ul>

## Generic learning outcomes assessments blueprint

### Domain 1: Professional knowledge and management

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
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 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	



HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
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)	*	*	*			*		*		*

## Domain 2: Leadership and teamworking

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
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)	*	*	*	*	*	*		*		
2.3 Demonstrate the importance of planning and an understanding of managing dental specialist services		*	*	*	*	*		*	*9	*

### Domain 3: Patient safety, quality improvement and governance

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
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	*
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	

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
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				*						

#### Domain 4: Personal education, training, research and scholarship

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	CS / ES reports
4.1 Demonstrate that they can plan and deliver effective education and training activities		*	*	*				*	*2,3,4,5	

HLO	Patient feedback / MSF	WPBAs	Reflective reports	Training course or qualification (inc. PG degrees)	Critical incidents or complaint reviews	Research or QI / audit projects	Logbook	Specialty specific summative assessment	Other (see list 1-9 below)	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	

Other methods of assessment are:

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

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
<p>5.1 Assessment of the child and young person</p> <p>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</p>	<ul style="list-style-type: none"><li>• Engaging in and conducting an effective multiple party consultation with regards to communication, consent, confidentiality, equality and diversity.</li><li>• Using 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.</li><li>• Conveying information and advice to children in a way that is appropriate to the individual child's age and stage of development.</li><li>• Accessing and understanding the impact of oral disease on oral health related quality of life.</li><li>• Demonstrating knowledge and understanding of the available clinical imaging options for the paediatric patient, their advantages and disadvantages and their interpretation.</li><li>• Being 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 being able to signpost patients and parents for help when required.</li><li>• Considering 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.</li></ul>
<p>5.2 Children in society</p> <p>To understand the legal and social framework which impacts on the delivery of oral health care</p>	<ul style="list-style-type: none"><li>• Knowing the principles of the UN Convention on the Rights of the Child, applying these in their own practice and work for the protection of these rights.</li><li>• Knowing and applying current legislation on consent to treatment and the right to refuse treatment in children with complex social needs</li><li>• Knowing the principles of obtaining consent for treatment for looked-after children and those in</li></ul>

Outcome	Examples
<p>to children and young people in the United Kingdom and to be aware of important national programmes which impact on health and oral health</p>	<p>informal fostering arrangements.</p> <ul style="list-style-type: none"> <li>• Being aware of local and national oral health promotion initiatives/guidance in respect to children and young people.</li> <li>• Understanding the delivery of paediatric services in the full range of care settings, recognising the differences and to be able to effectively operate in all these settings.</li> <li>• Being committed to a policy of advocacy for a healthy lifestyle in children and young people and for the protection of their rights.</li> <li>• Being aware of the immunisation programmes and schedules in the UK.</li> <li>• Understanding the effects of family composition, socio-economic factors and poverty on child health and child oral health.</li> <li>• Understanding and demonstrating awareness of the diverse family unit.</li> <li>• Knowing about screening and surveillance programmes in relation to child oral health, their advantages and limitations and being able to analyse and evaluate their results.</li> <li>• Understanding the role of dental public health in the development of oral health services for children.</li> <li>• Understanding the role of special care dentistry and restorative dentistry in the transition from paediatric to appropriate adult services.</li> <li>• Being aware of the roles of allied health and non-health professionals involved in the care of young people and to being able to effectively collaborate with such professionals.</li> </ul>
<p>5.3 Behavioural science</p> <p>To be able to appropriately select and deliver the full range of evidenced based, advanced, pharmacological and</p>	<p>Demonstrating non-pharmacological behaviour management techniques:</p> <ul style="list-style-type: none"> <li>• demonstrating and applying the key skills of non-pharmacological behaviour management</li> <li>• recognising and managing dental anxiety in children and their families</li> <li>• understanding and describing the principles of child cognitive development and behavioural psychology in relation to behaviour management</li> <li>• recognising when abnormal behaviour requires additional psychological support and being aware of how to access such support</li> </ul>

Outcome	Examples
<p>non-pharmacological behaviour management techniques and skills accounting for the emotional, physical, social and intellectual condition of the child</p>	<ul style="list-style-type: none"> <li>describing how to seek help for those patients with behaviours out with the scope of dental setting</li> <li>applying knowledge with respect to the ethical and legal aspects of managing child behaviour in the dental setting</li> <li>recognising and managing dental anxiety in children and their families</li> <li>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.</li> </ul> <p>Demonstrating pharmacological behaviour management techniques:</p> <ul style="list-style-type: none"> <li>knowing and understanding the guidelines for the safe use of sedation in children and young people</li> <li>applying knowledge of the facilities necessary for the safe delivery of inhalation sedation</li> <li>knowing and applying 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</li> <li>appraising, supporting and managing the dental team with respect to the safe delivery of inhalation sedation delivery</li> <li>knowing and understanding ethical and legal requirements relating to the delivery of sedation</li> <li>knowing the alternative (e.g. oral/intranasal/intravenous) sedation techniques appropriate in the management of anxious children and how this should be delivered safely.</li> </ul> <p>Demonstrating the knowledge and skills in Dental General Anaesthesia (DGA):</p> <ul style="list-style-type: none"> <li>knowing 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</li> <li>applying the skills to plan and deliver comprehensive restorative care and exodontia for children/adolescents under general anaesthesia</li> <li>understanding the ethical and legal requirements relating to the delivery of dental treatment</li> </ul>



Outcome	Examples
	<p>under DGA</p> <ul style="list-style-type: none"> <li>• understanding the risks and advantages of various methods of airway management from both the dental and anaesthetic point of view</li> <li>• recognising and understanding the effect that medical, social and emotional conditions have on DGA provision and being able to plan a DGA to accommodate and minimise the impact they may have</li> <li>• appraising, supporting and managing the dental team with respect to the safe delivery of dental treatment under general anaesthesia.</li> </ul>
<p>5.4 Medical</p> <p>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</p>	<ul style="list-style-type: none"> <li>• Demonstrating an understanding of complex medical conditions and how they affect oral health and the provision of oral health care.</li> <li>• Developing and delivering appropriate preventive, restorative and surgical treatment for the child with complex medical conditions.</li> <li>• Recognising and addressing 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.</li> <li>• Demonstrating an appreciation of caries risk and how it may be affected by oral and systemic conditions.</li> <li>• Describing the genetic basis, transmission, clinical features and diagnosis of common syndromes with significant oral, dental and facial features.</li> <li>• Understanding the role of genetic testing in paediatric dentistry, being able to consent families for such testing and be able to deliver simple genetic test results.</li> <li>• Applying knowledge of genetically determined conditions to the role of the paediatric dentist as part of the multidisciplinary team.</li> <li>• Demonstrating an understanding of the background to the cleft service in the United Kingdom.</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>• Demonstrating an understanding of normal physical growth in children and young people, recognising abnormal growth, the possible implications of abnormality and appropriate referral pathways for such children and young people.</li> <li>• Recognising and responding appropriately to paediatric medical emergencies that may occur in the dental setting.</li> </ul>
<p>5.5 Oral medicine and oral surgery</p> <p>Diagnose and manage soft and hard tissue pathology and to recognise which conditions requires investigation and management with or by other specialties</p>	<ul style="list-style-type: none"> <li>• Recognising, investigating and managing localised disease of the oral soft tissues in children and young people.</li> <li>• Recognising when oral disease may be a manifestation of systemic disease and referring appropriately to other dental, medical and surgical specialties.</li> <li>• Recognising the indications for medications for the paediatric patient and safely prescribing using appropriate therapeutic approaches in line with best practice guidance.</li> <li>• Applying pharmacological knowledge to identify medications which may have oral manifestations and/ or complicated dental treatment in the paediatric patient.</li> <li>• Recognising conditions which require a surgical approach to management, accurately assessing the challenges and referring as appropriate.</li> <li>• Demonstrating and applying the principles of good surgical technique, such as planning and raising intra-oral flaps, debridement and suturing and soft tissue and hard tissue management.</li> <li>• Demonstrating knowledge of surgical techniques relevant to the management of impacted, ectopic and supernumerary teeth, autotransplantation, retained roots and cystic lesions.</li> <li>• Demonstrating an understanding of relevant referral pathways and the necessity to consult and collaborate with colleagues in appropriate dental, medical and surgical specialties where necessary.</li> </ul>
<p>5.6 Dento-alveolar trauma</p> <p>To diagnose and manage acute traumatic dental injuries and their</p>	<ul style="list-style-type: none"> <li>• Diagnosing and carrying out appropriate treatment of acute dental injuries and its complications.</li> <li>• Demonstrating 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.</li> </ul>

Outcome	Examples
<p>long-term complications in children and young people</p>	<ul style="list-style-type: none"> <li>• Understanding the biological response to oral and dental trauma and its application to management in children and young people.</li> <li>• Understanding the impact that dental maturity and age have on management of traumatic dental injuries and its complications.</li> <li>• Understanding and managing the psychological impact of trauma on the child and young person and their families.</li> <li>• Recognising and understanding 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.</li> <li>• Demonstrating knowledge of current national and international guidance regarding dento-alveolar trauma.</li> <li>• Recognising circumstances in which there is increased risk of traumatic dento-alveolar injury and take the necessary steps to minimise such risk.</li> </ul>
<p>5.7 Development and anomalies</p> <p>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</p>	<ul style="list-style-type: none"> <li>• Describing normal dental, alveolar complex and craniofacial growth and development and identify abnormalities and their aetiology.</li> <li>• Demonstrating an understanding of the anatomical differences between the paediatric and adult patient and their impact upon management.</li> <li>• Diagnosing and managing 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.</li> <li>• Describing the genetic basis, clinical features and diagnosing 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.</li> <li>• Understanding and managing disturbances of eruption and exfoliation, abnormalities of tooth size, form, number and structure.</li> <li>• Understanding and applying interceptive orthodontics in preventing and managing dental malocclusions.</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>• Being able to prescribe, design and use simple orthodontic appliances and space-maintainers in the developing dentition.</li> <li>• Demonstrating an understanding of the limitations and scope of orthodontic interventions within paediatric dentistry and understanding when an orthodontic opinion should be sought, or referral made.</li> </ul>
<p>5.5 Oral medicine and oral surgery</p> <p>Diagnose and manage soft and hard tissue pathology and to recognise which conditions requires investigation and management with or by other specialties</p>	<ul style="list-style-type: none"> <li>• Recognising, investigating and managing localised disease of the oral soft tissues in children and young people.</li> <li>• Recognising when oral disease may be a manifestation of systemic disease and referring appropriately to other dental, medical and surgical specialties.</li> <li>• Recognising the indications for medications for the paediatric patient and safely prescribing using appropriate therapeutic approaches in line with best practice guidance.</li> <li>• Applying pharmacological knowledge to identify medications which may have oral manifestations and/ or complicated dental treatment in the paediatric patient.</li> <li>• Recognising conditions which require a surgical approach to management, accurately assessing the challenges and refer as appropriate.</li> <li>• Demonstrating and applying the principles of good surgical technique, such as planning and raising intra-oral flaps, debridement and suturing and soft tissue and hard tissue management.</li> <li>• Demonstrating knowledge of surgical techniques relevant to the management of impacted, ectopic and supernumerary teeth, autotransplantation, retained roots and cystic lesions.</li> <li>• Demonstrating an understanding of relevant referral pathways and the necessity to consult and collaborate with colleagues in appropriate dental, medical and surgical specialties where necessary.</li> </ul>
<p>5.6 Dento-alveolar trauma</p> <p>To diagnose and manage acute traumatic dental injuries and their</p>	<ul style="list-style-type: none"> <li>• Diagnosing and carrying out appropriate treatment of acute dental injuries and its complications.</li> <li>• Demonstrating 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.</li> </ul>

Outcome	Examples
<p>long-term complications in children and young people</p>	<ul style="list-style-type: none"> <li>• Understanding the biological response to oral and dental trauma and its application to management in children and young people.</li> <li>• Understanding the impact that dental maturity and age have on management of traumatic dental injuries and its complications.</li> <li>• Understanding and managing the psychological impact of trauma on the child and young person and their families.</li> <li>• Recognising and understanding 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.</li> <li>• Demonstrating knowledge of current national and international guidance regarding dento-alveolar trauma.</li> <li>• Recognising circumstances in which there is increased risk of traumatic dento-alveolar injury and take the necessary steps to minimise such risk.</li> </ul>
<p>5.7 Development and anomalies</p> <p>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</p>	<ul style="list-style-type: none"> <li>• Describing normal dental, alveolar complex and craniofacial growth and development and identify abnormalities and their aetiology.</li> <li>• Demonstrating an understanding of the anatomical differences between the paediatric and adult patient and their impact upon management.</li> <li>• Diagnosing and managing 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.</li> <li>• Describing 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.</li> <li>• Understanding and managing disturbances of eruption and exfoliation, abnormalities of tooth size, form, number and structure.</li> <li>• Understanding and applying interceptive orthodontics in preventing and managing dental malocclusions.</li> </ul>

Outcome	Examples
	<ul style="list-style-type: none"> <li>• Being able to prescribe, design and use simple orthodontic appliances and space-maintainers in the developing dentition.</li> <li>• Demonstrating 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.</li> </ul>
<p>5.8 Management and prevention of oral disease</p> <p>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</p>	<ul style="list-style-type: none"> <li>• Demonstrating 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.</li> <li>• Understanding current diagnostic techniques for dental caries and their advantages and limitations.</li> <li>• Constructing and delivering holistic, effective and appropriate preventive, restorative (including endodontic) and surgical treatment plans for children/adolescents with dental caries.</li> <li>• Demonstrating and describing 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.</li> <li>• Understanding the advantages and disadvantages of different techniques to manage aesthetic concerns in the child and young person and being able effectively select appropriate techniques and perform them.</li> <li>• Demonstrating and describing the selection, application, delivery, merits and limitations of dental materials used in the treatment of the paediatric patient.</li> <li>• Identifying, diagnosing and managing periodontal disease in children and young people and apply appropriate preventive strategies.</li> <li>• Recognising when periodontal disease may be related to systemic disease and referring appropriately for additional specialist opinion and management.</li> <li>• Accurately diagnosing and managing non-carious TSL in children and young people.</li> <li>• Manage the acute oral facial condition in a child/young person.</li> </ul>

Outcome	Examples
<p>5.9 Safeguarding</p> <p>Independently leads the full process of safeguarding children, including assessment and reporting, in a paediatric oral health care setting</p>	<ul style="list-style-type: none"> <li>• Identifying 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.</li> <li>• Recognising signs of dental neglect, understanding its impact and being able to devise a dental management plan for children with dental neglect.</li> <li>• Acting appropriately in managing children who are or may be at risk of child maltreatment.</li> <li>• Understanding and interacting with the full range of professionals and support services for safeguarding children.</li> <li>• Leading and advising oral health teams involved in specific child safeguarding cases.</li> <li>• Knowing and understanding local and national safeguarding processes and guidelines and be able to contribute from an oral health perspective.</li> </ul>

## Paediatric Dentistry assessments blueprint

\*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.

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-	*	*	*	*	*	*	*		*	*



HLO	MSF	CEX	DOPs	CBD	Logbook	College examination	Case presentation	Course completion	Reflective reports	Patient feedback
pharmacological behaviour management techniques and skills accounting for the emotional, physical, social and intellectual condition of the child										
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	*	*	*	*	*	*	*		*	

HLO	MSF	CEX	DOPs	CBD	Logbook	College examination	Case presentation	Course completion	Reflective reports	Patient feedback
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	*	*	*	*	*	*	*		*	*

HLO	MSF	CEX	DOPs	CBD	Logbook	College examination	Case presentation	Course completion	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	*	*	*	*	*	*	*	*	*	*

## 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 Competency 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
NIHR	National Institute for Health and Care Research
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
RCP	Review of Competency Progression
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
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 [Standards for Specialty Education 2019](#) and [GDC principles of specialist listing](#)
- [Dental Gold Guide 2023](#) – COPDEND