

# ERO WG «INTEGRATION»

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# WG «INTEGRATION»



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*Repetitio est Mater Studiorum*

The priority of our WG was to involve in ERO NDAs from Eastern European region.  
The goal was achieved in 2011 and at that time more than 10 NDAs became ERO regular member

# The tasks as the results of questionnaire (WG ERO Integration), were:



- Improvement the role of new NDA's
- Financial power and independence of NDAs
- Low Membership fee in new ERO members (5- 10 Euros per year)
- Membership of NDAs for practitioner dentists
- Mandatory CDE in NDCs
- License for private practicing...

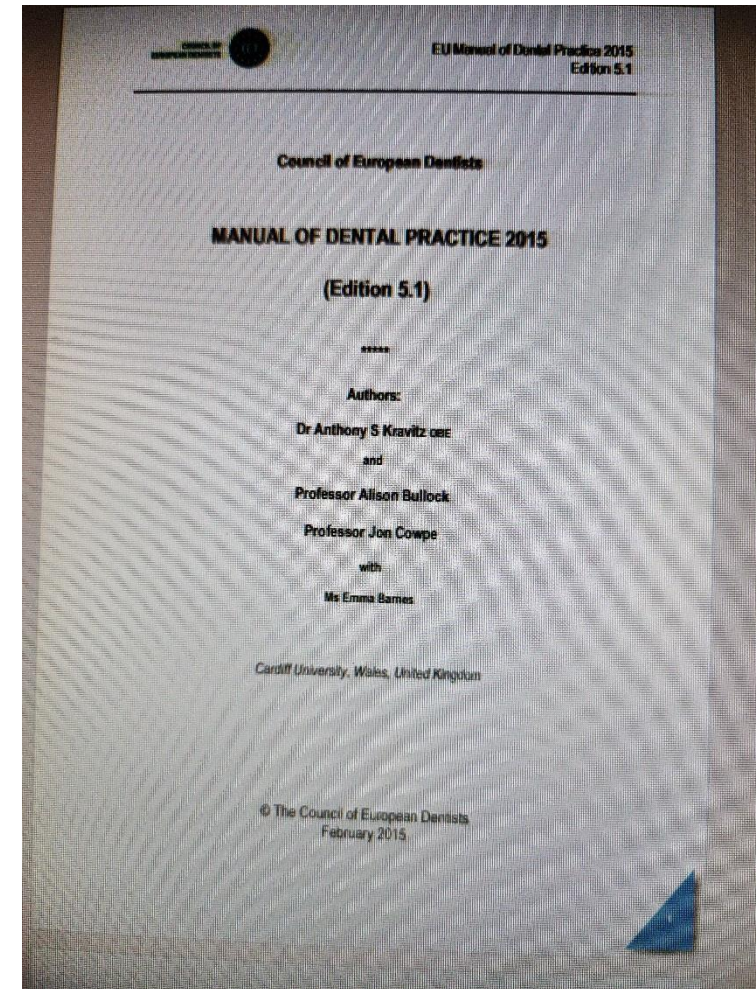
# FOLLOWING TASKS:

- **Licensing requirements for opening Dental practices (Dental Practice team)**
- **Insurance for dentists and patients, (Dental Practice team),**
- **Support for retired dentists, (Dental Practice team)**

## As a results of Questioner:

- The regulations are valid in the EU countries
- In most Eastern European countries, EU members - regulations also apply
- The newly independent countries of the former USSR have created their own requirements for licensing and opening dental clinics. They are compiled according to the general basic requirements that are uniform for medical institutions. The requirements for dental equipment and instruments, materials, are compiled with the modification of existing documents.

- The EU requirements for medical dental equipment, tools and materials are reflected in the document **MANUAL OF DENTAL PRACTICE 2015**
- Considering that the document has been working for a long time, it is subject to updating.





MANUAL OF DENTAL PRACTICE 2015 is a very huge document  
The document has been approved by many competent authorities

- The European Parliament ;
- The European Council;
- The Council;
- The European Commission;
- The Court of Justice;
- The European Central Bank
- The Court of Auditors;
- NDAs of 34 countries;



# Compilers who have made great contributions to the EU Manual



- The dental associations of 34 countries
- The dental councils of several countries
- Nina Brandelet-Bernot , Sara Roda and the other Secretariat of the CED
- Rob Anderson ([Cardiff University](#))
- Professor Elizabeth Treasure ([Cardiff University](#))
- Ms Ulrike Matthesius ([British Dental Association](#))
- Dr Howard Davies (European University Association)
- Dr Nicolae Cazacu, (ex-Romanian College of Dentists)
- Dr A Goldstein (Monaco)
- Dr Marino Bindi (San Marino)
- Dr Vijay Kumar
- Dr Susie Sanderson

# About the authors:

- Dr. Anthony Kravitz - Manchester, England,
- Professor Alison Bullock - University of Birmingham
- Professor Jonathan Cowpe - University of Wales
- Ms. Emma Barnes - University of Bristol,

We decided to focus on the main provisions of this document. Since the main provisions of the document are likely to be preserved

### Part 3: Directives involving the Dental Profession

- Medicinal Products and Medical Devices

The Medical Devices Directive (93/42/EEC) <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=CONSLEG:1993L0042:20071011:en:PDF>

- Directive on Prevention from Sharp Injuries in the Hospital and Healthcare Sector <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2010:134:0066:0072:EN:PDF>

## Good news, received on the eve of the congress

- The European Society of Dental Ergonomics which is an Associate Member of ERO would like to (re-)activate the cooperation. This could take place in a workshop before the plenary session in Almaty, for example. Ergonomics in the dental environment is an exciting area and we think that the new countries in the former USSR region could also be particularly interested in this.

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- **Financial power and independence of NDAs**
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- Mandatory CDE in NDCs
- License for private practicing...



# FOLLOWING TASKS:

## EDUCATION UNDERGRADUATE -

- unification of undergraduate education, according to education standards and educational programs,
- equalization of requirements for postgraduate education in Eastern European countries and approximation to the European or world standard of certification and accreditation



- The problem of unification of undergraduate education, according to education standards and educational programs



In the vast majority of CIS countries, a specialist for the treatment of teeth, diseases of the oral cavity, organs and tissues of the face is called a Stomatologists, not a dentist. We have a specialty dentist – but this is not a specialist with a higher education.

Now in Central Asian countries, this specialist (dentist) is being retrained into a dental hygienist or oral hygienist or a school dentist.



This issue is also reflected in the EU Manual 2015:

- System of automatic recognition of professional qualifications for dental practitioners (Chapter III of the PQD (professional qualifications))
- Each Member State automatically recognizes evidence of formal qualifications (diplomas, certificates and other evidence attesting successful completion of professional training) giving access to professional activities as a dental practitioner and as a specialised dental practitioner, covered by Annex V, points 5.3.2 and 5.3.3 of the PQD.

- The system of automatic recognition works on the basis of coordinated minimum training requirements. Basic dental training must be for at least 5 years' study, with the equivalent ECTS credits<sup>7</sup>, and must consist of at least 5,000 hours of full-time theoretical and practical training. That comprises, at least, the program described in point 5.3.1 of Annex V (of the PQD). This should guarantee that the person concerned has acquired commonly agreed knowledge and skills.

- Diplomas guaranteeing compliance
- The PQD lists the diplomas from each Member State which serve as evidence of having completed dental training which complies with the minimum training requirements. Each Member State must automatically recognise these diplomas and allow the holder to practise in that Member State.

- Knowledge of languages
- The knowledge of one official language of the host Member State is necessary in order for the professional (ie dental practitioner) to start practicing in the host Member State. However, the control of the language by the host Member State can only be carried out after the recognition of the professional qualification. It is important for professions with patient safety implications, such as dentistry, that a language control is exercised before the professional accesses such a profession.

# FOLLOWING TASKS:

- Ensuring the widespread implementation of preventive programs, educating the public, especially children of pre-preschool and school age – Governmental preventive programs, responsible attitude to oral health,



I think the list of the next tasks of the Integration Working Group should be discussed on the ERO Board , the NDAs of newly independent states.

Now we have new tasks and new Questions for EU Manual...

Also, our working group needs close cooperation, using the developments results of investigations of the other working groups.



Thank you for attention!