

ERO-WG Relationship between dental practitioner and universities

April 2012, Prague

Nermin Yamalik

until now...

Relationship between National Dental Associations (NDAs) and dental faculties within ERO (Phase-1)

(a NDAs-perspective)

- Survey – NDAs (completed, results shared in Sofia, April 2011)
- Article drafted & submitted to International Dental Journal for consideration for possible publication

Collaboration between dental faculties and National Dental Associations (NDAs) within the World Dental Federation-European Regional Organization zone: an NDAs perspective*

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Although improvements in certain oral health measures have been achieved, many global oral health matters and challenges exist. Collaborations and partnerships among various institutions are crucial in solving such problems. The main aim of the present study was to analyse the nature and extent of the partnership between dental faculties and National Dental Associations (NDAs). A questionnaire was developed, focusing on the relationship between NDAs and dental faculties within the World Dental Federation-European Regional Organization (FDI-ERO) zone with regard to major professional activities, such as dental education (both undergraduate and continuing education), workforce issues, improvement of national oral health, and science and knowledge transfer. The questionnaire was sent to all member NDAs within the ERO zone. The response rate was 21/41 (53.65%). The major activities in which NDAs were found to be involved were improvement of national oral health (100%), followed by continuing education activities (90%), whereas the activity which received least involvement was the development of an undergraduate dental curriculum (52%). The NDAs perceived their relationship with dental faculties to be quite satisfactory in the fields of continuing education, science and knowledge transfer, and the implementation of new technologies into daily dental practice. However, it was suggested that their relationship needed significant improvement with regard to the development of an undergraduate dental education curriculum, dental workforce issues and negotiations with the authorities regarding professional matters/issues. As the two important elements of organised dentistry, NDAs and dental faculties have a significant role to play in the improvement of oral health and in finding solutions to global oral health challenges; therefore, their collaboration and partnership are crucial for this purpose. On the basis of the perceptions of NDAs regarding their relationship with dental faculties, it can be concluded that their partnership can and should be further improved.

Key words: Collaboration, dental associations, dental faculties, oral health policy

It is clear that, in general, the context of health and the provision of health care are complex issues with a wide variety of determinants (e.g. social, economical, cultural, professional, educational, political, etc.)^{1,2}.

*This project was conducted by the European Regional Organization (ERO) Working Group 'The Relationship Between Dental Practitioners and Universities' and was presented at the ERO Plenary Session 2011, Sofia, Bulgaria.

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Further, many health professions, payers, institutional organisations, governmental bodies, nongovernmental organisations and private sectors, each having their own weaknesses and strengths, are involved, and their interaction in the form of partnerships and collaboration is crucial for the improvement of health and the provision of healthcare services³⁻⁸. Increasing areas of collaboration and widening extents of partnerships between various health professions, health disciplines, specialities, governmental and nongovernmental organizations and health professionals are both expected and experienced each day and in every field of health³⁻⁷. Partnerships in translation for advancing research and clinical care are likely to be important areas in which

As a NDA, how would you consider ?

	Occasionally	Often	Very rare	Rare	No idea
1. The frequency of your relationship with the dental faculties in your country?					
2. Are you involved in the development of undergraduate dental curriculum ? (e.g. a practice-based dental curriculum) If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
3. Are you involved in planning and providing of CE? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
4. Do you have a collaboration with dental faculties regarding the relationship with authorities related to dental issues/matters? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
5. Do you have a collaboration with dental faculties regarding timely and efficient knowledge transfer? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
6. Do you have a collaboration with dental faculties regarding implementation of new technologies to dental practice? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
7. Do you have a collaboration with dental faculties regarding improvement of national oral health in your country? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
8. Do you have a collaboration with dental faculties regarding the dental workforce issues in your country? If yes, in what way? Please specify: If yes, how would you consider your collaboration with dental faculties in this area?	Yes Very poor	No Poor	 Average	 Good	 Excellent
9. Which areas do you think your relationship with dental faculties need particular improvement? <input type="checkbox"/> relationship in the field of planning of undergraduate dental education <input type="checkbox"/> relationship in the field of planning of continuing dental education <input type="checkbox"/> relationship in the field of improvement of national oral health <input type="checkbox"/> relationship in the field of planning of dental workforce <input type="checkbox"/> economical and political issues related to dental profession <input type="checkbox"/> others.. (please specify..)					
10. How would you propose to improve your collaboration with the dental faculties in those areas where improvement is needed? Please specify;					
11. Do you feel that dental faculties and national dental associations act and treat each other as partners?	Yes	No	Not always	Very rare	No idea

Figure 1. Questionnaire: analysis of the nature and extent of collaboration between National Dental Associations (NDAs) and dental faculties in the European Regional Organization (ERO) zone.

security system, infrastructure, problems of dental students and oral health programmes. In some countries (e.g. Austria), NDAs were the only organisations legitimized to negotiate with the authorities with regard to the interests of dentists as a whole; in others, they were involved in negotiations in an advisory capacity (e.g. Israel, the Netherlands). NDAs were also actively involved in knowledge transfer, mainly through meetings, congresses, web sites, journals, e-mail, SMS

network, publishing of dental books (Czech Republic), national CE programmes (Italy), public announcements and press notices (Israel). All NDAs participated in preventative programmes and activities aimed at improving public awareness of oral health issues. Dental workforce issues were also an area in which NDAs played a role. For example, in Turkey, the NDA is conducting studies and workshops on the employment and unemployment of dentists, and in Spain,

Table 1 Professional areas in which National Dental Associations (NDAs) within the European Regional Organization (ERO) zone are mainly involved (%)

Main activities of NDAs	%
Improvement of national oral health	100
Provision of continuing education	90
Planning of continuing education	89
Negotiations with authorities (economical and political matters)	86
Knowledge transfer	75
Dental workforce issues	67
Implementation of new technologies	62
Development of undergraduate curriculum	52

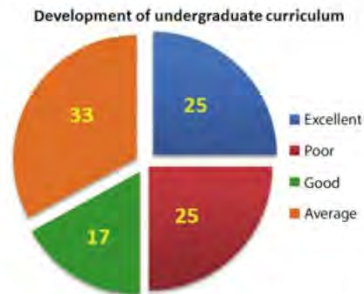


Figure 2. Perceived nature of the relationship between National Dental Associations (NDAs) and dental faculties with regard to the development of an undergraduate dental education curriculum (values are percentages).

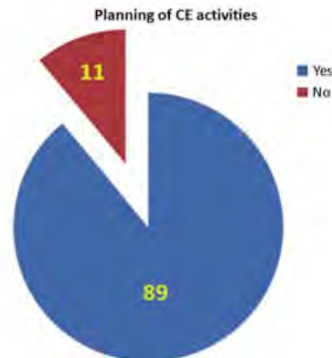


Figure 3. The extent of participation of National Dental Associations (NDAs) within the European Regional Organization (ERO) zone with regard to the planning of continuing education (CE) activities (values are percentages).

Slovakia and Austria, NDAs maintain the registration and licensing of dentists. In France, the NDA is actively involved in rethinking and redefining the ‘Dental Team’, and the roles and responsibilities of each of its members, and also conducts work on workforce

Table 2 Perceived relationship of National Dental Associations (NDAs) with dental faculties in the European Regional Organization (ERO) zone (%)

Area of collaboration	Excellent	Good	Very poor	Poor	Average
Improvement of national oral health	10	57	9	14	10
Provision of continuing education	21	37	5	5	32
Planning of continuing education	24	47	N.A.	6	23
Economical, political matters	11	33	N.A.	17	39
Knowledge transfer	20	47	N.A.	13	20
Dental workforce issues	14	36	7	14	29
Implementation of new technologies	14	57	7	7	15
Development of undergraduate curriculum	25	17	N.A.	25	33

N.A., not applicable.

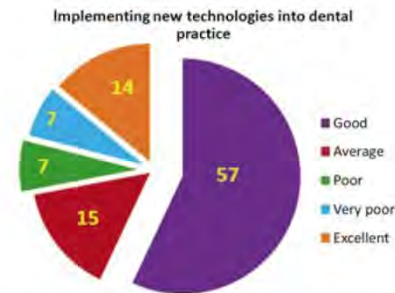


Figure 4. Perceived partnership with dental faculties with regard to the implementation of new technologies into dental practice (values are percentages).

demographics and the continuity of care. In other countries (e.g. Austria, the Netherlands), NDAs are also part of the decision-making process with regard to the quota for students of dentistry.

In *Table 2*, we see how NDAs perceive their relationship/collaboration with dental faculties in their country with regard to particular professional activities and tasks. When the sum of the excellent and good results was considered, it was found that the implementation of new technologies into dental practice (71%) (*Figure 4*) and the planning of CE (71%) were the two areas in which NDAs felt that they had a good partnership with dental faculties. Dental workforce issues (50%), development of an undergraduate dental curriculum (42%) and negotiations with authorities regarding economical/political matters (44%) were areas in which NDAs were not totally satisfied with their collaboration with dental faculties (<50%). *Table 3* shows the professional areas that require

Table 3 Professional areas that require improved collaboration between National Dental Associations (NDAs) and dental faculties in the European Regional Organization (ERO) zone

Area of collaboration	%
Economical, political matters	19
Development of undergraduate curriculum	19
Dental workforce issues	19
Provision of continuing education	19
Improvement of national oral health	17
Planning of continuing education	7

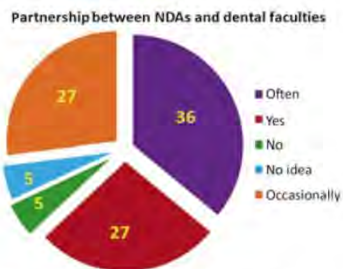


Figure 5. Responses of National Dental Associations (NDAs) with regard to the partnership between NDAs and dental faculties (values are percentages).

improved collaboration between NDAs and dental faculties. All areas, except the planning of CE (7%), are suggested to require a similar level of improvement (17–19%). NDAs suggested that the active cooperation of dental faculty management personnel, the appointing of members of the profession (NDAs) to the governing bodies of universities, the achievement of a tighter contact between counterparts, the establishment of mutual working groups, the stimulation of cooperation with prominent scientists and professors, greater collaboration in dental force planning and student intake, and regular exchanges and joint meeting/activities could help to further improve the professional partnership between NDAs and dental faculties.

Although the majority (63%) felt that counterparts treated each other as partners, some NDAs stated that a real partnership was not evident (Figure 5).

DISCUSSION

Different educational and professional developments within the dental field create different sets of missions, norms and practices with regard to dental diseases and their appropriate treatment¹⁵. Agencies and individuals interested in making improvements in oral health status in any particular target group may begin a process of working with others who have an interest in improving

the health and well-being of that target group. In a world that is increasingly synergistic and mutually dependent, improvements in oral health can be advanced by considering the elements of successful coalition building and by forming partnerships with multiple organizations and individuals⁵. Collaborative partnerships (people and organizations from multiple sectors working together in a common purpose) are a prominent strategy for community health improvement^{6,11}. Thus, it is important develop efficient partnerships, and there are clearly defined compelling reasons for professionals in health and human services administration to collaborate with other stakeholders in the community. However, there are also barriers to such collaboration, and experiences with such partnerships may not always generate positive outcomes: recent research on partnership synergy – a key indicator of a successful collaboration process – has suggested that many of these partnerships are inadvertently compromising their own success by the way in which they involve community stakeholders¹³.

The present study has revealed that NDAs and dental faculties within the ERO zone have many activities in common. They have relationships in a wide array of professional areas, including continuing professional development, knowledge and science transfer, dental workforce issues and improvement of oral health at the national level. Improvement in national oral health is considered to be an important area in which synergy between various stakeholders is required, and increased collaboration with the public health sector and bold leadership in dental education are advocated¹¹. As 100% of NDAs are involved in activities attempting to improve public oral health in their countries, an improved partnership with dental faculties would be in line with public benefits and professional principles and missions.

In general, the relationship with dental faculties was found to be satisfactory by NDAs in many dental fields. The best level of partnership was observed in collaboration for the planning of CE, the implementation of new technologies into dental practice and knowledge transfer. However, not all partnerships and collaborations have been successful with positive outcomes¹³. It has even been suggested that experience with such partnerships, thus far, has generated frustration rather than results¹³. Our survey has indicated that NDAs are not totally satisfied with their relationship with dental faculties, and has underlined that their relationship requires improvement in certain professional areas. Greater support and collaboration are expected from dental faculties in the development of an undergraduate curriculum, dental workforce issues and in negotiating professional matters with authorities. The ability of a partnership to understand and address complex problems – and to sustain interventions over time – has been

suggested to be related to who is involved in the partnership, how community stakeholders are involved, and the leadership and management of the partnership¹³. In this recent survey, participating NDAs have suggested that further improvement of the collaboration between NDAs and dental faculties is required.

There are many neglected global oral health issues and matters (e.g. the impact of oral health on general health, economic dimensions of oral diseases, burden of oral diseases and the inequalities in oral health care, barriers to oral healthcare services, workforce challenges, etc.), and world figures are not positive with regard to oral health and diseases.^{16,17}. Even in developed countries, there are underserved populations and disparities in oral health care^{17,18}, and the situation is becoming even worse globally¹⁷. Furthermore, all the available data and statistics demonstrate that a variety of health actions need to be taken to solve these matters^{16–18}. Therefore, the collaboration between dental faculties and NDAs is crucial in solving these problems.

As a profession, dentistry has the responsibility to serve all the community, and the mission of many professional dental organisations is to improve oral health for all^{7,8,18,19}. However, the role and mission of dental faculties can be redefined based on concepts such as professionalism, social justice, moral competency and changing expectations from dentists^{7,8,19,20}. The public expects the new professionals from dental schools to have a certain level of expertise, but also to use it with integrity and public interest, which may require social awareness and concern about national and global dental problems²⁰. Thus, it is natural that the profession (both the individual dentists and all components of organised dentistry) should be expected to be concerned for these problems and to take a leading role in addressing such matters and issues, and in advocating oral health^{7,8,19,20}. The present study has revealed that all NDAs are involved in the improvement of oral health in their country; most NDAs are also involved in workforce issues and have a certain level of relationship with dental faculties in these fields. However, it is also obvious that greater collaboration is needed among everyone involved in dentistry to further improve public oral health at both a national and global level. This is reflected in this survey, as NDAs listed improvement in national oral health (17%) and dental workforce issues (19%) among the fields in which better partnerships between NDAs and dental faculties are needed.

Although this study was conducted in Europe, it is possible that there may be certain similarities between the relationship of NDAs and dental faculties in different parts of the world. This may be an issue worth analysing through a more global approach. Nevertheless, it is also important to consider the conditions and factors that may determine whether collaborative part-

nerships are effective^{3,4,6}. Thus, there is a need for regular analysis of the trends in collaborative partnerships in the oral health arena.

The present study highlights the importance of active cooperation between NDAs and dental faculties – the two major institutions in the oral health arena. Furthermore, the results may be considered as important as they aid counterparts to better understand the needs/demands of one another and serve as a guide to identify efficient ways of improving their relationship.

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This project was developed by the ERO Working Group ‘The Relationship Between Dental Practitioners and Universities’. The authors wish to thank all members of the Working Group and Monica Lang for their kind support. The authors are also grateful to all the NDAs within the ERO zone who responded to the questionnaire.

REFERENCES

1. Gilson L, Sen PD, Mohammed S *et al.* The potential of health sector non-governmental organizations: policy options. *Health Policy Plan* 1994 9: 14–24.
2. Gellert GA. Non-governmental organizations in international health: past successes, future challenges. *Int J Health Plann Manage* 1996 11: 19–31.
3. Dewa CS, Trojanowski L, Cheng C *et al.* Lessons from a Canadian province: examining collaborations between the mental health and justice sectors. *Int J Public Health* 2011; DOI:10.1007/s00038-011-0268-2.
4. Woodford JD. Synergies between veterinarians and para-professionals in the public and private sectors: organisational and institutional relationships that facilitate the process of privatising animal health services in developing countries. *Rev Sci Tech* 2004 23: 115–135.
5. Beaulieu E. Partnerships for better oral health. *Int J Dent Hyg* 2003 1: 101–104.
6. Roussos ST, Fawcett SB. A review of collaborative partnerships as a strategy for improving community health. *Annu Rev Public Health* 2000 21: 369–402.
7. Masella RS. Renewing professionalism in dental education. *J Dent Educ* 2007 71: 205–216.
8. Dharamsi S, Pratt DD, MacEntee MI. How dentists account for social responsibility, economic imperatives and professional obligations. *J Dent Educ* 2007 71: 1583–1592.
9. Greenlee RT, Coleman LA, Nelson AF *et al.* Partnerships in translation: advancing research and clinical care. The 14th Annual HMO Research Network Conference, April 13–16, 2008, Minneapolis, Minnesota. *Clin Med Res* 2008 6:109–112.
10. Hood JG. Service-learning in dental education: meeting needs and challenges. *J Dent Educ* 2009 73: 454–463.
11. Mouradian WE, Huebner C, DePaola D. Addressing health disparities through dental-medical collaborations, Part III: leadership for the public good. *J Dent Educ* 2004 68: 505–512.
12. Raftar ME, Pesun IJ, Herren M *et al.* A preliminary survey of interprofessional education. *J Dent Educ* 2006 70: 417–427.
13. DeAngelis S, Warren C. Establishing community partnerships: providing better oral health care to underserved children. *J Dent Hyg* 2001 75: 310–315.

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Relationship between National
Dental Associations (NDAs)
and dental faculties within
ERO (Phase-2)

(a dental faculty-perspective)

Questionnaire-

adapted for dental faculties

- Consent from member NDAs requested (France & UK)
Not sent to Cyprus (no dental faculties)
Not sent to UK & France
- Receive the latest list of dental schools from ADEE
- Request of list of dental schools from NDAs (German Dental Association – Thank you).
- Questionnaire - sent to dental schools excluding France, UK and Cyprus – **17.August.2011** – Based on ADEE list and dental schools in Germany

Questionnaire

A total of **173** e-mail addresses

Reminder sent in November

36 responses received until the day this presentation was prepared.

Response rate 36/173

20.8 %

Thank You..

Croatia (2)

Denmark

Estonia

Finland

France (9)

F.Y.R.O.M

Georgia

Germany (2)

Italy (2)

Ireland

Israel

Latvia

Lithuania

Hungary

Netherlands

Norway

Poland

Portugal

Slovakia

Serbia

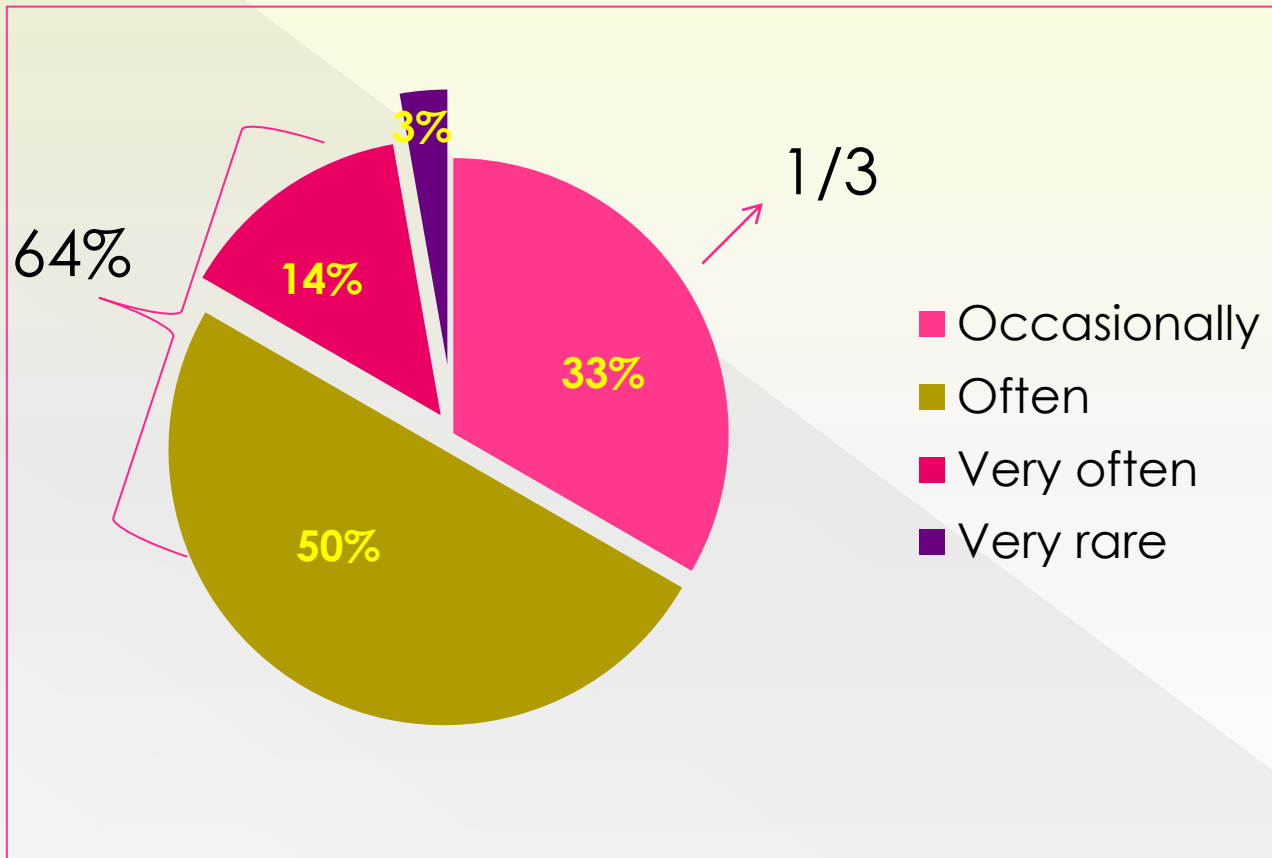
Spain

Switzerland

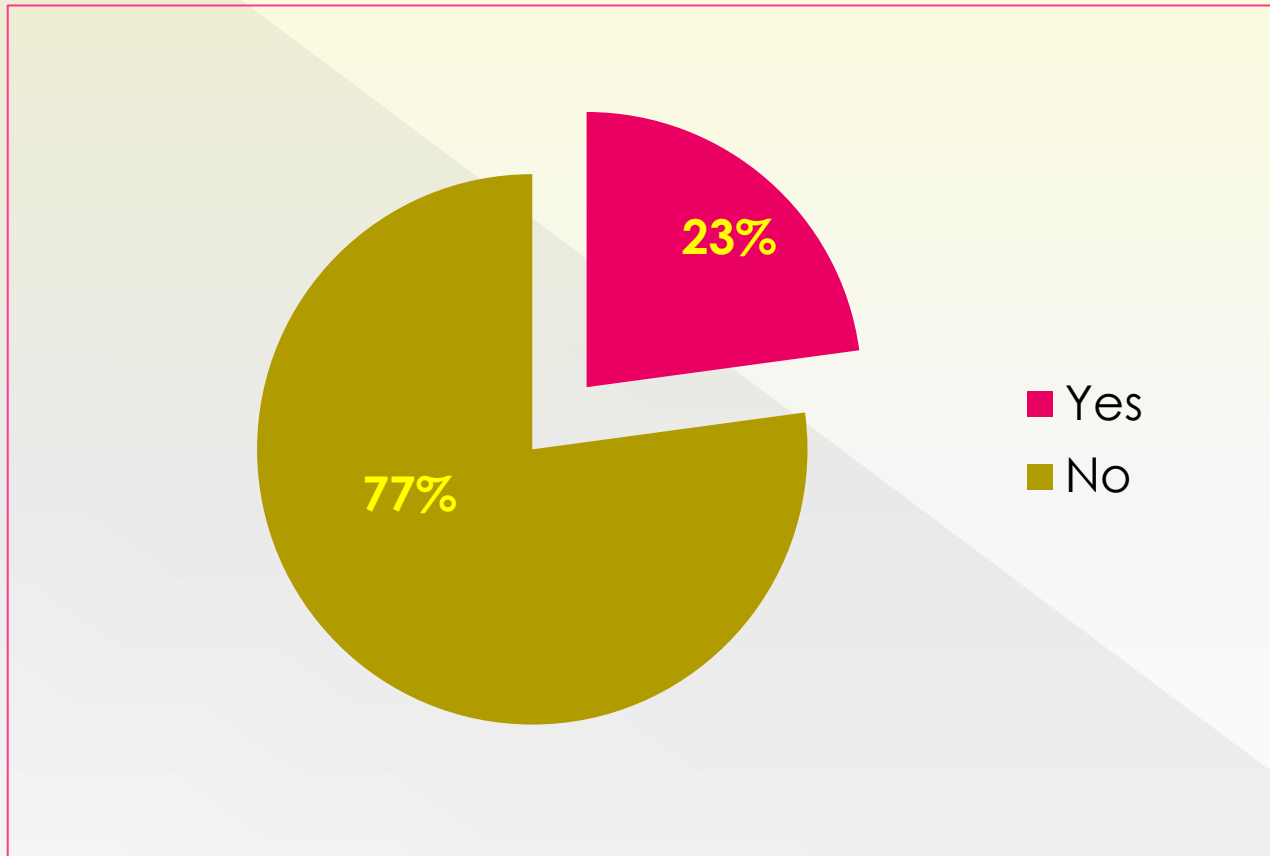
Turkey (3)

a brief analysis..

Question 1. How would you consider the frequency of your overall relationship with the NDA in your country?



Question 2. Is the NDA involved in the development of undergraduate dental curriculum ?



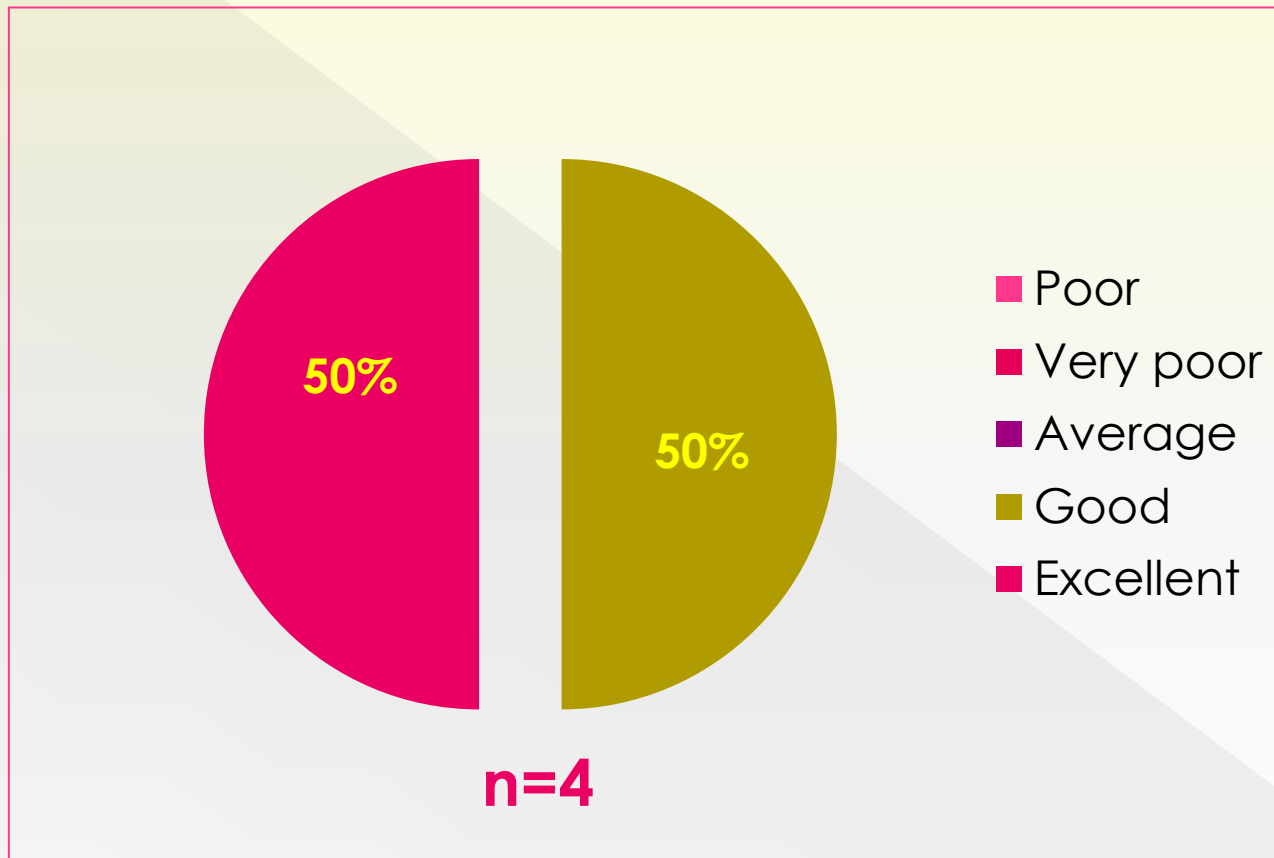
Question 2. Is the NDA involved in the development of undergraduate dental curriculum ? If yes, in what way? Please specify..

- Members of Polish Dental Chamber are also scientific university staff – **Poland**
- The Conference of Dental Deans and the NDA developed together a catalogue of core competences needed in all undergraduate dental curricula in Spain. This catalogue was subsequently made law by our government – **Spain**
- Deliberative body – **Lithuania**
- For OMFS only: the NDA on a nationwide level is made up to some extent by representatives of the faculties and the practitioners, so there are overlapping activities of the members in the committees involved (i.e. first of all of the dental faculty members)- **Germany (1)**
- Special lectures - **Germany (2)**

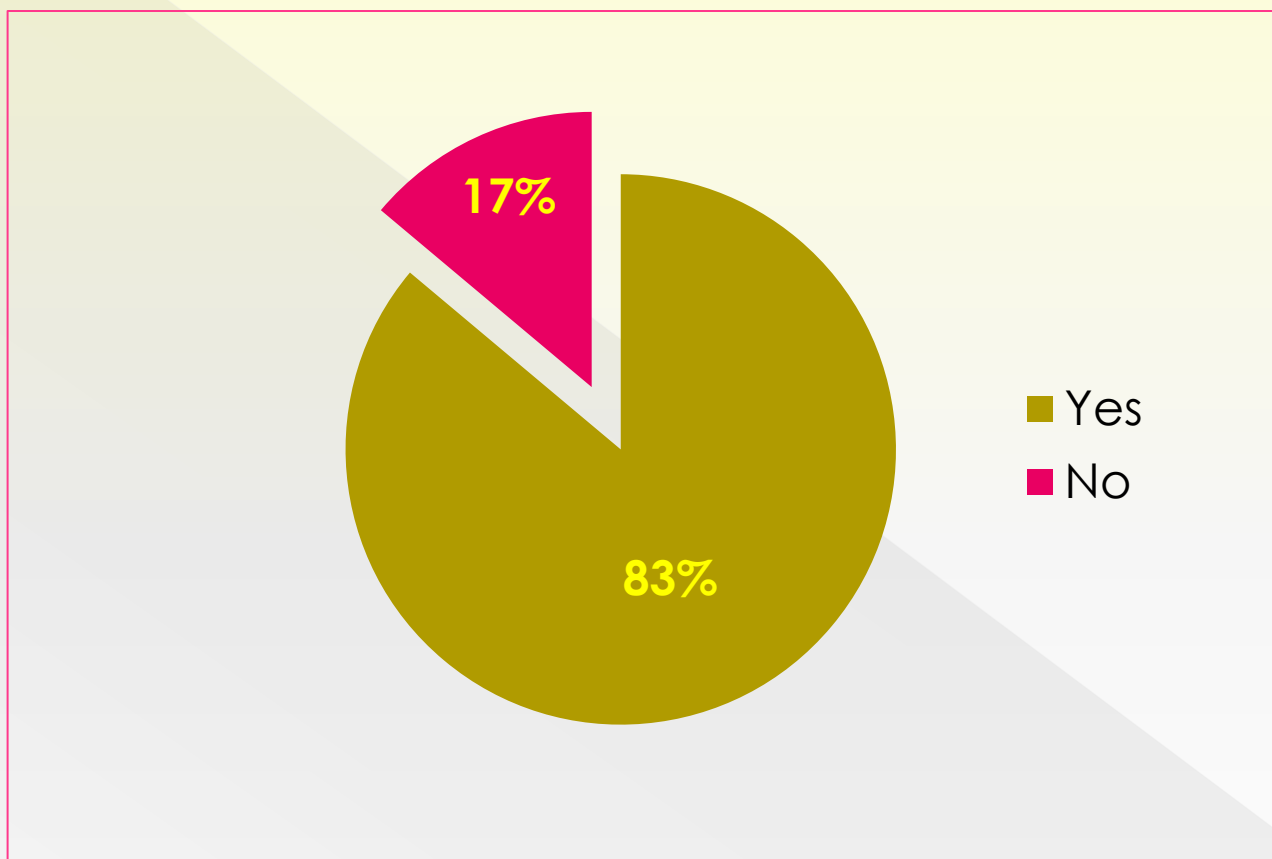
Question 2. Is the NDA involved in the development of undergraduate dental curriculum ? If yes, in what way? Please specify..

- We develop clinic competences in undergraduate dental curriculum with the introduction of hospitals clinic activities and community health dental activities-**Portugal**
- The NDA is involved in the development of the undergraduate curriculum by incorporation of the remarks given by the NDA during the preparation of the current curriculum – **F.Y.R.O.M**
- The Italian law on undergraduate dental curriculum is accepting EU texts on Competencies by ADEE and Dented, that were discussed and submitted to NDAs CDO and relevant authorities in each country and extensive consideration was given to comments. In Italy the profile document was even translated into Italian language– **Italy (2)**
- Curriculum design is the University's main responsibility-**Estonia**

If yes, how would you consider your collaboration with the NDA in this area?



Question 3. Are you involved in planning of continuing dental education?



Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- Postgraduate academic courses; congress, cultural event – **Italy**
- Planning and giving education – **Finland**
- As a head of the School, organizing and accrediting continuing educational program, supervising their program and level of quality – **Hungary**
- The faculties are represented in the planning group. Staff from faculties are often used as lecturers – **Norway**
- Within our faculty we have the ACTA dental Education BV (corporation) which has a 30-40% market share in the CE – **Netherlands**
- Dental faculty offers CE to all dentists – **Denmark**

Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- Members of Polish Dental Chamber are also scientific university staff – **Poland**
- In our institution we have an extensive program of CE including more than on hundred courses and involving more than 700 dentists – **Spain**
- The faculty participates in creating residency programs and together with NDA organizes FDI CE conferences.-
Georgia
- Planning continuing education courses; making programs of the courses – **Lithuania**
- Organisation of postgraduate courses and programs –
Switzerland
- Arranging continuing education – **Israel**

Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- I organize continuing dental education on my faculty-
Croatia (1)

- We are organising various types of CPD programmes.

- We have didactic and hands-on CPD courses for external practitioners in our School, and I organise some of these –
Croatia (2)

- We have didactic and hands-on CPD courses for external practitioners in our School, and I organise some of these –
Ireland

- Scientific consultant and lecturer of Dental Chamber –
Germany (2)

- Motivating the students and questioning the new graduated students on their necessities in clinic practice-
Portugal

- The planning is in coordination with the Board of the NDA in order to see the topics which will be of interest to the practitioners. – **F.Y.R.O.M**

Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- Planning of CE is one part of our job. Dental meetings and workshops in the dental faculty, meetings in collaboration with other Health faculty at the level of university- **France 1**
Post graduate diploma and Professional meeting (Entretiens de Garancière every september – 4 days – 80 events -1200 congressists) – **France 2**
- All ways of dentistry – **France 3**
- We are continuing different National Reforms concerning the Licence – Master – Doctorate to be in phase with the European Dental Education System (ADEE) – **France 4**
- One shot journey about one theme, University diplomas, regional congress- **France 5**

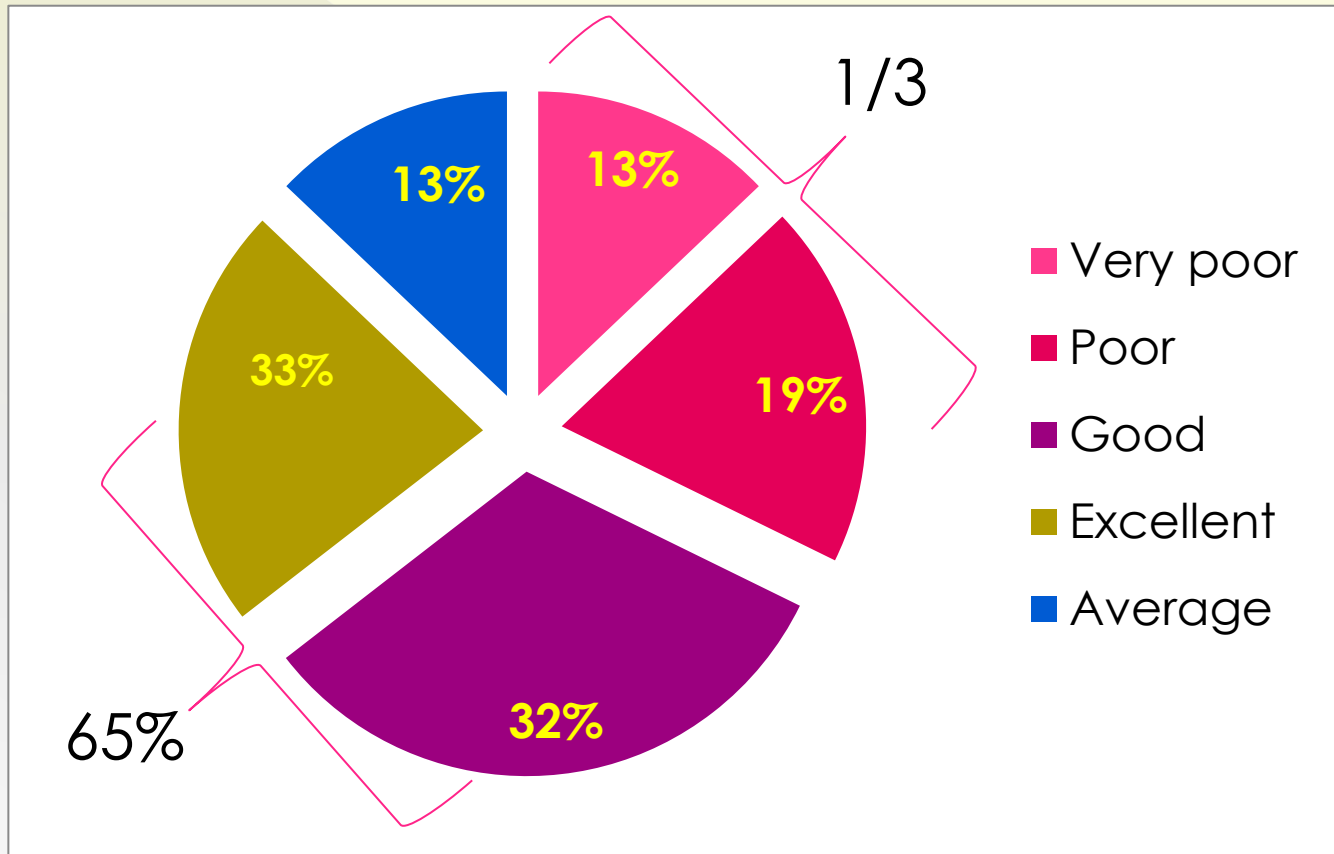
Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- University diplomas – **France 6**
- Collège des bonnes pratiques, Recommandations HAS, Congrès national de l'ADF strongly involves the teaching searchers - **France 8**
- We often organize CDE for dentists to improve themselves – **France 9**
- I'm involved only as a teacher in Oral mucosa disease courses for postgraduate studies , which are organized by Dental Assotiation- **Latvia**

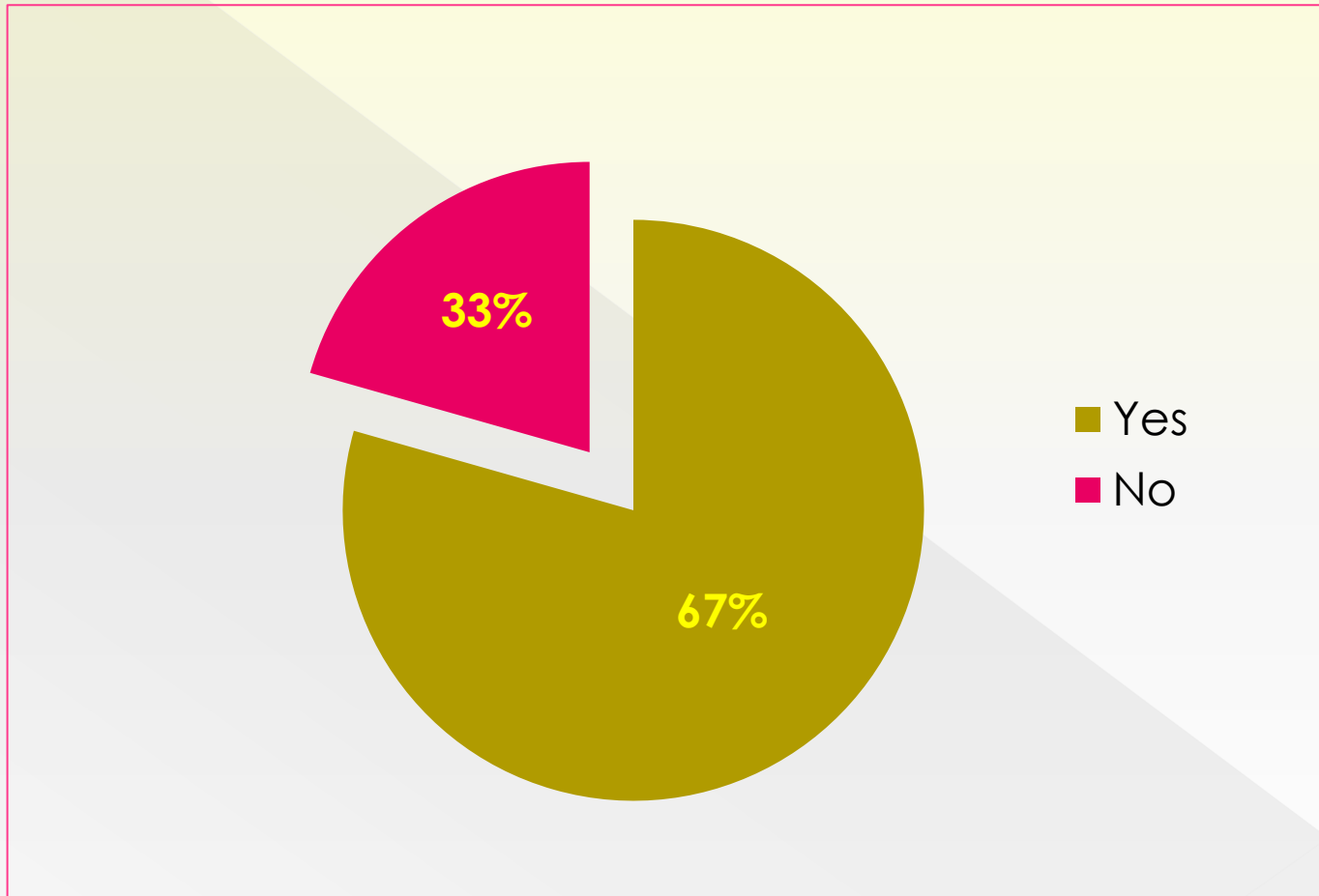
Are you involved in planning of continuing dental education? If yes, in what way? Please specify:

- Universities are offering masters and other courses according to a geographic planning and coverage of the country. The Ministry of Health Commission on CE is formed by delegates of the relevant authorities and associations in dental field. – **Italy (2)**
- As part of the education team in our faculty, we have been planning seminars for both undergraduate and graduate students, we also have literature classes in order to keep updated – **Turkey (2)**
- I have participated in the process of programme design for the annual dental meeting, there is CE programme available from the University also- **Estonia**

If yes, how would you consider your collaboration with the NDA in this area?



Question 4. Are you involved in provision of continuing dental education?



Are you involved in provision of continuing dental education? If yes, please specify..

- As a head of the School, organizing and accrediting continuing educational program, supervising their program and level of quality – **Hungary**
- The faculties are developing programs for continuing dental education within the different disciplines – **Norway**
- Within our faculty we have the ACTA dental Education BV (corporation) which has a 30-40% market share in the CE – **Netherlands**
- Overall responsible – **Denmark**

Are you involved in provision of continuing dental education? If yes, please specify..

- Planning the program - **Poland**
- Yes in my position as Dean (planning) and as Professor of Periodontology by imparting courses in Periodontology and implant dentistry – **Spain**
- The faculty participates in creating residency programs and together with NDA organizes FDI CE conferences.- **Georgia**
- Lectures and theme are prepared regularly for each year together Dental Schools and NDA- **Slovakia**

Are you involved in provision of continuing dental education? If yes, please specify..

- Giving continuing education courses – **Lithuania**
- postgraduate education of oral surgeons (oral surgery specialists) organized by the federal state organization of the NDA (pilot project) – **Germany**
- Arranging continuing education – **Israel**
- Teacher from dental school usually are involved as lecturer.-
Croatia (1)
- Members of the teaching staff have been engaged continuously as lecturers – **Croatia (2)**
- Ministering post-graduated courses in endodontics, pedodontics ortodontics and oral rehabilitation - **Portugal**

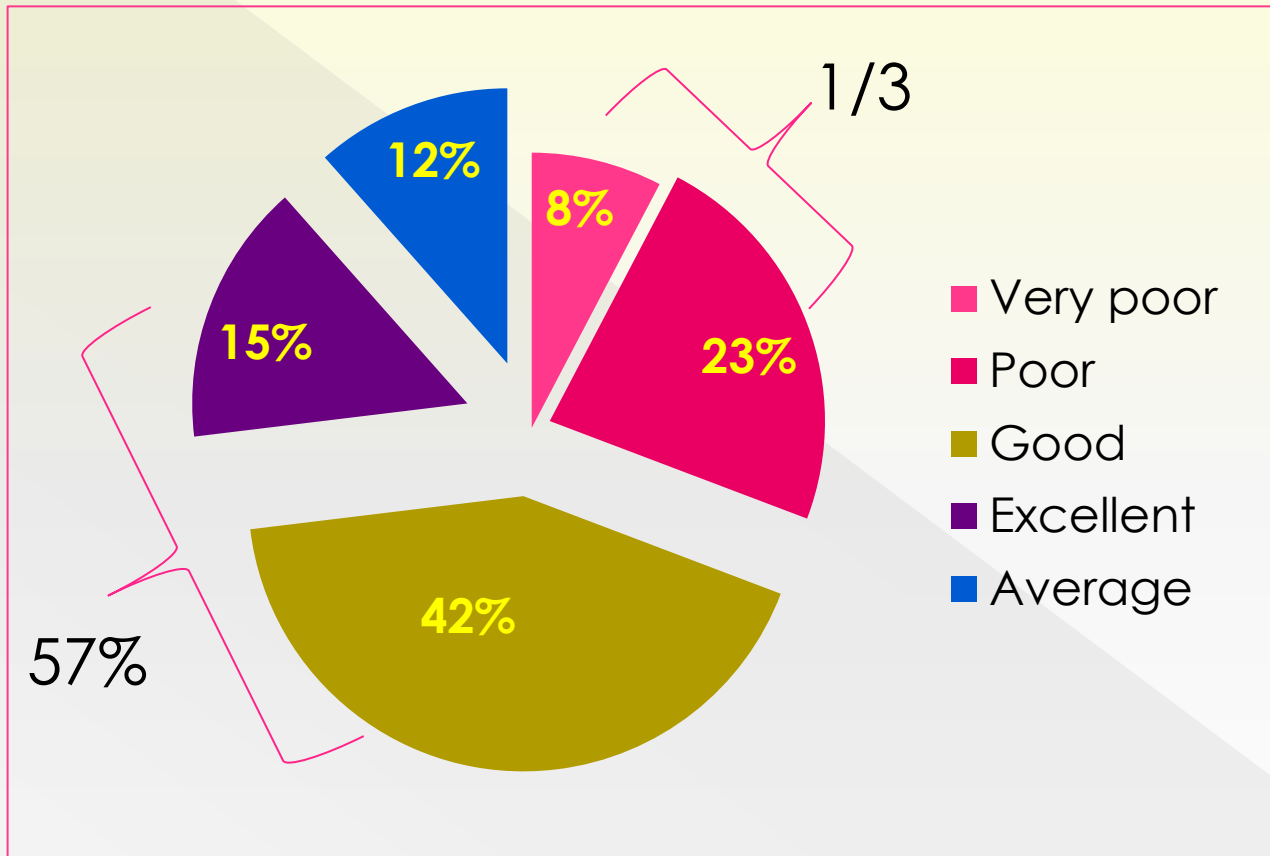
Are you involved in provision of continuing dental education? If yes, please specify..

- The continuing dental education is of utmost importance in our country, so since this faculty is the oldest one and with the highest number of students, it is necessary to take into account the new trends and technologies which are taught at the faculty – **F.Y.R.O.M**
- Many faculties are involved in CDE inside and outside scientific societies/university – **France 1**
- All ways of dentistry – **France 3**
- The same reasons explained before in the point 3 – **France 4**
- One shot journey about one theme, University diplomas, regional congress – **France 5**
- National council of continuous education in odontology – **France 6**
- Annual ADF Congress – **France 8**

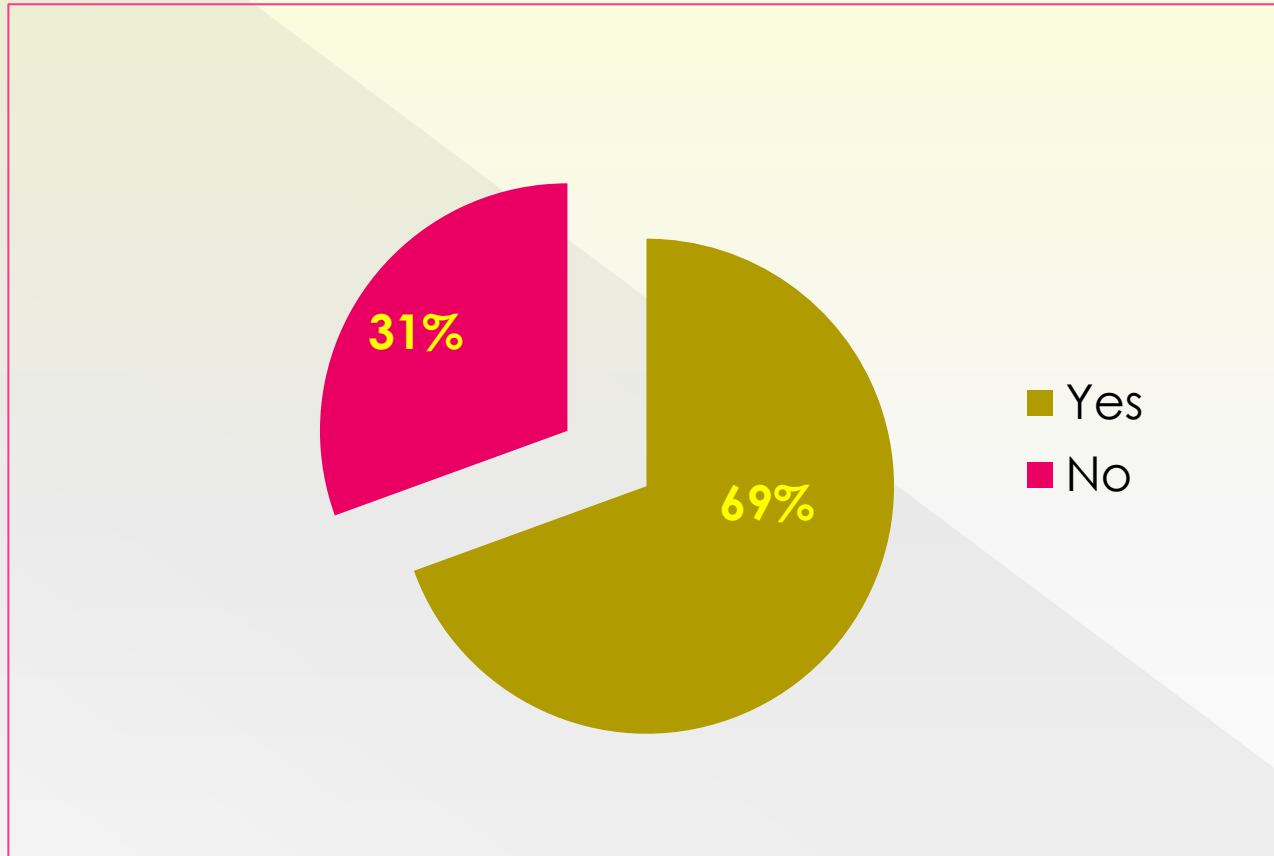
Are you involved in provision of continuing dental education? If yes, please specify..

- University of Brescia is providing postgraduate education and CE courses and congresses. The planning of congresses in our geographical area is on a yearly basis among universities, order, NDA, scientific organization (international, national and topic related). – **Italy (2)**
- At the beginning of each academic year, we over view the education programmes – **Turkey (2)**
- Organising and also giving CE courses at university- **Estonia**
- Faculty members are giving lectures and courses on different oral health topics.-**Turkey (3)**

If yes, how would you consider your collaboration with the NDA in this area?



Question 5. Are you involved in negotiations with authorities concerning dental issues/matters?



Are you involved in negotiations with authorities concerning dental issues/matters? If yes, in what way? Please specify:

- Both for academic reason with the rector of the university and for sanitary assistance - **Italy**
- I am the member of the Ministerial Advisory Committee, and as such I am in the position to be involved in negotiations-
Hungary
- We have continued negotiations on issues involving dental education – in particular the specialist programmes – **Norway**
- Planning of amount of dental students, Quality of dental care etc. – **Netherlands**
- National Body of Health – **Denmark**

Are you involved in negotiations with authorities concerning dental issues/matters? If yes, in what way? Please specify:

- As president of the conference of Dental Deans in Spain – **Spain**
- The faculty members are the members of the Continuing Professional Development Council of the Ministry of Health, Labour and Social Affairs of Georgia – **Georgia**
- With Ministry of Health, with Ministry of Education – **Lithuania**
- There are several meetings in various dental issues organized by chamber or president –**Croatia (1)**
- Occasionally we are asked to participate in giving professional opinion to the Ministry of Health and the National Institute for Health Insurance- **Croatia (2)**

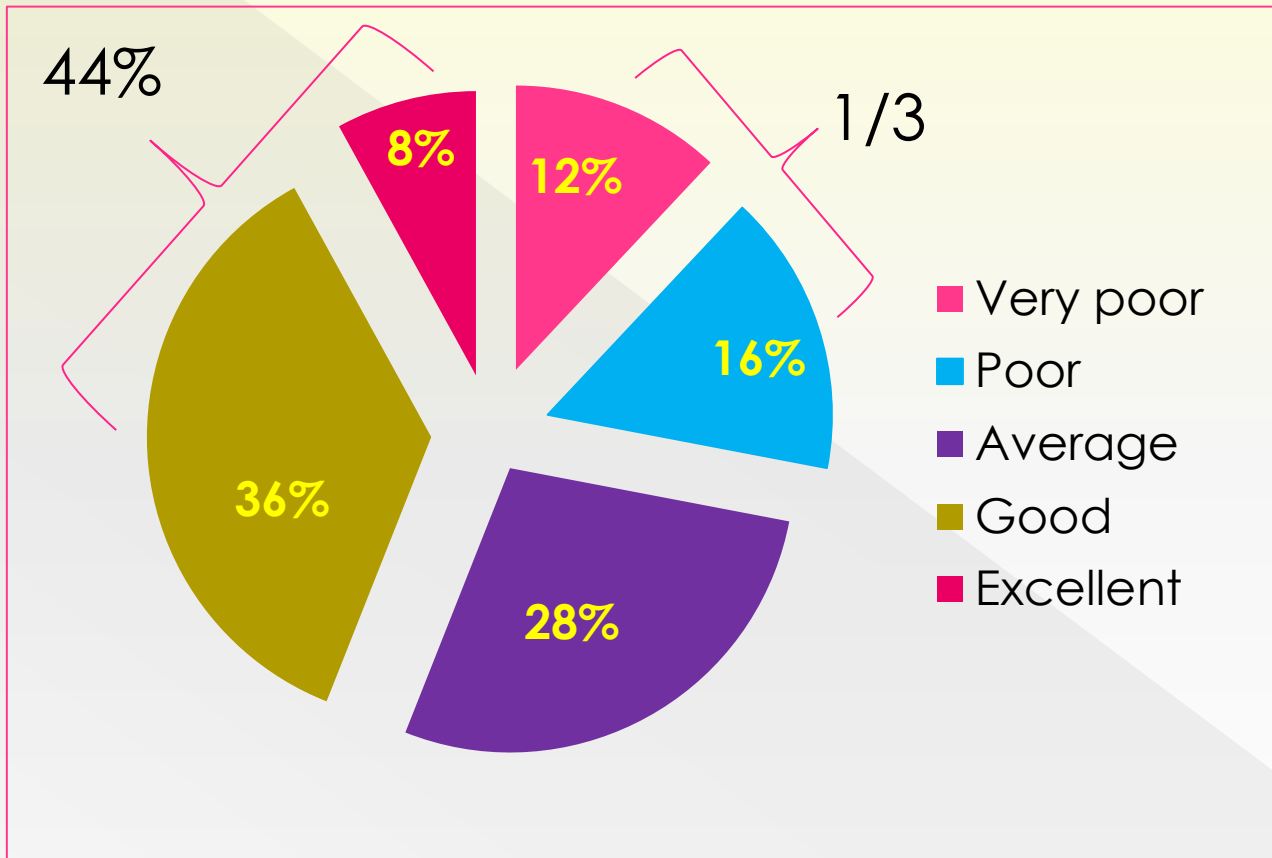
Are you involved in negotiations with authorities concerning dental issues/matters? If yes, in what way? Please specify:

- Policy planning, organisation of services, some dental education matters – **Ireland**
- Mostly in the meetings which are organized by the ministry of health and once in a year ...during Turkish Dental Associations Annual Meeting-**Turkey**
- Celebrating protocols of collaboration for the improvement of hospitals clinic activities for the undergraduate students – **Portugal**
- We are involved in the negotiations regarding the primary, secondary and tertiary dental care, the prices for each intervention, in coordination with the Dental Chamber of Macedonia – **F.Y.R.O.M**
- All ways of dentistry – **France 3**
- Colleagues from the University in the national commission ad hoc – **France 5**

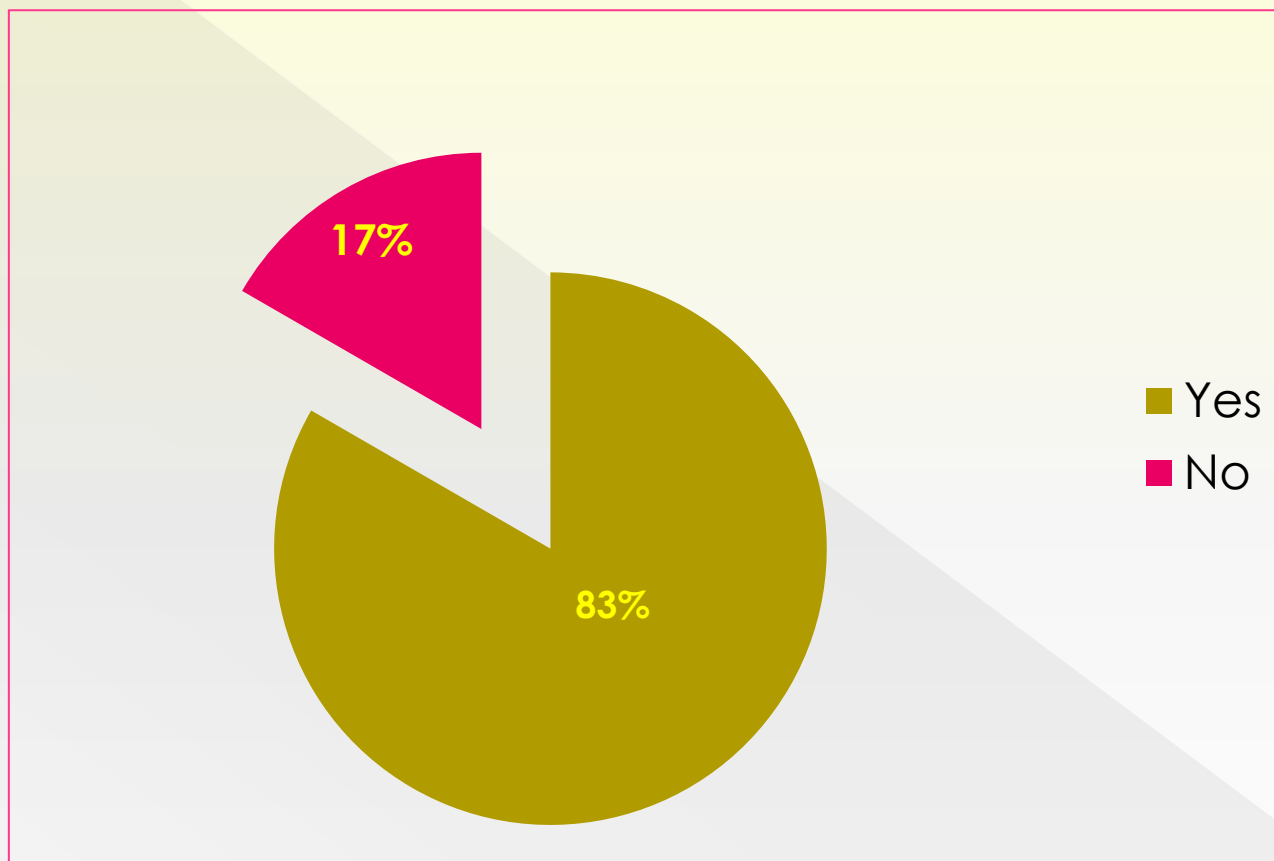
Are you involved in negotiations with authorities concerning dental issues/matters? If yes, in what way? Please specify:

- Discussions with ministries; national commission on dental education in odontology – **France 6**
- Conférence des Doyens en Chirurgie Dentaire, Collège des enseignants, - **France 8**
- i am the chief dental officer for Italy and we speak about needs and desirable level of CE- **Italy (2)**
- We have a new professional speciality examination system for postgraduate students, therefore we have been discussing the matter of the exam content with the authorities – **Turkey (2)**
- Number of annually immatriculated students; treatment guidelines; fees for dental treatment- **Estonia**
- We're negotiating about dental issues with Ministry of Health- **Turkey (3)**

If yes, how would you consider your collaboration with the NDA in this area?



Question 6. Are you involved in the field of knowledge transfer?



Are you involved in the field of knowledge transfer?
If yes, in what way? Please specify:

- Stupid question, an academic education has this responsibility!- **Netherlands**
- Part of our task as a university – **Denmark**
- As a head of Department and professor, heavily involved in teaching – **Hungary**
- All the courses and education involves knowledge transfer – **Norway**
- Organize meeting and courses – **Poland**
- As speaker in conferences and congresses – **Spain**
- The students of the faculty have free access to the Dental Congresses and Conferences organized by NDA.-**Georgia**
- As a Faculty of Odontology, Lithuanian University of Health Sciences in students teaching process, postgraduate education process - **Lithuania**

Are you involved in the field of knowledge transfer?
If yes, in what way? Please specify:

- Diverse cooperations with specific transfer organizations and granted projects established for enhancement of knowledge transfer on a national and a federal state level. Diverse industrial grant projects for mutual knowledge exchange. Usually the NDA is not involved in these collaborations and grants. (i.e. does not apply) – **Germany**
- Lectures, transfer of knowledge- theoretical and clinical- **Israel**
- In all ways as any other institution in the higher education – **Croatia (2)**
- By means of giving lectures in local or national meetings – **Turkey**
- Publications, statements, recommendations- **Germany (2)**
- Collaborating with laboratories of dental materials and or with industry - **Portugal**

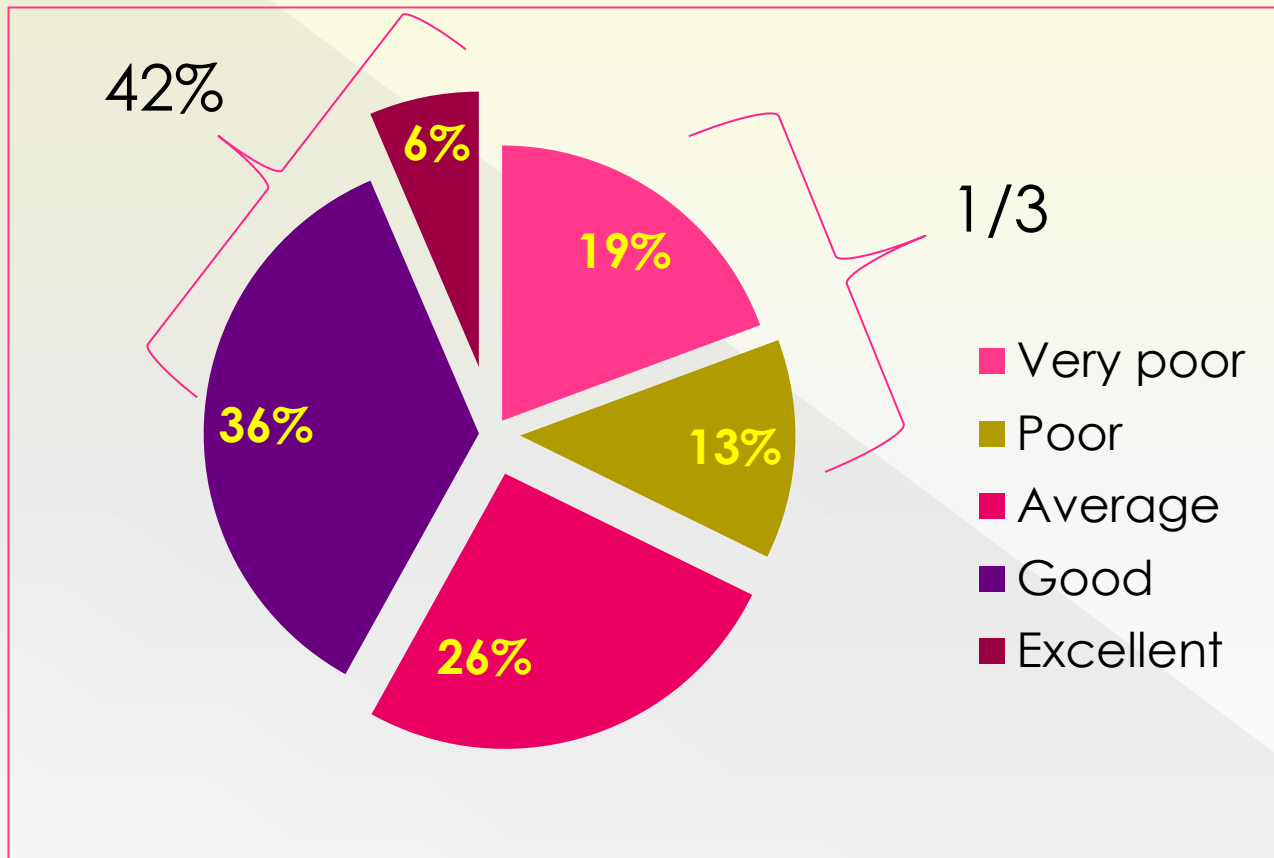
Are you involved in the field of knowledge transfer?
If yes, in what way? Please specify:

- Definitely, our staff gives lectures throughout the country, by invitation of the NDA. – **F.Y.R.O.M**
- Sure – by definition of faculty and university – **France 1**
- All ways of dentistry – **France 3**
- We share knowledges and mutual formation with others health professionnals areas (Medecine Faculty, Chemist Faculty...)-
France 4
- research transfer, licence, publications in the field of fundamental, clinical research and dental education – **France 5**
- Fundamental and clinical research and publications – **France 6**
- I'm involved only as a teacher in Oral mucosa disease courses for postgraduate studies , which are organized by Dental Assotiation –**Latvia**

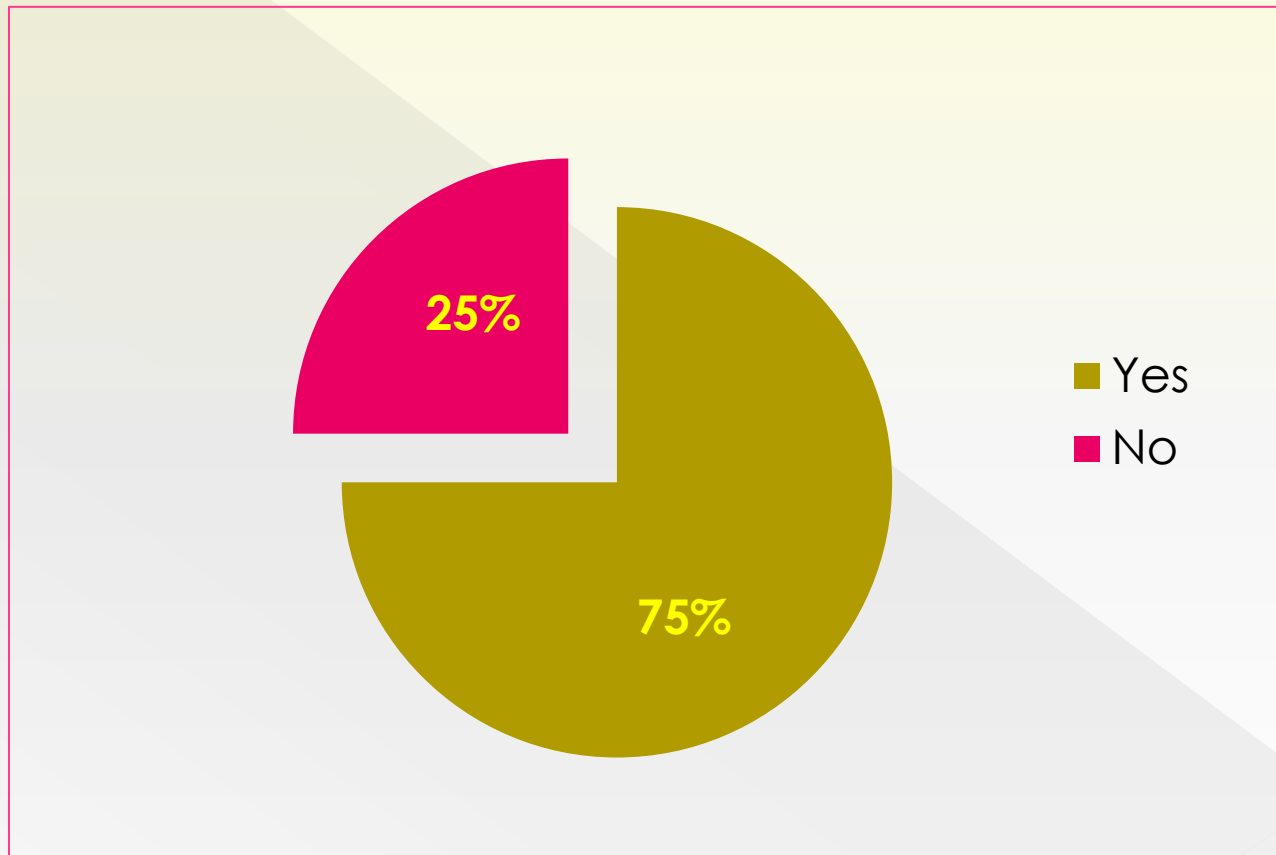
Are you involved in the field of knowledge transfer?
If yes, in what way? Please specify:

- I teach and I am deeply involved in level of knowledge and desirable level of practice – **Italy (2)**
- We encourage our students to attend conferences, symposiums on different areas of dentistry.- **Turkey (2)**
- teach students for 30 years, preparing treatment guidelines for children – **Estonia**
- Faculty members participate and give courses and lectures on the congress and seminars of NDA – **Turkey (3)**

If yes, how would you consider your collaboration with the NDA in this area?



Question 7. Are you involved in implementation of new technologies to dental practice?



Are you involved in implementation of new technologies to dental practice? If yes, in what way? Please specify

- Digital Dentistry is all its issues- **Netherlands**
- As a head of the School I am trying hard to implement new technologies in teaching and dental practice – **Hungary**
- Lectures and articles in national journals- **Norway**
- Invitation of speakers who take part on development or who have the practical experiences - **Slovakia**
- As a University - **Lithuania**
- Development of new technologies with transfer into clinical practice – diverse projects. Usually the NDA is not involved in these collaborations and grants. (i.e. does not apply)- **Germany**

Are you involved in implementation of new technologies to dental practice? If yes, in what way? Please specify

- Lectures, transfer of knowledge- theoretical and clinical – **Israel**
- Many dental factories or dental dealers are interested for clinical or preclinical scientific research.-**Croatia (1)**
- Occasionally we are asked from the dental industry to give professional opinion or provide research in this respect-**Croatia (2)**
- Undergraduate, post-graduate education and CDE– **France 1**
- All ways of dentistry- **France 3**

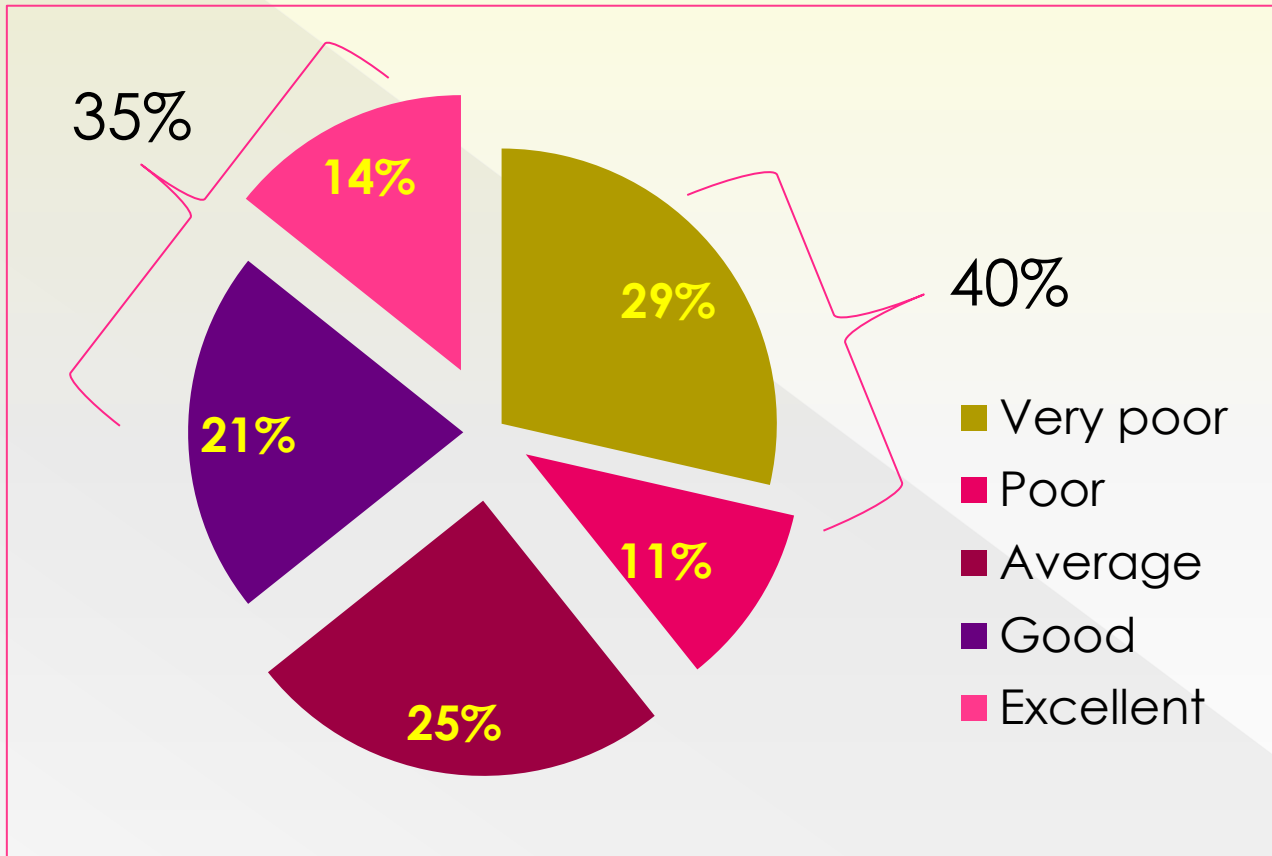
Are you involved in implementation of new technologies to dental practice? If yes, in what way? Please specify

- In all the different points taught in the fields of competence of the French Dental Faculty (oral surgery, endodontics, prosthodontics, orthodontics, implantology, pediatric dentistry, esthetic and restorative dentistry, periodontology and research in biomaterials – **France 4**
- Test and development of new devices – **France 5**
- Research and tests in laboratory; research with others partners – **France 6**
- Clinical research - **France 8**
- We offer a knowledge involving new technologies to our students on a dilay basis. We also have research programs involving these new technologies – **France 9**

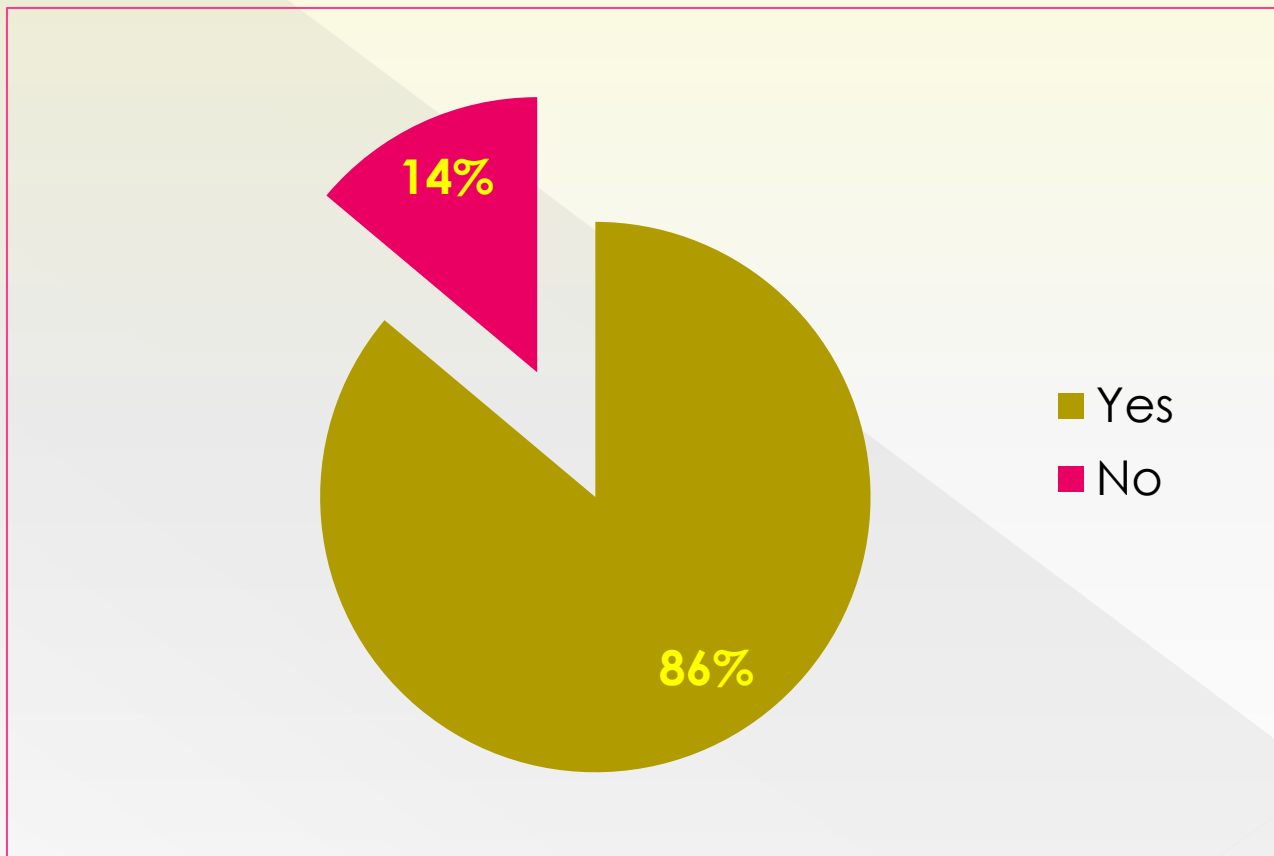
Are you involved in implementation of new technologies to dental practice? If yes, in what way? Please specify

- As a dean and together with Heads of Departments, but not with Dental Association – **Latvia**
- : I am part of international standard organization ISO and CEN – **Italy (2)**
- To keep up-to-date in literature and clinical practice, it is a requisite to follow new technologies, and use them wherever possible. – **Turkey (2)**
- Annual dental meetings, invited lecturers , introducing new technologies to students and GP-s – **Estonia**
- We're using most of developed products, devices and techniques for the success of dental treatment. – **Turkey (3)**

If yes, how would you consider your collaboration with the NDA in this area?



Question 8. Are you involved in the improvement of national oral health in your country?



Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- Research, education, knowledge transfer - **Denmark**
- E.g. as member of the governmental Health Council-
Netherlands
- I am the member of the Ministerial Advisory Committee, and as such I am in the position to be involved in negotiations- **Hungary**
- By research – **Norway**
- Promotion together with the Chamber – **Poland**
- The faculty is involved in Oral Health Care Actions of NGOs –
Georgia

Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- Teaching programmes, national oral health programmes for small childrens a school children, organisation of World oral health day on nationat level, epidemiologic survey of oral health – **Slovakia**
- Students teaching process, creating and implementating oral diseases prevention programs – **Lithuania**
- Granted prevention programmes by the pediatric dentistry department
Usually the DA is not involved in these collaborations and grants. (i.e. does not apply) - **Germany**
- Involvement in various national committees-**Israel**
- **I m not but should be. Croatia (1)**

Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- In many ways we are involved by ourselves taking into consideration our professional mission, but not involved by the health authorities (Ministry, NIHI) as needed – **Croatia(2)**
- Epidemiologic studies – **Germany (2)**
- Please specify: Developing the community dental health in schools and health medical and geriatric centers – **Portugal**
- We are often a part of the preventive dental programs, the last one was organized in April, 2011, by our Faculty, NDA and the Dental Chamber and it was oriented towards the children, in order to improve their oral health and hygiene and dietary habits – **F.Y.R.O.M**

Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- Undergraduate (counselling and clinical teaching) post-graduate and CDE – **France 1**
- All ways of dentistry- **France 3**
- We develop oral health programs with schools and teachers and in another way we participated to national health programs supported by some discipline colleges like the National Oral Health College of Dental and University Professors – **France 4**
- Care of specific populations in the public hospital; undergraduate courses – **France 5**
- Undergraduate curriculum – **France 6**

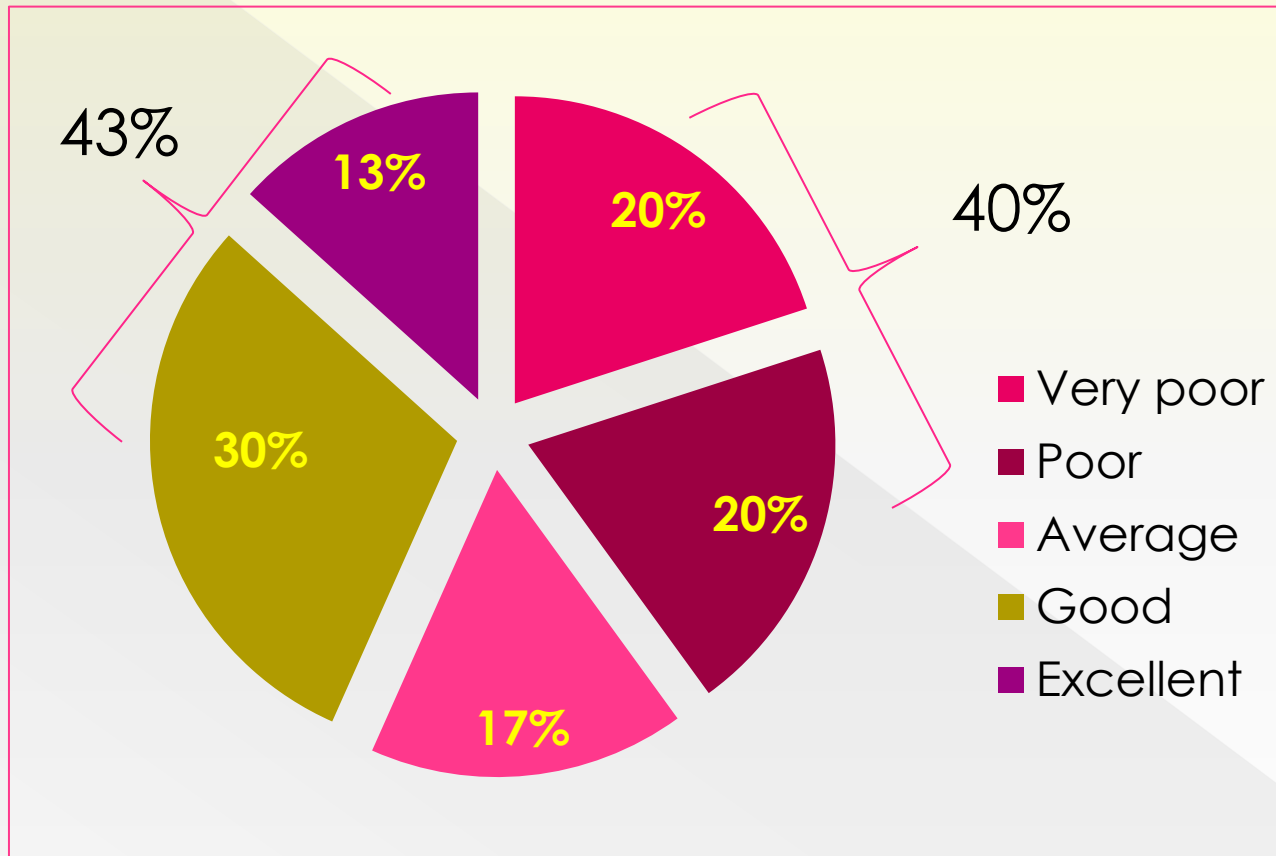
Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- Epidemiological studies - **France 8**
- We have a dental clinic to provide oral health care to public – **France 9**
- As a dean of Faculty, which prepares new specialists in Dentistry - **Latvia**
- As CDO we monitor and have a sentinel program in place – **Italy (2)**
- There have been studies undergoing in our faculty under different specialities to determine the oral health status of our country, and in different patient groups.- **Turkey (2)**

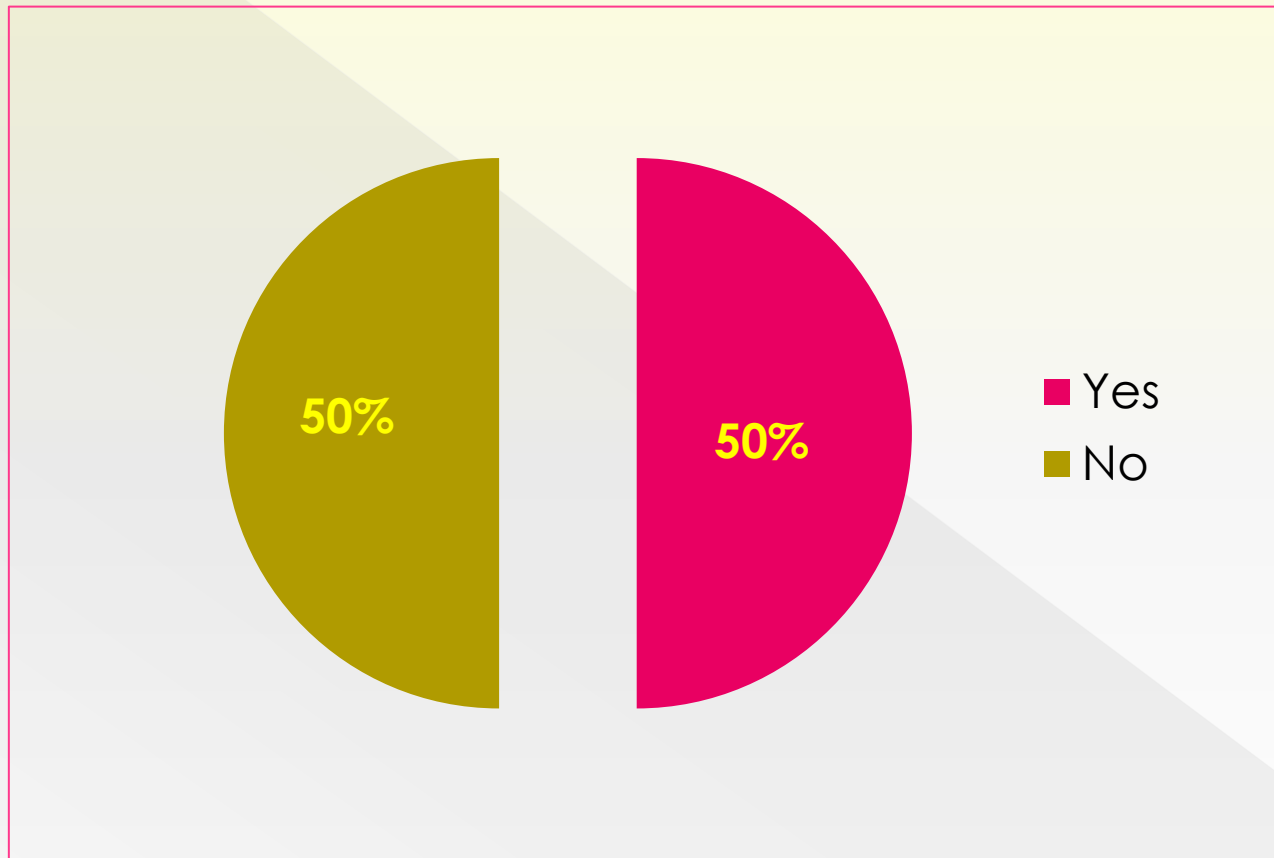
Are you involved in the improvement of national oral health in your country? If yes, in what way? Please specify

- Undergraduate (counselling and clinical teaching) post-graduate and CDE – **France 1**
- During many years joint efforts to carry out projects to improve oral health have been designed- **Estonia**
- Giving information about oral health to public through TV, newspaper, magazines and internet. Also we're trying to give useful information about oral health to patients via recently developed patient school in our faculty-**Turkey (3)**

If yes, how would you consider your collaboration with the NDA in this area?



Question 9. Are you involved in dental workforce issues in your country?



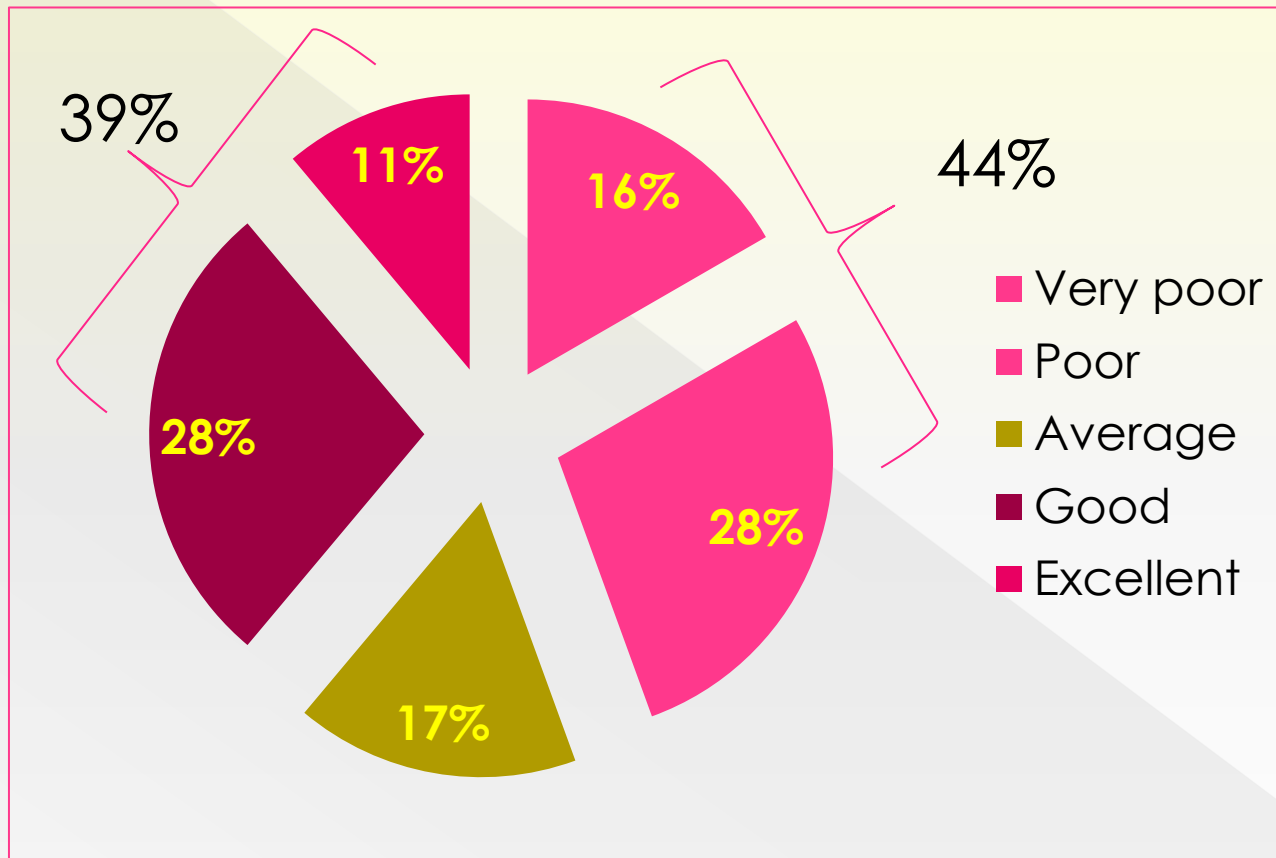
Are you involved in dental workforce issues in your country? If yes, in what way? Please specify

- Member of various WGs under the National Board of Health – **Denmark**
- E.g. as member of the governmental Health Council – **Netherlands**
- As members of working committees – **Poland**
- As a dentists education institution – **Lithuania**
- Articles and communication with the ministry of health- **Israel**
- The faculty takes active role in proposing the Ministry of Health to plan how many students have to enroll the dental undergraduate schools, having in mind the high unemployment rate.- **F.Y.R.O.M**

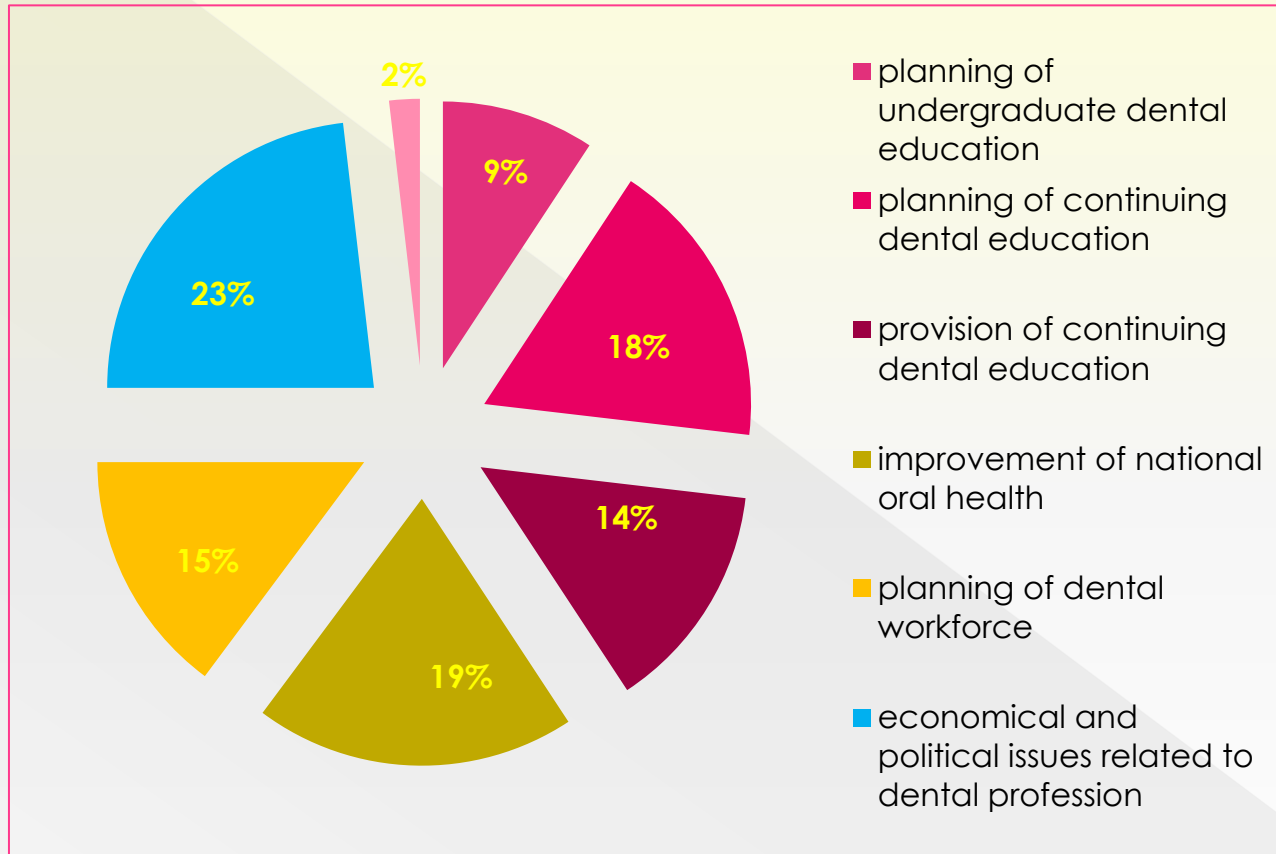
Are you involved in dental workforce issues in your country? If yes, in what way? Please specify

- All ways of dentistry – **France 3**
- National program of clinical research 2002 – **France 5**
- Regarding dental workforce issues in our country - it is planning only by Ministry of Education and Science.-**Latvia**
- As CDO we monitor –**Italy (2)**
- As in all countries, it is important to work under good conditions, respecting human rights.- **Turkey (2)**
- Except educating them, being a member of the committee for issuing certificates for competences – **Estonia**

If yes, how would you consider your collaboration with the NDA in this area?



Question 10. Which areas do you think your relationship with the NDA need particular improvement? Relationship in the field of;



Question 10. Others..

- In returning to a six year's undergraduate course – **Portugal**
- For the feedback obtaining, to ask Dental association help by the employers survey organization to find out the level of the new specialists training,-**Latvia**

Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- New written agreements benefiting both posts – **Denmark**
- The value of NDA's is decreasing, the importance and influence of academic institutes is increasing. It is questionable whether there is a societal need of NDA's – **Netherlands**
- The Finnish NDA has started at the end of last year regular meetings with the deans of the dental institutes, which so far seems to be a good way to broaden everyone's views of what needs to be done – **Finland**
- Members of NDA board should have more meetings and discussion on the issues mentioned above – **Hungary**
- Preparing mutual working group – **Poland**

Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- By acknowledging the importance of the university in these areas (planning of human resources and oral health issues – **Spain**
- NDA should be involved in updating Curriculums – **Georgia**
- The main problem between collaboration is in fact that dental faculty is not separate institution, but they are as a study prigtamme of Faculty of medicine and responsible person cannot understand the specific and typiacal dental problems and education direction – **Slovakia**

Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- Improvement of communication e.g. by integration of the local faculties especially on a federal state level of the NDA (which is active rather independently from the national NDA) and vice versa; the local NDAs are getting more and more involved in educational programmes (postgraduate) of their own, which run parallel to the faculties, which build up master-programs both on a local and national level independently –

Germany

- Better understanding of each other and improving relationship with the ministry of health- **Israel**

Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- Be more involve in strategies... to improve dental (oral) health-
Croatia (1)
- More collaboration and understanding of each other, and better relationship with the Ministry of health and NIHL. **Croatia (2)**
- Both parts has to know that we are playing for the same team –
Turkey
- Considering the dental education as a whole in our country instead the high competitiveness and isolated activities in each dental school – **Portugal**

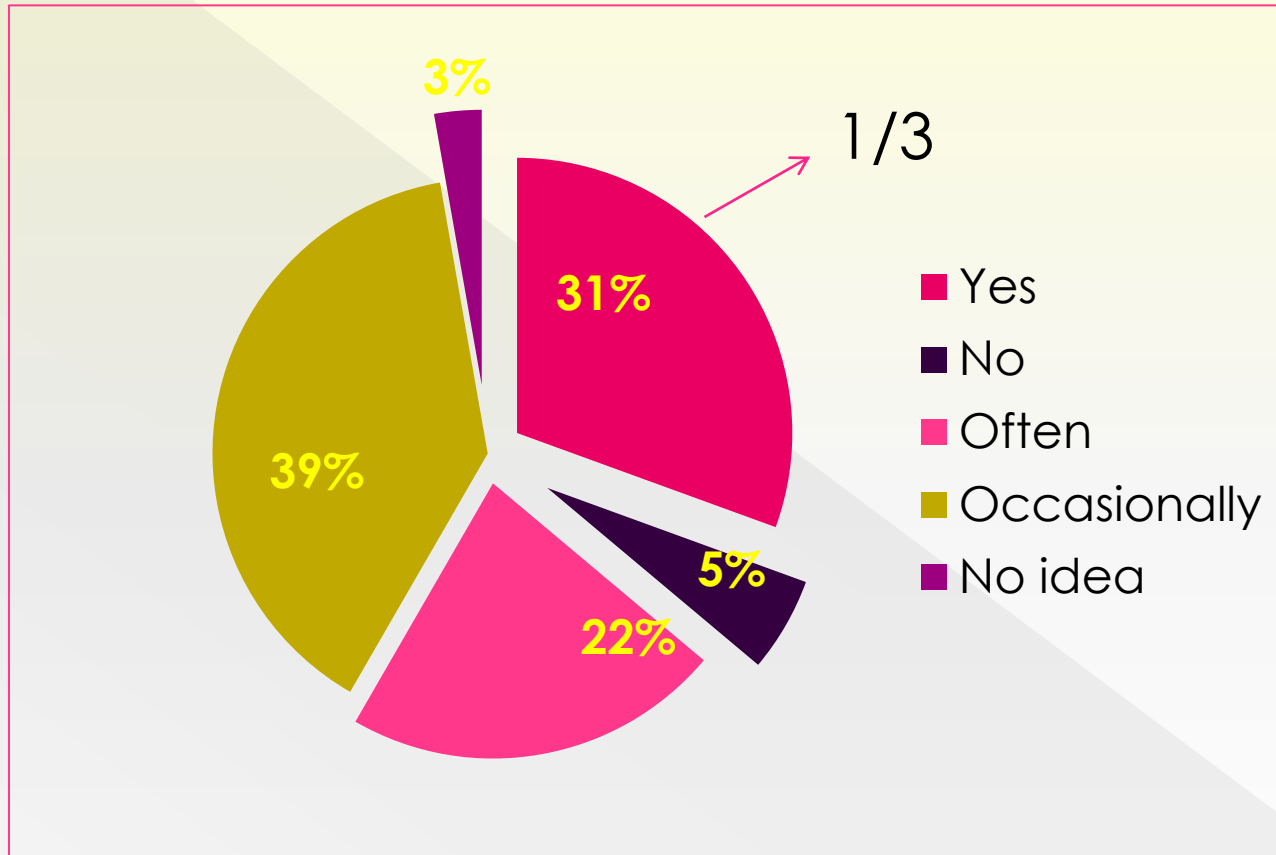
Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- We have a lot of problems with forming NDA – **Sjerkbia**
- Being consulted – **France 3**
- It's necessary perhaps to introduce, at a national level, accurate collaborations between NDA and different representative organisms like dental faculties. The main point, it's the respect of the competence of each actors without any confusion in their own functions and purposes. Conventions or participations to oral health programs or actions is an example- **France 4**

Question 11. How would you propose to improve your collaboration with the the NDA in those areas where improvement is needed? Please specify

- At the moment no idea, but my be invite the dean to participate at the meetings of the assotiations board and name one responsible person for this survey.-**Latvia**
- It is the most important fact to keep interactive communication with the NDA authorities to overcome such problems. –**Turkey (2)**
- Solving problems together: NDA board member is a member of the curriculum committee, some University staffmemebers are NDA board members - **Estonia**

Question 12. Do you feel that dental faculties and national dental associations act and treat each other as partners?



Activities dental faculties carry out;

- | | |
|--|------|
| 1. Improvement of national oral health | 86 % |
| 2. Planning of CE | 83 % |
| Knowledge transfer | 83 % |
| 3. Implementation of new technologies | 75 % |
| 4. Negotiations with authorities | 69 % |
| 5. Provision of CE | 67 % |
| 6. Dental workforce | 50 % |

good + excellent (%)

100 65 35 0



>50 %

good
satisfactory

Perceived level of partnership (good + excellent);

>50 % (good/satisfactory)

> 50%

1. Planning of CE
2. Provision of CE

65%

57%

< 50 % (average – poor)

< 50%

3. Negotiations with authorities
4. Improvement of national oral health
5. Knowledge transfer
6. Dental workforce issues
7. Implementation of new technologies

44%

43%

42%

39%

35%

Areas in need of improved partnership;

1. **Economical, political matters** **23 %**
2. Improvement of national oral health 19 %
3. Planning of CE 18 %
4. Dental workforce issues 15 %
5. Provision of CE 14 %
6. **Planning of undergraduate education** **9 %**

Professional activities carried;

Dental Faculties

- 1. Improvement of national oral health** 86 %
2. Planning of **CE** 83 %
Knowledge transfer 83 %
3. Implementation of new technologies 75 %
4. Negotiations with authorities 69 %
5. Provision of CE 67 %
- 6. Dental workforce** 50 %

NDAs

- 1. Improvement of national oral health** 100 %
2. Provision of CE 90 %
3. Planning of **CE** 89 %
4. Negotiations with authorities 86 %
5. Knowledge transfer 75%
6. Dental workforce issues 67 %
7. Implementation of new technologies 62 %
- 8. Development of undergraduate curriculum** 52 %

Areas in need of improved partnership

Dental Faculties

1. **Economical, political matters** **23 %**
2. Improvement of national oral health 19 %
3. Planning of CE 18 %
4. Dental workforce issues 15 %
5. Provision of CE 14 %
6. **Development of undergraduate curriculum** **9 %**

NDAs

1. **Economical, political matters** **19 %**
2. Development of undergraduate curriculum 19 %
3. Dental workforce issues 19%
4. Provision of CE 19 %
5. Improvement of national oral health 17 %
6. **Planning of CE** **7 %**

Perceived relationship - satisfactory

Dental faculties

1. Planning of CE	65 %
2. Provision of CE	57 %
3. Negotiations with authorities	44 %
4. Improvement of national oral health	43 %
5. Knowledge transfer	42 %
6. Dental workforce issues	39 %
7. Implementation of new technologies	35 %

NDAs

1. Planning of CE	71 %
Implementation of new technologies	71 %
3. Knowledge transfer	67%
4. Improvement of national oral health	67 %
5. Provision of CE	58 %
6. Dental workforce issues	50 %
7. Negotiations with authorities	44 %
8. Development of undergraduate curriculum	42 %

NDAs



Dental
faculties



NDAs



Dental
faculties



65% Implementation of new technologies into practice
61% Dental workforce issues

58% Knowledge transfer
57% Improvement of national oral health
56% Negotiations with the authorities

Develop the second article

N. Yamalik, V. Jerolimov, A. Mersel

Next phase...

Bringing NDAs & dental faculties together electronically
to aid in exchanging ideas and further improving their
collaboration and partnership



ERO Forum

ERO Forum & Discussion

Question



How can we improve our partnership and collaboration to close the gap between science/education and dental practice?

Preparation for the Forum:

- Forum rules (integrated)
- Forum moderators (determined). *A.Mersel, E. Eivanova, V.Margvelashvili*
- Forum moderators & Paolo Pertici & Monica Lang completed the testing of the Forum.
- We are ready to start using it...

ERO Forum

- Membership and log-in procedures, authorization and acceptance of Forum rules will be required..
- If agreed, an invitation to participate to the Forum by e-mail will be sent by Monica Lang to all member NDAs and the dental faculties (same faculties which we previously had contacted)
- Monica Lang will provide us with information and details regarding the process

ERO Forum

- Criticism is natural but we will not allow any insulting, non-professional or bad posts and ban such participants.
- Forum will be regularly monitored by our Forum moderators.
- The final outcome is expected to be a report by the Forum moderators. (Expected to be ready for our Hong Kong meeting).

Thank you ..

Lella, **A**нна(Poland)

Barac Furtinger, **V**esna (Croatia)

Cavalle, **E**doardo (Italy)

Dianišková, **S**imona (Slovakia)

Hanson, **S**tefaan (Belgium)

Hescot, **P**atrick (France)

Ivanova, **E**lena (Russia)

Jerolimov, **V**jekoslav (Croatia)

Kosenko, **K**onstantin (Ukraine)

Margevashvili, **V**ladimer (Georgia)

Mersel, **A**lex (Israel)

Premik, **M**arjan (Slovenia)

Saag, **M**are (Estonia)



Thank you..

nyamalik@hacettepe.edu.tr