

Post-CCST competencies (June 2013)

These competencies are suggestions to give guidance to trainers and trainees. Not all competencies need to be undertaken to gain the skills required and the TPDs and educational supervisors will guide trainees as to which are most appropriate for their own training programme

Module number		Suggested Assessment methods	Suggested Assessments
34	<p>Psychology in Relation to Craniofacial Abnormality</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Identification of factors which may influence the outcome of multi- disciplinary treatment • The ability to make an appropriate referral to a mental health professional should this be required 	<ul style="list-style-type: none"> • Workplace based assessments • Clinical and Communication Skills 	<ul style="list-style-type: none"> • CbD/CEX of patients with a history suggestive of psychological problems • Referral letters: Write a referral letter to a GMP re a patient who you think may have BDD or other psychological problem • Communication scenario/CEX: Explaining to a patient that you do not think OG treatment is appropriate for them as (i) you have concerns that they may have BDD or (ii) think their expectations are unrealistic • Communication scenario/CEX: Explanation to a patient who you want to refer to clinical psychology as you are worried re unrealistic expectation, previous history of cosmetic surgery or worries re BDD • Communication scenario/CEX: Discussion of risks and benefits with a patient who no longer wishes to go ahead with surgery midway through preoperative orthodontics • Communication scenario/CEX: Discussion with mother who wants Class III growing child to have surgery early due to child's teasing and psychological distress.

<p>35</p>	<p>Advanced Cephalometrics and Imaging</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Perform hard and soft tissue cephalometric analyses for surgical patients • Perform treatment planning in multidisciplinary cases • Demonstrate facial profile predictions of multidisciplinary outcomes following treatment • Evaluate 3D facial scan images • Evaluate cone beam CTs <p>(*NB: It is expected that trainees will undertake the WBAs for OG treatment on several occasions for a range of complex malocclusions and procedures including an AOB, complex facial asymmetry, segmental maxillary procedures</p> <p>It is not anticipated that these will be used to assess diagnosis and planning of straightforward single jaw procedures)</p>	<ul style="list-style-type: none"> • Workplace based assessments 	<p>DOPS:</p> <ul style="list-style-type: none"> • Orthognathic prediction* using “hand planning” technique • Orthognathic prediction* using computer-based method • Demonstrate use of software for handling CBCT images or 3D CT reconstructions
		<ul style="list-style-type: none"> • Clinical and Communication Skills 	<ul style="list-style-type: none"> • Show a Cone Beam CT scan or 3D CT scan and ask/discuss what it shows and how this may influence treatment planning • Show plain films with a problem such as condylar resorption and ask/discuss what it shows and how this may influence treatment planning. • Interpretations of 3D facial scan/stereolithographic model • Communication scenario/CEXCBD: Discuss cone beam CT findings and the implications of what has been found • Communication scenario/CEX/CBD: Discuss why a patient may be asked by their consultant to have appliances removed for a series of head and neck CT or similar

<p>36</p>	<p>Orthognathic Treatment</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Perform the orthodontic procedures required in pre-operative, peri-operative and post-operative management of multidisciplinary cases • Manage the pre-operative and post-operative expectations of the patient <p>(*NB: It is expected that trainees will undertake the WBAs for OG treatment on several occasions for a range of complex malocclusions and procedures including an AOB, complex facial asymmetry, segmental maxillary procedures</p> <p>It is not anticipated that these will be used to assess diagnosis and planning of straightforward single jaw procedures)</p>	<ul style="list-style-type: none"> • Workplace based assessments* 	<p>DOPS:</p> <ul style="list-style-type: none"> • Taking a face bow record (Denar or SAM systems) • Pre-surgery visit: trying in wafer, adjusting wafer if required, placement of hooks in appropriate sites etc. • Post-operative management – deciding which archwires should be used, whether elastics are required etc. • Tracing a ceph of patient with a complex deformity and listing major areas of concern • <p>CEX:</p> <ul style="list-style-type: none"> • Observation of orthognathic clinical assessment (on an OG clinic or NP clinic) • Observation of trainee discussing potential treatment options and the risks and benefits of treatment • Observation of trainee managing immediate post-op patient • Observation of a trainee discussing with a post-op patient who has developed a plate infection, explaining what has happened and what treatment is required • Discussion with a new patient referred for surgery where orthodontic preparation has already been undertaken elsewhere and clarifying what has happened so far and what needs to be done now
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		<ul style="list-style-type: none">• Patient logbooks	

<p>37</p>	<p>Multidisciplinary management of medically compromised patients</p> <p>Skills required:</p> <ul style="list-style-type: none"> Evaluates the role of the orthodontist in the team management of medically compromised patients 	<ul style="list-style-type: none"> Workplace based assessments 	<p>CBD:</p> <ul style="list-style-type: none"> Discussion of a patient with medical complications and the impact on treatment <p>CEX/CBDs:</p> <ul style="list-style-type: none"> Discussion of impact of medical problem on treatment (NP clinic style consultation) Discussion with parent explaining the implications of a medical condition on treatment options Discussion with patients on bisphosphonates re implications for treatment Discussion with the parents of a child with leukaemia (or similar condition) re why their consultant has requested the appliances are removed and explaining what happens in the short and longer term Discussion with patient/parent of growing child with muscular dystrophy as to what to expect with further growth and development, and the treatment options <p>(NB: The above could also be CEXs or CBDs if an appropriate patient was seen on a clinic)</p>
		<ul style="list-style-type: none"> Patient logbooks 	

<p>38</p>	<p>Orthodontic management of patients with special needs</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Demonstrates the role of the orthodontist in identifying the treatment possibilities in patients with special needs 	<ul style="list-style-type: none"> • Workplace based assessments 	<p>CEX/CBD:</p> <ul style="list-style-type: none"> • Discussion of a patient/parent of patient with special needs and the impact on treatment • Discussion with parent explaining the implications their child's condition on treatment options
		<ul style="list-style-type: none"> • Patient logbooks 	

<p>39</p>	<p>Distraction Osteogenesis</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Applies distraction devices to appropriate clinical situations • Demonstrates appropriate management of distraction cases 	<ul style="list-style-type: none"> • Workplace based assessments 	<p>CEX:</p> <ul style="list-style-type: none"> • Observation of clinical assessment in which distraction is discussed (on an OG clinic or NP clinic) • Observation of trainee discussing treatment options and the risks and benefits of treatment (relevant to distraction osteogenesis) • Observation of trainee managing post-op distraction patient <p>CBD:</p> <ul style="list-style-type: none"> • Discussion of management of a patient's management/ treatment (this could be any stage of distraction treatment from start of treatment to post-debond) • Discussion of a treatment plan where distraction is involved (or could be involved) - using all records including articulated study models, tracings etc.
		<ul style="list-style-type: none"> • Patient logbooks 	

<p>40</p>	<p>Multidisciplinary care of Cleft Lip and Palate patients</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Demonstrates an understanding of comprehensive specialist management of patients from birth to adulthood • Demonstrates the ability to counsel the parents of affected children • Demonstrates the use of orthodontic appliances in cleft care • Demonstrates an understanding of the various surgical procedures employed in the management of patients with clefts of the lip and /or palate • Demonstrates an ability to implement a treatment plan as part of 'hub and spoke' care of patients 	<ul style="list-style-type: none"> • Workplace based assessments 	<p>DOPS:</p> <ul style="list-style-type: none"> • Taking 5 or 10 year old cleft records • Taking a face bow record in cleft patient (Denar or SAM systems) • Pre-surgery visit for cleft OG patient: trying in wafer, adjusting wafer if required, placement of hooks in appropriate sites etc. • Trihelix placement and activation prior to bone graft <p>CBD:</p> <ul style="list-style-type: none"> • Discussion of management of a cleft patient (any stage of treatment) • Discussion prior to an alveolar bone graft - explaining to parents and patient why this is done and what will happen during and after the procedure <p>CEX:</p> <ul style="list-style-type: none"> • Observation of trainee examining cleft patient on Joint Clinic or NP clinic • Observation of trainee explaining treatment process to a cleft patient and family • Observation of a trainee discussing and formulating a treatment plan with a cleft surgeon
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		<ul style="list-style-type: none">• Patient log book	

41	Multidisciplinary care of Craniofacial Deformities Skills required: <ul style="list-style-type: none"> • Applies appropriate orthodontic interventions as part of multidisciplinary care of patients with craniofacial deformity • Demonstrates an ability to implement a treatment plan as part of 'hub and spoke' care of patients 	<ul style="list-style-type: none"> • Workplace based assessments 	CBD: <ol style="list-style-type: none"> 1. Discussion of management of a craniofacial patient (at any stage of treatment) CEX: <ol style="list-style-type: none"> 1. Observation of trainee examining a craniofacial patient on Joint Clinic or NP clinic 2. Observation of trainee explaining treatment process to a craniofacial patient and family
		<ul style="list-style-type: none"> • Clinical and Communication Skills 	<ol style="list-style-type: none"> 1. Identification of different syndromes and discussion of the likely craniofacial effects and impact on treatment 2. Communication scenario: Phone call with a patient's consultant or GMP to ascertain appropriate medical information which may influence future treatment planning 3. Writing a referral letter from a "spoke" unit to a hub team at a specified stage of treatment indicating what has happened so far and what records should be sent (various scenarios could be given for this)
		<ul style="list-style-type: none"> • Patient logbooks 	

<p>42</p>	<p>Hypodontia</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Demonstrates appropriate decision making regarding treatment options • Applies appropriate orthodontic mechanics as part of multidisciplinary treatment <p>(*NB: It is expected that trainees will undertake the WBAs for hypodontia/ ortho-restorative treatment on several occasions for a range of complex malocclusions - these WBAs are designed for severe and complex malocclusions and not for straightforward hypodontia/ ortho-restorative management which will already have been tested at an earlier stage of training)</p>	<ul style="list-style-type: none"> • Workplace based assessments 	<p>DOPS:</p> <ul style="list-style-type: none"> • Placement of TAD <p>CBD:</p> <ul style="list-style-type: none"> • Discussion of management of a patient with severe hypodontia (at any stage of treatment) • Discussion re management of a complex case requiring, for example, implants or premolar transplants <p>CEX:</p> <ul style="list-style-type: none"> • Observation of trainee explaining treatment process to a hypodontia patient +/- parents • Discussion with new patient +/- parents re moderate/severe hypodontia and the implications and short/long term planning • Observation of trainee explaining components of a complex case requiring, for example, implants or premolar transplants • Discussion with patient who is mid treatment and is complaining re duration of treatment and why treatment is continuing when their teeth look fine now - explain why treatment is being extended in order to create divergent roots to allow implant placement
	<ul style="list-style-type: none"> • Patient logbook 		

<p>43</p>	<p>Management in Secondary Care</p> <p>Skills required:</p> <ul style="list-style-type: none"> • Develops and demonstrates the interpersonal skills required to support a team for the delivery of a high standard of patient care in the secondary care setting <p>(NB: A portfolio of evidence may also be helpful when assessing competence in this area)</p>	<ul style="list-style-type: none"> • Workplace based assessments 	<p>OBSERVATION:</p> <ul style="list-style-type: none"> • Observation of trainee dealing with a management issue • Observation of trainee chairing a departmental/management meeting • Use of various Dental Public Health assessments such as chairing meetings etc. • Organising/managing an event such as journal club/local study group/section 63 course and then looking at feedback.
	<ul style="list-style-type: none"> • Management scenario discussions 	<ul style="list-style-type: none"> • Appraisal feedback: Prepare appropriate feedback for a colleague based on the 360⁰ appraisal information • Issues related to management at local and national level including: <ul style="list-style-type: none"> • Health services management, administration, use of resources • Evidence-based practice, clinical guidelines/outcomes; Medico-legal responsibilities, jurisprudence and ethics • Clinical effectiveness / Clinical audit • Appraisal / Performance assessment / Peer review • Clinical risk management / Complaints • Teaching / Training / Assessment / Continuing professional development • Confidentiality / Freedom of information / Data Protection 	

44	Teaching and training Skills required: <ul style="list-style-type: none"> • Develops and demonstrates the interpersonal skills required to provide high quality teaching and training using appropriate methods and techniques • Demonstrates involvement in e-learning • Demonstrates an ability to provide clinical supervision <p>(NB: A portfolio of evidence should be available for the assessment of competence in this area)</p>	<ul style="list-style-type: none"> • Workplace based assessments 	<ul style="list-style-type: none"> • Feedback from teaching session
		<ul style="list-style-type: none"> • Management scenarios 	
		<ul style="list-style-type: none"> • Peer observation 	<ul style="list-style-type: none"> • Observation of teaching episode (e.g. UG or PG clinic; lecture; seminar; journal club) • Observation of organisation of an extended teaching session, course for juniors or colleagues (e.g. Section 63 course; lecture; seminar; journal club) • Observation of shadowing examiners/ taking active part in mock vivas/ examinations
		<ul style="list-style-type: none"> • Teaching certificate 	<ul style="list-style-type: none"> • Award of teaching certificate