

CED Resolution

THE DENTAL TEAM RELATIONSHIP WITH PATIENTS

May 2015

INTRODUCTION

The Council of European Dentists (CED)¹ aims to promote high standards in oral healthcare and dentistry with effective patient-safety centred professional practice. With this resolution we wish to contribute to patient safety through the development of policy regarding the dental team structure and the relationship of the dental team with patients.

The recommendations set out in this document intend to clarify:

- a) the importance of the dentist's leadership role within the dental team to ensure effective patient safety;
- b) the composition of the dental team and the dentist's relationship with dental technicians; and,
- c) the responsibilities and competences that dentists expect of their dental team members and their relationship with patients.

In the EU the composition of the dental team varies significantly and this document only intends to describe the professions that exist in the majority of EU countries.

The recommendations set out in this document reinforce the [CED Resolution Delegation Yes - Substitution No](#) adopted by the CED General Meeting in November 2009, and the [CED-ADEE Joint Position on Competences](#) adopted by the CED General Meeting in May 2013.

A - IMPORTANCE OF THE DENTIST'S LEADERSHIP IN THE DENTAL TEAM

The provision of oral healthcare requires sophisticated and extensive medical and scientific knowledge in order to undertake correct diagnosis and treatment planning. This is particularly true given demographic changes such as an increasingly ageing population with complex health issues.

In order to ensure the best oversight of treatment and continuing care at all times, there is a need for the dentist to have a leadership role. This is particularly relevant in light of the risks related to the complexity of individual patients' circumstances, including the need to consider drug interactions when treating those with multiple conditions.

The revised Directive on the Recognition of Professional Qualifications² introduced a new criterion for the minimum duration of training for dentists. Basic dental training now comprises a total of at least five years and 5000 hours of university education before achieving the title of dentist and being able to start practising independently.

The dental university degree provides dentists with in-depth skills, knowledge and competences for prevention, diagnosis and treatment of diseases of the hard and soft tissues of mouth and jaws, malformations and lesions of the teeth, mouth, jaws and surrounding tissues, as well as for rehabilitation by replacement of missing teeth and restoration of aesthetic and functional oral health. The degree also encompasses medical subjects, thus providing an all-round understanding of a patient's clinical and non-clinical needs.

¹ The CED is a European not-for-profit association representing over 340,000 dental practitioners across Europe through 32 national dental associations and chambers in 30 European countries. Established in 1961 to advise the European Commission on matters relating to the dental profession. The CED is registered in the Transparency Register with the ID number 4885579968-84.

² [Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications](#) as amended by Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System ('the IMI Regulation').

Therefore, dentists must lead the dental team in order to guarantee the prevention of oral diseases by the promotion and the improvement of the oral health of individuals, families and communities based on patient-centred holistic care and evidence-based dentistry.

Considering the above, the dentist is the only professional with competence for the full spectrum of oral prevention, diagnosis, treatment planning and treatment, therefore holding full responsibility for all patients' oral healthcare.

B - COMPOSITION OF THE DENTAL TEAM AND THE DENTIST'S RELATIONSHIP WITH DENTAL TECHNICIANS

Patient care will be optimised if dental teams work together in one place, and the team is led by a dentist. In the European Union the composition of the dental team varies significantly from country to country and as mentioned above this document only intends to describe the professions that exist in the majority of EU countries.

In some countries, dentists work with dental chairside assistants only, whereas in other countries, team members may also include dental hygienists, with all professional groups having varying scopes of practice from country to country in accordance with national legislation.

These members of the dental team can undertake work in accordance with each team member's defined level of competence, but for reasons of patient safety should only do so after a dentist has provided a diagnosis and treatment plan and delegated the work to team members as appropriate.

Furthermore, they should only work in a dental office, under the supervision of a dentist as they do not have the necessary competence to establish an overall diagnosis.

Dental technicians are manufacturers of custom-made medical devices, cooperate with the dentist and usually work in independent laboratories, following dentists' prescriptions and specifications, while they may also be based in practices or hospitals. This is the core composition of the dental team, covering all patients' oral health needs and ensuring quality and safety of oral healthcare.

C - RESPONSIBILITIES AND COMPETENCES THAT DENTISTS EXPECT OF THEIR DENTAL TEAM MEMBERS AND THEIR RELATIONSHIP WITH PATIENTS

In order to safeguard adequate delivery of oral healthcare and appropriate relationship with patients, the members of the dental team must have the appropriate education, training and legal authorisation to provide specific oral care interventions as delegated by the dentist. They must follow a code of conduct or defined set of standards to ensure patient safety and good team work.

The core responsibilities and competences of dental team members are outlined below. They may vary from country to country. The level of regulation and registration is very varied across the European Union, which makes the leadership role of dentists, who are highly regulated in every country, extremely important.

Dental Chairside Assistants

Assisting the dentist during procedures, dental chairside assistants work under the supervision of the dentist and are responsible for preparing and providing instruments and materials needed for the treatment and follow-up with patients, along with any additional tasks related to laboratory and administrative work assigned to them by the dentist.

Dental Hygienists

Dental hygienists only exist in some Member States and their education, training and field of competences differ greatly across the European Union.

Dental hygienists work under the supervision of the dentist, following prescribed procedures and protocols related to the promotion and maintenance of good dental hygiene. They perform dental prophylactics and scaling of teeth, apply prophylactic materials to the teeth, collect data, and educate patients on maintaining a good oral health regime.

Dental Technicians

Dental technicians as manufacturers cooperate with the dental team, work under dentists' prescriptions and specifications in order to manufacture dental custom-made devices such as bridges, crowns and dentures.³ The dentist is the final user of dental custom-made devices⁴ and bears the responsibility for the overall treatment.

RECOMMENDATIONS

In light of the above considerations on patient safety and quality assurance, the CED underlines that:

1. The dentist is the leader of the dental team in order to ensure patient safety and the delivery of holistic high quality oral healthcare.
2. The dentist is responsible for patients' oral health and the outcome of the clinical treatment and therefore is the only professional able to decide which interventions shall be delegated to the members of the dental team.
3. The members of the dental team must always follow the professional and therapeutic guidelines (protocols) prescribed by and agreed with the dentist.
4. Dental team members must follow a code of conduct or defined set of standards to ensure patient safety and good team work.
5. Professional dental associations and/or national regulatory bodies must play an important role in defining the profiles of the dental team members and in preventing illegal practice.

Unanimously adopted by the CED General Meeting on 29 May 2015

³ Policy Statement of the European Regional Organisation of the Federation Dentaire Internationale, August 2012.

⁴ For the CED position on custom made devices please see the [CED Resolution on the Revision of the EU Regulatory Framework for Medical Devices](#)