

SECTION II:
STANDARDS AND CRITERIA FOR
PROGRAMME ACCREDITATION -
UNDERGRADUATE DENTAL DEGREE

STANDARDS AND CRITERIA FOR PROGRAMME ACCREDITATION - UNDERGRADUATE DENTAL DEGREE

1. INTRODUCTION

Knowledge and technology in dentistry have developed at a rapid pace, and due to these scientific advances, dental education is faced with the challenge of maintaining quality within the profession. A system of accreditation of undergraduate dental degree programmes, based on specific standards and criteria, will ensure that oral health care professionals are competent.

Formal dental education is a relatively recent development in Malaysia. Its first HEP was established at the University of Malaya in 1972. The first group of 30 students graduated in 1976. Even though the Malaysian Dental Council (MDC) and the government have recognized the degree, the HEP took the initiative to benchmark its curriculum with dental education institutions in the United Kingdom. In 1997, the General Dental Council (GDC) in the United Kingdom (UK) assessed the faculty and deemed it satisfactory for GDC recognition. It was around this time that the *Lembaga Akreditasi Negara* (LAN) and the Ministry of Higher Education Malaysia developed the system for accreditation of educational programmes. The MDC was also involved in this development specifically in relation to standards and criteria for undergraduate dental degrees.

It was only after 24 years of the establishment of the first HEP in Malaysia that the second HEP at Universiti Kebangsaan Malaysia and third HEP at the Universiti Sains Malaysia were established by the government in 1996 and 1997 respectively. Since then, there was a rapid increase in the establishment of dental faculties in the country. The increase in number of undergraduate dental degree programmes as well as demands from consumers and the profession for high quality oral health care provided the impetus to regulate and accredit professional dental programmes. Accreditation will not only protect the public and uphold the prestige of the profession, but will provide a—the standards required of dental faculties in this country and the quality developments that will be required as faculties mature.

These standards and criteria are used in assessing the information provided by the institution seeking approval to either start a new undergraduate dental degree programme or for accreditation of the programme. It covers seven areas of evaluation.

These standards and criteria were drafted so as not to be too prescriptive or rigid, that they may stifle initiative, development and expansion in the field of dentistry. Some of these standards may lack precise definition or may be difficult to quantify due to their qualitative nature. Nevertheless, the institutions should attempt to provide comprehensive information to facilitate the assessment. This document, as the principal document for accreditation of dental degree programmes, consist of three (3) parts:

Part A: Programme Information;
 Part B: Status of Programme; and
 Part C: Programme Standard

Part A: Programme Information

Please provide the following information:

1. Name of institution
2. Background of institution, its organisational structure and chart
3. Name of course and degree awarded
4. Language of instruction
5. Mailing and website addresses
6. Telephone and fax numbers, email addresses
7. Name of site visit Coordinator and telephone and fax number and email address
8. Name of Chairman / President / Chief Executive Officer, telephone and fax number and email address
9. Name of Dean/Director, telephone number, fax number and email address
10. Date programme was established
11. Reference number of the approval for establishment
12. Duration of Programme
13. General breakdown of student learning time for the whole programme.
(Refer to Appendix SII-1)

Breakdown of Courses Classification	Student Learning Time (SLT)	Percentage
MQA courses (programmes in Malaysia only)	-----	-----
University courses	-----	-----
Major/compulsory courses	-----	-----
Electives	-----	-----
Total	-----	-----

14. Programme calendar – HEP must provide the calendar for the academic year of the programme.
15. State the rationale of having this dental programme. How does this programme fulfil the market needs and contribute to the social and national development? Show evidence that the faculty / HEP have considered market and societal demand for the programme as well as sufficient resources to run it.
16. Describe how recommendation(s) and suggestion(s) that resulted from the last accreditation survey report (if any) have been addressed.

Part B: Status of Programme

1. Check the mode by which the course is conducted.

Mode of Course	Mark [✓] Where Appropriate
Internal to the Faculty	[]
Collaboration (specify)	[]

2. If the course is conducted in a mode other than internal to the faculty, please provide the following information:
 - 2.1 Name of partner faculty(ies) and name of equivalent degree(s) awarded.
 - 2.2 Accreditation status of the partner faculty(ies)?
 - 2.3 Is the degree of the partner faculty recognised by the Malaysian Dental Council?
 - 2.4 Indicate number of years of study in parent/partner faculty and in your faculty.
 - 2.5 What are the credit transfer requirements?
 - 2.6 Provide evidence/documents pertaining to the agreement between your faculty and the parent faculty(ies).
3. Physical Resources and Finance
 - 3.1 Give a brief description of source of financing and proportion budget allocation for the present year and the last two years.
 - 3.2 List all members who are responsible for decisions on budget allocation and their positions in relation to the faculty.
4. Management of the Programme
 - 4.1 List all committees, which are responsible for programme management.
 - 4.2 List all members of these committees and their relationship to the faculty.
5. Describe the mechanism for quality assurance by the faculty / parent faculty(ies) / University.

Part C: Programme Standard

This provides information pertaining to the seven areas of evaluation as follows:

Area 1: Programme Development and Delivery

- i. Statement of Educational Objectives of Academic Programme and Learning Outcomes
- ii. Programme Development: Process, Content, Structure and Teaching-Learning Methods
- iii. Programme Delivery

Area 2: Assessment of Student Learning

- i. Assessment Methods
- ii. Relationship between Assessment and Learning Outcomes
- iii. Management of Student Assessment

Area 3: Student Selection and Support Services

- i. Student Selection
- ii. Articulation and Transfer
- iii. Student Support Services
- iv. Student Representation and Participation
- v. Alumni

Area 4: Academic and Support Staff

- i. Recruitment and Management
- ii. Service and Development
- iii. Support Staff

Area 5: Educational Resources

- i. Physical Facilities
- ii. Research and Development
- iii. Expertise in Education
- iv. Financial Resources

Area 6: Programme Management

- i. Programme Management
- ii. Programme Leadership
- iii. Administrative Staff
- iv. Academic Records

Area 7: Programme Monitoring, Review and Continual Quality Improvement

- i. Mechanisms for Programme Monitoring, Review and Continual Quality Improvement

2. Area 1: Programme Development and Delivery

STANDARD		CRITERIA
1.1	Statement of Educational Objectives of Academic Programme and Learning Outcomes	<ul style="list-style-type: none"> i. The programme can only be considered after a need assessment has indicated a necessity for the programme to be established (applicable for Provisional Accreditation only). ii. The programme must define its programme educational objectives (PEO) and programme learning outcomes (PLO) in compliance with the standards and criteria. iii. The programme educational objectives (PEO) and learning outcomes (PLO) must be consistent with and supportive of the vision and mission of the HEP. iv. The programme learning outcomes (PLO) must define the competencies that the dental student should demonstrate on completion of the programme. These competencies must be consistent with that listed in the document “Competencies of New Dental Graduates, Malaysia” in Appendix SII-2. v. The programme learning outcomes (PLO) must be aligned with the programme educational objectives (PEO). vi. The programme educational objectives (PEO) and learning outcomes (PLO) must be periodically reviewed in consultation with the relevant stakeholders.
1.2	Programme Development: Process, Content, Structure and Teaching-Learning Methods	<ul style="list-style-type: none"> i. The HEP must have sufficient autonomy to design the curriculum and allocate resources necessary for its implementation in achieving the learning outcomes. (Where applicable, the above provision must also cover collaborative programmes and programmes franchised to, or from other HEPs in accordance with national policies). ii. The HEP must have an appropriate process by which the curriculum is established. iii. The HEP must consult relevant stakeholders in the development of the curriculum. Stakeholders include Ministry of Health, Ministry of Defense, Institutions of Higher Education, Professional Associations, Professional Bodies and Alumni. iv. Educational programme duration must not be less than 5 academic years and a range of 200-215 weeks of teaching and learning, revision and examination week. v. The curriculum must include horizontal (concurrent) and vertical (sequential) integration, self-directed learning, adequate and balanced theory, practical, clinical practice and hospital posting. vi. The learning outcomes must include cognitive, psychomotor and affective (CPA) competencies which are appropriate to the needs of the nation and must be

STANDARD		CRITERIA
		<p>measurable (Appendix SII-2).</p> <p>vii. Curriculum content must incorporate sufficient depth and scope of knowledge in biomedical sciences, social and behavioral sciences, law and ethics in dentistry, preventive dentistry and oral health promotion, dental professionalism and practice management, infection control, laboratory and clinical sciences and skills and community-based programme components.</p> <p>viii. Basic science component must include Anatomy, Physiology, Biochemistry, Dental Anatomy/Oral Biology, Dental Material Science, Medical Microbiology, Pathology and Pharmacology.</p> <p>ix. Clinical science component must include General Medicine & General Surgery (Human Disease), General Dental Practice, Restorative Dentistry, Oral and Maxillofacial Surgery, Oral Medicine and Oral Pathology, Orthodontics, Paediatric Dentistry, Prosthodontics, Periodontology, Community Dentistry, Oral Imaging and Diagnostics.</p> <p>x. Community-Based Dental Practice component must establish operational linkage between educational programmes and the general practice environment including dental and health related activities e.g. community project, district health posting, satellite or outreach clinics. There should be interaction with health and health-related sectors of society and government.</p> <p>xi. Evidence-based dental practice component must include teaching of the principles of scientific and evidence-based dentistry, analytical and critical thinking, research methodology, report writing and scientific communication.</p> <p>xii. Ethics and Humanities component must incorporate aspects of ethics, jurisprudence and humanities that enable effective communication, decision-making and ethical practice. The ethics and humanities aspects are adapted from time to time to suit the scientific needs of the programme, the changing demographic as well as the cultural contexts and needs of society.</p> <p>xiii. The HEP should establish mechanisms to access to current information and to identify up-to-date topics of importance for inclusion in the curriculum and its delivery, for example through the use of the latest technology and through global networking.</p> <p>xiv. There should be co-curricular activities to enrich student experience, and to foster personal development and responsibility.</p>
1.3	Programme	i. The HEP must take responsibility to ensure the effective

STANDARD		CRITERIA
	Delivery	<p>delivery of the programme.</p> <ul style="list-style-type: none"> ii. Students must be provided with the current documented information about the aims, outline, learning outcomes and methods of assessment of the programme. iii. The programme must have an appropriate coordinator and a team of academic staff (e.g. programme committee) with adequate authority and responsible for effective delivery of the programme. iv. The programme team must have access to adequate resources to implement teaching and learning activities and conduct programme evaluation for quality improvement. v. The HEP must provide students with a conducive learning environment to support didactic or conventional approaches and other relevant approaches. vi. The HEP must encourage innovations in teaching, learning and assessment.

3. Area 2: Assessment of Student Learning

STANDARD		CRITERIA
2.1	Assessment Methods	<ul style="list-style-type: none"> i. The frequency, methods and criteria of student assessment, including the grading criteria and appeal policies, must be documented and communicated to students at the commencement of the programme. ii. There must be a variety of methods and tools to assess learning outcomes and competencies. These include continuous and summative assessments with a reasonable balance of 40% - 60% contributed by continuous assessment. iii. There must be mechanisms to ensure the validity, reliability, consistency, currency and fairness of the assessment methods. iv. The HEP must employ mechanism for external examiners to be included in professional examinations. v. Changes to student assessment methods must follow established procedures and regulations and communicated to students prior to their implementation.
2.2	Relationship between Assessment and Learning Outcomes	<ul style="list-style-type: none"> i. Assessment principles, methods and practices must be aligned to the learning outcomes of the programme. ii. The assessment must be consistent with the levels defined in the MQF, the domains of learning outcomes and the programme standards as in Appendix SII-2. iii. The link between assessment and the achievement of learning outcomes in the programme must be reviewed periodically to ensure its effectiveness.
2.3	Management of Student Assessment	<ul style="list-style-type: none"> i. The HEP and its academic staff must have adequate level of autonomy in the management of student assessment. ii. There must be mechanisms to ensure the security of assessment documents and records. iii. Results of assessment must be communicated to the student within a reasonable time frame after endorsement by the relevant authority. iv. The HEP must have an appropriate mechanism to address cases of academic plagiarism. v. The HEP must periodically review the management of student assessment and act on the findings of the review.

4. Area 3: Student Selection and Support Services

STANDARD		CRITERIA
3.1	Student Selection	<ul style="list-style-type: none"> i. The programme must have a clear policy on criteria and processes of student selection, including that of transferring students and foreign students. These policies must be consistent with current procedures of the Ministry of Higher Education. ii. The HEP must have a policy regarding blood-borne viruses for candidates and students. This standard must be consistent with “Guidelines for Oral Healthcare Practitioners Infected with Blood Borne Viruses” issued by MDC. iii. Student enrolment must commensurate with the capacity of the HEP to effectively deliver the programme. Any increase in student intake must have the approval of the relevant authority. iv. The criteria and processes of student selection must be transparent and objective. v. There must be a clear policy on, and appropriate mechanisms for appeal on student selection. vi. The admission policy for the programme must be monitored and reviewed periodically to continuously improve the selection processes.
3.2	Articulation and Transfer	<ul style="list-style-type: none"> i. The HEP must have well-defined and effectively disseminated policies, regulations and processes that facilitate student mobility, including credit transfer and credit exemption which are in accordance with current requirements by relevant authorities (Appendix SII-3). ii. Incoming transfer students must have comparable achievement in their previous programme of study and have the capacity to successfully follow the programme.
3.3	Student Support Services	<ul style="list-style-type: none"> i. Students must have access to appropriate and adequate support services, such as physical, social, financial, recreational and online facilities, academic and non-academic counselling and health services. ii. There must be a designated administrative unit responsible for planning and implementing student support services staffed by individuals who have appropriate experience consistent with their assignments. iii. An effective induction to the programme must be made available to students and evaluated regularly with special attention given to out of state/international students. iv. Academic, non-academic and career counselling must be provided by adequate and qualified staff where issues pertaining to counselling remain confidential.

STANDARD		CRITERIA
		<ul style="list-style-type: none"> v. A buddy system should be in place for peer support to students. vi. The HEP must have clearly defined and documented processes and procedures in handling student disciplinary cases including plagiarism. vii. There must be a grievance mechanism for students to make appeals on academic and non-academic matters. viii. Student support services must be evaluated regularly to ensure their adequacy, effectiveness and safety. ix. There must be mechanisms that actively identify and assist students who are in need of academic, spiritual, psychological and social support.
3.4	Student Representation and Participation	<ul style="list-style-type: none"> i. There must be programmes to encourage active student participation in matters related to their interests and welfare. ii. Student rights and responsibilities must be acknowledged, clearly documented and made known to them. iii. There must be adequate student representation and organization at the institutional and faculty levels. iv. Student should be facilitated to develop linkages with external stakeholders and to participate in activities to gain managerial, entrepreneurial and leadership skills in preparation for the workplace. v. Student activities and organizations should be facilitated to participate in activities that encourage character building, inculcate a sense of belonging and responsibility and promote active citizenship. vi. The HEP should encourage students to be involved in research activities and publication.
3.5	Alumni	<ul style="list-style-type: none"> i. The HEP must foster active linkages with its graduates to improve the programme. ii. The HEP should encourage the alumni to play a role in the development, review and continuous improvement of the programme and in preparing the students for their professional future through linkages with industry and the profession.

5. Area 4: Academic and Support Staff

STANDARD		CRITERIA
4.1	Recruitment and Management	<ul style="list-style-type: none"> i. The HEP must have a clearly defined plan for its human resource needs. ii. The HEP must have a clear and documented recruitment policy for academic and support staff. iii. Clinical academic staff must have postgraduate qualification with a minimum of two (2) years clinical postgraduate training by coursework if basic degree is recognised or passed Professional Qualifying Examination OR postgraduate qualification with a total of five (5) years clinical experience, inclusive of 2 years clinical postgraduate training by coursework if basic degree not recognised and did not pass Professional Qualifying Examination as mentioned in the Guidelines for Application for TPC for Dental Surgeons 2018 (Appendix SII-4). iv. The HEP must have adequate number of full-time academic staff responsible for implementing the programme (1 full-time staff is equivalent to 3 part-time staff). The criteria indicated below provide the guide in fulfilling this standard: <ul style="list-style-type: none"> a. Overall at least 60% of academic staff must be full-time. b. In each core discipline, there must be at least 50% of full-time staff (Core discipline includes Oral Surgery, Prosthodontics, Conservative Dentistry, Paediatric Dentistry, Orthodontics, Periodontology, Oral Medicine and Oral Pathology and Dental Public Health) c. At least 30% of academic staff are Malaysian citizens. v. The staff-student ratio for the programme must be appropriate to the teaching-learning methods and comply with the programme standards for the discipline. The HEP must have the following academic staff to student ratio: <ul style="list-style-type: none"> a. 1:10 for Pre-clinical teaching (Basic Medical Science and Oral Biology) b. 1:6 for dental simulation and dental clinical supervision. vi. There must be a combination of teaching, research and service roles (community/promotion activities) for all academic staff. vii. The policy of the HEP must reflect an equitable distribution of responsibilities among the academic staff. viii. The recruitment policy must seek diversity among the academic staff in terms of experience, approaches and background. ix. Recognition and reward through promotion, salary increment or other remuneration must be based on

STANDARD		CRITERIA
		<p>equitable work distribution and meritorious academic roles using clear and transparent policies and procedures.</p> <p>x. The HEP should have active national and international linkages to provide for the involvement of well renowned academics and professionals in order to enhance teaching and learning of the programme.</p>
4.2	Service and Development	<p>i. The HEP must have policies addressing matters related to service, professional development and appraisal of the academic staff.</p> <p>ii. The academic staff must be given sufficient autonomy to focus on areas of his expertise.</p> <p>iii. The HEP must have a clearly stated policy on conflict of interest, particularly in the area of private practice, multiple employment and consultancy services.</p> <p>iv. The HEP must have clearly defined and documented processes and procedures in handling disciplinary cases involving the academic staff.</p> <p>v. The HEP must have mechanisms and processes for periodic student evaluation of the academic staff for purposes of quality improvement.</p> <p>vi. The HEP must have a staff development programme particularly for new academic staff including mentoring and formative guidance.</p> <p>vii. The HEP must encourage and facilitate its academic staff to play an active role in community engagement activities.</p> <p>viii. The HEP must provide opportunities for academic staff to participate in professional, academic and other relevant activities, nationally and internationally and where relevant, for them to obtain professional qualifications to enhance teaching-learning experience.</p>
4.3	Support Staff	<p>i. There should be sufficient support staff for teaching and learning purposes with staff to student ratio of 1:10.</p> <p>[Support staff include Dental Therapist, Staff Registered Nurse, Dental Surgery Assistant, Clinical Assistant (Attendant), Dental Technologist, Medical Laboratory Technologist, Radiographer, Patient Registration Clerk and any other relevant support staff].</p> <p><u>Minimum number of staff required:</u></p> <ul style="list-style-type: none"> • Dental Therapist – 1 • Dental Surgery Assistant: <ul style="list-style-type: none"> - for student – 2 per 50 students, - for CSSD – 2 • Clinical Assistant (Attendant) – 2 per 50 students • Staff Registered Nurse – 1

STANDARD		CRITERIA
		<ul style="list-style-type: none"> • Radiographer – 2 • Dental Technologist – 1 per 50 students (for total number of students in Year 2+Year 3+Year 4+Year 5) • Medical Laboratory Technologist – 2 per 50 students (for total number of students in Year 1+Year 2) • Patient Registration Clerk – 1

6. Area 5: Educational Resources

STANDARD		CRITERIA
5.1	Physical Facilities	<p>i. The programme must have sufficient and appropriate physical facilities and educational resources such as facilities for practical and clinical teaching to ensure its effective delivery.</p> <ul style="list-style-type: none"> • Educational resources include lecture hall/auditorium, tutorial room, seminar room, computer laboratory, medical science laboratory and strong room. • General facilities include cafeteria, toilet, locker room, store room, <i>surau</i>, students' common room, sports facilities and hostel. <p>ii. The library or resource centre must have adequate and up-to-date reference materials and availability of qualified staff that meet the needs of the programme and research amongst academic staff and students. This would include provisions for appropriate computers and information as well as communication technology-mediated reference materials.</p> <p>iii. Specific equipment and facilities for training must be adequately provided for practical and clinical-based programmes:</p> <ol style="list-style-type: none"> a. pre-clinical training facilities for operative technique (skills lab), workstation to student ratio of 1:3 b. clinical training facilities in primary care setting, student clinic for clinical year students and hospital facilities with ambulatory services: <ul style="list-style-type: none"> - dental chair to student ratio of 1:3; - prosthetic workstation to student ratio of 1:4; - adequate pool of patients for optimal clinical training c. suitable facilities for community-based activities d. availability of related facilities such as imaging, centralized sterilisation and supply department (CSSD). <p>iv. All equipment (e.g. autoclaves, x-rays, compressor) must comply with the relevant laws and regulations.</p> <p>v. The facilities available in the HEP must be user-friendly to patients with special needs.</p> <p>vi. The educational resources, services and facilities must be periodically reviewed and improved upon to maintain their quality and appropriateness for current education and training.</p>
5.2	Research and Development	<p>i. The HEP must have a policy and activities for research and availability of adequate facilities to sustain them.</p> <p>ii. The interaction between research and education must be reflected in the curriculum, influence current teaching, and</p>

STANDARD		CRITERIA
		<p>encourage and prepare students for engagement in research, scholarship and development.</p> <p>iii. The HEP must periodically review its research resources and facilities and take appropriate action continually to enhance its research capabilities and to promote a conducive research environment.</p>
5.3	Expertise in Education	<p>i. The HEP must utilize personnel with educational expertise in planning its programmes and in the development of new teaching and assessment methods.</p>
5.4	Financial Resources	<p>i. The HEP must have a clear line of responsibility and authority for budgeting and resource allocation that takes into account the specific needs of the HEP.</p> <p>ii. The HEP must have clear procedures to ensure that its financial resources are sufficient and that it is capable of utilising them efficiently and responsibly.</p> <p>iii. The HEP must be given sufficient autonomy to allocate resources appropriately to achieve the programme educational objectives.</p>

7. Area 6: Programme Management

STANDARD		CRITERIA
6.1	Programme Management	<ul style="list-style-type: none"> i. The HEP must clarify its governance structure and function, the relationships within them, and their impact on the programme, and these must be communicated to all parties involved based on the principles of transparency, accountability and authority. ii. The HEP must have policies, procedures and mechanisms for regular reviewing and updating of its structures, functions, strategies and core activities to ensure continuous quality improvement. iii. The HEP management committee must be an active policy-making body with an adequate degree of autonomy within the terms of reference. iv. Mechanisms to ensure functional integration and comparability of educational quality must be established for programmes conducted in campuses or partner institutions that are geographically separated. v. The HEP must have a formal system responsible for internal and external consultations, feedback, market needs analysis and employability projections of the programme. vi. The governance must involve the participation of, and the consultation with academic staff, students and external stakeholders.
6.2	Programme Leadership	<ul style="list-style-type: none"> i. The leadership of the programme must be held by those with appropriate qualifications and experience, and with sufficient authority for curriculum design, delivery and review. ii. The Dean must be held by those with appropriate qualifications, registered with MDC and have the experience to lead the programme. iii. For institutions located in Malaysia, the Dean shall be a dental surgeon and residing in Malaysia. The founding dean must have at least a minimum of five (5) years academic experience (applicable for provisional accreditation only). iv. The HEP must establish appropriate programme leadership other than the Dean. The criteria for their appointment and responsibilities must be clearly stated. v. Mechanisms and processes must be in place to allow for communication between the programme and the HEP leadership in relation to matters such as staff recruitment and training, student admission, and allocation of resources and decision making processes.

STANDARD		CRITERIA
6.3	Administrative Staff	<ul style="list-style-type: none"> i. The administrative staff of the HEP must be appropriately qualified, technically competent and sufficient in numbers to support the implementation of the programme and related activities. The administrative staff must include the registrar, IT personnel, financial officer, receptionist and others. ii. The HEP must conduct regular performance review of the programme's administrative staff. iii. The HEP must have an appropriate training scheme for the advancement of the administrative staff as well as to fulfil the specific needs of the programme, for example, risk management, technology management, maintenance of specialised equipment, and advanced technical skills.
6.4	Academic Records	<ul style="list-style-type: none"> i. The HEP must have appropriate policies and practices concerning the nature and security of student and academic staff records. ii. The HEP must implement policies on the rights of individual privacy and the confidentiality of records. iii. The HEP should continuously review policies on security of records including increased use of electronic technologies and safety systems.

8. Area 7: Programme Monitoring, Review and Continual Quality Improvement

STANDARD		CRITERIA
7.1	Mechanisms for Programme Monitoring, Review and Continual Quality Improvement	<ul style="list-style-type: none"> i. The HEP must have clear policies and appropriate mechanisms for regular monitoring and review of the programme. The curriculum must be reviewed every 5 years. ii. The HEP must have a dedicated Quality Assurance (QA) unit or personnel responsible for internal quality assurance of the faculty. iii. The HEP must have an internal monitoring and review committee headed by a designated coordinator who is dedicated to continuously review the programme. The review must involve external experts. iv. Programme evaluation must involve the relevant stakeholders whose views are taken into consideration. v. Teacher and student feedback must be sought. Students have channels for informing issues to heads of programmes before they become major problems. The faculty has mechanisms for students to assess their lecturers. vi. The content of the programme must be periodically reviewed to keep abreast with scientific, technological and knowledge development of the discipline, and with the needs of the society. vii. Various aspects of student performance, progression and attrition must be analysed for the purpose of continual quality improvement. This must be consistent with Minimum Clinical Experience (MCE) in Competency-Based Assessment as in Appendix SII-5. viii. In collaborative arrangements, the partners involved must share the responsibilities of programme monitoring and review. ix. The findings of a programme review must be presented to the HEP for its attention and further action. x. There must be a link between the HEP quality assurance processes and the achievement of the institutional goals. xi. The HEP's review system must constructively engage relevant experts (nationally and internationally) to identify areas of concerns and demonstrate ways to improve the programme. xii. The HEP must make the report on programme review accessible to relevant stakeholders in order to seek their views. xiii. The HEP must embrace the spirit of continual quality improvement based on prospective studies and analysis that leads to the revision of its current policies and

STANDARD		CRITERIA
		practices, taking into consideration past experiences, present conditions and future possibilities.

Appendix SII-1

STUDENT LEARNING TIME OF UNDERGRADUATE DENTAL DEGREE PROGRAMME

**This Student Learning Time of Undergraduate Dental Degree Programme was endorsed
by the Malaysian Dental Council (MDC) at its 114th Meeting on 1 June 2016**

STUDENT LEARNING TIME OF UNDERGRADUATE DENTAL DEGREE PROGRAMME

Student Learning Time (SLT) is the learning workload of a student in order to achieve specific learning outcomes. It is the amount of time expected of a student to spend on learning either through face-to-face contact with the teacher or independently. This includes the time used for assessment as in the timetable.

SLT is measured by notional hours which is not a precise measure but an indication of the amount of study load and degree of commitment expected. The Standards and Criteria for a Dental Degree Programme equates **one credit with 40 notional hours of learning**. A guide to calculate SLT for an Undergraduate Dental Degree Programme is given in Table 1. The SLT for groups of courses are given in Table 2. **The total SLT for the BDS/DDS programme (excluding University courses) is in the range of 10,000 to 11,000 notional hours.**

Table 1: Guide to Calculate Student Learning Time

Teaching Modality	Time (hr) of teaching (Face-to-face)	Additional (hr) time to be added. (Independent Learning)	Total SLT (hr)
Lecture	1	2	3
Tutorial	1	1	2
Practical Lab	3	1	4
Clinical	3	1	4
Small Group Discussion	1	1	2
Directed Self Learning	1	0	1
Problem-based learning	6	6	12
Seminar / Case Presentations	1	3	4
Ward Round	1	0	1
Posting (8 hours x 5 days)	40	0	40
A & E Posting (8 hours x 5 days)	40	0	40
Research	80	0	80
Project Report	20	0	20
Each 2000-word written assignment	10	0	10
Revision (in the time-table)	1	0	1

Examination (in time-table)	1	0	1
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Table 2: SLT for Groups of Courses

SUBJECT	SLT (notional hours)
Basic Medical*/ Dental Science (Including Oral Biology)	2000 – 2500 (50 – 62.5 credits)
Pre-Clinical (Dental Materials and Technology)	700 – 1000 (17.5 – 25 credits)
Dental Clinical Course**	6500 – 7500 (162.5 – 187.5 credits)
Human Disease – General Medicine and General Surgery	400 – 600 (10 – 15 credits)
University Courses	Up to 15% of total SLT or a maximum of 1500 notional hours or whichever is less
Dental Programme (BDS/DDS or equivalent), excluding University courses	10,000 – 11,000 (250 – 275 credits)

*Basic Medical Sciences include Anatomy, Physiology, Biochemistry, General Pathology, Medical Microbiology and Pharmacology.

**Dental Clinical Courses include Restorative Dentistry, Paediatric Dentistry, Orthodontics, Oral & Maxillofacial Surgery, Oral Radiology, Oral Pathology & Oral Medicine and Community Dentistry / Dental Public Health.

Appendix SII-2

COMPETENCIES OF NEW DENTAL GRADUATES, MALAYSIA

This Competencies of New Dental Graduates, Malaysia was endorsed by the Malaysian Dental Council (MDC) at its 99th Meeting on 17 August 2012

COMPETENCIES OF NEW DENTAL GRADUATES, MALAYSIA

A dental surgeon at graduation need to be ready to contribute to the general health of the population by being capable of providing basic dental treatment independently and implement oral health management to his /her patients and communities in a culturally sensitive manner. A dental surgeon is expected to acquire this ability through a formal structured course at a tertiary institution and be a competent dental practitioner by the time he or she received his or her first professional dental degree.

Competency assumes that all decisions, tasks and behaviours' carried out are supported by sound knowledge and skills in biomedical, behavioural and clinical dental science and in an ethical and professional manner as spelled out in the Code of Professional Conduct of the Malaysia Dental Council. Competences should support integration and merging of all disciplines, which should benefit dentists in training and also patients who are receiving treatment.

Upon graduation, students should have the following outcomes:-

1. Possess scientific knowledge to support the practice of dentistry. (Cognitive)
2. Demonstrate clinical skills to practice dentistry independently. (Psychomotor)
3. Demonstrate teamwork skills in managing oral health care for individuals and community. (Psychomotor & Affective)
4. Display ethical value and professionalism in practicing dentistry within the confines of the laws governing of the profession. (Psychomotor & Affective)
5. Communicate effectively with peers in the dental and other health professions, patient and community. (Psychomotor & Affective)
6. Appraise and apply current scientific information and techniques in the practice of dentistry. (Psychomotor)
7. Display skills for lifelong learning and continuing professional development. (Psychomotor)
8. Display entrepreneurial skills in the management of dental practice. (Psychomotor)

The dental graduate is expected to achieve the following competencies on completion of the undergraduate dental degree programme.

Domain 1 : Knowledge

PO1: Possess scientific knowledge to support the practice of dentistry. (Cognitive)

1. Explain the interactions between general health, oral health, nutrition, drugs and diseases that can have an impact on dental care. (C2)
2. Apply the principles of oral health promotion and disease prevention. (C3)
3. Relate basic structure and functions of the human body at organ, tissue, cellular and molecular levels to the practice of dentistry. (C2)
4. Explain the etiology & pathogenesis of systemic conditions & disease processes such as inflammation, infection, disorders of the immune system, degeneration, neoplasia, metabolic disturbances and genetic disorder affecting the human body including orofacial region. (C2)
5. Distinguish the signs and symptoms of orofacial disease and related systemic conditions. (C4)
6. Explain normal and abnormal orofacial development. (C2)
7. Explain radiographic techniques and radiation safety in the practice of dentistry. (C2)
8. Select relevant investigative procedures to aid the diagnosis and management of common oral diseases. (C4)
9. Explain the pharmacotherapeutics of drugs commonly used in dentistry. (C2)
10. Apply the principles of occlusion and its significance in the management of various orofacial diseases and conditions. (C3)
11. Select local anaesthetic procedures in the management of pain during dental treatment. (C4)
12. Explain sedation and general anaesthetics procedures in the control of pain related to dentistry. (C2)
13. Explain cranio-facial form and relationships, including evidence of deviation from the norm. (C2)
14. Explain the concepts of dento-facial aesthetics and its application. (C2)
15. Differentiate the principles of restoration and replacement of primary and permanent dentition. (C4)
16. Identify the treatment needs of various target groups including special need and geriatrics. (C1)
17. Apply principles and methods of sterilization, disinfection and antisepsis to prevent cross-infection in clinical practice. (C3)
18. Demonstrate the influence of behavioral, social and environmental factors in the delivery of oral health care. (C3)
19. Justify the selection of dental materials based on the science and applications well as their limitations and related environmental issues. (C4)
20. Apply basic principles of exodontia and minor oral surgical procedures. (C3)
21. Explain the methods of prevention and management of common medical and dental emergencies. (C2)

Domain 2 : Practical and Clinical Skills**PO2 : Demonstrate clinical skills to practice dentistry independently.**

1. Demonstrate the prevention methods of common orofacial diseases and conditions based on scientific evidence. (P4)
2. Demonstrate health promotion skills. (P4)
3. Perform appropriate methods of infection control in clinical practice. (P5)
4. Display the ability to obtain and record relevant medical, dental and social history. (P5)
5. Perform clinical examinations, intraoral radiographics and other necessary investigations relevant to practices of dentistry. (P5)
6. Integrate findings of a comprehensive examination to make a diagnosis. (P5)
7. Formulate an appropriate treatment plan based on clinical examinations and investigations. (P5)
8. Perform simple restorative procedures in primary and permanent dentition including pulp management of single rooted teeth. (P5)
9. Perform complex restorative procedures in primary and permanent dentition including onlays, single crowns, short span bridges and root canal therapy of uncomplicated multirouted teeth. (P4)
10. Construct simple prostheses for replacement of missing dentition. (P5)
11. Perform non-surgical management of periodontal conditions. (P5)
12. Perform basic life support in the management of medical emergencies in dental practice. (P4)
13. Manipulate commonly used dental materials in dental practice. (P5)
14. Perform administration of local and topical anaesthesia and management of their potential complications. (P5)
15. Perform simple oral surgical procedures including exodontias. (P5)
16. Perform simple orthodontic treatment including removable appliances. (P4)
17. Display the ability to prescribe and advise the used of common pharmaceutical agents related to dentistry. (P5)

Domain 3: Social Skills, Teamwork and Responsibility

PO3: Demonstrate teamwork skills in managing oral health care for individuals and community. (Psychomotor & Affective)

1. Display skills in implementing preventive measure for individuals and community according to the risk assessment. (P4,A2)
2. Perform patient care by taking into consideration their intellectual and socio-emotional characteristics. (A3)
3. Display ability to engage patient and / or their parents, guardians or care givers in their oral health care. (P3,A2)
4. Display the ability to lead or contribute as team member. (P3,A2)

Domain 4: Value, Ethics, Moral and Professionalism

PO4: Display ethical values and professionalism in practicing dentistry within the confines of the laws governing the profession. (Cognitive, Psychomotor & Affective)

1. Comprehend the code of professional conduct from the Malaysia Dental Council. (C2)
2. Comprehend the laws and regulations related to the practice of dentistry in Malaysia.(C2)
3. Explain the role and function of professional organizations and regulatory bodies.(C2)
4. Describe the professional duties of care in dentistry in line with the patient' charter.(C1)
5. Follow the requirements for informed consent and confidentiality of patient record.(P3,A2)
6. Demonstrate ethical values and professional behavior toward patient, members of the dental team and other healthcare personnel.(A3)
7. Recognize the limitations of their clinical skills and refer accordingly.(P4,A3)

Domain 5: Communication Skills and Interpersonal Relationships

PO5: Communicate effectively with peers in the dental and other health professions, patients and community. (Psychomotor & Affective)

1. Display good doctor- patient relationship in the delivery of oral healthcare. (P4)
2. Identify patient expectations, demand, need and attitude with regards to oral health care.(P4,A2)
3. Display effective communication with the dental team, patients, and other health care personnel to facilitate the delivery of oral health care(P4)
4. Perform an appropriate referral of a patient based on professional judgment.(P5)

Domain 6: Critical Thinking & Scientific Skills

PO6: Appraise and apply current scientific information and technique in the practice of dentistry. (Cognitive & Affective)

1. Apply clinical reasoning skills in decision making for oral health care delivery .(C4,A3)
2. Apply evidence- based approach in the practice of dentistry.(C3,A2)

Domain 7: Continuing Professional Development and Lifelong Learning

PO7: Display skills for lifelong learning and continuing professional development. (Psychomotor)

1. Recognize the resources for lifelong learning.(C4)
2. Demonstrate ability to acquire knowledge and scientific evidence.(P4)

Domain 8: Managerial & Entrepreneurial Skills

PO8: Display entrepreneurial skills in the management of dental practice. (Cognitive & Psychomotor)

1. Explain concepts in planning and management of dental practice in compliance with relevant regulations, policies and protocols.(C2)
2. Explain the principles of managing oral health care programme.(C2)
3. Organize a community programme to improve the oral health of the public.(P4)

Table 1: Performance Standards

Based on five-point Bondy rating scale

As of 20th May 2012

No.	Programme Outcomes (PO)	Competencies		Learning Level (Bloom's Taxonomy)	Performances Level (Five-point Bondy rating scale)
		No.	Description		
PO1	Possess scientific knowledge to support the practice of dentistry. (Cognitive)	1	Explain the interactions between general health, oral health, nutrition, drugs and diseases that can have an impact on dental care.		
		2	Apply the principles of oral health promotion and disease prevention		
		3	Relate basic structure and functions of the human body at organ, tissue, cellular and molecular levels to the practice of dentistry		
		4	Explain the aetiology & pathogenesis of systemic conditions & disease processes such as inflammation, infection, disorders of the immune system, degeneration, neoplasia, metabolic disturbances and genetic disorders affecting the human body including orofacial region		
		5	Distinguish the signs and symptoms of orofacial diseases and related systemic conditions		
		6	Explain normal and abnormal orofacial development		
		7	Explain radiographic techniques and radiation safety in the practice of dentistry		
		8	Explain the pharmacotherapeutics of drugs commonly used in dentistry		
		9	Apply the principles of occlusion and its significance in the management of various orofacial diseases and conditions		

PO1	Possess scientific knowledge to support the practice of dentistry. (<i>Cognitive</i>)	10	Select local anaesthetic procedures in the management of pain during dental treatment		
		11	Explain sedation and general anaesthetic procedures in the control of pain related to dentistry		
		12	Explain cranio-facial form and relationships, including evidence of deviation from the norm		
		13	Explain the concepts of dento-facial aesthetics and its application		
		14	Differentiate the principles of restoration and replacement of primary and permanent dentition		
		15	Explain the treatment needs of various target groups including special needs and geriatrics		
		16	Apply principles and methods of sterilization, disinfection and antisepsis to prevent cross-infection in clinical practice		
		17	Demonstrate the influence of behavioral, social and environmental factors in the delivery of oral health care		
		18	Justify the selection of dental materials based on the science and applications as well as their limitations and related environmental issues		
		19	Apply basic principles of exodontia and minor oral surgical procedures		
		20	Explain in the methods of prevention and management of common medical and dental emergencies		
PO2	Demonstrate clinical skills to practice dentistry independently (<i>Psychomotor</i>)	1	Demonstrate the prevention methods of common orofacial diseases and conditions based on scientific evidence		
		2	Demonstrate health promotion skills		

PO2	Demonstrate clinical skills to practice dentistry independently (<i>Psychomotor</i>)	3	Perform appropriate methods of infection control in clinical practice		
		4	Display the ability to obtain and record relevant medical, dental and social history		
		5	Perform clinical examinations, intraoral radiographic and other necessary investigations relevant to the practice of dentistry		
		6	Integrate findings of a comprehensive examinations to make a diagnosis		
		7	Formulate an appropriate treatment plan based on clinical examinations and investigations		
		8	Perform simple restorative procedures in primary and permanent dentition including pulp management of single rooted teeth		
		9	Demonstrate complex restorative procedures in primary and permanent dentition including onlays, single crowns, short span bridges and root canal therapy of uncomplicated multirooted teeth		
		10	Perform simple removable prosthetic procedures for replacement of missing dentition		
		11	Perform non-surgical management of periodontal conditions		
		12	Demonstrate Basic Life Support (BLS) in the management of medical emergencies in dental practice		
		13	Manipulate commonly used dental materials in dental practice		
		14	Perform administration of local and topical anaesthesia and management of their potential complications		
		15	Perform simple oral surgical procedures including exodontia		

PO2	Demonstrate clinical skills to practice dentistry independently (<i>Psychomotor</i>)	16	Demonstrate simple orthodontic treatment including removable appliances		
		17	Display the ability to prescribe and advise the use of common pharmaceutical agents related to dentistry		
PO3	Demonstrate teamwork skills in managing oral health care for individuals and community (<i>Psychomotor & Affective</i>)	1	Display skills in implementing preventive measures for individuals and community according to the risk assessment		
		2	Demonstrate patient care by taking into consideration their intellectual and socio-emotional characteristics		
		3	Display ability to engage patient and/or their parents, guardians or care givers in their oral health care		
		4	Display the ability to lead or contribute as team member		
PO4	Display ethical values and professionalism in practicing dentistry within the confines of the laws governing the profession. (<i>Cognitive, Psychomotor & Affective</i>)	1	Comprehend the Code of Professional Conduct from the Malaysian Dental Council		
		2	Comprehend the laws and regulations related to the practice of dentistry in Malaysia		
		3	Explain the role and function of professional organizations and regulatory bodies		
		4	Comprehend the professional duties of care in dentistry in line with the Patients' Charter		
		5	Follow the requirements for informed consent and confidentiality of patient record		
		6	Demonstrate ethical values and professional behavior towards patients, members of the dental team and other health care personnel		
		7	Recognize the limitations of their clinical skills to refer accordingly		

PO5	Communicate effectively with peers in the dental and other health professions, patients and community. (Psychomotor & Affective)	1	Display good doctor-patient relationship in the delivery of oral health care		
		2	Demonstrate the ability to respond to patients' expectations, demands, needs and attitude with regards to oral health care		
		3	Demonstrate effective communication with the dental team, patients, and other health care personnel to facilitate the delivery of oral health care		
		4	Perform an appropriate referral of a patient based on professional judgment		
PO6	Appraise and apply current scientific information and techniques in the practice of dentistry. (Cognitive & Affective)	1	Apply clinical reasoning skills in decision making for oral health care delivery		
		2	Apply evidence-based approach in the practice of dentistry		
PO7	Display skills for lifelong learning and continuing professional development. (Cognitive & Psychomotor)	1	Recognize the resources for lifelong learning		
		2	Demonstrate ability to acquire knowledge and scientific evidence		
PO8	Display entrepreneurial skills in the management of dental practice. (Cognitive & Psychomotor)	1	Explain concepts in planning and management of general dental practice in compliance		
		2	Explain the principles of managing oral health care programme		
		3	Organize a community programme to improve the oral health of the public		

Table 2: The five-point Bondy rating scale³

Scale Table	Score	Standard of Procedure	Quality of Performance	Level of Assistance Required
Independent	5	Safe Accurate Achieved intended outcome Behavior is appropriate to context	Proficient Confident Expedient	No Supporting cues required
Supervised	4	Safe Accurate Achieved intended outcome Behavior is appropriate to context	Proficient Confident Reasonably expedient	Requires occasional supportive cues
Assisted	3	Safe Accurate Achieved intended outcome Behavior generally appropriate to context	Proficient throughout most of performance when assisted	Required frequent verbal and occasional physical directives in addition to supportive cues
Marginal	2	Safe only with guidance Not completely accurate Incomplete achievement of intended outcome	Unskilled Inefficient	Required continuous verbal and frequent physical directive cues
Dependent	1	Unsafe Unable to demonstrate behavior Lack of insight into behavior appropriate to context	Unskilled Unable to demonstrate Behavior/Procedure	Required continuous verbal and continuous physical directive cues
X	0	Not observed		

Appendix SII-3

CREDIT TRANSFER IN DENTAL DEGREE PROGRAMME

This Credit Transfer in Dental Degree Programme was endorsed by the Malaysian Dental Council (MDC) at its 101th Meeting on 21 February 2013

CREDIT TRANSFER IN DENTAL DEGREE PROGRAMME

Credit transfer is generally not encouraged for dental degree programme in Malaysia. However, applications from individuals can be considered on a case-by-case basis. The application must fulfill the following criteria:

- i. the candidate must fulfill the minimum entry requirement for admission to a dental degree programme as determined by the Ministry of Education, Malaysia;
- ii. the candidate is from the list of institutions as in Schedule 2 of the Dental Act 1971;
- iii. the candidate has not failed in an institution before applying to continue in the undergraduate dental degree programme in another institution;
- iv. the candidate is required to produce a 'letter of good standing' from the transferring institution;
- v. admission of the candidate enables him/her to be in the receiving institution for a minimum period of 3 years before graduation; and
- vi. the institution that accepts the candidate must ensure that it does not exceed its stipulated annual intake of students.

These criteria are applicable to candidates of undergraduate dental degree programme from local and overseas institutions.

Appendix SII-4

GUIDELINES FOR APPLICATION FOR TEMPORARY PRACTISING CERTIFICATE FOR DENTAL SURGEONS 2018

This 4th Edition of Guidelines for Application for Temporary Practising Certificate for Dental Surgeons 2018 was endorsed by the Malaysian Dental Council (MDC) at its 121st Meeting on 22 January 2018

CONTENTS

1. Introduction	1
2. Objective	2
3. Dental Practitioners Eligible for Temporary Practising Certificates (TPC)	2
3.1 Categories of TPC	2
3.2 Conditions for TPC	4
4. Requirements	7
5. Application Process	12
6. TPC Applications Under Special Circumstances	12

APPENDICES

A. Form for Application for Temporary Practising Certificate for Dental Surgeons	13
B. Form for Application for Renewal Temporary Practising Certificate for Dental Surgeons	20
Members of the Working Committee	23

1. INTRODUCTION

Under Section 19 of the Dental Act 1971, dental practitioners who wish to practise in Malaysia must possess a valid practising certificate. A dental practitioner, who has been duly registered by the Malaysian Dental Council (MDC), must submit his application for a practising certificate using the prescribed form (Form 8 of the Dental Regulations 1976) and pay the requisite fee (dental practitioners in the public sector are exempt from payment), and he will then be issued with an Annual Practising Certificate (APC).

Under Section 14 of the same Act, there is also provision for the application and issuance of Temporary Practising Certificates (TPC) to dental practitioners who are registered outside Malaysia and wish to practise dentistry in Malaysia. A TPC may be issued for a period not exceeding three (3) months. While the certificate remains in force, the holder of a TPC shall be subject to any restrictions and conditions that may be specified in the certificate, and is deemed to be a registered dental surgeon. The TPC may be renewed for subsequent periods. The Council, however, has the power to cancel the TPC at any time and the certificate shall thereupon lapse.

This document clarifies the criteria and processes for application and approval of a TPC and supersedes an earlier document published in May 2014.

2. OBJECTIVE

To maintain high standards in the practice of dentistry and to facilitate transfer of skills and knowledge.

3. DENTAL PRACTITIONERS ELIGIBLE FOR TPC

3.1 Category of TPC

A Temporary Practising Certificate (TPC) may be granted to dental practitioners in the following categories:

- A. Contract or exchange dental practitioners in the public sector.
- B. Contract dental lecturers in Institutions of Higher Education.
- C. External examiners invited by Institutions of Higher Education.
- D. Dental practitioners who visit Malaysia to attend short clinical hands-on courses.
- E. Dental specialists employed in private hospitals.
- F. Dental experts engaged in transfer of skills and knowledge.
- G. Contract and collaborating dental practitioners in the public sector and Institutions of Higher Education to conduct dental clinical research.
- H. Dental practitioners undertaking voluntary community service.
- I. Foreign post-graduate dental students in dental faculties of Malaysian Institutions of Higher Education or in foreign Institutions of Higher Education with branch campuses in Malaysia.

3.2 Conditions for TPC

A Temporary Practising Certificate may be granted based on the following conditions:

Category	Scope & Place of Practice	Duration of TPC
A. Contract or exchange dental practitioners in the public sector.	Provision of dental services at government facilities only.	
B. Contract dental lecturers in Institutions of Higher Education (IHE).	<p>Teaching and learning within the dental programmes at the specified IHE and approved healthcare facilities specified by the IHE.</p> <p>Provision of dental services at the approved healthcare facilities in the IHE.</p>	
C. External examiners invited by IHE.	Examination purposes only.	

D. Dental practitioners who visit Malaysia to attend short clinical hands-on courses.	Specified hands-on courses at approved facilities.	
E. Dental specialists employed in private hospitals	Provision of dental services at the level of his specialty at the specified private hospitals.	
F. Dental experts engaged in transfer of skills and knowledge.	Specified clinical courses at approved facilities.	Up to a maximum of fourteen (14) days per year for a maximum of three (3) times in a year.
G. Contract and collaborating dental practitioners in the public sector and IHE to conduct dental clinical research.	Provision of dental services as specified by the research protocol.	
H. Dental practitioners undertaking voluntary community service.	Provision of voluntary dental services organised by or in collaboration with Malaysian organisations.	Up to a maximum of fourteen (14) days per year.
I. Foreign post-graduate dental students in dental faculties of Malaysian IHE or in foreign IHE with branch campuses in Malaysia.	Provision of dental services at healthcare facilities as specified by IHE.	

4. REQUIREMENTS

The application form must be accompanied by the following documents:

- a. *Certified copy of basic Dental Degree.
- b. *Certified copy of Certificate of Registration as a dental surgeon or the equivalent, from country of origin.
- c. *Certified copy of passport.
- d. *Two (2) recent passport size photographs.
- e. *Letter of Good Standing from Dental Regulatory Body in country of last practice, issued within 6 months of application.
- f. *Certified copy of post-graduate qualification(s) - if any.
- g. *Certified copy of post-graduate academic transcript(s) - if any.
- h. *Clinical working experience - if any.
- i. Processing fee in the form of Bank Draft/Money Order/Postal Order or by electronic transfer.
- j. Letter or Offer of Employment/Sponsorship from the:
 - i. relevant public sector agency;
 - ii. IHE;
 - iii. hospital;
 - iv. responsible organisation; or
 - v. local sponsoring company.

*Required only for initial applications.

Further criteria shall apply and additional documents shall be submitted for applications from each category as listed below.

A. Contract or Exchange Dental Practitioners in the Public Sector

- i. Basic Degree must be recognised.

B. Contract Dental Lecturers in Institutions of Higher Education

- i. For Bachelor and Post-graduate Level Programmes

Basic Degree

Recognised or passed Professional Qualifying Examination	Not Recognised and did not pass Professional Qualifying Examination
<p>Category B1:</p> <p>Evidence of postgraduate qualification with a minimum of two (2) years clinical postgraduate training by coursework.</p>	<p>Category B2:</p> <p>Evidence of postgraduate qualification with a total of five (5) years clinical experience, inclusive of at least 2 years clinical postgraduate training by coursework.</p>

- ii. For Certificate and Diploma level programmes
 - a) Basic Degree must be recognised.
 - b) Evidence of minimum of three (3) years clinical working experience as a dental surgeon after basic dental qualification.

C. External Examiners invited by Institutions of Higher Education

- i. Letter of undertaking from the Person In-Charge, Dean or Director of the Institution engaging the services of the external examiners.

D. Dental Practitioners who visit Malaysia to attend short clinical hands-on courses

- i. Evidence of a minimum of two (2) years clinical working experience as a dental surgeon after basic dental qualification.
- ii. Evidence of CPD points granted for the course.
- iii. Letter of undertaking from the Person In-Charge, Dean or Director of the facility that will be responsible for all treatment undertaken and for any dental or medical emergencies that may arise from the hands-on course.

E. Dental Specialists employed in private hospitals

- i. Basic Degree must be recognised.
- ii. Post-graduate qualification must be approved by the Malaysian Dental Council.
- iii. Letter of Approval from the IHE if applicant is also holding a TPC under Category B.

F. Dental Experts engaged in transfer of skills and knowledge

- i. Evidence of expertise.
- ii. Letter of approval from the employer (for holders of TPC).
- iii. Details of the procedure which will be carried out in the course.
- iv. Details of the course (including duration, number of participants and venue).
- v. Letter of undertaking from the Person-In-Charge or Director of the facility who will be responsible for all treatment undertaken and for any dental or medical emergencies that may arise from the procedures.

G. Contract and Collaborating Dental Practitioners in the public sector and Institutions of Higher Education to conduct dental clinical research

- i. Memorandum of agreement.

H. Dental Practitioners undertaking voluntary community service

- i. Basic Degree must be recognised.

- ii. Proof of minimum of five (5) years' experience as a dental surgeon.
- iii. Letter of undertaking from the local hospital or clinic that will be responsible for all treatment undertaken and for any dental or medical emergencies that may arise from the procedures.

I. Foreign post-graduate dental students in dental faculties of Malaysian Institutions of Higher Education or in foreign Institutions of Higher Education with branch campuses in Malaysia

- i. Letter of approval from the any healthcare facility other than the IHE.

5. APPLICATION PROCESS

New applications for TPC must be submitted using the 'Application for TPC of a Dental Surgeon' Form (**Appendix A**). Applications for renewal of TPC must be submitted using the 'Application for Renewal of Temporary Practising Certificate of a Dental Surgeon' Form (**Appendix B**). Dental practitioners shall not practise until they received their TPC. To ensure this, applicants are advised to submit their application to the Council **at least one (1) month** before the dental practitioner is due to begin practice in Malaysia.

6. TPC APPLICATIONS UNDER SPECIAL CIRCUMSTANCES

In extraordinary circumstances (e.g. mass or natural disasters), applications may be approved by the Registrar, in consultation with the Council.

Appendix A

**APPLICATION FOR TEMPORARY PRACTISING
CERTIFICATE OF A DENTAL SURGEON**

1. Full Name:

2. Passport No: 3. Date of Expiry:

4. Citizenship:

5. Date of Birth:

6.

(a) Permanent Address:

.....

.....

(b) Local Address:

.....

.....

Tel. No: E-mail address:

7. Details of Basic Dental Qualification:

(a) Degree Awarded (in full):

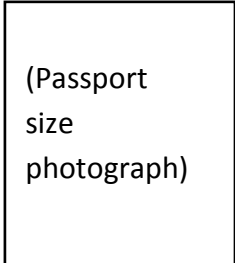
.....

.

(b) Name of Institution conferring degree:

.....

(c) Date awarded:



8. Details of Postgraduate Qualifications (if any):

I (a) Qualification Awarded (in full):

.....

(b) Name of Institution conferring degree:

.....

(c) Date awarded:

II (a) Qualification Awarded (in full):

.....

(b) Name of Institution conferring degree:

.....

(c) Date
awarded:

III (a) Qualification Awarded (in full):

.....

(b) Name of Institution conferring degree:

.....

(c) Date
awarded:

9. Professional Designation in country of origin:

.....

10. Duration of TPC: From
to

11. Principal Practising Address:

(a) Name of premises:

.....

Address:

.....

Telephone No.:

.....

.....

Signature of Dean / Director

Other Practising Addresses:

(b) Name of premises:

.....

Address:

.....

Telephone No.:

.....

.....

Signature of Dean / Director

12. Particulars of Bank draft/ Money order/ Postal order which is attached:

(a) No.: (b) Amount (RM):

(c) Bank/ Post officer and date:

13. I attach the following documents as proof of my qualifications and in support of my application:

- | | |
|---|--------------------------|
| (a) Certified copy of Basic Dental Degree | <input type="checkbox"/> |
| (b) Certified copy of Certificate of Registration as a dental surgeon from country of origin | <input type="checkbox"/> |
| (c) Certified copy of passport | <input type="checkbox"/> |
| (d) Two (2) recent passport size photographs | <input type="checkbox"/> |
| (e) Letter of Good Standing from Dental Regulatory Body in country of origin | <input type="checkbox"/> |
| (f) Certified copy of post-graduate qualification(s) | <input type="checkbox"/> |
| (g) Certified copy of post-graduate academic transcript(s) | <input type="checkbox"/> |
| (h) Evidence of clinical working experience | <input type="checkbox"/> |
| (i) Payment of RM100 | <input type="checkbox"/> |
| (j) Letter or Offer of Employment from local sponsor | <input type="checkbox"/> |
| (k) * Evidence of experience as a specialist | <input type="checkbox"/> |
| (l) * Letter of Undertaking from university/ healthcare facility covering any and all emergencies | <input type="checkbox"/> |

- (m) * Letter of approval from university
- (n) * Details of the procedure & course for transfer of skills and knowledge
- (o) * Memorandum of agreement

Note: * Denotes optional documents

DECLARATION

I (full name).....,
hereby declare that the particulars stated in this application are true and correct, and the documents attached are true copies of original documents which relate to me.

I have not at any time been found guilty of an offence involving fraud, dishonesty or moral turpitude or any offence punishable with imprisonment (whether in itself or in addition to or in lieu of a fine).

Signature of Applicant:.....

Date:

14. Details of university / healthcare facility where clinical procedures will be carried out:

(a) Name of university / healthcare facility:

(b) Address of university / healthcare facility:

.....

(c) Tel.
No.:

.....

Signature of Dean / Director: Date:

Name of Dean / Director:

Appendix B

**APPLICATION FOR RENEWAL OF TEMPORARY PRACTISING
CERTIFICATE OF A DENTAL SURGEON**

1. Full Name:

2. Passport No.: 3. Date of Expiry:

4. CPD Points for [Year]:

5. Local Address:

..... Tel. No.:

6. Duration of TPC: From to

7. Principal Practising Address:

(a) Name of premises:

Address:

Telephone
No.:

.....
.....
Signature of Dean/ Director

Other Practising Addresses:

(b) Name of premises:

Address:

Telephone No.:

.....
.....
Signature of Dean/ Director

8. Particulars of Bank draft/ Money order/ Postal order which is attached:

(a) No.: (b) Amount (RM):

(c) Bank/ Post officer and date:

.....
Signature of Applicant

Date:

Note: CPD – Continuing Professional Development

To be completed by the employer

(√ where applicable)

9. Application for:

A. Contract or exchange dental practitioner in the public sector	
B. Contract dental lecturer in an Institution of Higher Education	
a. as a dental lecturer	
b. as a dental practitioner	
C. External examiner invited by an Institution of Higher Education	
D. Dental practitioner who is visiting Malaysia to attend a short clinical hands-on course	
E. Dental specialist employed in a private hospital	
F. Dental expert engaged in transfer of skills and knowledge	
G. Contract and collaborating dental practitioner in the public sector or an Institution of Higher Education to conduct dental clinical research	
H. Dental practitioner undertaking voluntary community service	
I. Foreign post-graduate dental student in a dental faculty	

of a Malaysian Institution of Higher Education or in a Foreign Institution of Higher Education with a branch campus in Malaysia	
---	--

10. Details of university/ healthcare facility where clinical procedures will be carried out:

(a) Name of university/ healthcare facility:

(b) Address of university/ healthcare facility:

.....

(c) Tel. No.:

Signature of Dean / Director: Date:

Name of Dean / Director:

MEMBERS OF THE WORKING COMMITTEE

- | | | |
|----|----------------------------------|---------------|
| 1. | Prof. Dr. Noor Hayaty Abu Kasim | Chairman |
| 2. | Assoc. Prof. Dr. Badiyah Baharin | |
| 3. | Assoc. Prof. Dr. Chia Set Hoong | |
| 4. | Dr. Elise Monerasinghe | |
| 5. | Dr. Siow Ang Yen | |
| 6. | Dr. Sofiah Mat Ripen | MDC Secretary |
| 7. | Dr. Noor Akmal Muhamat | Secretary |
| 8. | Dr. Hazwani Hassan | Co-secretary |

Appendix SII-5

MINIMUM CLINICAL EXPERIENCE (MCE) IN COMPETENCY-BASED ASSESSMENT

This Minimum Clinical Experience (MCE) in Competency-Based Assessment was endorsed by the Malaysian Dental Council (MDC) at its 114th Meeting on 1 June 2016

These documents were prepared upon discussion among the dean of the dental schools or their representatives as in the list below:

1. Prof Dr Mohamed Ibrahim Abu Hassan
Chairperson/Dean, Faculty of Dentistry, UiTM
2. Prof Dato' Dr Zainal Ariff Abdul Rahman
Representing Dean, Faculty of Dentistry, UM
3. Prof Madya Dr Tuti Ningseh Mohd Dom
Dean, Faculty of Dentistry, Universiti Kebangsaan Malaysia
4. Dr Haslinda Ramly
Dean, Faculty of Dentistry, Universiti Sains Islam Malaysia
5. Prof Dato Dr Norain Abu Talib
Dean, Faculty of Dentistry, MAHSA University
6. Prof Dr Abdul Rashid Hj. Ismail
Dean, Faculty of Dentistry, Melaka Manipal Medical College
7. Prof Dr Toh Chooi Gait
Dean, Faculty of Dentistry, Int. Medical University
8. Prof Dr Rahimah Abdul Kadir
Dean, Faculty of Dentistry, Lincoln University College
9. Prof Madya P Raghunan Menon P
Dean, Faculty of Dentistry, Penang International Dental College
10. Prof Dato Dr Fawzia Abdullah
Dean, Faculty of Dentistry, SEGi University
11. Prof Dr Adam Hussein
Dean, School of Dental Science, Universiti Sains Malaysia
12. Assoc Prof Dr Muhanad Kasmoola
Dean Kulliyah Dentistry, International Islamic University, Malaysia
13. Prof Dr Wihaskoro Sosreno
Dean, Faculty of Dentistry, AMIST University
14. Dr Siti Mariam Abdul Ghani
Deputy Dean (Academic), Faculty of Dentistry, UiTM (Secretariat)

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Minimum Clinical Experience (MCE) in Competency-Based Assessment

1.0 Definitions

1.1 Clinical Competency

- Ability to carry out a task (clinical procedure) on **patient** to a predetermined standard/level independently without assistance or supervision.
- Assessment covers cognitive, affective, psychomotor domains and professional values.

1.2 Procedural Competency

- Ability to carry out a task (procedure) on **simulated patient or mannequin** to a predetermined standard/level independently without assistance or supervision.
- Assessment covers cognitive, affective and psychomotor (technical skill) domains.

1.3 Minimum Clinical Experience (MCE)

- It is a pre-requisite for competency assessment.
- It consists of **quantitative** (minimum number of requirement) and/or **qualitative** measurements according to rubrics of clinical assessment.

1.4 Expected Clinical Experience (ECE)

- This comprises of expected clinical and procedural experiences prior to the final professional examination.

1.5 Predetermined standard/level

- As indicated in the Competencies of New Dental Graduate in Malaysia (approved by the Malaysian Dental Council)

1.6 Competency-Based Curriculum

- Clinical assessment by qualitative measurements according to rubrics.

- Met the pre-requisite requirement (minimum clinical experience) to sit the clinical competency test;
 - Time-based (readiness of a student) or ;
 - Completion of minimum number of clinical requirement or;
 - Combination of the above.

2.0 Minimum Clinical Experience Prior To Assessment of Competency

This section focuses on the pre-requisites to be achieved prior to competency assessment. Table I below indicates the procedure and minimum clinical experience based on discipline.

Table I: Dental procedure for competency/minimum clinical experience (MCE)

2.1 Procedural Competency

Discipline	Procedure	Specific Task	MCE
Prosthodontics	Fixed Prosthodontics	Procedural crown preparation (All ceramic)	Nil

2.2 Clinical Competency

Disciplines	Procedure	Specific Task	MCE
General Dental Practice	• Examination & Diagnosis		10 presented E&D or 1 semester clinical contact hours
	• Oral Radiographic Imaging	Take and interpret intraoral radiograph	5 cases
	• Infection control		*Assessed in every procedural rubrics of all disciplines

	<ul style="list-style-type: none"> • Basic Life Support 		Certification at least once
	<ul style="list-style-type: none"> • LA procedure 	Infiltration	5 cases or 1 semester
		Inferior Dental Nerve Block	5 cases or 1 semester
	<ul style="list-style-type: none"> • Prescription of common drugs 	Write prescription and advice	5 cases or 1 semester
Restorative	<ul style="list-style-type: none"> • Caries management 	Initial (small-medium) (ICDAS 3 or 4)	10 cases or 1 semester
		Advanced/deep caries (medium-large) (ICDAS 5 or 6)	5 cases or 2 semesters
Endodontics	<ul style="list-style-type: none"> • Root canal treatment 	Complete root canal treatment until coronal seal	2 teeth or 2 semesters
Prosthodontics	Removable Prosthesis	<ol style="list-style-type: none"> 1) Preoperative assessment & partial denture design 2) Secondary impression (can either be complete denture or partial denture) 	#2 cases (patients) of partial dentures* or 2 semester #If student fail competency at the 3 rd case, the student need to practice on another case before sitting the next attempt. *At least one Co-Cr denture.
Oral Surgery	Exodontia	Forceps extraction	5 cases or 2 semesters
Periodontics	Scaling and polishing		10 cases or 1 semesters
Paediatric Dentistry	Behavioural management		3 cases or 2 semesters

3.0 Expected Clinical Experience (ECE)

Apart from minimum clinical experiences as outlined in Table 1, Dental Faculties need to ensure providing clinical experience in the procedures in Table 2 - Competency Tests for these procedures are optional.

Table 2 : Expected Clinical Experience (ECE)

Discipline	Procedure	ECE
Restorative	<ul style="list-style-type: none"> • Indirect restorations <ul style="list-style-type: none"> ○ Onlays/ Crowns ○ Post and core 	3 indirect restorations with minimum 1 post crown
Endodontics	<ul style="list-style-type: none"> • Root canal treatment (Multi rooted tooth) 	1 molar tooth
Prosthodontics	<ul style="list-style-type: none"> • Complete denture 	1 set of F/F denture or F/P denture
	<ul style="list-style-type: none"> • Bridge 	At least 1 bridge with 2 abutments preparation. *in the event where cases are not available, 1 procedural competency and 1 clinical resin bonded bridge is acceptable.
Oral Surgery	<ul style="list-style-type: none"> • Surgical removal of impacted tooth or root 	1 case
Periodontics	<ul style="list-style-type: none"> • Root planning 	At least 1 sextant or equivalent
Orthodontics	<ul style="list-style-type: none"> • Orthodontics diagnosis 	2 cases
	<ul style="list-style-type: none"> • Simple orthodontic treatment including removable appliances 	1 case
Oral Medicine	<ul style="list-style-type: none"> • Distinguish sign and symptom of orofacial diseases and related 	Record of patient seen

	systemic conditions	
Preventive Dentistry	<ul style="list-style-type: none"> • OHI/OHE • Smoking cessation counselling • Caries risk assessment • Caries risk management: <ul style="list-style-type: none"> ○ Plaque control ○ Topical fluoride ○ Fissure sealant ○ Dietary advice 	5 cases 2 cases 10 cases 3 cases 2 cases 2 cases 3 cases
Paediatric dentistry	<ul style="list-style-type: none"> • Stainless steel crown • Pulpotomy • Restorative procedure 	1 case on mannequin 1 case on mannequin 5 cases
General Dental Practice	<ul style="list-style-type: none"> • Case completion 	5 cases or at least 2 disciplines

4.0 Competency Assessment

Assessment of student performance is an essential component of an outcome-based education. It also involves consideration of the following aspects as described below.

4.1 Assessment methods

- Student need to pass the competency assessment. Should they fail, they are allowed to repeat the test until they pass as determined by the faculty.
- It is optional whether such test will carry marks for continuous assessment.

4.2 Assessment will be according to rubrics. Rubrics need to be clear and objective.

4.3 School which choose not to opt for competency test for certain procedure shall set a schedule for graduating to be at least doubling the minimum clinical experience.

School who chooses the qualitative options should be provide evidence of the students performed the procedure. Students must performed not less than the minimum no.

4.4 Assessment shall be done by TWO assessors.