



RAK MEDICAL AND HEALTH SCIENCES UNIVERSITY
RAK COLLEGE OF DENTAL SCIENCES



RAK COLLEGE OF DENTAL SCIENCES
INTERNSHIP TRAINING PROGRAM
HANDBOOK
2023

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1. INTRODUCTION

1.1. Internship Clinical Training Program

Program Director's Message

RAK College of Dental Sciences (RAKCODS), RAK Medical and Health Sciences University (RAKMHSU) has been established in 2007. Internship training program started in 2012 to provide training to its graduates and accomplish the mission, goals and objectives of RAKCODS. The program provide training in oral health care to enhance the knowledge, clinical skill of interns and gain experience which will enable them to practice with greater independence. Internship is an optional training program for one-year duration at RAKCODS and is based on the philosophy of Comprehensive Dental Care for patients under the supervision of qualified clinical faculty. Interns are encouraged to make enquiries with the dental practice regulatory bodies in their respective countries with respect to the current dental practice licensing regulations.

Intership Handbook is prepared based on the suggestion of the faculty members and interns. The Internship Manual 2021 is revised as Internship Handbook 2023 based on the valuable suggestions and recomendatio from the honourable team Commission for the Academic Accreditation, Ministry of Education, Internship team form Ministry of Health and Prevetion and in aligned with National Institute for Health Specialities (NIHS) guidelines.

This handbook highlights the; admission requirements for internship program, general clinical protocol, regulation for the training, learning outcome, clinical requirement, assessment of clinical competency, evaluation and reflection on the program. The interns' are encouraged to follow the instructions mentioned in this handbook for the smooth running of the clinics.

A flowchart is being presented which explains the whole journey of the internship training program and closing the loop of communication between the interns, faculty and the organization. It starts with the evaluation of interns by the faculty on all the educational components performed by interns, a feedback by the faculty to the interns to improve their skills and the interns in turn provide a feedback on the faculty and program which shall allow RAKCODS to improve the effectiveness of the internship program.

This intership handbook will make a valuable contribution in comprehensive patient care, community based preventive dental programs and to improve the clinical skills of interns. All interns, faculty and staff members are invited for their valuable suggestions to further improve this handbook.

Dr. Muhammed Mustahsen Rahman

Program Director

1.2. Internship Program at RAK College of Dental Sciences

A dental Internship is an optional training program at RAKCODS and is based on the philosophy of Comprehensive Dental Care for patients under the supervision of qualified clinical faculty. The duration for internship training at RAKCODS facility is one year and is offered after graduation. Interns will abide by all university policies and procedures given in the student handbook, internship handbook and other university related published documents

Attendance for all clinic sessions will be monitored by the clinic instructor/faculty. Interns are expected to attend all the sessions and present in all assigned clinical sessions. Interns who cannot attend the clinic due to any emergency should call the clinic reception to rearrange the scheduled appointments of his/her patients.

Clinical Records of patients are maintained as electronic files in Hospital Information Management System (HIMS) and has been designed to contain all the necessary information of the patients. All the details of the patient are considered confidential and maintained accordingly

Interns have to complete all clinical requirements by following clinic policies and guidelines including case reports of full mouth oral rehabilitation of a patient explaining how the treatment was modified (if any) and a detailed report with all supporting documents are to be submitted. Each intern will be evaluated for their Knowledge, clinical Skills, attitude towards work, communication Skills and clinical procedure/ work in their respective discipline.

Evaluation of the interns will be on the educational training component, daily evaluation of their clinical procedures, review of clinical requirements completion, case presentation, journal clubs and seminars. The effectiveness of the internship training program will be measured using the internship evaluation, faculty evaluation of all interns, faculty evaluation by evaluators & interns, and patient experience survey. Feedback will be provided to all and an action taken report will be prepared to improve the program.

This handbook contains general guidelines. Please refer the following for further details and guidelines:

RAKCODS Health and Safety Policies and Procedures for medical records, patient rights and responsibilities, patient experience, patient complaints, patient triage, general and informed consent, urgent and routine dental care, patient's referral, incident management system or Occurrence Variance Reporting, *disclosure policies, clinical procedure guidelines, medication management policies, quality improvement plan, hospital safety policies including infection prevention and control policies, radiation safety, medical equipment management, training & maintenance, emergency preparedness plan and policies on hospital emergency codes.*

Ethics Framework of RAKCODS- for working within the organization, solving ethical dilemmas, action plans and ethics in the conduct of research.

Patient Safety Plan- allows RAKCODS to understand the priorities while treating patients.

Students Handbook RAKMHSU

Risk Management Plan RAKCODS

1. OVERSIGHT OF THE INTERNSHIP PROGRAM

2.1 Vision and Mission of RAK College of Dental Sciences

Vision

To be a leading dental institute in the UAE and the GCC region, dedicated to the pursuit of academic excellence as well as making valuable contribution to the community in oral healthcare.

Mission

To prepare graduates who have evidence-based knowledge and skills in the dental profession, enabling them to make a valuable contribution at an individual as well as at community level too. RAKCODS is also committed to contribute to the advancement of knowledge by supporting research conducted by its faculty and students, following ethical practices, in the process of encouraging lifelong learning.

2.2 Internship Program Goals and Objectives

Goals:

The dominant goal of the internship program is to supplement their academic knowledge and clinical training in multiple dental discipline through comprehensive clinical dentistry under the supervision of well qualified and experienced faculty. The training program also enable them to make a valuable contribution at an individual as well as at community level too with the following specific goals.

Skill Development: Interns can enhance their clinical skills and techniques through direct patient care by performing various dental procedures and advance treatment under supervision.

Experiential Learning: Interns learn how to interact with patients, maintain dental records, collaborate with colleagues and seek consultation from faculty.

Training in Multiple Dental Discipline: Program provides an exposure to major dental discipline and encourages to explore their interests and gain a broader understanding of various aspects of dentistry.

Career Development: Interns have the opportunity to connect with experienced dentists and dental professionals for their future career development. Internship program also provides clinical education for those who are planning to serve in different public or private organizations locally or globally.

Professional Ethics and Communication Skills: Interns learn and understand the importance of working within the ethical framework, patient confidentiality, informed consent and effective communication during patient care.

Professional advancement: Through the training program, the interns develop adaptability, time management, teamwork, and critical thinking. The program also facilitates the choice of and preparation for a specific specialty that the intern may be interested in.

Objectives:

1. Establish diagnosis, prognosis and treatment planning and perform periodontal procedure for patients with periodontal diseases
2. Present clinical & radiographic findings, diagnosis and treatments available for jaw cysts, bone tumors, oral malignancies, maxillofacial injuries and perform tooth extractions/ minor surgical procedure.
3. Prepare the various cavity designs for amalgam, composite and complex restorations
4. Perform root canal treatment (opening, cleaning, shaping, preparation and obturations) on assigned patient/s
5. Prepare for full veneer crowns, partial veneer crown, intra-coronal restorations and extensively damaged teeth, make impressions, and perform setup of teeth and artificial occlusion.
6. Performing restorative management, pulp treatments in pediatric dentistry and prevention of oral or dental disease
7. Diagnose malocclusion establish treatment planning and fabricate different clasps for the management of patients with removable appliances

2.3 Organizational Structure Roles and Responsibilities

Program Director (PD):

- Specialist in a dental discipline with minimum five years of documentation and administrative experience.
- Licensed with ministry of Health as specialist and have at least five years post residency or specialty qualification.
- Also provides fundamental clinical skills training and should have at least three years of documented educational and/or administrative experience.
- Have dedicated time for the leadership of the program and responsible to communicate with the interns, faculty members, NIHS and the leadership team.
- Ensure the availability of adequate resources for education/ training in healthy and safe learning and working environments that promote interns' well-being
- Provide for Authority and accountability for the overall program, including compliance with all applicable program requirements.
- Provided with the support required to devote FTE of non-clinical time to the administration of the program as per the number of approved interns position and NIHS requirements.
- Role model for faculty members and interns and participate in clinical activity consistent with the specialty. This activity will allow the program director to role model the core competencies for the faculty members and interns.
- Have responsibility, authority, and accountability for administration and operations; teaching and scholarly activity; interns' recruitment and selection, evaluation, and

promotion of interns, and disciplinary action; supervision of interns; and intern education in the context of patient care.

- Have outstanding professionalism, high quality patient care, educational excellence, and a scholarly approach to work and creates an environment where respectful discussion is welcome, with the goal of continued improvement of the training.
- Design and conduct the program in a fashion consistent with the needs of the community, the mission of the institute and the mission of the program.
- Administer and maintain a learning environment conducive to educating the interns in each of the Core Competency domains.
- Develop and oversee a process to evaluate candidates prior to approval as program faculty members for participation in the internship program education and at least annually thereafter.
- Have the authority to approve and/or remove program faculty members for participation in the internship program education at all sites.
- Have the authority to remove interns from supervising interactions and/or learning environments that do not meet the standards of the program.
- Provide accurate and complete information required and requested by the NIHS and others as required.
- Provide a learning and working environment in which interns have the opportunity to raise concerns and provide feedback in a confidential manner as appropriate, without fear of intimidation or retaliation.
- Provide and review infrastructure facilities on regular basis and address any issue raised by the faculty and interns
- Provide orientation to the internship program and conduct regular meeting with the interns and faculty to understand their concern and provide the solution

Associate Program Director (APD):

- Specialist in a dental discipline with minimum three years of documentation and administrative experience.
- Licensed with ministry of Health as specialist and have at least five years post residency or specialty qualification.
- Associate program director is appointed to support the PD by actively participating in administrative and educational activities.
- Assume the role for a duration suitable for ensuring program continuity and stability.
- Provided with the support required to devote FTE of non-clinical time to the administration of the program as per the number of approved interns position and NIHS requirements.
- Role model for faculty members and interns and participate in clinical activity consistent with the specialty. This activity will allow the program director to role model the core competencies for the faculty members and interns.
- Review clinical requirements, internship reflection training program, faculty evaluation and provide action taken report to improve the program

Faculty

- Specialist in a dental discipline with minimum three years of teaching and clinical experience.
- Licensed with Ministry of Health as specialist/ practitioner.
- Have appropriate qualifications in their fields (PhD, MDS, Post Residency or Specialty, etc.) and hold appropriate institutional appointments and current dental specialty or general dental practice license.
- Provide an important bridge allowing interns to grow and become practice-ready, ensuring that patients receive the highest quality of care.
- Role models for interns by demonstrating compassion, commitment to the delivery of safe, quality, cost-effective, patient-centered care, professionalism, and a dedication to lifelong learning.
- Improve the oral and ultimately the overall health of the individual and the community through the dental internship training.
- Ensure that patients receive the optimum level of oral care and recognize and respond to the needs of the patients, interns, community, and institution.
- Provide appropriate levels of supervision to promote patient safety and create an effective learning environment by acting in a professional manner and attending to the well-being of the interns and themselves.
- Have a significant role in the education and supervision of interns and must devote a significant portion of their entire effort to intern education and/or administration, and teach, evaluate, and provide formative feedback.
- Regularly participate in organized clinical discussions, rounds, journal clubs, and conferences and pursue faculty development designed to enhance their skills.
- Approve guide the interns regarding patient examination, diagnosis, prognosis, treatment plan, sequence of treatment planning, record management and referral to the specialist.
- Evaluate the individual intern for their Knowledge, clinical Skills, attitude towards work, communication Skills and clinical procedure/ work in their respective discipline.
- Review clinical requirements, internship reflection training program, faculty evaluation and provide action taken report to improve the program.

Faculty Involvement in the Dental Internship Program Planning and Review

Faculty involvement in the dental internship program planning and ongoing program review and evaluation is crucial for ensuring the program's success and maintaining its quality. Here is a description of their involvement in these processes:

Program Development: Faculty members play a vital role in developing the dental internship program. Including their journal clubs, case presentations and comprehensive clinical dentistry requirements. All of these ensures the alignment with the program's goals and objectives.

Determining Clinical Experiences: Faculty members help in identifying and selecting appropriate clinical experiences/requirements for the interns. They ensure that the program provides a diverse range of experiences/requirements that cover various aspects of dental practice and meet the requirements for licensure or certification.

Establishing Assessment Methods: Faculty members contribute to the development of assessment methods and evaluation criteria to measure the interns' progress and competence. They help design competency evaluations, and performance assessments that accurately reflect the interns' knowledge and skills.

Ongoing Program Review and Evaluation through Reflection program: Monitoring Intern Progress: Faculty members oversee the progress of the dental interns throughout the program. They regularly evaluate their performance, provide feedback, and address any concerns or areas needing improvement.

Faculty Meetings with interns: Faculty members participate in regular meetings with program coordinators, Program directors and other administrators to discuss the program's effectiveness and make any necessary adjustments. These meetings provide a platform for faculty and interns to share their observations, exchange ideas, and contribute to program enhancements. Also there are regular meeting with interns to understand their progress, difficulties faced and other needs.

Program Evaluation: Faculty members actively participate in program evaluation processes. They analyze data collected from surveys, and feedback from interns, faculty, and preceptors to assess the program's overall effectiveness. Based on these evaluations, an action plan is made to improvise on the program effectiveness.

To demonstrate an awareness of and responsiveness to the larger context and system of healthcare, including social determinants of health, as well as the ability to effectively call on other resources to provide optimal care, dental interns engage in various learning activities. Here are a few examples:

Community Outreach Programs: Dental interns engage in community outreach programs aimed at providing oral health screening services to the community. These programs often involve partnering with community organizations or schools. By participating in these initiatives, interns develop an understanding of the social determinants of health and the impact of socioeconomic factors on oral health outcomes. They learn to adapt their care to address the specific needs of different communities and connect patients with relevant community resources.

Professional Development Workshops: Dental interns attend workshops or seminars focused on topics such as healthcare economics, healthcare management, and practice management. These learning activities provide interns with insights into the broader healthcare system, reimbursement models, and strategies for optimizing resource allocation. They learn how to navigate the healthcare system efficiently, advocate for their patients' needs, and leverage available resources to provide optimal care.

Program Coordinator

- Licensed with ministry of Health as GP dentist and have at three years of clinical experience and with a minimum of two years of documentation and administrative experience.
- At a minimum, the program coordinator must be provided with adequate time for the administration of the program.
- Manage the day-to-day operations of the program and serve as an important liaison with learners, faculty, and other staff members, and the NIHS. Individuals serving in this role are recognized as program coordinators.

- Possess skills in leadership and personnel management and are expected to develop unique knowledge of the NIHS and Program Requirements, policies, and procedures.
- Assist the program director in accreditation efforts, educational programming, and support of interns.
- Provide orientation to the internship program and conduct regular meeting with the interns and faculty to understand their concern and provide the solution.
- Review clinical requirements, internship reflection training program, faculty evaluation and provide action taken report to improve the program

Other Program Personnel

Multiple personnel may be required to effectively administer a program. These may include: Staff members with clerical skills, project managers and education experts. Supporting staff with clinical skills and licensure as applicable.

3. INTERN APPOINTMENTS

3.1 Admission Requirements

Dental Internship program is a UAE government requirement that is applicable only to those expatriates who wish to practice dentistry in the UAE, and not mandatory for those who do not plan to practice dentistry in UAE. However, interns are encouraged to make enquiries with the dental practice regulatory bodies (dental councils, for example) in their respective countries with respect to the current dental practice licensing regulations.

As there are limited numbers of seat for interns, merit will be strictly followed for the intake of all interns as per the selection criteria of the university. Decision of the 3 members (Program Director, Associate Program Director and Program Coordinator) will be considered as the final for the intake of interns. The duration for internship training is one year.

Following are the Requirements:

- BDS degree from Accredited Universities in the UAE and attested by Ministry of Education in UAE.
- BDS Degree or Equivalent Undergraduate Dental Degree from Universities outside the UAE duly certified by the MOE of the UAE.
- English Language Proficiency Test (TOEFL score of 500 in paper-based test OR 61 in internet based test OR Academic IELTS score of 5 OR 173 in TOEFL CBT)
- Good Standing Certificate by University last attended
- Medical Fitness /Vaccination Certificate
- Copy of Passport / Identity Card “ID”
- Any other requirements set in the NIHS guidelines

Completely filled Registration Form for Internship submitted to Dean’s office as per announced date.

3.2 Internship Application Form

RAK College of Dental Sciences - Internship Application Form

Instructions:

- Name should be written in CAPITAL LETTERS as it should appear in the certificate.
- Admission is subject to availability of seats and approval from Admission Committee

Full Name in BLOCK LETTERS:

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Mobile No: _____ **E mail ID:** _____

Year of Graduation and Institution: _____

Address: _____

Signature of applicant: _____ **Date:** _____

Please attach the following with application form:

- BDS or Equivalent Undergraduate Dental Degree from Accredited Universities in the UAE and attested/certified by Ministry of Education in UAE.
- English Language Proficiency Test (TOEFL score of 500 in paper-based test OR 61 in internet based test OR Academic IELTS score of 5 OR 173 in TOEFL CBT)
- Good Standing Certificate by University last attended
- Medical Fitness or Vaccination Certificate
- Copy of Passport / Identity Card “ID”

Manager Finance:

Intern ID:

Program Director

Associate Program Director

Program Coordinator

Date: _____

3.3 Internship Agreement

This agreement is entered into between RAK COLLEGE OF DENTAL SCIENCES (RAKCODS) and intern _____ and is effective from _____

The purpose of this educational internship program is for intern to learn and improve his knowledge and clinical skill and experience. In consideration of the mutual agreements set forth herein, the parties hereby agree:

1. The internship is related to an educational purpose and will receive training with direct and close supervision by qualified faculty for one-year period.
2. RAKCODS will provide a quality clinical training to interns at its existing facilities and guidelines of national institute for health specialties (NIHS).
3. The intern acknowledges and agrees that intern will pay the fee as mentioned in internship application from is not entitled to wages or compensation or benefits for the time spent in the internship.
4. The intern will comply with the policies, procedures, rules and regulations of the institution mentioned in internship handbook and student handbook.
5. The institution may terminate the internship in case the rules and regulations of the institution are not followed.
6. Intern agree to provide all the documents mentioned in internship application.
7. Intern shall act in a professional manner and dress appropriately and play a role in patient health care.

I have read, understood, agree to abide by the university policies and procedures given in the student handbook, internship handbook, RAKCODS Health and Safety Procedures and other university related published documents. Should I commit any violation, I understand and agree that I will be liable for disciplinary action as per Institution & NIHS guidelines. This agreement will continue to be in effect and I agree to abide by this agreement until I complete my internship program.

Name of the Intern: _____

Intern ID no: _____

Start date of the program: _____

Phone & Email of the Intern: _____

Signature of the Intern with Date: _____

Program Director, RAK College of Dental Sciences

Name: _____

Signature with Date: _____

3.4 Job Description, Guidelines and Responsibility of Interns

- Internship Training Program at RAK College of Dental Sciences (RAKCODS) is based on the philosophy of Comprehensive Dental Care for patients under the supervision of qualified clinical faculty of different specialties.
- RAKCODS dental chairs/units with all associated facilities will be used for training of the interns.
- Each intern will be working under the supervision of clinical faculty in all major discipline of clinical dentistry.
- The duration for internship training is one year and offered after graduation as per the academic calendar of the university.
- Interns will attend 7 hours a day for 5 days a week as per the assigned schedule to complete the education program.
- The intern is allowed annual leave for 21 working days in total.
- The intern should be in the program for a minimum period of 3 months before requesting any leave.
- Annual leave has to be submitted to the Internship Coordinator before 2 weeks of the required date and the approved request must be kept in the intern's file after the approval from the Dean.
- Any day the intern does not appear for work will be considered as absent.
- If the intern does not appear for 10 consecutive days, the program coordinator should inform the Chairperson Clinical Sciences, who in turn will consider the immediate termination of the intern from the program with the consent of the Dean.
- A sick leave certificate, duly attested by competent authority must be submitted to the Internship Coordinator.
- Violation Warning will be executed if any of the above mentioned guidelines are not followed.
- First violation will have an oral warning.
- Second violation will have a written warning.
- The third violation will be forwarded to disciplinary committee; it may lead to the termination of the intern from the program.
- Interns are expected to be present in all assigned sessions. Prior permission is required if intern is unable to attend the clinic.
- Interns who are unable to attend the clinic due to any emergency should call the clinic reception to rearrange the scheduled appointments of his/her patients.
- Interns have to complete all clinical requirements as mentioned in this Handbook by following all policies of the clinic as per the rules and regulations of the University.
- In line with the philosophy of comprehensive dental care at the RAKCODS, interns will be allocated patients for whom they are to provide comprehensive preventive and therapeutic dental care.
- Interns will review medical/dental history, clinical chart and discuss with the instructor before clinical examination.
- Interns should comply with dress code and university code of ethics

- Clinic setting- charts, forms, supplies and equipment should be arranged before patient is seated.
- Finish the procedure 15 minutes prior to end of the session for adequate infection control and cleaning of the unit.
- The intern is responsible for the appearance and cleanliness of the cubicle while working on it and before leaving.
- At the end of the clinic time, the chair should be raised to its full height position and the foot pedals placed on the base of the chair to facilitate cleaning of the floors by cleaning staff.
- The E-files of the patients have been designed to contain all patients' informations and clinical records. All data should be recorded in e file.
- Case reports of full mouth rehabilitation of a significantly medically compromised patient explaining how his medical condition influenced the treatment and how the treatment was modified (if any), to be submitted complete with all supporting documents and proof of follow up reviews.
- Dental records of all patients treated, complete with specialty chart recordings and progress notes filled out by the intern and executed by the supervising staff.
- As the clinical work is entirely in the RAKCODS clinics, it is important to monitor intern's progress in all aspects of general dental practice. The specialists do this throughout the clinical training, as a part of the assessment of clinical skill, treatment plans and patient management.
- **Interns are responsible to:**
- Follow all the guidelines as provided in Internship handbook, RAKCODS Health and safety procedures, RAKMHSU student handbook & other documents
- Complete all the clinical procedures/requirements in each of dental discipline on a satisfactory level.
- Continuously improve knowledge, clinical & communication Skills.
- Provide treatment with proper attitude
- Upholding the patient safety as a priority always

3.5. Intern's Transfers

- The internship program accepts interns as transferred from other NIHS accredited internship program subject to availability of seats.
- At least 50% of the total clinical requirements should be carried out in RAKCODS. This will be assessed by a personal interview of the candidate, verification of previous educational and/or training experiences & procedure performed.
- The candidate requesting the transfer shall submit the following documents:
 - All the documents mentioned in admission requirement mentioned on pp -).
 - A 'No objection for transfer' certificate from the applicant's current institution.
- A summative competency-based performance evaluation from the program from which the intern is transferring is required prior to acceptance of a transferring intern.
- Intern who has been dismissed from any internship training program will be not be eligible for admission as a transfer.

4. EDUCATION PROGRAM

The educational program is to keep the interns refreshed with most recent advancement of logical information and clinical skills. This enables interns to make a valuable contribution to their communities as well as to individuals by adhering to ethical practices and encouraging lifelong learning.

The program includes the following educational, didactic, clinical training, clinical case presentation and journal club/workshops/professional development components to ensure that interns can practice with knowledge and skill based on evidence in the dental profession.

4.1 Educational Components

Didactic:

- Theory lecture of will be given to interns in different dental discipline on most recent and advanced dental treatments, use of advanced technology in dentistry, professionalism and ethics based on evidence.
- The detailed contents will be provided to the interns once they register for the program and attend the orientation sessions held before the commencement of the program.
- Three hours per week is dedicated for the interns to participate in the structured core didactic activities as per the schedule provided including but not limited to, lectures, conferences, courses, labs, asynchronous learning, case discussions didactic teaching, journal clubs, education in critical appraisal of scientific evidence, ethical practice towards medical profession and basic principles of research methodology and its clinical application. The attendance will be monitored strictly.
- Competency-based goals and objectives are designed to fulfill the requirements of each dental discipline. These clinical requirements are aligned with the program objectives and are evaluated on a regular basis and feedback provided to the interns by the faculty to promote progress on a trajectory to autonomous practice which is documented in the internship program.
- These goals and objectives will be discussed with interns and faculty members during the program orientation. It is also available in the shared folder of the organization and the same internship handbook will be mailed to the interns, faculty and staff.
- This learning activity is to promote critical thinking, evidence-based practice, and self-reflection, all of which are essential for providing high-quality dental care and fostering a commitment to lifelong learning.
- It fosters dental interns' ability to investigate and evaluate patient care, appraise scientific evidence, and continuously improve patient care through self-evaluation and lifelong learning is the case presentation and discussion session
- During this activity, dental interns are given the opportunity to present and discuss complex patient cases they have encountered during their clinical practice.
- The session involves a collaborative and interactive approach, where interns present their cases to a group of faculty members, fellow interns, and sometimes, guest experts.

- The following key elements are supervised in this learning activity:

Case Presentation:

- Each intern prepares a detailed presentation that includes the patient's medical and dental history, chief complaint, diagnostic findings (radiographs, clinical exams, and laboratory results), treatment planning, and interventions performed. The presentation may also incorporate relevant literature and evidence-based guidelines.
- Interns will present two comprehensive clinical cases with complete documentation including chief complaint, medical and dental history, clinical charts, diagnosis, treatment planning, interpretation of diagnostic findings, patient education, oral health risk assessment, development of personalized prevention strategies, treatment done or any modification in treatment plan.
- Presentation includes pre and post treatment conditions of the patient including, photographs, slides, models, x-rays and follow-up record development of comprehensive, sequenced treatment plans and patient management and relevant literature and evidence-based guidelines.
- During this activity, dental interns are given the opportunity to present and discuss complex patient cases they have encountered during their clinical practice. The session involves a collaborative and interactive approach, where interns present their cases to a group of faculty members, fellow interns, and sometimes, guest experts. The following key elements are involved in this learning activity:
- After the case presentation, a discussion ensues, involving faculty members and fellow interns. The discussion focuses on critically evaluating the intern's management of the case, examining the decision-making process, and identifying areas of improvement or alternative approaches. Participants engage in a dialogue, sharing their perspectives, experiences, and evidence-based insights.
- Throughout the case presentation and discussion, emphasis is placed on the integration of scientific evidence. Interns are encouraged to support their treatment decisions with research studies, systematic reviews, and clinical guidelines. They learn how to appraise the quality of evidence, assess its applicability to the case at hand, and make informed decisions based on the best available evidence.
- Depending on the case complexity, case presentation and discussion sessions may involve experts from other disciplines, such as oral surgery, periodontics, or prosthodontics. This multidisciplinary approach broadens the interns' perspective, encourages collaboration, and helps them understand the role of different specialties in comprehensive patient care.
- By participating in case presentation and discussion sessions, dental interns demonstrate their ability to investigate and evaluate their patient care, integrate scientific evidence, and continuously improve their skills and knowledge.

Case Presentation Guidelines:

- Slide of pre-operative and post-operative clinical charts and radiographs
- Pre-operative and post-operative diagnostic casts (mounted on articulator)

- Power presentation slides on patient of history, diagnosis, prognosis: detailed treatment planning and dental procedure
- Additional color slides to illustrate treatment progress
- Postoperative case presentation should include intra-treatment slides of important clinical or laboratory steps and other dental procedures
- What treatment was performed, documented treatment progress and procedures along the way, if treatment not completed yet what other needs to be done, other treatment options considered
- Outcome assessment;
- What aspects of the treatment went well?
- What aspects of the treatment could have been improved?
- Student will discuss the case with each faculty in their specialty according to the treatment plan
- The presentation should be done using the presentation format for both pre-treatment and post-treatment phase
- Distribution of marks is based on the details mentioned below

Assessment of Case Presentation

Pre-treatment presentation:50 Marks	Post-treatment presentation 50 Marks
Case selection/Data collection: 5	Ethical Principle/ Professionalism: 10
Accuracy of charting: 10	Treatment options/ Alternative plan: 10
Diagnosis: 10	Clinical Procedures: 10
Completeness 5	Material management: 5
Prognosis 5	Knowledge/ skills: 10
Treatment Plan & Sequence 10	Completeness/ Reevaluation: 5
Maintenance/ Reevaluation 5	

Group Discussion: After the case presentation, a discussion ensues, involving faculty members and fellow interns. The discussion focuses on critically evaluating the intern's management of the case, examining the decision-making process, and identifying areas of improvement or alternative approaches. Participants engage in a dialogue, sharing their perspectives, experiences, and evidence-based insights.

Evidence-Based Practice: Throughout the case presentation and discussion, emphasis is placed on the integration of scientific evidence. Interns are encouraged to support their treatment decisions with research studies, systematic reviews, and clinical guidelines. They learn how to appraise the quality of evidence, assess its applicability to the case at hand, and make informed decisions based on the best available evidence.

Multidisciplinary Approach: Depending on the case complexity, case presentation and discussion sessions may involve experts from other disciplines, such as oral surgery, periodontics, or prosthodontics. This multidisciplinary approach broadens the interns' perspective, encourages collaboration, and helps them understand the role of different specialties in comprehensive patient care.

By participating in case presentation and discussion sessions, dental interns demonstrate their ability to investigate and evaluate their patient care, integrate scientific evidence, and continuously improve their skills and knowledge. This learning activity promotes critical thinking, evidence-based practice, and self-reflection, all of which are essential for providing high-quality dental care and fostering a commitment to lifelong learning. Also refer to Annexure 4 on the independent functioning of the internship program from the BDS training program.

Journal Club/ Workshops/ Professional Development

This learning activity fosters cultural awareness, sensitivity, and competence, enabling interns to provide patient-centered care that respects and addresses the unique needs and perspectives of each individual.

Each intern will present at least one journal club as per the assigned topics and schedule which will be provided to the interns at the beginning of the program.

Each intern will attend minimum 5 workshops/ professional development activities by the college to update themselves with the current and most recent knowledge and skills.

Throughout the workshop, emphasis is placed on the importance of patient-centered care. Interns learn how to involve patients in decision-making, respect their autonomy, and ensure they have a voice in their own care.

Interns develop skills to elicit patient perspectives, preferences, and concerns, thereby fostering effective communication and building trust.

The college will organize professional development programs that are specifically designed to enhance clinical skills, communication and make them aware about the importance of patient safety, ethics, emergency preparedness and professionalism.

4.2 Clinical Training Components

- Including assessing, diagnosing, and planning for the provision of multidisciplinary oral health care for a wide variety of patients including patients with special needs will be based upon the clinical regulations provided within this handbook.
- A weekly clinical schedule will be provided to the interns in each dental discipline by the program coordinator to complete all the multidisciplinary clinical requirements as mentioned in (4.3. Curriculum Organization and Intern Experiences)
- A monthly urgent and emergency care schedule will also be provided, not exceeding more than 4 times a month for each intern.
- The interns will be working according to their job description and guidelines that includes intern responsibilities for patient care, progressive responsibility for patient management, upholding patient safety and feedback provided by the supervising faculty as a part of their grading or evaluation for each dental procedure.

Clinical Work and Requirements

Interns will perform an adequate patient health status evaluation, comprehensive dental and oral examination and treatment plan by upholding professionalism and ethics at all times in all dental discipline.

Clinical work & guideline for each dental discipline is provided below so as to achieve the objectives of the internship program and complete all the clinical requirements in that particular dental discipline.

Discipline - Clinical Periodontics

Objective 1. Establish diagnosis, prognosis and treatment planning and perform periodontal procedure for patients with periodontal diseases

Clinical Work:

- Collect the data, record chief complaint, case history, medical history past dental history and other relevant information in patient management,
- Oral examination for teeth, & periodontium, record any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment
- Complete periodontal chart on assigned patients, identify debris & plaque, changes on the gingiva, measure the pocket depth and attachment loss
- Adhere to infection control, disinfect the operatory, use sterilized instruments, properly arranged the instruments and wear adequate protective gears
- Interpret the findings from history, clinical & radiographic examination and other appropriate diagnostic procedures to establish diagnosis treatment plan
- Interpretation of radiograph for horizontal or vertical bone loss. Furcation involvement, tooth mobility/migration (if any) recorded accurately
- Diagnosis of the assigned patient, recognition of associated factors or lesions such as caries, pulpitis, missing teeth and treatment planning
- Proper sequence of treatment planning and different options of treatment (If possible) discussed with the patient
- Prescription of medication with correct doses and instructions if require
- Advising and counseling patients about the nature of periodontal diseases, risk factors and treatment options in a way that is easily understood by patients of different backgrounds
- All medically compromised or patients with risk factors need to be controlled or taken certain precaution before proceeding to the periodontal therapy.
- Educate, motivate and encourage patients to assume appropriate responsibility for their oral hygiene and various plaque control methods
- Proper oral hygiene instruction and education with proper tooth brushing technique and other cleansing aid
- Practice non- surgical periodontal procedures during the clinical session on assigned patients. Remove stains, supra and subgingival calculus, root planing done with minimum trauma to the periodontium
- Evaluate all treatment results after phase -I therapy recommend appropriate additional action and maintenance
- Identify conditions or patients with severe periodontitis which require surgical treatment or to be referred to a specialist
- Diagnose patients requiring periodontal surgery
- Perform/ Assist surgery under the supervision of instructor with proper incision, control of bleeding and other factors which may effects the healing
- Proper use of surgical blade for incision in flap surgery or gingivectomy

- Remove granulation tissue, control bleeding and place suture, and adequate postoperative instructions delivered
- Follow up appointment protocol as per need of the patient

Clinical Requirements - Periodontics

The trainees are required to complete the following clinical requirements over a period of one year:

Fifteen (15) completed cases of scaling and root planing

Two cases Flap Surgery/Gingivectomy/Crown Lengthening

Discipline - Clinical Oral Surgery

Objective 2. Present clinical & radiographic findings, diagnosis and treatments available for jaw cysts, bone tumors, oral malignancies, maxillofacial injuries and perform tooth extractions/ minor surgical procedure.

Clinical Work:

- Apply appropriate infection control measures
- Adapt the ability to work safely and effectively
- Record all information and present accurately, identify the tooth/teeth in question (if any), proper maintenance of patient case sheet without any irregularities and fully adheres to infection control procedures
- Present the clinical findings including extra-oral and intraoral inspection, extra-oral and intraoral palpation, vertical and horizontal percussion. Correct presentation of radiographic findings related to pain or swelling
- Diagnosis of sources of oral pain or swelling
- Apply a systematic process for patient management
- Discuss treatment options and indications for tooth extractions with supervising faculty
- Select local anesthesia, instruments, positioning of the patient for the non-surgical & surgical tooth extraction
- Perform all five steps during the tooth extraction (loosening of soft tissue, luxation of the tooth with elevator, adaptation of forceps, luxation with forceps, removing of tooth from socket) under the supervision of faculty
- Proper presentation of post-extraction care to the patient
- Enter all the procedures in in patient's file and executed by the faculty
- Attend assigned hospital rotations in Oral and Maxillofacial surgery department of the designated hospital.
- Observe hospitalized patients with severe medical and dental problems and trauma cases operated under GA and other departments such as: Operating room (OR), emergency room (ER), ICU and CCU.
- Understand the basic principles of hospital regulations including admission, discharge, sterilization, infection control, operating theatre, ICU and CCU. I
- Identify post-operative and trauma care in emergency room for patients with maxillofacial injuries.

- Prepare a report on their rotation and patients observed or procedures in all different departments of the hospital.
- Attend to all assigned urgent care patients within RAKCODS as per their schedule and also to be a part of the on call duty as per the emergency roster provided monthly.
- Select cases indicated for minor oral surgery, incisions, elevation of flap and suturing procedures performed adequately
- Practicing different suturing techniques under supervision of faculty
- Perform/Assist/ observe the minor oral surgical procedures

Clinical Requirements - Oral surgery

The trainees are required to complete the following clinical requirements over a period of one year:

Twenty-five (25) teeth extraction

Two (2) Alveoloplasty

One (1) Minor Oral Surgery (Biopsy/apicoectomy/impaction)

Discipline - Clinical Operative Dentistry

Objective 3. Prepare the various cavity designs for amalgam, composite and complex restorations

Clinical Work:

- History taking and examination of the assigned patients
- Record all information regarding chief complaint and present accurately, identified the tooth/teeth in question (if any), patient case sheet maintained without irregularities and fully adheres to infection control procedures.
- Interpret the findings from history, clinical examination, radiographs and other appropriate diagnostic procedures/tests to identify the etiology, pathogenesis and to establish diagnosis and treatment planning
- Disinfect the operatory, use sterilized instruments, properly arranged the instruments and wear adequate protective gears.
- Radiographic interpretation of carious lesions and identification of incipient caries accurately done
- Identify old restorations and assess if it requires replacement or not
- Diagnose carious lesions and classify as active or arrested.
- Sequencing of treatment done properly and explained to the patient
- Isolation procedures properly done with proper use of rubber dam including proper selection of clamp, proper application and prevention of any mishaps
- Proper preparation of cavity with outline form including removal of all carious enamel and dentin, proper resistance form, retention form and convenience form developed
- Preservation of adjacent tooth structure properly done
- Suitable restorative material selected, occlusal and proximal contacts properly developed with proper finishing and polishing of the restoration
- Post-operative instructions given to the patient
- Perform fillings during the clinical session on the assigned patients

- Educate the patients for caries control methods

Clinical Requirements - Operative Dentistry

The trainees are required to complete the following clinical requirements over a period of one year:

Thirty (30) complex composite restorations

Thirty (30) tooth color restorations

Discipline - Clinical Endodontics

Objective 4. Perform root canal treatment (opening, cleaning, shaping, preparation and obturations) on assigned patient/s

Clinical Work:

- To diagnose cases, require endodontic treatment
- Perform endodontic treatment on assigned patients following the explained protocol
- Identify the tooth/teeth in question (if any), maintain the patient case sheet and fully adheres to infection control procedures
- Intra oral clinical examination, proper diagnosis of pulp condition and radiographic interpretation of pulp and peri radicular lesions done
- Sequencing of treatment plan and explained to the patient
- Isolation procedures properly done with proper use of rubber dam including proper selection of clamp, proper application and prevention of any mishaps
- Cavity preparation with proper outline form, removal of caries, identification of all canals and straight line access and working length accurately determined
- Shaping and cleaning of canals and shaped to master apical file at working length
- Fill the canals with tug back, dense homogenous fill without voids and proper coronal seal.
- Postoperative instructions to the patients.

Clinical Requirements - Endodontics

The trainees are required to complete the following clinical requirements over a period of one year:

Ten (10) Endodontic cases of which:

Five (5) single rooted

Five (5) multi rooted

Discipline - Clinical Removable and Fixed Prosthodontics

Objective 5. Prepare for full veneer crowns, partial veneer crown, intra-coronal restorations and extensively damaged teeth, make impressions, perform setup of teeth and artificial occlusion.

Clinical Work:

Removable Prosthodontics

- History taking and examination of the oral cavity and behavior management of the assigned patient

- Interpret the findings from history, clinical examination, radiographs and other appropriate diagnostic procedures/tests to establish diagnosis and treatment planning
- Record all information recorded and present accurately, identify the tooth/teeth in question (if any), proper maintenance of patient case sheet without any irregularities and fully adheres to infection control procedures
- Recognize the correct shapes types of the ridge and hard palate. Any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment identified
- Interpret radiographs (intra-radicular bone of the abutment/s)
- Diagnose the assigned patient and recognition of caries, pulpitis or partially dentate patient
- Proper sequence of treatment planning, integrated treatment plan with appropriate denture design and different options of treatment (If possible) discussed with the patient and correct appointment protocol maintained
- Borders should be in harmony with limiting structures, proper space allowed for impression material without damaging tissue and shape of impression is similar to form of denture
- Custom made tray checked and adjusted to required standard and accurate impression, including teeth, saddles, extensions free from defects, obtained without assistance
- Laboratory work checked and adjusted to required standard where possible or acknowledged as unsatisfactory
- Selection of teeth verified and accurate relevant records achieved
- Fit of base (including occlusion) verified and jaw relation records verified
- Tooth selection and arrangement discussed with patient and confirmed
- Defects in finished dentures recognized and corrected
- Finished dentures fit well, have satisfactory appearance & are comfortable
- Post insertion instructions given to patient

Clinical Requirements - Removable Prosthodontics

The trainees are required to complete the following clinical requirements over a period of one year:

One (1) complete denture (maxillary / mandibular set) or four (4) chrome-cobalt removable partial dentures

Two (2) chrome-cobalt removable partial denture

One (1) dentures (complete or partial) repair or One (1) tissue conditioning

Fixed Prosthodontics

- Record all information and presented accurately, identified the tooth/teeth in question (if any), proper maintenance of patient case sheet without any irregularities and gingival bleeding and pocket depth for abutments (if present) recorded.
- Any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment identified and different option of treatment (If possible) discussed with the patient.
- Interpretation of radiograph on intra radicular bone of the abutment/s
- Prepare the tooth with proper anatomical reduction and occlusal clearance, adequate functional cusp bevel reduction, sufficient tissue removal for retention/ resistance, proximal clearance/ contact fully broken and correct contour so as to receive the prosthesis.

- Perform the insertion of the prostheses
- Educate the patients in denture plaque control methods and the maintenance of the prostheses and manage the post insertion complaints
- Educate, motivate and encourage patients to assume appropriate responsibility for their oral hygiene

Clinical Requirements - Fixed Prosthodontic

The trainees are required to complete the following clinical requirements over a period of one year:

Two (2) anterior fixed bridges

One (1) posterior fixed bridges

One (1) ceramic veneer or maryland bridge

One (1) post and core

Discipline - Clinical Pediatric Dentistry

Objective 6. Performing restorative management, pulp treatments in pediatric dentistry and prevention of oral or dental disease

Clinical Work:

- Record appropriate history and perform examination of the oral cavity and behavior management of the assigned pediatric patients
- Interpret the findings from history, clinical examination, radiographs and other appropriate diagnostic procedures/tests to identify the etiology, pathogenesis and to establish diagnosis and treatment planning
- Correct Diagnosis, recognition of conditions such as caries, pulpitis, missing teeth, teeth ready to shed and sequence of treatment planning
- Adequate knowledge on isolation techniques and material that needs to be used for the prescribed procedure
- Apply methods of behavior guidance and all the necessary instruments arranged for use as needed for the procedure
- Good knowledge about LA agent, techniques and toxicity and monitoring of patient
- Perform endodontics (pulp capping, pulpotomies, pulpectomies), extractions and space maintenance during the clinical session on the assigned pediatric patients
- Educate the patients in plaque control methods Primary and permanent teeth identified accurately, dental caries indices completed adequately and any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment identified
- Prescribe medication with correct doses and instructions
- Post-operative instructions as needed with periodic recall schedules

Clinical Requirements - Pediatric dentistry

The trainees are required to complete the following clinical requirements over a period of one year:

Ten (10) teeth extraction

Ten (10) teeth filings

Two (2) pulpotomy/pulpectomy,
One (1) cases space maintainer
Nine (10) cases of fluoride application
Ten (10) teeth fissure sealant

Discipline - Clinical Orthodontics

Objective 7. Diagnose malocclusion, establish treatment planning and fabricate different clasps for the management of patients with removable appliances

Clinical Work:

- Record all information and present accurately, identify the tooth/teeth in question (if any), proper maintenance of patient case sheet without any irregularities and fully adheres to infection control procedures
- Record any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment
- Identify and Interpret radiographic findings appropriately
- Orthodontic treatment needs assessment is done accurately along with recognition of associated factors of malocclusion, case evaluation by cast study, space analyses & Cephalometric analysis
- Correct and proper sequence of treatment planning. Different option of treatment (If possible) discussed with the patient
- Wire bending exercises of various designs on study models.
- Fabrication of retentive and active components of removable orthodontic appliances.
- Post-operative instructions as needed with periodic recall schedules
- Adequate skill on wire bending and their importance in orthodontics
- An orthodontic case presentation of a malocclusion with all records

Clinical Requirements - Orthodontics

The trainees are required to complete the following clinical requirements over a period of one year: One Cases Presentations – Fully documented removable orthodontic case.

Postoperative Instructions

Postoperative instruction for dental procedures in each dental discipline are available in multiple languages in Hospital Information Management System (HIMS) and provided to the patients after their respective dental procedures.

4.3 Defined Core Competencies

Interns have to achieve a minimum satisfactory level in all domains of the core competency. Assessment at unsatisfactory level need to repeat the procedure. Assessment of the interns' performance is based on the flowing criteria.

ASSESSMENT CRITERIA	Assessment
<ul style="list-style-type: none"> • Excellent knowledge and ability to recall all information with professionalism in patient care, procedural skills, medical knowledge, interpersonal communication skills • Excellent skills in diagnosis and treatment by following system and evidence based practice • No assistance is required from the clinical supervisor 	Excellent/ 85-100 %
<ul style="list-style-type: none"> • Knowledge and ability to recall most of the information with professionalism in patient care, procedural skills, medical knowledge, interpersonal communication skills • Good skills in diagnosis and treatment by following system and evidence based practice • Limited assistance is required from the clinical supervisor 	Satisfactory / 70-85 %
<ul style="list-style-type: none"> • Significant gaps in knowledge, procedural skills, medical knowledge, interpersonal communication skills, and/or deviations from accepted practice that compromises patient safety or patient outcomes. • Performing treatment without following system and evidence based practice and not seeking approval from clinical supervisor • Significant assistance required from the clinical supervisor to prevent adverse outcomes. 	Un- Satisfactory <70% Unsafe treatment Repeat the procedure

Interns will demonstrate competence in all dental discipline. Core competencies are integrated into the curriculum and assessed as shown in the below table (competency areas, setting/activities and assessment method):

Competency Area	Setting/Activities	Assessment Method(s)
Professionalism		
Compassion, integrity, and respect for others	Apply ethical standards and comply with national legal and regulatory requirements in the provision of dental care.	<ul style="list-style-type: none"> • Patient meets the criteria of registration • Signed general consent form available • Patient rights & responsibilities available Informed consent recorded if the procedure needs it • Financial obligations if any is discussed with the patient
Responsiveness to patient needs that supersedes self-interest	Ensure that patient safety is paramount in all decisions and actions.	<ul style="list-style-type: none"> • Checks patient record to understand chief complaint and treatment needs • Patient identification done • Reassessment was done as necessary

Competency Area	Setting/Activities	Assessment Method(s)
		<ul style="list-style-type: none"> • Checked for medical alerts on system.
Respect for patient privacy and autonomy	Protect patients' privacy and confidentiality.	<ul style="list-style-type: none"> • Patients' history and case details are kept confidential. • There is no breach of patient's personal information. • The information of the patient is dealt professionally. • All the patient details after being saved in HIMS, the student logs out.
Accountability to patients, society, and the profession	Demonstrate empathy and caring behavior towards patients, their families and members of the community.	<ul style="list-style-type: none"> • Greets the patient and makes him/ her comfortable in the clinic. • Makes sure the patient/families of the patients are also attended to and involved in decision making. • Interdisciplinary health education form completed as per HIMS.
Respect and responsiveness to diverse patient populations, including but not limited to diversity in gender, age, culture, race, religion, disabilities, national origin, socioeconomic status, and sexual orientation.	Ensure that all actions focus on the patients' best interests and respect patients' dignity, rights and choices.	<ul style="list-style-type: none"> • Treatment is provided to all patient irrespective of their demographic details. • The care plan is discussed with the patient and family. • His/her choices of treatment are respected. • Performs dental treatment in the best interest of the patient.
Ability to recognize and develop a plan for one's own professional well-being.	Demonstrate professionalism in development of a comprehensive treatment plan	<ul style="list-style-type: none"> • Required investigations, final diagnosis and Treatment plan is completed and discussed with patient and family with confidentiality • Refers patient for specialty treatment if needed

Competency Area	Setting/Activities	Assessment Method(s)
Recognize professional scopes and limitations of practice and importance of referral to professional colleagues when indicated.	Maintain effective relationships with peers and respect professional boundaries.	<ul style="list-style-type: none"> • Behaves and respects patients, colleagues, staff and faculty professionally and ethically. • All the patient information discussed with the faculty before referrals.
Maintain effective relationships with peers and respect professional boundaries.	Recognize the importance of effective relationships with peers and professional development for self and all members of the dental team.	<ul style="list-style-type: none"> • Appropriate knowledge related to the diagnosis and treatment planning presented and discussed in a respectful and professional manner. • The knowledge shown during the case presentation was updated and was evidence based.
Appropriately disclosing and addressing conflict or duality of interest.	Apply ethical standards and comply with national legal and regulatory requirements in the provision of dental care.	<ul style="list-style-type: none"> • Follow all policies and procedures of institution in terms of patient care. • Follow clinical procedure guidelines to prevent conflict or any duality of interest • All patient details to be kept confidential • Respect and understand patient rights & responsibilities
Patient Care and Procedural Skills		
Obtaining a comprehensive medical history	Recognize the manifestations of systemic conditions and how these and their management may affect the management of dental care.	<ul style="list-style-type: none"> • Details of medical history and hospitalization recorded • Oral manifestations of systemic conditions recorded • Risk of dental diseases on systemic health noted. • Appropriate referrals/ consent obtained from physician prior to treatment.
Performing a comprehensive extra-oral and intra-oral examination.	Perform an extra-oral and intra-oral examination for health, disease and abnormalities of the dentition, mouth and associated structures,	<ul style="list-style-type: none"> • Findings of Extra-oral examination including Head, Neck, TMJ and Lymph nodes and details recorded. • Findings of Intra-oral examination recorded.

Competency Area	Setting/Activities	Assessment Method(s)
	including assessment of vital signs.	<ul style="list-style-type: none"> Any abnormal change of both intra oral and extra oral examination are identified correctly and recorded. Any abnormality on the tongue, buccal mucosa, soft palate and frenum attachment are identified.
Assessing patient's problems and/or chief complaint.	Identify and record the chief complaint, history of the present condition	<ul style="list-style-type: none"> Chief complaint, case history, history of present dental condition. Selection of appropriate investigation for the patient.
Appropriately using diagnostic methods and tests and interpret findings.	Select, take, and interpret diagnostic images and other diagnostic procedures relevant to the patient's condition.	<ul style="list-style-type: none"> Correct Interpretation of investigations. Interpretation of radiograph recorded accurately. Maintain accurate, consistent, legible and contemporaneous records of the patient.
Integrating information to develop a differential diagnosis.	Establish differential diagnosis and reach on final diagnosis based on clinical investigations	All details of patient including diagnosis and treatment plans duly approved on HIMS before performing treatment
Developing and implementing a treatment plan.	Formulate and record a comprehensive, patient-centered, evidence-based oral health treatment plan.	<ul style="list-style-type: none"> Proper treatment plan established based upon the history and investigations and contemporary knowledge as per evidence available A Patient centric treatment plan is explained with the patient and family for his/their opinion Progress notes correctly mentioned
Identifying patient's anxiety and pain related to the oral cavity and associated structures.	Identify patient's anxiety and pain related to the oral cavity and associated structures and respond appropriately.	<ul style="list-style-type: none"> Identify the patient's ability to cope with treatment procedure based on medical & Dental History. Appropriate handling & use of instruments during the treatment procedures.

Competency Area	Setting/Activities	Assessment Method(s)
Evaluating the periodontium and managing with non-surgical periodontal therapy.	Evaluate and manage the periodontium with surgical and non-surgical treatment plans.	<ul style="list-style-type: none"> • Correct and proper sequence of treatment planning. • Explain the treatment plan to the patient with different treatment options that can be done. • Detection of supra and subgingival calculus. • Perform scaling & root planing with proper handling of instruments. • All stain removed from tooth surface. • Control of bleeding, pain and no injury or tearing of the tissue. • Follow up appointment protocol as per need of the patient. • Identify patients with severe periodontitis which require surgical treatment or to be referred to a specialist.
Performing non-surgical endodontic treatment of the pulp and periapical conditions.	Evaluate and manage the tooth/teeth with pulp and periapical diseases.	<ul style="list-style-type: none"> • The correct and proper sequence of treatment planning. • Explain the treatment plan to the patient with different treatment options that can be done. • Detection of teeth associated with pulp and periapical diseases. • Isolation procedures for the tooth to be restored. • Removal of caries and build-up of the tooth if indicated. • Outline form of access cavity preparation. • Canals Identification • Working length determination • Cleaning and shaping to working length. • Master cone placement • Quality of filling • Coronal seal

Competency Area	Setting/Activities	Assessment Method(s)
Performing uncomplicated tooth extractions and minor oral surgeries.	Evaluate and manage the teeth with surgical and non-surgical extractions.	<ul style="list-style-type: none"> • Follow up appointment protocol as per the need of the patient. • Correct and proper sequence of treatment planning. • Explain the treatment plan to the patient with different treatment options that can be done. • Discuss the expected peri/post-operative complications. • Proper positioning of the patient and operator and selection preparation of the armamentarium for the anaesthesia and surgical procedure and preparation of surgical site. • Identify the nerves to be anesthetized and administer the appropriate profound LA Technique. • Perform simple atraumatic forcep or elevator extraction and deliver the whole tooth/root out. • Inspection of the socket, control of bleeding, pain and no injury or tearing of the tissue. • Educate the patient with post-operative care and instructions. • Follow up appointment protocol as per need of the patient. • Identify patients with complicated exodontia which require surgical extraction or to be referred to a specialist.
Administering/prescribing pharmacological agents relevant to routine dental treatments.	Administer and/or prescribe pharmaceutical agents relevant to routine dental practice.	<p>Has knowledge and demonstrates ability in prescribing drugs for</p> <ul style="list-style-type: none"> • Dental patients visiting for routine dental treatment, • patient in need of prophylactic antibiotic • Patient in need of emergency medication

Competency Area	Setting/Activities	Assessment Method(s)
		<ul style="list-style-type: none"> • Patient in need to prevent post-surgical care • Patients with medically compromised conditions
<p>Preventing, recognizing, and managing medical emergencies in the dental office.</p>	<p>To understand possible medical emergencies in dental office</p>	<ul style="list-style-type: none"> • Continuous professional development in attending how to manage medical emergencies in dental office • BLS certification as applicable
<p>Restoring appearance, function and stabilize occlusion with fixed and/or removable prostheses.</p>	<p>Utilize patient removable and/or fixed prostheses to rehabilitate, restore appearance and function, prevent injury, and stabilize the occlusion.</p>	<ul style="list-style-type: none"> • Correct and proper sequence of treatment planning and Explain the treatment plan to the patient with different treatment options that can be done. • Primary Impressions: <ul style="list-style-type: none"> ▪ Appropriate size of impression stock tray is selected ▪ Accurate selection and manipulation of the impression material. ▪ Complete capturing of the targeted oral structures with borders in harmony with limiting structures. ▪ Accurate impression, free of defects or detachment from the tray. ▪ Cleansing and disinfection of the impression. • Final impression: <ul style="list-style-type: none"> ▪ Custom-made tray checked and adjusted as required. ▪ Accurate selection and manipulation of the impression material. ▪ Application of proper impression technique and controlled gag reflex. ▪ Accurate impression, including teeth, saddles, extensions free from defects.

Competency Area	Setting/Activities	Assessment Method(s)
		<ul style="list-style-type: none"> ▪ Cleansing and disinfection of the impression. • Jaw relation records: <ul style="list-style-type: none"> ▪ Laboratory work checked and adjusted to required standard. ▪ Border smoothness, fit and stability of record bases verified, and accuracy of wax rim dimensions checked. ▪ Accurate registration of orientation, vertical and horizontal jaw relations. ▪ Proper securing of the recorded jaw relations. ▪ Jaw relation records properly cleansed and disinfected. • Tooth selection: <ul style="list-style-type: none"> ▪ Appropriate shade and mould size is selected and accurate relevant records achieved. ▪ The selected tooth shade and mould size is discussed with the patient and his/her family. • Evaluation of trial removable prosthesis: <ul style="list-style-type: none"> ▪ Laboratory work checked and adjusted to required standard. ▪ Fit of base (including occlusion) verified. ▪ Jaw relation records verified or retaken if incorrect. ▪ Tooth selection and arrangement discussed with patient and confirmed or altered. • Insertion: <ul style="list-style-type: none"> ▪ Defects in finished dentures recognized and corrected where possible. ▪ Fit, stability and retention of the base of removable prosthesis verified.

Competency Area	Setting/Activities	Assessment Method(s)
		<ul style="list-style-type: none"> ▪ Accuracy of occlusal contacts and harmony of occlusion verified and adjusted if necessary. ▪ Finished dentures well-polished, have satisfactory appearance, and comfortable. ▪ Careful verbal & written instructions given to patient.
<p>Applying universal infection control standards in clinical procedures.</p>	<p>Apply universal infection control guidelines for all clinical procedures.</p>	<ul style="list-style-type: none"> • Apply universal infection control guidelines for all clinical procedures by: <ul style="list-style-type: none"> ▪ Practicing Hand hygiene. ▪ Working in clean/ and disinfected operatory. ▪ Appropriate use of personal protective equipment. ▪ Sterilized instruments are used. ▪ Appropriate handling of instruments, sharp and medical waste.
<p>Performing preventive and restorative procedures that preserve, restore, or replace tooth structure, and maintain soft and hard tissue health using direct or indirect restorative procedures.</p>	<p>Manage restorative procedures that preserve tooth structure, replace defective tooth structure, maintain function, aesthetics, and promote soft and hard tissue health using direct or indirect methods.</p>	<ul style="list-style-type: none"> • Cavity preparation with proper outline form, resistance form, retention form and convenience form. • Removal of caries and defective tooth structure following minimally invasive concept.
<p>Recognizing and managing acute mucosal and dento-alveolar infections.</p>	<p>Identify patients with different oro-mucosal lesions and infections related to the dento-alveolar region.</p>	<ul style="list-style-type: none"> • Correct diagnosis of patients with mucosal or dento-alveolar infections or to be referred to a specialist. • Correct and proper sequence of treatment planning and explain to the patient. • Discuss the expected peri/post-operative complications. • Perform drainage if required and prescribe medications as applicable.

Competency Area	Setting/Activities	Assessment Method(s)
		<ul style="list-style-type: none"> • Educate the patient with post-operative care and instructions. • Follow up appointment protocol as per need of the patient.
<p>Managing patients from different age groups, medically compromised patients, and people of determination according to their needs.</p>	<p>Manage patients from different age groups, medically compromised patients, and people of determination according to their needs.</p>	<ul style="list-style-type: none"> • Identify the risk factors of dental disease and manifestation of certain systemic disease in periodontium. • Refer for medical evaluation and treatment and develop complete periodontal treatment plan with physician • Precautions that should be taken before proceeding to periodontal therapy and effect of different drugs on the periodontal tissues` • Apply risk assessment on different age groups and design a customized preventive and management program
<p>Undertaking orthodontic assessment, including an indication of treatment need and interceptive orthodontics treatment.</p>	<p>Manage orthodontic procedures and elaborate on interceptive orthodontics</p>	<ul style="list-style-type: none"> • Identify the risk factors of orthodontic patient with systemic diseases • Refer for medical evaluation and treatment and develop complete orthodontic treatment plan with physician • Precautions that should be taken before proceeding to orthodontic therapy and effect of different drugs on orthodontic therapy • Assessment of periodontal disease risk with different age groups with definitive orthodontic therapy
<p>Medical Knowledge</p>		
<p>Identifying strengths, deficiencies, and limits in</p>	<p>Demonstrate foundation knowledge as relevant to</p>	<p>Demonstrates knowledge & skills in all dental disciplines</p>

Competency Area	Setting/Activities	Assessment Method(s)
one's knowledge and expertise.	clinical skills related to all dental disciplines.	<ul style="list-style-type: none"> ▪ Accurate record/charting of dental findings. ▪ Detection and recording of abnormalities of oral cavity. ▪ Interpretation of radiograph accurately. ▪ Ability to prescribe antibiotics in dental patients ▪ Advising proper oral hygiene instruction. ▪ Performing different nonsurgical and surgical dental procedures. ▪ Follow up re-evaluation appointment
Setting learning and improvement goals.	Ensure that all Program Learning Outcomes are achieved satisfactorily	Analysis of feedbacks from faculty as a part of the reflection program of internship
Identifying and performing appropriate learning activities.	Demonstrate the ability to perform all dental procedure mentioned in Program learning outcome	All dental requirements/ clinical procedures are completely satisfactorily and graded
Systematically analysing practice using quality improvement methods and implementing changes with the goal of practice improvement.	Reflection program of internship	<ul style="list-style-type: none"> • Feedback by faculty of interns, • Feedback of interns regarding their procedure, • Feedback of interns regarding the faculty involved in training
Incorporating feedback and formative evaluation into daily practice.	Reflection program of internship	<ul style="list-style-type: none"> • Feedback of faculty regarding interns daily evaluation
Locating, appraising, and assimilating evidence from scientific studies related to their patients' health problems.	Evaluate published clinical and basic science research and integrate this information to improve the periodontal health of the patient.	<ul style="list-style-type: none"> • Has knowledge relevant to the most recent published literature • Applies knowledge adequately to treat the patient satisfactorily.
Using information technology to optimize learning.	Orientation to existing and new technologies including Hospital Information Management System (HIMS), Rotary	Workshop attendances

Competency Area	Setting/Activities	Assessment Method(s)
	instrumentation, CBCT, Lasers etc...	
Interpersonal and Communication Skills		
Communicating effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds.	Apply appropriate inter-professional and communication skills that allow building a teamwork approach to the delivery of oral healthcare.	Communicates effectively with: <ul style="list-style-type: none"> ▪ Peer group/team ▪ Staff ▪ Faculty ▪ Other healthcare professionals as applicable ▪ Applied 4 handed dentistry
Communicating effectively with fellow dentists and auxiliary staff, other health professionals and health-related agencies.	Demonstrate appropriate interpersonal skills in mentoring and participating in activities within a health care team.	<ul style="list-style-type: none"> • Demonstrate appropriate interpersonal communication skills • In case presentation • Discussion of care plan In referring patients to other team members
Working effectively as a member of a health care team or other professional group.	Document and share written and electronic information about the dental encounter to optimize clinical decision-making and patient safety, ensuring confidentiality and privacy.	All the information is recorded appropriately to: <ul style="list-style-type: none"> ▪ Prioritize patient safety. ▪ Provide a handover If and when needed. Ensures privacy and confidentiality regarding details of patient.
Educating patients, families and other health professionals.	Present clear information to patients in a timely manner, that ensures that they are advised of and understand the different treatment options including risks and benefits.	<ul style="list-style-type: none"> • Details of treatment plans discussed with patient including both the ideal and alternative treatment plans. • Advantages, risks and disadvantages of the treatment planned is explained to the patient. • Communicates respectfully with patients, colleagues, staff and faculty when seeking consultations or referral of patient
Maintaining comprehensive, timely, and legible medical records, if applicable.	All the contemporaneous records of patients are to be recorded as applicable	Records of patient available on HIMS

Competency Area	Setting/Activities	Assessment Method(s)
		Timely approvals of treatment plan and treatment on HIMS All patient related forms (Gen consent, Informed consent if applicable and Patient rights and responsibilities)
Systems-based Practice		
Competency Area	Setting/Activities	Assessment Method(s)
Working effectively in various health care delivery settings and systems relevant to their clinical training.	Demonstrate appropriate interpersonal skills in mentoring and participating in activities within a health care team.	<ul style="list-style-type: none"> • Demonstrate appropriate interpersonal communication skills • In case presentation • Discussion of care plan In referring patients to other team members
Coordinating patient care within the health care system as relevant to their role.	Present clear information to patients in a timely manner, that ensures that they are advised of and understand the different treatment options including risks and benefits.	<ul style="list-style-type: none"> • Details of treatment plans discussed with patient including both the ideal and alternative treatment plans. Advantages, risks and disadvantages of the treatment planned is explained to the patient.
Advocating for quality patient care and optimal patient care systems.	Apply the principles of health promotion strategies and disease prevention to promote periodontal and general health, quality of life and wellbeing.	<ul style="list-style-type: none"> • Health promotion principles are applied with evidence on the importance and practice of prevention of periodontal diseases. • Demonstrates skills of proper oral hygiene instruction and education with proper tooth brushing technique and other cleansing aid. • Provides demonstrations on proper diet and its impact on health. Identify the contributing factors and its prevention & management if applicable.
Working in inter-professional teams to enhance patient safety and improve patient care quality.	Collaborate with dental team members and other health care professionals in the management of	<ul style="list-style-type: none"> • Maintains professional relationship with patients, colleagues, staff and faculty

Competency Area	Setting/Activities	Assessment Method(s)
	oral health care and health promotion for all patients.	Seeks/refers for consultation from specialists as needed.
Participating in identifying system errors and implementing potential systems solutions.	Evaluate published clinical and basic science research and integrate this information to improve the dental health of the patient.	<ul style="list-style-type: none"> • Has knowledge relevant to the most recent published literature • Applies knowledge adequately so as to identify system errors and treat the patient satisfactorily.
Incorporating considerations of cost awareness and risk benefit analysis in patient and/or population-based care as appropriate.	Ensure and record patient informed consent for treatment and their financial obligation.	<ul style="list-style-type: none"> • Informed consent recorded if the procedure needs it Financial obligations if any is discussed with the patient

4.4 Curriculum Organization and Intern Experiences

- The curriculum is organized to optimize intern educational experiences, the length of these experiences, and supervisory continuity.
- Internship at RAKCODS is based on the philosophy of Comprehensive Dental Care for patients under the supervision of qualified clinical (core) faculty.
- Weekly Interns schedule for the whole academic year (approximately 48 weeks) is arranged to cover, didactic, clinical training, clinical case presentation and journal club/workshops/professional development components to ensure that interns can practice with knowledge and skill based on evidence in the dental profession.
- Clinical hours will be on average 168 hours in Endodontics, Periodontics, Prosthodontics, Oral Surgery, Orthodontics, Pediatric Dentistry, Operative & General Dentistry at RAKCODS dental clinics, which is more than 4 weeks' rotation in each discipline.
- On an average 144 hours are allocated for didactic learning sessions that include theory in each discipline on advance in dental technique in patient management, multidisciplinary conferences, journal or evidence-based reviews, case-based planned didactic experiences, seminars and workshops to meet specific competencies, webinars and online educational resources, grand rounds, quality improvement and safety and one-on-one instruction.
- In addition, internal will have a monthly Rotation for urgent care for routine patients and on call duty to provide emergency care for the patients treated at RAKCODS clinic.

Day	Session 8.30 - 12.00	12.30-16.00
Monday	Endodontics	Orthodontics
Tuesday	Periodontics	Pediatric Dentistry
Wednesday	Prosthodontics	Operative Dentistry
Thursday	Oral Surgery/ Oral Medicine	General Dentistry
Friday	8.30-11.30: Didactic, Case Presentation, Grand Rounds, Journal Club, Hospital Rotation, Professional Development *	
Monthly Rotation	For urgent care patients and on call duty for emergency care	

***Detail of didactic teaching, case presentation, journal club, hospital rotation and professional development** will be provided to interns at the beginning of the program. Hospital rotation will also be arranged accordingly.

- The structured clinical experiences are to facilitate learning in a manner that allows interns to function as part of an effective inter-professional team.
- Interns During the rotations the clinical experience shall be focused on the care for low risk and high-risk patients including interdisciplinary management of complex or advanced cases, medically compromised patients and cases requiring complex multidisciplinary rehabilitations.
- Intern must be actively involved in the oral care of patients by following the clinic guideline mentioned before in this handbook, including participating in decision-making, planning and management of their patients.
- Interns are responsible writing orders, progress notes and enter all records in Hospital Information Management System (HIMS), approved by the supervising faculty.
- Interns will be exposed to emergency care, participate as observer in clinical procedure in operating theater under general anesthesia and write report on admission and discharge procedures during the oral and maxillofacial surgery rotation.
- Interns may be provided elective rotations to increase their clinical skills or knowledge with prior approval with maximum eight weeks of the internship program.

Residency Programs Assistance to Interns

The dental intern program provides counseling and assistance to interns who are seeking admission into residency/post grad programs or defining their career paths. The program recognizes the importance of guiding interns through this critical phase of their professional development. Here are some ways in which the program supports interns in this process:

Career Counseling: The program offers career counseling services to dental interns. Trained professionals, such as faculty members or program coordinators, provide one-on-one guidance to help interns explore different career options, understand their interests and goals, and make informed decisions about their future paths. Counseling sessions may involve discussions about various specialty options, residency programs, private practice, academic careers, or other dental-related opportunities.

Ongoing Support and Guidance: The program ensures that interns have continuous support and guidance throughout their decision-making process. Faculty members, mentors, or program coordinators remain accessible to address any questions or concerns that interns may have. They provide personalized guidance, advice, and encouragement, helping interns navigate the complexities of defining their career paths.

By offering career counseling and continuous support, the dental intern program assists interns in defining their career paths and pursuing residency/post grad programs. This comprehensive support system aims to empower interns to make well-informed decisions, set meaningful career goals, and take the necessary steps to achieve their professional aspirations.

Attendance will be strictly monitored in didactic sessions, clinical sessions and hospital rotation.

4.5 Scholarship

- Dentistry is both an art and a science. This requires the ability to think critically, evaluate the literature, appropriately assimilate new knowledge, and practice lifelong learning.
- The institution and faculty will create an environment that fosters the acquisition of such skills through intern participation in scholarly activities. Scholarly activities must include discovery, integration, application and teaching.
- Internship program will ensure that scholarly activities are consistent with its mission, goal and objectives by allocating adequate resources to facilitate intern & faculty involved in scholarly activities to advance interns' knowledge and practice of the scholarly to evidence-based patient care.
- Faculty will play an important role in scholarly activities by stimulate interns to utilize learning resources to create a differential diagnosis, a diagnostic algorithm, treatment plan and evidence to reach their treatment decisions and encouraging them to engage in various scholarly activities.
- Interns will be provided opportunity and encouraged to participate and perform research in basic science, clinical investigation, translational science, patient care, or population oral health, peer-reviewed journal publications, case-presentation publications, quality improvement and/or patient safety initiatives, Systematic reviews, meta-analyses, review articles, chapters in medical textbooks, or case reports.
- Interns are also required to prepare, present and attend case reports or a presentation to/of colleagues on a subject of interest, and/or development of a research or quality improvement project according to the schedule provided.
- Faculty will attend and participate in grand rounds, posters, workshops, quality improvement presentations, podium presentations, reviewed print/electronic resources, articles or publications, book chapters, textbooks, webinars, service on professional committees, or serving as a journal reviewer, journal editorial board member, or editor, peer-reviewed publication including case-discussion and letters to the editor.
- All these activities where the faculty are involved will help them guide the interns in their daily clinical practice and lifelong learning.

5. CLINIC REGULATIONS

5.1 General Clinic Regulations

RAKCODS organization is responsible for promoting patient care and keeping the clinics clean and functioning effectively. Clinical Records of patients are maintained as electronic files in Hospital Information Management System (HIMS) and has been designed to contain all the necessary information of the patients. All the details of the patient are considered confidential and maintained accordingly.

- Interns are expected to obey policies of the clinic along with the rules and regulations of the University.
- Interns should attend all the clinics regularly, attendance for all clinic sessions is monitored by clinic coordinator.
- Interns who are unable to attend the clinic due to any emergency should call the clinic reception to rearrange the scheduled appointments of his/her patients.
- Interns should work in pair- student doctor and student assistant.
- Clinic setting- charts, forms, supplies and equipment should be arranged by the intern before the patient is seated and also discuss the case with the instructor after clinical examination and starting of any procedure.
- Procedure should be finished 15 minutes prior to end of the session for adequate infection control, cleaning of the unit and execution of the treatment procedure.
- Do not accept a patient in the last half an hour of the clinic session.
- At the end of the clinic time, the chair should be raised to its full height position and the foot pedals placed on the base of the chair to facilitate cleaning of the floors by cleaning staff.
- Food, drink and smoking are not allowed in the clinics. Mobile phones should be switched off or silent during the procedure.
- **Dress Code and Appearance:** Interns are responsible to be appropriately dressed during clinic hours as per University regulations.
- Wear neat and clean dress. White coats/scrubs/surgical gowns are to be worn buttoned and must be clean.
- Jeans and open shoes are not allowed in the clinics. Hair should be cleared away from the face. Fingernails should always be cut short.
- Interns are responsible for the appearance and cleanliness of their cubicle while working on it and before leaving.

5.2 Ethics in Clinical Practice

- *Please refer to Ethics Framework for further detail*
- All interns, faculty members, and staff are required to follow high ethical standards which have the benefits of the patient as their primary goal.
- The privilege of being a dentist comes with a responsibility to patients, community and colleagues of the profession to conduct one's professional activities in a highly ethical manner.

- The dentist –patient relationship is the cornerstone of dental ethics. Faculty, interns and staff are expected to adhere closely to dental ethics.
- The dental treatment is provided equally with respect to all without any discrimination based on patient’s gender, sexual, racial, religious, or ethnic characteristic.

5.3 General Guidelines for Patient Care

Please Refer to the RAKCODS Health and Safety Policies and Procedures for general and informed consent, urgent and routine dental care, patient’s referral, infection prevention and control, radiation safety and incident management system or Occurrence Variance Reporting.

- RAKCODS operates a teaching plan that is designed to give a broad experience in patient care and practice management.
- Prospective patients can contact the reception for registration. The patients are screened in the initial nursing assessment and initial dental assessment clinic and assigned to interns.
- Interns has the responsibility for the total dental care of each assigned patient.
- Arranges the appointment for the patient to perform devised treatment plan according to his schedule and patient’s convenience
- Relevant data and details are entered in the Electronic File (pp18-25) by the student. An appropriate diagnosis and sequence of treatment plan is devised by the student and confirmed by the clinical instructor.
- In case of dental emergencies, treatment will be provided to alleviate pain.
- Clinical delivery of patient care is the primary responsibility of the intern whose name appears on the dental chart.
- The faculty supervises the delivery of care and assures that accepted standards of care are met. This includes timely and sequential delivery of care according to the prescribed treatment plan and routine monitoring of change in the patient’s medical health status.
- Preventive dentistry aspects of the patient, ethical and professional characteristics should always be maintained by the faculty staff, and interns.
- Clinical competency in the comprehensive patient care system is evaluated as per the core clinical competency mentioned in this handbook.
- Interns are expected to behave professionally, communicate respectfully with colleagues and show empathy towards patients and attendants.
- **Patient Care Services:** Each patient treated at RAKCODS has the right for consideration and respectful care and confidential treatment.
- Dental treatment is provided according to standards of quality care with proper attention to asepsis and patient care and begins as early as possible once the patient has been examined, treatment plan completed/approved by the clinic instructor.
- Each clinical step is explained to the patient in accordance to the approved treatment plan for his/her consent. Patients have the right to make decisions about their care.
- Patients have the right to participate in decisions about their care and to convey consent for treatment services.
- Patients have the right to be treated with courtesy by students, faculty and staff.

- Patients have a right to have their principle reason for seeking treatment addressed either by having the condition treated or by clear explanation of why the condition will not be treated.
- The patient care system will be based on providing comprehensive oral care. Principles of care include: Established standards of patient care and Problem based comprehensive treatment plan.
- The use of patient's information is limited to authorize staff only and will be used only with the permission of the patient or attendant.
- Patient's information must not be discussed in public locations.
- The patients chart is a legal document and all stakeholders must be aware of the importance of this form and patient confidentiality.

5.4 Emergency Dental Care

RAKCODS provides dental care to patients for emergencies created due to treatment or procedures done in the dental clinics only. Emergency dental care during non-clinic hours can be provided by on call staff which is available according to a monthly timetable. Following are

Emergency Contact Numbers: Dental Reception **07 2269132/ 07 2222593/ 07 2269373**

Sheikh Saqr Hospital **07-2223666** and Obaidullah Hospital **07-2223555**

- Interns can provide their mobile numbers to patients which are under their treatment for any emergency. In case the intern is contacted by the patient, he/she can contact the on call faculty of the concerned specialty immediately for advice. Emergency numbers of on call staff are available at the reception.

6. EVALUATION

6.1 Process of Evaluation and Flow Chart

A flowchart is being presented to explain the whole journey of the Internship Training Program beginning with the educational and clinic training components and formative and summative evaluation. Following are used for the evaluation on internship program:

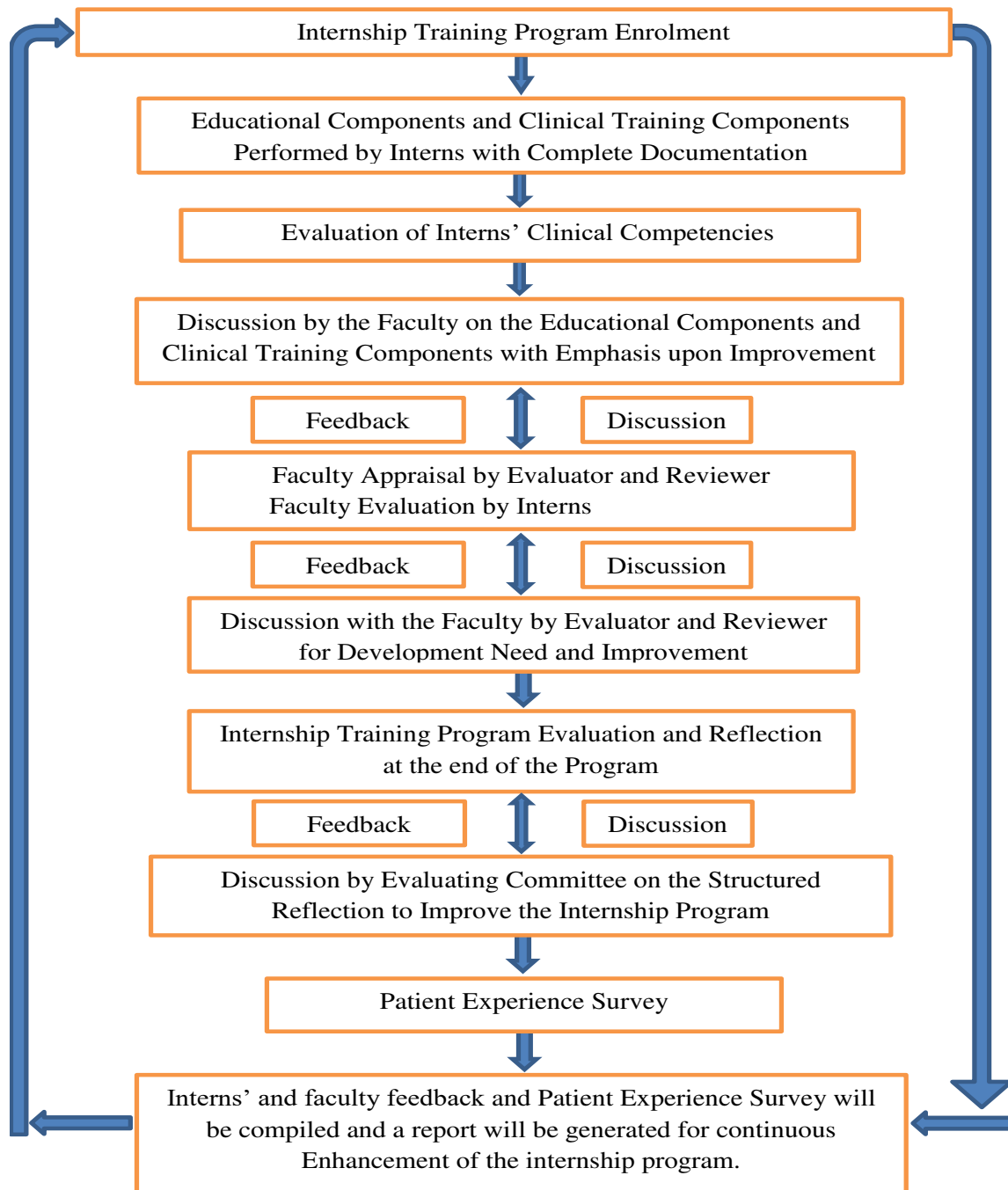
- Evaluation of interns' clinical competencies
- Faculty Evaluation
 - Appraisal by Evaluator and Reviewer
 - The Faculty Evaluation by Interns
- Internship Training Program Evaluation and Reflection
- Patient Experience Survey

A well-structured formative and summative evaluation with constructive feedback on internship program is provided below which allows a comprehensive evaluation of the interns by the faculty on the educational component of the program. Faculty of RAKCODS involved in the internship training program will evaluate the clinical competencies of interns as per the core competency provided in this handbook and will provide constructive feedback to the interns.

Faculty evaluation will be performed by the Associate/ Program Director and interns as per the proforma mentioned in faculty evaluation and discussed with the faculty for further improvement of the program.

At the end of the internship program interns are provided with an opportunity to provide their feedback and reflection on the internship training program through a specially designed Internship Training Program Evaluation and Reflection survey. Interns' feedback will be discussed with the faculty and interns. Report will be incorporated for continuous enhancement of the internship program. Patient Experience Survey, which is conducted regularly will provide a feedback from the patients treated regarding the quality and health care delivery services provided by the interns under supervision of the faculty.

Flow Chart Reflecting the Internship Training Program at RAKCODS



6.2 Evaluation of Interns' Clinical Competencies

Supervising faculty will provide the feedback to individual interns regarding intern's performance, knowledge, or understanding for each dental procedure in their respective disciplines by using the assessment criteria which is based upon the core clinical competencies. Faculty feedback is provided to interns continuously for all their procedures. The faculty empower interns to provide much of that feedback themselves in a spirit of continuous learning and self-reflection in the context of routine clinical care.

Formative evaluation is to monitor and improve intern's learning and providing feedback for each of their procedure

Formative evaluations help the interns to identify their strengths and opportunities to improve.

An evaluation form dedicated towards formative evaluation is prepared and provided below.

Formative Evaluation of Interns' Clinical Competencies

Date

MR No of patient

Name of the Procedure

Discipline

Intern ID

Name

Supervising Faculty/Instructor

SL NO	Competency area	Areas of Strength	Opportunity to improve
	Professionalism		
	Patient Care and Procedural Skills		
	Medical Knowledge		
	Practice Based Learning and Improvement		
	Interpersonal and Communication Skills		
	System-Based Practice		

Assessment - Excellent

Satisfactory

Un-Satisfactory

Interns Signature

Faculty Signature

Any difficulty faced by the interns will be recognized and addressed immediately by the faculty/program coordinator/program director.

Summative Evaluation:

- Summative Evaluation is semi-annual for intern's learning by comparing the interns against the goals and objectives of the rotation and program, respectively and is also utilized to make decisions about program completion.
- Faculty members will directly observe, evaluate, and provide feedback on intern performance for each evaluation or similar educational assignment, in particularly for interns who have deficiencies that may result in a poor final evaluation as mentioned in
- All Evaluations will be documented in intern's file and provided to the interns at the end of the rotation at the completion of the assignment and program.
- The program shall provide an objective performance evaluation based on the core competencies and multiple evaluators such as faculty members, peers, patients, self, and other professional staff members.
- The program director or associate program director with input from the program coordinator and core faculty will meet and review with each intern their documented semi-annual evaluation of performance, including progress and the specialty-specific Milestones, case-logs, semi-annual evaluation on their strengths and identify areas for growth.
- Based on the objective and summative evaluation, program director in consultation with concerned faculty and the intern who did not achieve the required Milestones in particular domain will reschedule the education plan based on the specific learning needs of the intern to achieve the competency and it will be documented.
- A plan will be developed for interns who do not achieve the required level of competence as per the NIHS policies and procedures by allowing additional clinics up to 3 moth with more close supervisions. However, the situations which require more significant intervention, time course of intern may increase up to 6 months or following NIHS guidelines.
- There will be a summative evaluation of each intern that includes their readiness to graduate the program. The evaluations of an intern's performance will be accessible for review by the intern. The institute will provide performance evaluations of those interns accepted into a residency following completion of the internship to the specialty program director. The program director will provide a final evaluation to each intern upon completion of the program.
- The program's Milestones including case log for all the procedures performed by the interns will be a part of the intern's permanent record maintained by the institution, and must be accessible for review by the intern and record will be maintain for 50 years.
- The institute will make sure and verify that the intern has demonstrated the knowledge, skills, and behaviours necessary to enter autonomous practice on recommendations from the Clinical Competency Committee and be shared with the intern upon completion of the program.
- A Clinical Competency Committee will be appointed by the program director and include 6 members of the program's core faculty (one from each discipline).
- The Program Director has final responsibility for intern evaluation and promotion decisions based on objective and summative evaluation.
- The Clinical Competency Committee will review all intern's evaluation semi-annually to determine each intern's progress on achievement of the program-specific Milestones and advise the program director regarding each intern's progress.

6.3 Faculty Evaluation

- The program has a process to evaluate each faculty member’s performance as it relates to the educational program annually.
- The evaluation includes a review of the faculty member’s clinical teaching abilities, engagement with the educational program, participation in faculty development related to their skills as an educator, clinical performance, review of patient outcomes, professionalism, research, and scholarly activities at the end of the program to improve the faculty performance and thereby the program itself.

The appraisal form used for the faculty evaluation is given below:

Appraisal by Evaluator and Reviewer

FACULTY NAME :	
EVALUATION PERIOD	DENTAL DISCIPLINE
EVALUATOR – Associate Program Director	REVIEWER – Program Director

Rating Scale

Rating	Level of Performance	Description
5.0	Meets & exceeds expectations	Excellent
4.5	Always meets expectations	Very Good
3.5	Meets expectation with minimum guidance	Good
3.0	Meets expectation with close supervision and monitoring	Average
2.5	Does not meet expectations	Below Average

Instructions

- At the completion of the program, Evaluator will submit the form within defined time frame to the Reviewer.
- Reviewer will meet with the Faculty exclusively for appraisal review purpose and performance counseling with the faculty.
- Reviewer has to be as objective as possible and submit the same to Program Director and provide any clarifications as may be required.
- Reviewer will consult with the Associate Program Director and also with the faculty in identifying his/her developmental needs. Both will share information about the performance appraisal with the Faculty.
- The Faculty will sign on the Appraisal Form at the appropriate place. If he/she has any comments/views to express, he/she can mention the same on the form or on a separate sheet.
- In the process faculty shall be identified the critical areas of successes/ failures and strengths/ weaknesses.

SI No.	Performance Factors	Wattage	5	4.5	3.5	3	2.5	Score	Remarks
1	Clinical Teaching Abilities (20)								
1.1	Compliance with program procedures and quality processes	7	⊙	⊙	⊙	⊙	⊙		
1.2	Quality of work associated with clinical training and Evaluation	7	⊙	⊙	⊙	⊙	⊙		
1.3	Job Knowledge, Punctuality and Promptness of action	6	⊙	⊙	⊙	⊙	⊙		
2	Engagement with educational program (20)								
2.1	Carrying out educational program as required	7	⊙	⊙	⊙	⊙	⊙		
2.2	Intern's management during all the educational components	7	⊙	⊙	⊙	⊙	⊙		
2.3	Initiating and supporting education program	6	⊙	⊙	⊙	⊙	⊙		
3	Participation in faculty development related to their skills as an educator (12)								
3.1	Seminars/ Workshop/Conferences attended	6	⊙	⊙	⊙	⊙	⊙		
3.2	Seminars/ Workshop/ organized and lecture delivered	6	⊙	⊙	⊙	⊙	⊙		
4	Clinical Performance (12)								
4.1	Team Spirit/Dealing with interns, staff and patients	6	⊙	⊙	⊙	⊙	⊙		
4.2	Interns supervision during clinical training	6	⊙	⊙	⊙	⊙	⊙		
5	Review of patient outcomes (12)								
5.1	Guiding the interns for treatment planning and clinical procedures	4	⊙	⊙	⊙	⊙	⊙		
5.2	Communication Skills/ Clarity of expression	4	⊙	⊙	⊙	⊙	⊙		

5.3	Engagement in health promotion and health awareness activities	4	⊙	⊙	⊙	⊙	⊙		
6	Professionalism (12)								
6.1	Compassion, integrity, and respect for colleagues, interns & patients	6	⊙	⊙	⊙	⊙	⊙		
6.2	Professional competency and quality of delivery of the assignment handled	6	⊙	⊙	⊙	⊙	⊙		
7	Research, and scholarly activities (12)								
7.1	Publication in scoupous/peer reviewd journal	4	⊙	⊙	⊙	⊙	⊙		
7.2	Guide & supervise the interns for their research and scholarly activities	4	⊙	⊙	⊙	⊙	⊙		
7.3	Quantity and quality of research done	4	⊙	⊙	⊙	⊙	⊙		
Total Score Obtained Out of 100									

Overall Grade

Score range	Grade	Description	Grade as per total score by	
			Evaluator	Reviewer
91% and above	A	Excellent		
81% to 90%	B	Very Good		
65% to 80%	C	Good		
51% to 65%	D	Average		
50% and below	E	Below average		

If the score is between two ranges, then it may be rounded off to the next higher range.

<u>Observations / Recommendations/ Development Need Identifies</u>

Comments

Evaluator Name &Signature Date:	Reviewer Name &Signature Date:
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<p>The Evaluator and Reviewer shared the information about my Performance Appraisal with me and consulted with me about identification of my developmental needs.</p> <p>Signature of Faculty</p> <p>Date:</p>
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Faculty Evaluation by Interns

The program has a process to evaluate each faculty by the interns at the completion of the program. This evaluation is anonymous and confidential in nature as given below:
 This evaluation includes an evaluation of each faculty member’s clinical training abilities, ability to encourage engagement in the educational program, their skills as an educator, clinical trainer, professionalism, research, and scholarly activities.
 The program has the responsibility to evaluate and improve the program faculty members’ teaching, scholarship, professionalism, and quality care.

The Faculty Evaluation by Interns- Form

Thank you for your participation in this evaluation. Your feedback is valuable in helping us improve the educational program.

Please rate the following statements using a Likert scale from 1 to 5, where 1 represents "Strongly Disagree" and 5 represents "Strongly Agree."

1. Faculty was well prepared and enthusiastic for the Didactic/ Journal Clubs/ Seminars/ Clinical Training Sessions?
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

2. Communicated effectively during the Educational/ Clinical Training Sessions.
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

3. Explained the subject very clearly during education and clinical training components.
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

4. Encouraged interns to ask questions and clarified doubts during the learning sessions.
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

5. Provided useful feedback on your performance with reference to clinical competencies/ didactic learning
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

6. Has encouraged you whenever you approached him/her for research and scholarly activities
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

7. The faculty member is skilled at imparting knowledge and being an effective educator.
 - Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly Disagree

8. The faculty member displays professionalism in their interactions with interns.
 - Strongly agree
 - Agree

- Neutral
- Disagree
- Strongly Disagree

9. The faculty member demonstrates up-to-date knowledge in their field.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly Disagree
- Strongly Disagree

10. The faculty member facilitates meaningful discussions and critical thinking among interns.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

11. The faculty member encourages interns to pursue professional development opportunities.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly Disagree
- Strongly Disagree

12. The faculty member serves as a positive role model for interns and demonstrates respect and sensitivity towards diversity and inclusivity.

- Strongly agree
- Agree
- Neutral
- Disagree
- Strongly Disagree

Additional Comments (optional): Please provide any additional comments or feedback about the faculty member's performance.

Feedback shall be provided to faculty members on their evaluations, faculty response and action taken report will be prepared by the program director and shall be used to improve the program by incorporating it into program-wide faculty development plans.

6.4 Internship Training Program Evaluation and Improvement

Instruction:

- The purpose of this Internship Program evaluation (survey is provided below) is to ensure quality, satisfaction and to honor excellence. The responses are confidential, taken seriously by the administration and will be used for continuous improvement of the program.
- The program director will appoint the Program Evaluation Committee comprising of three members (two faculties and one intern), to conduct and document the Annual Program Evaluation as part of the program's continuous improvement process.
- The Program Evaluation Committee must present the Annual Program Evaluation Report in a written form to be discussed with all program faculty and interns as a part of continuous improvement plans.
- The responsibilities of the Program Evaluation Committee include:
 - Acting as an advisor to the program director, through program oversight;
 - Review of the program's requirements, both NIHS required and program self-determined goals, and the progress toward meeting them.
 - Guiding ongoing program improvement, including developing new goals based upon outcomes.
 - Review of the current operating environment to identify strengths, challenges, opportunities, and threats related to the program's mission and aims.

The Program Evaluation Committee should consider the following elements in its assessment of the program:

- Program curriculum; Outcomes from prior Annual Program Evaluation(s); NIHS letters of notification including citations, areas for improvement, and comments; The quality and safety of patient care;
- Aggregate interns and the faculty for well-being; recruitment and retention following institutional policies; workforce diversity following institutional policies; engagement in quality improvement and patient safety; scholarly activity; interns and Faculty Surveys; written evaluations of the program.
- Aggregate intern for achievement of the Milestones; certification rates graduates' performance.
- Aggregate faculty for faculty evaluation, professional development.
- The Program Evaluation Committee will also evaluate the program's mission and aims, strengths, areas for improvement, and threats.
- The Annual Program Evaluation review, including the action plan, will be distributed to and discussed with the members of the teaching faculty and the interns and be submitted to the Program Director.
- The program director will prepare a Self-Study report, which is an objective, comprehensive evaluation of the internship program with improvement plan shall submit the same before its reaccreditation site visit by the NIHS.
- The Program Director will guide all eligible program graduates and encourage them to obtain enrolment in a NIHS residency program.

Program Evaluation by Interns

Please complete this questionnaire by checking the appropriate box on the five-point rating scale. This survey will be done at the end of every semester. The objective of this survey is to ensure that the clinical experience that the interns are going through are of international standards and also allows them to contribute to their own professional development.

Intern ID Number:

Section 1: Design and Delivery of the Internship Program

THE MANNER IN WHICH THE INTERNSHIP PROGRAM HAS BEEN DESIGNED AND TAUGHT HAS HELPED ME TO:

1. The training program was well organized.
 - Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No comments

2. The number and type of clinical cases was sufficient to meet the requirements.
 - Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No comments

3. The training was good enough to prepare me for a future career.
 - Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No comments

4. The supervising staff was cooperative and efficient.
 - Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree

- Strongly Disagree
 - No comments
5. The training improved my skills in different dental discipline.
- Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No comments
6. Learning resources provided by the different disciplines were appropriate for the program
- Strongly Agree
 - Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No comments

Section 2: Internship Program Objectives

This section will examine your beliefs about your LEARNING OUTCOMES gained in Internship program.

HOW WELL DO YOU BELIEVE YOU ARE ABLE TO:

1. Establish diagnosis, prognosis and treatment planning and perform periodontal procedure for patients with periodontal diseases
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

2. Present clinical & radiographic findings, diagnosis and treatments available for jaw cysts, bone tumors, oral malignancies, maxillofacial injuries and perform tooth extractions/ minor surgical procedure
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

3. Prepare the various cavity designs for receiving composite, simple and complex restorations
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

4. Perform root canal treatment (opening, cleaning, shaping, preparation and obturations) on assigned patient/s
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

5. Prepare for full veneer crowns, partial veneer crown, intra-coronal restorations and extensively damaged teeth, make impressions, perform setup of teeth and artificial occlusion.
Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

6. Performing restorative management, pulp treatments in pediatric dentistry and prevention of oral or dental disease
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

7. Diagnose malocclusion establish treatment planning and fabricate different clasps for the management of patients with removable appliances
 - Always
 - Almost Always
 - Often
 - Occasionally
 - Never
 - Not applicable

Section 3: Feedback On Reflective Practice During Internship Training at RAKCODS

This section will examine your beliefs about your Reflective Practice during internship training at RAKCODS:

1. Reflective practice is important in clinical training.
 - Strongly Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No Comments

2. Comfortable in using the reflective worksheets
 - Strongly Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No Comments

3. Reflective practice led me towards self-directed learning.
 - Strongly Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No Comments

4. Confident in transforming my reflective experiences into routine practice.
 - Strongly Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No Comments

5. Able to translate my perspectives on previous experiences into subsequent practices.
 - Strongly Agree
 - Slightly Agree
 - Disagree
 - Strongly Disagree
 - No Comments

6. Performance has improved after reflective practice.

- Strongly Agree
- Slightly Agree
- Disagree
- Strongly Disagree
- No Comments

7. Able to provide consistently high-quality dental care through reflective practice.

- Strongly Agree
- Slightly Agree
- Disagree
- Strongly Disagree
- No Comments

SECTION 4: Final Comment

Please comment on anything you wish to that was not adequately covered above.

1. Name the strengths of the internship training:

2. Name the weaknesses of the internship training with suggestions for improvement:

3. The areas of reflective thinking during the internship training which supported in your professional development

4. Any difficulties/challenges during the training If yes, mention them and explain how did you solve them?

5. Your advice to successive batches to use internship training effectively:

7. THE LEARNING AND WORKING ENVIRONMENT

The learning and working environment in the internship program that highlights the following:

- Learning Resources and Professional Development
- Excellence in the Safety and Quality of Care
- Excellence in Professionalism
- Commitment to the Well-being of the Interns, Faculty and Health Care Team.
- Educate Faculty, Interns and Health Care Team for Fatigue Mitigation
- Clinical Responsibilities, Teamwork and Transitions of Care
- Provide Interns with Educational, and Clinical Experience Opportunities

7.1. Learning Resources and Professional Development

The dental internship training program has been designed to ensure that dental interns are provided with ample resources to support their learning and professional development. The program encompasses several vital aspects that contribute to this objective:

Infrastructure and Facilities: The program ensures that dental interns have unrestricted access to well-equipped and contemporary dental clinics or facilities. These clinics have nursing stations furnished with the necessary dental instruments, equipment, and materials required to execute a diverse range of dental procedures. Furthermore, the program ensures the availability of outsourced dental laboratories, radiography facilities, and other essential amenities to facilitate comprehensive learning experiences.

Faculty Guidance: The core faculty who are involved in the training serve as the mentors for interns. These mentors, are all licensed and practicing specialist dentists, supervise and assist interns in their clinical work, helping them refine their skills and address any challenges they encounter. The faculty also to provide advice, clarify doubts, and engage in discussions on complex cases. There are also instructors on the intern’s floor who continuously guide the interns in their clinical training.

Educational Materials and References: To facilitate a robust learning environment, the program ensures that interns have unrestricted access to a vast array of educational materials and references. These resources include textbooks, journals, online platforms, and databases specifically tailored to the field of dentistry.

Study Materials and Resources: To support interns in their exam preparation, the program provides access to a well-established library with a range of study materials and resources as mentioned in RAK College of Dental Sciences Library.

The college library provides a quiet atmosphere and enough seating capacity to its users which includes individual study carrels with the computers, comfortable chairs and tables for group study. Interns can find books in the library in basic medical and dental sciences.

RAKMHSU Library. All subscribed e-resources can be accessed both on-campus and off-campus through RAKMHSU E-Library/Portal. The Library subscribes following online databases:

ProQuest Health Research Premium Collection: This online database provides information on thousands of medical topics, with full text access to 5100+ journals, and over 900 include MEDLINE indexing. In addition, users have access to charts, diagrams, graphs, tables, photos, and other graphical elements essential to medical research.

Up-to-date: A comprehensive evidence-based clinical information resource, designed to provide physicians the quick access to practical and reliable answers to questions that arise during the course of patient care.

Exam Master: This database provides high quality, web-based exam preparation systems for medicine, nursing, pharmacy, physician assistant, and the health sciences.

We also provide the facility of Inter library loan to our interns. If our interns require access to specific materials that are not available in our library, they can explore inter library loan services. The library is also providing our interns with a citation management tool (SPSS) which really helps in managing references efficiently in their research.

Continuing Education Opportunities: The program acknowledges the significance of continuous learning and, therefore, provides interns with numerous opportunities to engage in continuing education programs, workshops, seminars, and conferences. These events expose interns to novel research findings, emerging trends, and advanced dental techniques.

Research and Evidence-Based Practice: In order to cultivate a culture of research and evidence-based practice, the program encourages dental interns to actively engage in research activities. This facilitates the development of critical thinking skills, enhances their understanding of scientific methods, and encourages interns to base their clinical decisions on the best available evidence.

Patient Diversity and Case Complexity: The program strives to expose dental interns to a diverse patient population encompassing individuals with a wide range of dental conditions and treatment needs. This exposure ensures that interns gain invaluable experience in managing various cases, ranging from routine dental procedures to complex and challenging ones.

The dental internship program recognizes the importance of continuous learning and professional advancement. As part of this recognition, the program encourages dental interns to pursue and take relevant exams such as the EDREE (Examinations for the Dental Registration in European Economic Area), MFD (Membership of the Faculty of Dental Surgery), MFDS

(Membership of the Faculty of Dental Surgery), National Boards, or other applicable examinations. Here's how the program supports and encourages interns in this endeavor:

Awareness and Guidance: The program provides the interns with at least one session on career guidance in the early part of the year. Additionally, they are provided with guidance on preparing for these exams, including recommended study materials, preparation courses, and examination strategies.

Career Advancement Opportunities: The program emphasizes the professional benefits and career advancement opportunities associated with achieving these certifications. The program may also facilitate connections with alumni or professionals who have successfully completed these exams, allowing interns to learn from their experiences and explore potential career paths. Maintaining faculty development and enhancing their teaching interest is crucial for ensuring the continuous growth and effectiveness of the dental internship program. Here is an overview of the process involved in achieving this goal:

Needs Assessment: The first step in faculty development is conducting a needs assessment to identify areas where faculty members require further training or support. This is usually done by discussions with faculty, their responses in appraisal forms. By understanding the specific needs and challenges faced by faculty members, the program can tailor development initiatives to address those areas effectively.

Professional Development Programs: The university organizes professional development programs that are specifically designed to enhance teaching skills and foster teaching interest among faculty members. These programs may include workshops, seminars, webinars, conferences, and continuing education courses focused on pedagogy, innovative teaching methodologies, assessment techniques, and educational technology. There are continuous workshops under the name of Kaizen Workshops that RAKCODS conducts every year since the last four years, and also the main university has workshops conducted through the year.

Faculty Training and Certification: The program supports faculty members in pursuing training and certification programs related to teaching and education. This may include certifications in educational technology, curriculum development, instructional design, or specialized teaching methodologies. The program may provide financial assistance or allocate dedicated time for faculty members to attend these training programs, recognizing the value of formal certifications in enhancing their teaching skills.

Research and Scholarship Support: The program encourages faculty members to engage in educational research and scholarship related to dental education. This support can include providing resources, research opportunities.

Recognition and Incentives: Recognizing the contributions and efforts of faculty members is vital for sustaining their teaching interest. The program acknowledges outstanding teaching performances through awards, accolades, and appreciation events. Additionally, the program may offer incentives such as opportunities for leadership roles within the program to incentivize and motivate faculty members to actively engage in teaching enhancement activities.

7.2. Patient Safety, Quality Improvement, Supervision, and Accountability

Guidelines are provided below. Please refer to RAKCODS Health and Safety Procedures, Patient Safety Plan, Patient Safety Incident Management System for all details.

- Patient safety and quality of patient care is the responsibility of faculty, interns and staff. Interns and faculty consistently work in a well-coordinated manner with other health care professionals to achieve organizational patient safety goals.
- Internship program is responsible to prepare interns to provide the highest level of clinical care with continuous focus on the safety, individual needs, and humanity of their patients.
- It is the right of each patient to be cared for by interns who are appropriately supervised; possess the requisite knowledge, skills, and abilities and seek assistance as required to provide optimal patient care.
- Interns must demonstrate the ability to analyze the care they provide, understand their roles within health care teams, and play an active role in system improvement processes.
- The program has formal mechanisms as mentioned in the evaluation section of this handbook to assess the knowledge, skills, and attitudes of its personnel toward safety in order to identify areas for improvement as mentioned in competency and evaluation section.
- It is mandatory for all interns, faculty and support staff to be immunized against and/or tested for infectious diseases, such as mumps, measles, rubella, hepatitis B, and SARS-CoV-2 prior to contact with patients and/or infectious objects or materials, in an effort to minimize the risk to patients and dental personnel.
- The program will ensure that all interns, faculty, and support staff involved in the direct provision of patient care be continuously recognized/certified in basic life support procedures, including cardiopulmonary resuscitation.
- The program has policies on Infection and Prevention Control and interns shall comply with the RAKCODS Health and Safety Policies and Procedures for sharp injury, radiation hygiene and protection, ionizing radiation, hazardous materials, and blood-borne and infectious diseases etc.
- Program conducts workshops/ professional development programs/ educational activities on safe, inter-professional, team-based care and on patient safety for its faculty, interns and staff. Participation in these workshops is monitored.
- RAKCODS has a formidable patient safety incident management system and related policies which include reporting, investigation, and follow-up of adverse events, near misses, and unsafe conditions. These prove to be pivotal mechanisms for improving patient safety and are essential for the success of any patient safety program. This is a part of the internship orientation program.
- To enhance patient safety, feedback and experiential learning are essential in developing competence in the ability to identify causes and establish sustainable systems-based changes.
- Orientation is provided to Interns, faculty members, and other clinical staff members regarding their responsibilities in reporting patient safety events at the clinical site and documented. Quality and Patient safety reports are provided quarterly to the senior administration and applicable actions are ensued upon.
- Intern representative will be participating as team members in real and/or simulated inter-professional clinical patient safety activities, such as root cause analyses or other activities that include analysis, as well as formulation and implementation of actions.
- **Quality Improvement:** Interns will be provided training and experience in quality improvement processes, including an understanding of health care disparities.

- **Quality Metrics:** Interns and faculty members will receive data on quality metrics and benchmarks related to their patient populations.
- **Engagement in Quality Improvement Activities:** Interns will have the opportunity to participate in inter-professional quality improvement activities.
- **Supervision and Accountability:** Intern is mainly responsible for the care of their patients under the supervision of faculty. Faculty member shares the responsibility and accountability for their efforts in the provision of care.
- Each patient will have an identifiable and appropriately-credentialed and privileged supervising dentist who is responsible and accountable for the patient's care. This information must be available to interns, faculty members, other members of the health care team, and patients.
- Interns and supervising faculty must inform each patient of their respective roles in that patient's care when providing direct onsite patient care.
- The supervising faculty/clinical instructor are physically present to guide and supervise each intern during the key portions of the patient interaction & care on their assigned clinical sessions throughout the internship program and Supervising faculty are available in the premises to guide the student.

7.3. Professionalism

- Program provides training sessions through kaizen workshops, to educate interns and faculty members concerning their professional responsibilities, including their obligation to provide appropriate care as required by their patients.
- The learning objectives of the program ensure clinical teaching & didactic educational event. This however should not affect the fulfillment of what can be considered as non-relevant tasks but are necessary for patient care.
- The model of care delivery for patients at RAKCODS is based on the philosophy of patient- and family-centered care by upholding a culture of professionalism and this is emphasized upon during the internship program.
- RAKCODS has already an existing platform (Occurrence variance Report in its HIMS) to report unsafe conditions and adverse events, the same is shared by all members of the team including interns.
- Program will take in to consideration the care for the interns regarding fitness for work including management of time before, during, & after clinical assignments, illness, fatigue, and substance use, in themselves, peers, and other members of the health care team.
- Interns will be monitored for their patient care performance improvement indicators, accurate reporting of clinical and educational work hours, patient outcomes, and clinical experience data.
- All interns and faculty members shall demonstrate responsiveness to patient needs that supersedes self-interest. This includes handovers and referral mechanisms to another qualified caregiver within the organization or outside as per the RAKCODS Health and Safety Policies and Procedures. These mechanisms ensure best interests of the patient.
- Program provides a professional, equitable, respectful, and civil environment that is free from discrimination, sexual and other forms of harassment, mistreatment, abuse, or coercion of students, interns, residents, faculty and staff which is as per the Ethical Framework of RAKCODS.

- RAKCODS Health and Safety Policies and Procedures and Ethical Framework addresses concerns regarding unprofessional behavior and a confidential process for reporting, investigating, and addressing such concerns (Annexure 1 and Annexure 2).

7.4. Well-Being

- Program takes the responsibility to establish measures to ensure well-being of all interns, faculty and staff members. Dentists and all members of the health care team share responsibility for the well-being of each other (Annexure 3).
- The program, will make all efforts to enhance the meaning that each intern finds in the experience of being a dentist, including protecting time with patients, minimizing non-dental related obligations, providing administrative support, and enhancing professional relationships;
- The program will focus on scheduling, work intensity, work compression that impacts intern well-being, evaluating workplace safety data and addressing the safety of interns & faculty member and policies and programs that encourage optimal intern & faculty member well-being.
- The program will organize workshops/trainings to educate faculty members and interns to identify symptoms of burnout, depression, and substance use disorders and assist those who experience these conditions to seek care.
- The program will encourage interns and faculty members to alert the program director or other designated personnel or programs when they are concerned that another intern, or faculty member may be displaying signs of burnout, depression a substance use disorder, suicidal ideation, or potential for violence; provide access to appropriate tools for self-screening; provide access to confidential, affordable mental health assessment, counseling, and treatment.
- The program will arrange coverage of patient care through urgent care clinic in circumstances when interns may be unable to attend work due to fatigue, illness, family emergencies and parental leave etc.
- As per the institutions policy Interns have 21 days of annual leave, 15 days' sick leave, 2 short leaves every month, Hajj leave for 9 days, 4 days for the death of a first degree relative, maternity leave as per the request of the presiding doctor. However, in any case the total number of leaves availed by an intern should not exceed 50 calendar days.
- Compensatory clinics up to one month will be provided to complete all the educational components of the program if he has exceeded 50 calendar days of the allowed leaves.
- Under unavoidable circumstances, and depending on length of absence and program completion requirements, the length of training for intern may extend up to maximum six months on the recommendation of clinical committee and is subjected to compliance with payment terms.

7.5. Fatigue Mitigation

- Program will conduct Kaizen workshops for all faculty members and interns to recognize the signs of fatigue and sleep deprivation, educate them in alertness management and fatigue mitigation processes and use fatigue mitigation processes to manage the potential negative effects of fatigue on patient care and learning.
- Program will ensure continuity of patient care, consistent with the program's policies and procedures, if an intern may be unable to perform their patient care responsibilities due to excessive fatigue.

7.6. Clinical Responsibilities, Teamwork and Transitions of Care

- **Clinical Responsibilities:** The clinical responsibilities for each intern are based on patient safety, intern ability, severity and complexity of patient illness/condition, and available support services.
- **Teamwork:** Interns must care for patients in an environment that maximizes communication. This must include the opportunity to work as a member of effective inter professional teams that are appropriate to the delivery of care in the specialty and larger health system.
- **Transitions of Care:** Program has mechanisms to optimize transitions in patient care, including their safety, frequency & structure and monitor effective, structured hand-over processes to facilitate both continuity of care and patient safety as per the policies of the institution.
- Programs will ensure that interns are competent in communicating with team members in the hand-over process as per the institution policy.
- Program will ensure continuity of patient care, consistent with the program's policies and procedures, in the event that an intern may be unable to perform their patient care responsibilities due to excessive fatigue or illness, or family emergency.

7.7. Interns Clinical Experience and Education

- Programs, has an effective program structure that is configured to provide interns with educational and clinical experience opportunities as well as reasonable opportunities for rest and personal activities.
- **Hours of Clinical and Educational Work:** Interns are working on average 35 hours a week for 5 days. Maximum hours of clinical and educational work per week will not be more than 60 hours, inclusive of all in-house clinical and educational, laboratory activities and any other activities done from home.
- **Mandatory Time Free of Clinical Work and Education:** Working hours for interns are from 8:30- 16.00 with a 30-minute break from Monday to Friday, Saturday and Sunday is the weekend off that will provide enough time for the interns to rest and focus on personal well-being.
- **Maximum Clinical Work and Education Period Length:** Clinical and educational work periods for interns on average 35 hours a week for all educational and clinical activities. However, other activities related to patient safety, such as providing effective transitions of care, and/or intern education, to provide humanistic attention to the needs of a patient or family or attend unique educational events and where work settings and resources allow will be given 3 hours additionally per day with maximum 60 hours per week. Interns will not be assigned additional patient care responsibilities during this time.
- **Internship is a full time program;** interns are not allowed to moonlight under any circumstances.
- **Maximum In-House On-Call Frequency:** Interns will have emergency on call on rotation. It will not exceed more than 4 times a month.
- **The Dental Intern Program Ensures** that interns' clinical and educational responsibilities prepare them to become independent general dental practitioners through a comprehensive and structured approach.
- **Key elements of the program** that contribute to the interns' qualification as a general dental practitioner includes:
- **Progressive Clinical Experience:** The program provides dental interns with progressively increasing clinical responsibilities over the course of their training. Under the guidance and

supervision of faculty and instructors, interns perform a wide range of clinical procedures, including preventive care, restorative dentistry, pediatric dentistry, endodontics, periodontics, oral surgery, and prosthodontics.

- This progressive clinical experience ensures that interns develop the necessary skills, competence, and confidence to practice independently.
- **Mentorship and Supervision:** Dental interns receive mentorship and supervision from experienced faculty members and instructors throughout their training. These mentors provide guidance, feedback, and support to help interns refine their clinical skills and expand their knowledge base.
- The mentors monitor and assess interns' progress, ensuring that they meet the required competencies and are ready to transition to independent practice.
- **Case-based Learning:** Dental interns engage in case-based learning activities that simulate real-world patient scenarios. They analyze and discuss complex cases, integrating their theoretical knowledge with clinical decision-making. Through these activities, interns develop critical thinking skills, enhance their problem-solving abilities, and learn to apply evidence-based approaches to patient care.
- **Patient Diversity and Cultural Competence:** The program exposes dental interns to a diverse patient population, representing different socioeconomic backgrounds, cultures, and oral health needs. Interns gain experience in providing culturally sensitive and patient-centered care to individuals from various backgrounds.
- This exposure fosters an understanding of social determinants of health, improves communication skills, and enhances their ability to adapt their care to meet the unique needs of each patient.
- By combining progressive clinical experience, mentorship, comprehensive education, case-based learning, exposure to diverse patient populations, the dental intern program ensures that interns' clinical and educational responsibilities qualify them to become independent general dental practitioners.
- The program equips interns with the necessary knowledge, skills, professionalism, and cultural competence to provide high-quality dental care and meet the oral health needs of their future patients.
- **Internship Certificate:** Internship certificate will be awarded to the intern in recognition of the fulfillment of all the prescribed requirements of the Internship Program at RAKCODS.



RAK Medical Health and Sciences University
RAK College of Dental Sciences (RAKCODS)



Policy/ Procedure Type:	Grievance Policy	Prepared by: Dr. Shumaila Azhar Internship Program Coordinator
Title:	Interns' Grievance and Appeal Policy	
Policy Code Number:	GP.01	Reviewed by: Dr. Vivek Padmanabhan Associate Program Director
Ownership of Policy:	RAKCODS	
Issue Date: 17 th July 2023 Edition 01	Review Date: 16 th July 2026	Approved by: Dr. Muhammed Mustahsen Rahman Internship Program Director

Purpose

To provide a formal process for addressing and resolving interns' concerns, complaints, or grievances related to their clinical experiences within RAK College of Dental Sciences (RAKCODS), facilitating conflict resolution, and promoting institutional improvement.

Scope

The policy aims to ensure fairness, transparency, and the protection of interns' rights by providing a structured mechanism to address and resolve issues in a timely and equitable manner.

Policy Statement

RAKCODS seeks to create and maintain a healthy and enjoyable practicing environment, and one that will enhance personal development for the interns. In instances where grievances occur, it is the aim of the RAKCODS to resolve them amicably and promptly, in a manner that is both fair and equitable to all concerned. Complaints or appeals by interns to the Internship Program Coordinator, shall be made responsibly.

Procedures

To maintain a grievance, the complaining party must allege that he or she has suffered a substantial injury resulting from violation of rights or privileges concerning clinical training or other activities, arising from:

- Acts of discrimination prohibited by the RAKCODS;
- Failure to comply with rules, regulations, and procedures established by the RAKCODS;
- Arbitrary and capricious actions on behalf of the RAKCODS; and
- Retaliation for exercise of protected rights

Procedures for Implementation of Grievance Redressal

- **Informal Resolution:** Before instituting a formal grievance, the aggrieved party shall make all reasonable efforts to achieve a resolution of the situation through informal consultation with the appropriate faculty advisor/mentor and administrative officers.
- **Preliminary Proceedings:** If informal consultation fails to resolve the matter, or if the aggrieved Intern concludes that such consultation is not feasible or would be futile, the aggrieved Intern shall refer the dispute by means of a letter addressed to the Program Coordinator. The letter shall identify the general nature and circumstances of the grievance.

The Intern Grievance Redressal Committee

The Grievance Redressal Committee consists of three full-time faculty members who are involved in Internship Training Program and nominated by the Program Director based on the recommendations from the Associate Program Director. In addition, one intern representative will also be included in the committee.

The Chairperson, who is appointed by the Program Director will convene the Committee upon receipt of a request of an appeal against disciplinary action from an intern, and will forward its recommendation to the Associate Program Director. An Intern may appeal against the Grievance Redressal Committee's decision to the Program Director whose decision is final.

Formal Proceedings

Commencement of Proceedings:

- The aggrieved party may commence formal proceedings by means of a grievance sent to the Program Coordinator with a copy to the Program Director and Associate Program Director.
- The grievance shall identify the aggrieved party as the "Grievant" and shall name the other party (concerned intern, faculty, departments / offices) as the "Respondent."
- Within five working days of receipt of the grievance, the Associate Program Director shall reply in writing, sending copies of the reply to the Program

Director, and the Grievant. The reply shall set forth with particularity the position of the RAKCODS Respondent with respect to each allegation of the grievance.

- If majority members of the Grievance Redressal Committee, after an opportunity for argument by the parties, agrees that for any of the reasons set out in this section a hearing is not warranted, the grievance shall be dismissed, in whole or in part, and the matters dismissed shall be deemed closed.
- On the determination that a hearing is warranted, the Program Coordinator shall establish a schedule for the hearing. Grievances shall be heard and decided with reasonable dispatch, and ordinarily shall be completed within five working days after the determination that a hearing is warranted.
- A grievance procedure is not a formal judicial proceeding. Its purpose is to provide a fair evaluation of an allegation that a right or privilege has been violated. In order to achieve that end, the Grievance Redressal Committee shall have authority to call any material witness who is a member of the RAKCODS faculty, administration, or staff and any other Intern who is willing to testify; to question parties and witnesses; to exclude matters it deems irrelevant; to place reasonable limits on arguments, the presentation of evidence, and the questioning of witnesses by the parties.
- The RAKCODS will make a reasonable effort to facilitate the appearance of all faculty, administration, staff and Interns reasonably called to testify.
- The procedure at the hearings shall be informal but shall comply with the requirements of fairness to the parties.
- A party shall be entitled to inspect and copy, in advance of the hearing, all relevant documents in the control of the other party and not privileged, and may offer such documents or excerpts there from in evidence.
- The parties shall be entitled to present opening and closing statements.
- If necessary, a tape recording of the hearing shall be made and one copy shall be kept on file.
- At the conclusion of the presentation of evidence and argument from both sides, the Committee shall convene a closed session to deliberate and reach a decision.
- In rendering its decision, the Grievance Redressal Committee shall determine whether the Grievant has established by clear and convincing evidence that he or she has suffered a substantial injury.
- The Grievance Redressal Committee shall render its findings and recommendations in a written opinion that shall state the number of members subscribing to the opinion, and shall include dissenting opinions, if any. This opinion shall be submitted to the chairperson of the Grievance Redressal Committee, and copies shall be transmitted to the parties and to the Associate Program Director.

Final Disposition

The Grievance Redressal Committee shall discuss its findings with the Associate Program Director and the final decision shall be implemented.

An Intern may appeal against the Grievance Redressal Committee's decision to the Program Director Who may form another Grievance Redressal Committee for further enquiry or implement the final decision. The decision from the Program Director's is final.

Document Change Record:

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1	17 th July 2023	No Change	No changes

Authorization Form

Compiled by: Dr. Shumaila Azhar Internship Program Coordinator	
Reviewed by: Dr. Vivek Padmanabhan Associate Program Director	
Approved by: Dr. Muhammed Mustahsen Rahman Program Director	



RAK Medical Health and Sciences University
RAK College of Dental Sciences (RAKCODS)



Policy/ Procedure Type:	Grievance Policy	Prepared by: Mr. Nisar Ahmed Nisar HOD – Human Resources
Title:	Faculty/ Staff Grievance and Appeal Policy	
Policy Code Number:	GP.02	Reviewed by: Dr. Vivek Padmanabhan Associate Program Director
Ownership of Policy:	RAKCODS	
Issue Date: 17 th July 2023 Edition 01	Review Date: 16 th July 2026	Approved by: Dr. Muhammed Mustahsen Rahman Program Director

Purpose

The purpose of the Faculty/ Staff Grievance and Appeal Policy in RAK College of Dental Sciences (RAKCODS) is to provide a structured and fair process for Faculty/Staff members to address their concerns, disputes, and grievances. The Faculty/Staff Grievance and Appeal Policy serves several key purposes:

- Ensuring Fairness
- Conflict Resolution
- Upholding Academic Standards
- Promoting Collegiality
- Safeguarding Faculty/Staff Rights

Scope

The policy aims to ensure that all Faculty/Staff members involved in internship training program have a mechanism through which they can seek resolution for issues related to their employment, working conditions, professional development, or other relevant matters.

Policy Statement

To uphold this standard, the collaboration between faculty and staff is crucial and should be conducted in a respectful and harmonious manner. In order to achieve

this, the College must create an environment that respects and values the Faculty/Staff while also ensuring that their concerns and grievances are promptly and fairly addressed.

RAKCODS promotes the resolution of disputes among academic personnel through informal and open discussions. However, the College acknowledges that there are occasions when more formal procedures are necessary. Whether informal or formal, all such activities should be approached with a sense of trust and cooperation among all participants.

Procedures

Before instituting a formal grievance, the aggrieved party shall make all reasonable efforts to achieve a resolution of the situation through informal consultation with the Human Resources department and appropriate College officials.

Preliminary Proceedings:

If informal consultation fails to resolve the matter, or if the aggrieved party concludes that such consultation is not feasible or would be futile, the aggrieved party shall refer the dispute by means of a letter addressed to the Associate Program Director. The letter shall identify the general nature and circumstances of the dispute.

Grievance Redressal Committee:

The Grievance Redressal Committee consists of five members from full-time faculty and staff depending upon the need. One of the senior most faculty member will be the Chairperson.

The Chairperson will convene the Committee upon receipt of a request of an appeal from a Faculty/Staff or a representative of a Faculty/Staff member. The Committee will deliberate upon the matter and will meet the Faculty/Staff concerned also. It will forward its recommendations to the Associate Program Director.

Formal Proceedings:

Commencement of Proceedings:

- The aggrieved party may commence formal proceedings by means of a grievance sent to the Chairperson of the Grievance Redressal Committee with a copy to the Program Director.
- The grievance shall identify the aggrieved party as the “Grievant” and shall name the RAKCODS as the “Respondent.” A grievance may not be brought against Faculty/Staff of the College, based on the personal issues. A grievance may be maintained against the College for Official Acts only.

- Within twenty working days of receipt of the grievance, the Associate Program Director shall reply in writing to the Chairperson of the Grievance Redressal Committee. The reply shall set forth with particularity the position of the College with respect to each allegation of the grievance.
- If a majority of the Grievance Redressal Committee, after an opportunity for argument by the parties, agrees that for any of the reasons set out in this section a hearing is not warranted, the grievance shall be dismissed, in whole or in part, and the matters dismissed shall be deemed closed.
- On the determination that a hearing is warranted, the Chairperson shall establish a schedule for the hearing. Grievance shall be heard and decided with reasonable dispatch, and, ordinarily, shall be completed within 30 workdays after the determination that a hearing is warranted.
- A grievance procedure is not a formal judicial proceeding. Its purpose is to provide a fair evaluation of an allegation that a right or privilege has been violated. In order to achieve that end, the Grievance Redressal Committee shall have authority to call any material witness who is a member of the College, to question parties and witnesses; to exclude matters it deems irrelevant; to place reasonable limits on arguments, the presentation of evidence, and the questioning of witnesses by the parties. The College will make a reasonable effort to facilitate the appearance of any of its Faculty/Staff reasonably called to testify.
- The procedure at the hearings shall be informal but shall comply with the requirements of fairness to the parties.
- A party shall be entitled to inspect and copy, in advance of the hearing, all relevant documents in the control of the other party and not privileged and may offer such documents or excerpts wherefrom in evidence. The Grievant shall be provided full and fair opportunity to present his/her case in a reasonable manner.
- The parties shall be entitled to present opening and closing statements.
- A stenographic record or tape recording of the hearings shall be made and one copy shall be kept on file by RAKCODS.
- At the conclusion of the presentation of evidence and argument from both sides, the Committee shall convene in closed session to deliberate and reach a decision. In rendering its decision, the Grievance Redressal Committee shall not substitute its judgment for that of the maker of the decision being challenged. Rather it shall determine whether the Grievant has established by clear and convincing evidence that he or she has suffered a substantial injury.
- The Grievance Redressal Committee shall render its findings and recommendations in a written opinion that shall state the number of members subscribing to the opinion and shall include dissenting opinions, if any. This opinion shall be submitted to the Associate Program Director.

Final Disposition

The Grievance Redressal Committee shall discuss with the Program Director and the final decision shall be implemented, keeping the grievant fully informed.

Faculty/ Staff may appeal against the Grievance Redressal Committee’s decision to the Program Director, who may form another Grievance Redressal Committee for further enquiry or implement the decision. The decision from the Program Director’s is final.

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1	16 ^h July 2023		No changes

Authorization Form

Compiled by: Mr. Nisar Ahmed Nisar HOD – Human Resources	
Reviewed by: Dr. Vivek Padmanabhan Chairperson, Clinical Sciences	
Approved by: Dr. Muhammed Mustahsen Rahman Dean, RAKCODS	



RAK Medical Health and Sciences University
RAK College of Dental Sciences (RAKCODS)



Policy/ Procedure Type:	Safety Policy	Prepared by: Mr. Muhammad Zahid Khan Admin, Health and Safety Officer
Title:	Faculty & Staff Safety Policy	
Policy Code Number:	SP.01	Reviewed by: Dr. Vivek Padmanabhan Chairperson, Clinical Sciences
Ownership of Policy:	RAKCODS	
Issue Date: 20th – July 2023 Edition 01	Next Review Date: 19th – July 2026	Approved by: Dr. Muhammed Mustahsen Rahman Dean, RAKCODS

Purpose

The purpose of this policy is to establish a comprehensive framework that ensures the health, safety, and well-being of faculty & staff involved in the activities at RAKCODS internship training program. The objectives of this policy are to protect interns, faculty and staff from potential hazards, enhance productivity, promote safety culture and reduce risks.

Scope

This policy applies to all faculty & staff involved in the internship program at RAKCODS. The policy covers all workplaces including office spaces, clinical training facilities and any other locations where work is conducted. It also established a process for reporting accidents, near-misses, and incidents. The health and safety of all interns, faculty and staff shall be a prime focus in the planning and execution of all activities of internship programs.

Policy Statement

To uphold the highest standards of Safety for its faculty, staff and interns in order to provide a hazard free and safe work environment.

Procedures

Health and Safety Committee

The purpose of the Health and Safety Committee is to oversee and drive improved performance in, the strategies, policies, working practices and performance of the Group in relation to health and safety, ensuring these at least meet or exceed legal obligations, with the objective of promoting the well-being and safety of faculty & staff affected by the college activities. Health and Safety committee hold regular meetings with faculty & staff and internship program organization to make sure that everyone understands specific Health and Safety protocols. These meetings also ensure that protocols are properly implemented and changed (if necessary).

There will be one subcommittee namely the “Infection Control Committee” which will work under the umbrella of the Health and Safety Committee. The Infection Control Committee have to monitor the various contagious disease and infections such as COVID-19 etc. and issue the guidelines accordingly.

The Health and Safety Committee shall:

- Identify hazards, conditions and situations that may be unhealthy or unsafe for faculty & staff and advice on effective systems for responding to identified hazards.
- Consider and expeditiously deal with complaints relating to safety of occupants. Prepare measures to handle any safety matter that the Committee deems appropriate.
- Gather all reports related to the safety requirements. Identify, evaluate and recommend a resolution to the Program Director regarding all matters pertaining to health and safety in the workplace.
- Make recommendations to Program Director on educational and training programs promoting the safety and compliance with the regulation, and monitor the recommendations’ effectiveness.
- Consult with faculty, staff and the internship program organization on issues related to safety and the occupational environment.
- Faculty & Staff are eligible for health services through the health insurance scheme in designated hospitals and clinics.
- Committee should conduct regular orientations, lectures and workshops for interns, faculty and staff related to various health and allied practices such as CPR, AED and First Aid, etc.
- Committee will orient faculty & staff on Infection Prevention and Control Policy to cater safety concerns. This includes proper hand hygiene, use of personal protective equipment (PPE) like gloves, masks, and gowns, as well as guidelines for handling and disposing of infectious waste.
- Committee will ensure that faculty & staff are trained on safe use of chemicals and hazardous substances that are used for cleaning, disinfection, and medical procedures.

- To prevent needle stick and sharps injury, committee will orient faculty & staff on needle stick prevention program & policy to reduce the risk of getting infected with blood borne pathogens.
- Faculty & staff may face workplace violence from patients or their relatives. Workplace Violence Prevention policy addresses the procedure and handling of such incidents to prevent and manage such incidents. Committee will conduct a training program to this aspect as well.
- Committee will also train faculty & staff on policy for emergencies and disasters. This includes building evacuation plans, fire safety measures, and response procedures for natural disasters or other crises.
- Health & Safety Committee in coordination with Bio Medical Engineer will devise a training program on using medical equipment safely for faculty & staff to prevent accidents and ensure accurate diagnosis and treatment.

Roles & Responsibilities

- Program Coordinator, Associate Program Director and program Director are responsible for ensuring adherence to rules and safety policies as well as for keeping a safe and healthy workplace for all faculty, staff and interns. They must take the necessary steps to guarantee that all hazards are addressed and detected non-compliance concerns are promptly resolved.
- Faculty & staff involved in internship training program at RAKCODS are accountable for their own safety. The obligation to create and maintain a safe environment is on each individual and collective member of the community. Each person working at RAKCODS is expected to act in a way that protects their own health and safety as well as the health and safety of their coworkers, interns, and visitors. They are also expected to follow all applicable health and safety laws, policies, programs, and procedures.
- The interns, faculty & staff are strongly encouraged to report the incidents by initiating the Occurrence Variance Report (OVR) as per the Occurrence Variance Reporting policy of RAKCODS.

4. Document Change Record:

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1	19 th July 2026		No changes

Authorization Form

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Reviewed by: Dr. Vivek Padmanabhan Associate Program Director	
Approved by: Dr. Muhammed Mustahsen Rahman Program Director	



RAK Medical Health and Sciences University
RAK College of Dental Sciences (RAKCODS)



Policy/ Procedure Type:	Internship and BDS Programs	Prepared by: Dr. Vivek Padmanabhan Associate Program Director
Title:	Policy on Interns' and Students' Training	
Policy Code Number:	TP.01	Reviewed by: Dr. Muhammed Mustahsen Rahman Internship Program Director
Ownership of Policy:	RAKCODS	
Issue Date: 4 th August 2023 Edition 01	Next Review Date: 3 rd August 2026	Approved by: Dr. Muhammed Mustahsen Rahman Internship Program Director

Purpose

The Policy on Interns' and Students' Training aim to create guidelines, norms, and training resources for completing both programs. It promotes a collaborative and supportive learning environment for the benefits of interns and students and ensures the availability of adequate resources for education, healthy, safe learning and working environments.

Scope

Policy applies to all interns and students enrolled in their respective programs and supervising faculty and staff.

To understand the separation of trainings taking place at RAK College of Dental Sciences (RAKCODS) including the Internship Training Program and Bachelor of Dental Surgery (BDS) Program respectively.

Policy Statement

The management of RAKCODS is committed to providing a conducive learning environment for all interns and students similarly without any overlap. It provides guidelines to ensure that the presence of all learners (interns and students) enrolled in their respective programs do not compromise the educational experience of either.

Procedures

Training Sites: The clinical trainings for interns and students are conducted separately, with dedicated dental units allocated to each group. There will be no combined clinics where both interns and students participate together.

Supervision and Mentorship: The presence of interns and students will be accompanied by proper supervision and mentorship by qualified faculty and staff members in their respective clinics.

There are separate schedules prepared for the faculty and staff involved in the teaching and training of interns and students without compromising the faculty and staff workload.

Clinical Hours in each major dental discipline during the one-year internship training program is designed according to NIHS stipulations and will not affect the total credit load of the faculty involved in teaching and clinical trainings of the interns and students.

Dedicated Learning Opportunities: Interns and students should not replace scheduled educational opportunities for each other. Instead, their presence should be complementary to these opportunities and contribute to a well-rounded educational experience.

There will be separate schedules for teaching and clinical trainings of interns and students without interfering with each other program/ schedules.

Communication and Feedback: Regular channels of communication should be established to facilitate feedback from interns and students regarding the impact of the presence of each other on their education. This feedback should be used to make necessary improvements to the learning environment. These feedbacks can be collected during the meetings with both students and interns.

Conflict Resolution: In case any conflicts arise between interns and students, a formal conflict resolution mechanism will be followed which is in accordance to the ethical framework and hierarchical solution providers of the organization. The objective of the conflict resolution process is to reach mutually agreeable solutions.

Program Orientation: All interns and students will receive appropriate orientations at the start of the academic year for their respective program.

Periodic Review: This policy will be subject to periodic review to assess its effectiveness and relevance. Any necessary updates or revisions will be made to ensure its alignment with the organization's educational goals.

Dissemination: This policy shall be made readily available to all learners including BDS students and interns. The policy is accessible through the internal shared folder of the organization.

By implementing this policy, the management of RAKCODS aims to foster a collaborative and supportive learning environment, enabling all learners to grow professionally and contribute effectively to the advancement of dental education.

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Authorization Form

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<p>Reviewed by: Dr. Muhammed Mustahsen Rahman Internship Program Director</p>	
<p>Approved by: Dr. Muhammed Mustahsen Rahman Internship Program Director</p>	