



National Institute for Health Specialties Dental Internship Program Accreditation Rubrics

| GENERAL INFORMATION | | | | | |
|---|--------------------------|--------------------------|--------------------------|----------|----------|
| 1 Institution Information | | | | | |
| Entity name | | | | | |
| City | | | | | |
| Date | | | | | |
| Requirement | Status | | | Evidence | Comments |
| | Met | P. Met | Not Met | | |
| DOMAIN 1: GOVERNANCE | | | | | |
| Component 1.1. Governance Structures | | | | | |
| 1.1.1. The program is sponsored by an institution accredited by or in compliance with NIHS standards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.1.2. A primary clinical site is designated by the sponsoring institution. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.1.3. Program Director (PD) appointed according to criteria and allowed the required Full-time Equivalent (FTE). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| Form Title | Version | Date | Owner | Page |
|---|---------|----------|-------|------|
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 1 |

| | | | | | | |
|---|---|--------------------------|--------------------------|--------------------------|--|--|
| 1.1.4 | Associate Program Director (APD) appointed according to criteria and allowed the required FTE. <i>(if applicable in compliance with NIHS program size requirements)</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.1.5 | Clinical Competency Committee (CCC) constituted according to criteria. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.1.6 | Program Evaluation Committee (PEC) constituted according to criteria. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 1.2. Governance Relationships | | | | | | |
| 1.2.1. | Effective relationship of the PD/APD with the Designated Institutional Official (D.I.O) or equivalent. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.2.2. | Program Letter of Agreement (PLAs) with participating sites in compliance with the NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.2.3. | Effective relationship among participating sites. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 1.3. Governance Processes | | | | | | |
| 1.3.1. | Policies and procedures for internship in place and implemented. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.3.2. | Existing financial plan and budgeting for the program. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 1.3.3. | Functioning information system for the program. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| OVERALL ASSESSMENT OF DOMAIN 1: | | | | | | |
| DOMAIN 2: TRAINING PROGRAM | | | | | | |
| Component 2.1. Program Organization | | | | | | |
| 2.1.1. | The sponsoring institution and its participating sites provide care in all major clinical specialties in accordance with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | |
|---|---------|----------|-------|------|
| Form Title | Version | Date | Owner | Page |
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 2 |

| | | | | | | |
|-----------------------------------|---|--------------------------|--------------------------|--------------------------|--|--|
| 2.1.2. | Availability of optional rotations (electives) for interns in accordance with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.3. | The program monitors clinical rotations across all participating sites. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.4. | Availability of healthy and safe learning and working environment in accordance with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.5. | The curriculum is structured, and rotation specified according to NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.6. | The program integrates the following competencies into the curriculum: professionalism, patient care and procedural skills, medical knowledge, practice-based learning and Improvement, Interpersonal and communication skills, and systems-based practice. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.7. | The program runs didactic sessions for interns in accordance with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.1.8. | The program demonstrates evidence of scholarly activities with adequate resources deployed. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 2.2. Training Resources | | | | | | |
| 2.2.1. | Availability of adequate educational resources for the program. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.2.2. | Adequate number and variety of patients | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.2.3. | Availability of resources for scholarly activities. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.2.4. | Caring and motivating learning environment emphasizing collaboration and teamwork. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 2.3. Intern Evaluation | | | | | | |
| 2.3.1. | Intern assessment system in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.3.2. | Interns assessed after each rotation. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.3.3. | Formative assessment follows stipulated criteria | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | |
|---|---------|----------|-------|------|
| Form Title | Version | Date | Owner | Page |
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 3 |

| | | | | | | |
|---|--|--------------------------|--------------------------|--------------------------|--|--|
| 2.3.4. | Summative assessment system in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 2.3.5. | Summative assessment follows stipulated criteria. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| OVERALL ASSESSMENT OF DOMAIN 2 | | | | | | |
| DOMAIN 3: INTERNS | | | | | | |
| Component 3.1. Recruitment and Deployment | | | | | | |
| 3.1.1. | Interns are appointed according to educational capacity and in line with the NIHS eligibility criteria. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.1.2. | Existence of 4 or more interns per year. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.1.3. | Existence of transparent deployment system. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.1.4. | Procedure for transfer of interns in place and in line with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.1.5. | Induction process for interns in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.1.6. | Changes in interns' complement are notified to NIHS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 3.2. Competency Acquisition | | | | | | |
| 3.2.1. | Interns' supervision follows stipulations in the NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.2.2. | Rotations are structured with sufficient length to provide a quality educational experience for interns. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.2.3. | Equitable exposure to training experience. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | |
|---|---------|----------|-------|------|
| Form Title | Version | Date | Owner | Page |
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 4 |

| | | | | | | |
|--|---|--------------------------|--------------------------|--------------------------|--|--|
| 3.2.4. | Blend of supervised patient care responsibilities, clinical teaching, and didactic educational events for interns is appropriate. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.2.5. | Interns with difficulties properly coached. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 3.3. Training Procedures | | | | | | |
| 3.3.1. | Procedures for intern's training progression in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.3.2. | Existing procedures for compliance and duty hours according to NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.3.3. | Procedures for on-call arrangements in place and according to NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.3.4. | Existence of structured hand-over processes to facilitate both continuity of care and patient safety. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.3.5. | The program complies with NIHS requirements for maximum clinical work, night float, and free time. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 3.4. Intern Support and Growth | | | | | | |
| 3.4.1. | Adequate access to learning resources, reference materials and technical support for scholarly activities for interns. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.4.2. | Procedures for intern representation and voice in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.4.3. | Presence of other learners e.g., residents is supportive and does not compromise interns' education. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.4.4. | Policies and procedures for intern well-being, counselling, and support. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 3.4.5. | Secure procedures for complaints and grievances in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | |
|---|---------|----------|-------|------|
| Form Title | Version | Date | Owner | Page |
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 5 |

OVERALL ASSESSMENT OF DOMAIN 3

DOMAIN 4: FACULTY AND ADMINISTRATIVE STAFF

Component 4.1. Scope and Recruitment

| | | | | | | |
|--------|--|--------------------------|--------------------------|--------------------------|--|--|
| 4.1.1. | Right mix of the training team (faculty) observed. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.2. | Existing process for faculty eligibility and selection in line with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.3. | Procedure for role assignment and induction in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.4. | Faculty numbers in line with the ratios stipulated by the NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.5. | Core faculty adequate in number | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.6. | Program coordinator appointed and allowed adequate time for administrative duties. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.1.7. | Existence of program administration personnel according to needs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

Component 4.2. Support and Growth of Training Team

| | | | | | | |
|--------|---|--------------------------|--------------------------|--------------------------|--|--|
| 4.2.1. | Provision for time, space, and resources to support the role of faculty and administration staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.2.2. | Procedures for faculty and staff safety and concern raising in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.2.3. | Existing faculty development program and compliance with scholarly activities in accordance with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.2.4. | Fair treatment and appeal process in place for faculty and administrative staff. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| | | | | |
|---|---------|----------|-------|------|
| Form Title | Version | Date | Owner | Page |
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 6 |

| Component 4.3. Performance Management of Training Team | | | | | | |
|--|---|--------------------------|--------------------------|--------------------------|--|--|
| 4.3.1. | Performance evaluation and appraisal for faculty and staff in place in line with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.3.2. | Procedures for faculty role balance in relation to education and service. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 4.3.3. | Faculty members demonstrate commitment and devote sufficient time for interns' education. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| OVERALL ASSESSMENT OF DOMAIN 4 | | | | | | |
| DOMAIN 5: PROGRAM EVALUATION/QUALITY, AND PATIENT SAFETY | | | | | | |
| Component 5.1. Program Evaluation | | | | | | |
| 5.1.1. | Policy and procedures for program evaluation in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.1.2. | Annual program evaluation conducted in line with NIHS requirements. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.1.3. | The annual program evaluation report is discussed with faculty and interns and shared with the D.I.O. or equivalence. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.1.4. | The Program Evaluation Committee is functional with regular meetings and output. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.1.5. | Program evaluation results are used for improvement of interns' education. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Component 5.2. Quality Improvement | | | | | | |
| 5.2.1. | System for patients' safety and quality improvement in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.2.2. | Documentation and reporting system in place. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.2.3. | Interns receive training and experience in patient's safety and quality improvement processes. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.2.4. | Interns and faculty are involved in quality improvement activities and reporting including access to data. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

| Form Title | Version | Date | Owner | Page |
|---|---------|----------|-------|------|
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 7 |

| Component 5.3. Patient Safety | | | | | | |
|------------------------------------|--|--------------------------|--------------------------|--------------------------|--|--|
| 5.3.1. | The program follows the institutional patient safety policy and system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.3.2. | The program provides formal educational activities that promote patient safety-related goals, tools, and techniques. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 5.3.3. | Interns are involved in reporting patient safety events including disclosure of adverse events. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| OVERALL ASSESSMENT OF DOMAIN 5 | | | | | | |
| Overall Assessment of All Domains: | | | | | | |

| POSITION | NAME | SIGNATURE | DATE |
|---|------|-----------|------|
| <i>Program Director</i> | | | |
| <i>Designated Institutional Official/ or Equivalent</i> | | | |

| Form Title | Version | Date | Owner | Page |
|---|---------|----------|-------|------|
| Dental Internship Program Accreditation Rubrics | 1 | Feb 2023 | NIHS | 8 |