



Conference overview and purposes

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Welcome to the Program Directors' Symposium, the first Academy-sponsored workshop for program directors to discuss issues of global concern affecting advanced education in pediatric dentistry and the specialty as a whole.

Shortly after I began my career in pediatric dental education almost 20 years ago, I had the privilege of assisting in the development of a symposium on advanced education in our specialty. The meeting was held in October 1978 at Eastman Dental Center and the proceedings were published early the following year. Before we embark on the tasks before us this weekend, permit me to review for those of you here who were not present then some of the concerns and issues discussed at that gathering almost 18 years ago.

First and foremost was the concern over the future demand for pediatric dental care. We heard dire, but inaccurate, predictions of falling birth rates, and no one foresaw the marvelous success we would have in educating the public and our colleagues in allied fields about our role as primary care providers. Neither did we grasp the implications of the increasing number of immigrants, some with high dental treatment needs, who would enter this country. The impact of effective preventive measures was predicted to slightly reduce the number of children seeking dental care and decrease the number of visits per child. On the other hand, family incomes were predicted to increase, as were third-party dental plans. Speculation centered on the possibility of a national health care plan that might include dental coverage for children. As we know, family incomes for many in the middle class have not kept pace with inflation, and many of this country's poorer citizens have lost ground. The predicted demand at that time for future dental services for children was not all rosy. Today, however, pediatric dental practices are flourishing, and the number and quality of applicants to our programs have been on the rise in recent years.

In 1978, the primary care nature of pediatric dentistry was well recognized. It was believed that pediatric dentists would be in demand by those who plan health care programs, an assumption that is being challenged today.

Cooperation and consultation between pediatric dentists and orthodontists was urged. There was a perceived need for three-year programs combining the two

specialties, but only for those with a clear commitment to full-time academic careers. It was not clear to the participants in 1978 whether the two specialties could be effectively combined in practice.

The role of research in our educational programs was affirmed as a means of not only advancing our knowledge, but also of facilitating problem solving skills and enhancing the ability of program graduates to critically evaluate scientific literature. The concept of "lifelong learner" was clearly expressed.

In 1978, we discussed the roles of hospital experience and the management of developmentally disabled patients in our programs. The balance within programs among clinical, didactic, research, and teaching experiences was reviewed. And with 20-20 hindsight, it appears to this reviewer that one speaker's presentation on student evaluation hinted at the value of outcomes assessment. Among her four purposes of student evaluation was "a molding and balancing of the program content as a consequence of evaluation."

In the intervening 18 years we have met at symposia focused on specific topics, such as sedation and behavior management, and we have in recent years met within the framework of Academy annual sessions to review topics of common interest. Since 1978, however, there has not been to my knowledge another gathering of program directors to discuss global issues of common concern in a multi-day format. And that brings us to the challenges facing us today.

Some of the concerns that occupied the attendees in 1978 are still evident. Today, however, the environment in which our programs are conducted is dramatically different. Health care reform, managed care pressures, challenges to program financing, the need for more educators, increased educational accountability, and changing disease patterns—we all know what the issues are. Now is the time to address these challenges with creative and bold solutions.

The impetus for this meeting grew out of the Academy's strategic planning process that took place in early 1994. Subsequently, the Education and Research Committees were charged with developing a symposium in which program directors could begin to address issues of common concern. Steve Wilson, Huw Thomas, and I began the planning in earnest in October 1994. We asked for, and received from you, input

as to the topics and structure of this symposium. The 2-day format will afford us the opportunity to explore some of the issues we face today. We may raise more questions than we can answer, but one of our primary goals is to begin the development of strategies that you, as program directors, can adopt and adapt to enable pediatric dental specialty education not merely to survive, but to thrive in the new health care environment. So in a very real sense, we will be about the business of strategic planning, and in doing so we must, as Paul Casamassimo reminded us in a recent editorial, "think outside the box." What is "the box?" One way to think of it is the set of paradigms within which our programs function. These paradigms include education, patient care, research, and funding. To use current buzzwords, these paradigms are shifting, and if we are to survive we must shift with them. If we are truly to succeed, then we must be active in managing some of these shifts.

In the arena of education, we will, within the next year or so, be operating under a "new" set of educational guidelines. These guidelines will "raise the bar," but will also be somewhat dated the day they go into effect, given the lengthy development and approval process, as well as the current emphasis on process and outcomes in education. We are under greater outside scrutiny than ever before; the levels of accountability are being ratcheted up continually. One fallout of our specialty's success in the private sector is the difficulty we are having in attracting our best and brightest students into careers in teaching and research.

Educational and clinical practice activities are converging as fiscal and societal pressures place greater emphasis on patient care. Patients are no longer content to be fodder for our teaching programs; they are dental health care consumers with more options than ever before. We will have to learn to direct our residents in multidisciplinary settings for primary and specialty care, settings that will be outside the warm and comfortable cocoon we have spun for ourselves in our academic health care institutions. We will need to explore models in which the educators function more as clinicians, and full-time clinicians function as educators.

We are challenged in the research arena not only to advance the knowledge base of our specialty, but to do this in an era of shrinking funding and shrinking time allotted for those activities.

The fourth side of the box, funding, is perhaps foremost in many of our minds. Downsizing government and health care reforms threaten the traditional funding base for many of our programs. As Paul put it, our "level of concern should be just short of panic."

Those of us who planned this symposium felt strongly that we should draw heavily on the expertise and varied backgrounds available from within our body of program directors. Thus, all of our moderators, panelists, and summary experts, and all but three of our speakers are educators "in the trenches" wrestling with

the issues to be discussed. At the same time, we are fortunate to be able to bring in experts such as Scott Litch and Barry Waldman, and an "inside" expert, John Ferguson. We appreciate all of our speakers being with us to provide background in key areas.

The symposium is structured around five primary issues: clinic administration, finances, manpower, curriculum/accreditation, and program administration. The steering committee will grant you that these are somewhat arbitrary categories and a good deal of overlap exists among the topics. However, we believe this will prove to be a workable format. Within each issue, background and current challenges will be provided by two or three brief presentations. Following these, a panel of program directors will provide reactions and stimulate discussion by the group as a whole. On Sunday morning we will hear summaries of these discussions, suggestions for strategies to deal with the challenges, and possible outcomes measures by which we may gauge future success.

To provide a little change of pace tomorrow morning, we have imposed upon three of our program directors, Ron Bell, Bob Henry, and Bill Mueller, to walk us through their programs as examples of different models for educating pediatric dentists.

Drs. Wilson, Thomas, and I wish to thank the officers and trustees of the American Academy of Pediatric Dentistry for their foresight in directing that this symposium be held, and for their financial support for the on-site costs of hosting the attendees and guest speakers. We also express our appreciation to the American Academy of Pediatric Dentistry Educational Foundation for their support of the costs of publishing the proceedings of the symposium. Steve, Huw, and I are also greatly indebted to the Academy's central office staff, particularly John Bogert and Jenny Dowland, for their efforts in planning this symposium. As each of you know, meetings such as this do not just happen. There is a lot of behind-the-scenes work involved in distributing and collecting surveys, sending informational mailings to each of you, keeping the steering committee focused on our tasks, and freeing us to concentrate on the content of the symposium while they do all the work involved in local arrangements. Please join me in thanking the central office, the Academy officers and trustees, and the Educational Foundation for their support and hard work.

So now it is time to get to work. I know each of you came prepared to spend 2 days of concentrated effort, but also to learn from and to enjoy the company of your fellow educators in a collegial atmosphere. I look forward to an exciting and productive program, as well as to the opportunity to benefit from your ideas and experiences. Thank you, and welcome.

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