

# Review of Dental Training Programmes: November 2016



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## Details of the Review

Health Education England, working across Yorkshire and the Humber, commissions education and training for approximately 1,155 dental learners across a wide range of acute hospitals, primary care practices and dental schools.

It also provides Dental Workforce Transformation education for the whole multi-professional dental team including 3058 dentists and 6281 dental care professionals.

The current range of training commissions is:

- 106 Dental Foundation Trainees
- 69 Core Trainees
- 70 Specialty Trainees
- 800 Undergraduates (approximate figure)
- 50 Hygiene Therapists
- 60 Dental Nurses

HEE commissions £37m for this training.

This review was conducted in partnership with the School of Clinical Dentistry (University of Sheffield) School of Dentistry (University of Leeds) Leeds Dental Institute and Health Education England (HEE).

Each learning environment was also assessed on the following information, contained within this pack:

- Learning Environment self-assessment reporting
- Learner feedback surveys
- Previous programme review actions and progress
- Soft intelligence from within HEE and the two Dental Schools
- CQC information
- GDC information

<b>Visit date</b>	<b>2<sup>nd</sup> and 3<sup>rd</sup> November 2016</b>
<b>Learning Environments Visited</b>	<ul style="list-style-type: none"> <li>• Primary Care Dental Practices (random sample)</li> <li>• Leeds Teaching Hospitals NHS Foundation Trust (Leeds Dental School)</li> <li>• Sheffield Teaching Hospital NHS Foundation Trust (Charles Clifford Dental Hospital)</li> <li>• The Rotherham NHS Foundation Trust</li> <li>• York Teaching Hospitals NHS Foundation Trust</li> <li>• Mid Yorkshire Teaching Hospital NHS Trust</li> <li>• Hull and East Yorkshire Hospitals NHS Foundation Trust</li> <li>• Bradford Teaching Hospitals NHS Foundation Trust</li> <li>• Postgraduate School of Dentistry</li> <li>• Sheffield University</li> <li>• Leeds University</li> </ul>
<b>Lead (Responsible Person)</b>	<ul style="list-style-type: none"> <li>• James Spencer (Postgraduate Dental Dean - Facilitator)</li> <li>• David Eadington (Clinical Lead for Quality – Facilitator 2<sup>nd</sup> Nov)</li> <li>• Peter Taylor (Deputy Dean – Facilitator 3<sup>rd</sup> Nov)</li> </ul>
<b>Other Visiting Members</b>	<ul style="list-style-type: none"> <li>• Brian Nattress (Associate Postgraduate Dental Dean, HEE YH)</li> <li>• Catherine MacDona (Dental Care Professionals Tutor, HEE YH)</li> <li>• Joanne Birdsall (Consultant in Orthodontics, Rotherham Hospital)</li> <li>• Sue Baker (Associate Postgraduate Dean, HEE YH)</li> <li>• Melanie Catleugh (SAC representative)</li> <li>• Ghazala Ahmad-Mear (Associate Postgraduate Dean, HEE YH)</li> <li>• Anne Hegarty (Consultant in Oral Medicine, University of Sheffield)</li> <li>• Becky Burgess Dawson (Placement Development Manager, HEE YH)</li> <li>• Stephen Wood (Dental Foundation Trainer, HEE YH)</li> <li>• Rachel Fitzsimons (Dental Care Professional Tutor, HEE North East)</li> <li>• Helen Rodd (Professor/Honorary Consultant in Paediatric Dentistry, University of Sheffield)</li> <li>• Richard Balmer (Associate Postgraduate Dental Dean, HEE YH)</li> <li>• Denise Creasey (Dental Care Professional Tutor, HEE YH)</li> <li>• Usha Appalsawmy (Medical/Patient Safety Leadership Fellow)</li> <li>• Elizabeth Riley (Dental Foundation Trainer HEE YH)</li> <li>• Julia Armstrong (Dental Care Professional Tutor, HEE YH)</li> <li>• Michael Manogue (Director of Student Education, University of Leeds)</li> <li>• Mike Hayward (Associate Postgraduate Dean, Quality, HEE YH)</li> <li>• Emily Weeks (Dental Foundation Trainer, HEE YH)</li> </ul>
<b>Patient safety issues identified as requiring</b>	2016/DENT/03

<b>immediate action</b>	2016/DENT/06
<b>Were any educational requirements identified?</b>	Yes

## Summary of findings

There was excellent engagement with the review from across the region and this was reflected by the number of learners and educators who were present during the two days; 324 learners and 130 educators. Table 1 details the full list of professions in attendance.

<b>Profession</b>	<b>Number</b>
Dental Speciality	66
Dental Core	52
Dental Foundation	59
Undergraduate	65
Dental Nurses	25
Dental Hygiene/Therapy	53
Dental Technicians	4
Dental Educators	130

It was clear that the learning environments across Yorkshire and the Humber place a high value on Education and Training and this was appreciated by the educators and learners. There was extensive evidence of good training and overall the learners were very pleased and optimistic with the learning they were receiving. The hygiene/therapy learners in particular displayed genuine passion for their work.

There was evidence that many areas have embraced multi-professional working but some acknowledged that further work is needed in some areas to reach all learner groups and their educators. One example of this was medical emergency training where it was reported that this was done separately by each profession. The majority of learners and educators agreed that it would be better to undergo this training multi-professionally as a team.

An improved awareness of Hygiene & Therapy learners as a group within hospital settings would enable them to be less segregated to improve multi-professional working. There was a general lack of awareness by other dental professions of the scope of practice of this group of learners. In addition Hygiene & Therapy learners would appreciate clearer pathways and the opportunity to be involved in research/leadership/management and other departments to enable wider opportunities.

Both learners and educators came across as being very loyal to their training programmes and a high percentage said that they would recommend their programme and learning environment as a place to learn and to be treated. All educators felt very strongly about the need to promote professionalism and this message came out strongly across all professions.

It was reported that mental health issues are not sufficiently explored pre-placement in order to review any reasonable adjustments. It was felt a stigma was present and issues were avoided at times. In order to ensure reasonable adjustments are in place it will be important to encourage learners at induction to disclose any disabilities not known to their training organisation. When positive disclosure occurs, the 1:1 involvement was felt to be very supportive.

All learner groups reported that their tutors are very knowledgeable and clearly access their own CPD to use in their teaching. Dental Nurses reported that there was a good spread of specialist knowledge amongst their tutor group. However, one learner did report concerns about the number of tutor absences they had personally experienced.

Dental Technicians reported very little opportunity to see patients but thoroughly enjoyed the experience when they did. They were concerned that as a group they were unable to embrace new technology as, whilst the profession has gone digital in great strides, they have been told that the required equipment for use in training and in practice is not affordable.

Undergraduate learners from the University of Leeds displayed evidence of self-directed learning, but were also very much aware and clear about the support mechanisms available to them. Undergraduate learners from the University of Sheffield were felt to be very pro-active, reflective learners who embraced developments positively. Mentorship was available to all years in a cascading fashion. During the first two years, multi-professional training was found to be embedded at Undergraduate level in both Universities with generic competencies in existence. However, as the undergraduate learners progress and become more specialised it was reported that some of the multi-professional training fell aside at the higher level. Increased integration during the latter part of the Undergraduate course would allow for more sustained multi-professional working.

All Educators felt that they received learner feedback and that they had a good peer review process in place. However, the educators were experiencing and the learners reporting universal tension between service delivery and teaching demands. It was reported that insufficient staffing due to service demands impacted negatively on training needs for both learners and educators.

Learners in Dental Speciality and Dental Core acknowledged that the time for service commitment is a good way to learn and despite workload pressures does teach real work skills, for example; teamwork, communication, juggling commitments and prioritisation. A significant amount of Orthodontists wanted to have far more engagement with the ARCP process. They felt that the current ARCP process was a tick box exercise and that feedback was negligible. The panel were concerned that this feedback should be freely available, but are aware that there is currently a national ARCP review taking place which should address this issue. The national

curriculum for Dental Speciality learners in Orthodontic training was reported to be well organised and all assessments were thought to be very clear. All learners and educators felt that the courses provided were patient centred.

All learner groups reported receiving support in their career progression and there was general optimism for the future. Informal career advice from mentors was reported to be helpful. However, new speciality consultants and Hygiene/Therapy educators reported a lack of support during their first year of employment. A period of transitional support and mentorship in the first year of employment would be recommended.

The educators felt that time to teach was an issue across all areas. Staff shortages were felt to be impacting on the available time to both teach and supervise. This was thought not to be just about job planning, but about the learner experience and whether they are ready to progress. Time to give adequate and educational feedback was also flagged as an issue. It is recommended that each host should job plan to ensure adequate provision of time is given to educational supervision.

The Hygiene and Therapy learners were enthusiastic and confident about their future career and job security and reported receiving good feedback from tutors as to how they can develop further following graduation. They would appreciate, however, more interaction with nurses and dental students to be more prepared for work after qualifying. The Undergraduate learners were concerned there would not be sufficient Dental Foundation Training places available on graduation and the Dental Nurse learners were equally unsure whether a job would be available after training is completed. The Dental Core learners were aware that they would not be guaranteed a Dental Speciality post and this created uncertainty about their future. Dental Speciality learners felt they were unable to settle in one place due to the lack of Speciality posts; this had a knock on effect on other areas of their life in terms of getting on the housing market, etc.

All learner and educator groups would recommend their educational environments as a place to learn, to educate and to be a patient.

## Noteworthy practice

*Noteworthy practice is used as a phrase to incorporate educational or patient care initiatives that are worthy of wider dissemination, deliver the very highest standards of education and training or are innovative solutions to previously identified issues worthy of wider consideration.*

A number of areas of notable practice were identified during the review. The list below details these areas:

Learning Environments / Professional Group / Department / Team	Noteworthy practice
Leeds University Undergraduate	International learners on the undergraduate course in Leeds felt that their integration into the school was outstanding. They considered themselves “very well looked after”, were given a clear mentor and felt supported above and beyond.
Leeds University Undergraduates	The Radiology department used dental nurses that had extra training in radiography and were consequently training undergraduate learners to take radiographs. This was thought to be an excellent use of skill mix, resources and the first of its kind in the country.
Leeds University Dental Nurses	Dental nurses reported that the training programme run specifically for dental nurses who will be training with foundation training was excellent and was very positively received.
Sheffield University Dental Core /Dental Speciality learners	The polyclinics run by Sheffield Charles Clifford Dental Hospital provided good support for Dental Core learners and Dental Speciality learners. This positive feedback was reinforced by the educators. However, there was genuine concern that they were going to be phased out. The panel would highly recommend that this area of good practice should continue.
University of Sheffield Dental Nurses	The Dental nurses are encouraged to provide feedback for work placed based assessment during the Dental Foundation training year. This has been positively received by the Dental Foundation learners.
University of Sheffield	The Stepping Stone course provided for all part time teachers at undergraduate level was felt to be very useful to gain further insight into procedures.
Dental Nurses	Dental Nurses reported positively regarding progression in their career in terms of being encouraged and supported to progress to Hygiene/Therapy training. Their skills have been highlighted and encouragement and opportunity given.



Bradford NHS Foundation Trust	Good examples of multi-disciplinary working were reported at Bradford where the Dental Core learners overlap and work together with the medical foundation trainees for a few months.
Dental Core learners South	Positive feedback was reported on the SMART course which the learners felt was enjoyable as well as useful. In addition a lot of the formalised courses for oral surgery were very much appreciated and positively reported on.
Dental Core learners South	Dental Core learners in the Salaried Service reported that once every three months they are able to access a country wide meeting where all levels of the profession learn about the profession.
University of Sheffield Undergraduate	The principles of multi-professional training in Outreach practices were felt to be prevalent by undergraduate learners. All learners involved in Outreach were experiencing team working within one single setting and the feedback was very positive. Learners felt valued within outreach practices which were seen as a real benefit for real life learning. A significant number of learners felt these principles could be replicated in other learning environments; for example Hygiene & Therapy learning environment in a hospital setting.
University of Sheffield Undergraduate	The University of Sheffield Undergraduate learners have an annual meeting with the Dean which they reported on very positively. The meeting made them feel valued, listened to and their feedback is acted upon.
Paediatric Dentistry	Paediatric dentistry are able to access six months primary care experiences to enable them to experience working multi-professionally with school nurses, health visitors, GPs, etc. The possibility of extending this period of learning to other specialities should be examined.
Mid Yorkshire NHS Trust	The two week induction at Mid-Yorkshire NHS Trust was felt to be excellent. Locums were brought into the Trust to cover the first few days which meant there was no working out of hours or on call duties for the new learners.

**Requirements for Improvement**

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
4,3	4.2, 3.1	2016/DENT/01
<b>Requirement</b>	Improve accessibility and training for learners and educators on e-Portfolio	
<b>Educational Environment (s)</b>	All	
<b>Specialty (ies)</b>	All	
<b>Learner Level (s)</b>	Dental Foundation, Dental Core and Dental Specialty learners	
<b>Details of the Concern</b>	<p>The issue of access to and appropriateness of the e-Portfolios was a common theme from both learners and educators throughout the review. Effective e-Portfolio use requires full engagement from educators in order to lead by example. However, a significant number of the educators interviewed reported that they did not know how to effectively use the three e-Portfolios currently in use. The educators felt that the time spent dealing with IT issues impacted on their available time to train and resulted in educators spending less quality time spent with learners.</p> <p>Dental Specialty Trainees raised concerns about the move to ISCP10. Whilst the e-Portfolio used by Dental Foundation learners was regarded as reasonable, the one in use for Dental Core learners was not felt to work. This was partly due to access to the system; for example software issues mean that information gets “lost” or does not appear when logged in, but in the main was felt to be due to the lack of engagement of the educators. A specific concern was raised by all those based within the Leeds learning environment, in that the Leeds IT system was inadequate and could not support the e-portfolio.</p>	
<b>Responsible person and or organisation</b>	James Spencer – Postgraduate Dental Dean	
<b>Action 1</b>	<p>Provide appropriate refresher training for current educators.</p> <p>Review induction for educators to ensure information and guidance on e-portfolios is included.</p>	<b>March 2017</b>
<b>Action 2</b>	Work with Leeds Teaching Hospital to ensure all appropriate systems support e-Portfolios.	<b>March 2017</b>

HEE Domain	HEE Standard	Identification Number
5	5.1, 5.2	2016/DENT/02
<b>Requirement</b>	Development of structured DCT posts with access to defined curriculum, Educational Supervisor and PDP	
<b>Educational Environment (if applicable)</b>	All	
<b>Specialty (ies) (if applicable)</b>	All	
<b>Learner Level</b>	Dental Core, Dental Foundation learners	
<b>Details of the Concern</b>	<p>The Dental Core learners generally felt a lack of progression as they 'go through the course' from years one to three, often with no change in job role or responsibility. It was apparent to the panel that the majority of Dental Core Trainees felt like the 'lost tribe'. The panel were aware that this is a national issue and that as such there needs to be improved definition and strategy. Each host organisation will be required to job plan for the provision of education supervision independent of their administrative and CPD sessions.</p> <p>Some Dental Foundation learners were not aware of their own curriculum. This needs to be signposted more clearly at Dental Foundation induction, as well as throughout the Foundation year.</p> <p>There was a common theme throughout the Dental Core learners in Maxillofacial surgery. A significant number were not aware that there was a new curriculum and reported not having a PDP or an Educational Supervisor which meant they received no form of supervision of education. This was confirmed by educators in Maxillofacial surgery who felt this was one of the reasons why it was so difficult to recruit Training Programme Directors in this speciality.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean with Ghazala Ahmad-Mear, Richard Balmer and Sue Baker (APDs for HEE YH)	
<b>Action 1</b>	Ensure all relevant learners and educators are aware of the new structure of Dental Core Training including the curriculum and RCP processes	<b>Sept 2017</b>
<b>Action 2</b>	All Local Education Providers should ensure that all Education Supervisors have appropriate time for education included in their job plan	<b>Sept 2017</b>
<b>Action 3</b>	Ensure all Foundation learners are made aware of their curriculum at induction.	<b>Sept 2017</b>

HEE Domain	HEE Standard	Identification Number
5, 1	5.1, 1.1	2016/DENT/03
<b>Requirement</b>	Access to an appropriate induction that prepares the learner and ensures safe transition to a safe start to work.	
<b>Educational Environment</b>	All	
<b>Specialty (ies) (if applicable)</b>	All	
<b>Learner Level</b>	Dental Core learners	
<b>Details of the Concern</b>	<p>Induction for Dental Core learners was reported to vary widely across Yorkshire &amp; Humber. This concerned both the learning environment induction and the training induction in terms of skills required, particularly related to medical rather than dental care. This led to Dental Core learners feeling inadequately equipped and supported when first starting in post. This concern related to all organisations but predominantly to support and induction issues in Leeds and Sheffield.</p> <p>The Dental Core learners were not equipped to perform core skills, for example interpretation of a CT scan. The Dental Core learners based in Pinderfields felt vulnerable as the Registrar who is second on call is based in Leeds. This situation resulted in the learner experiencing a lack of confidence in drug prescribing.</p> <p>The Training Programme Directors need to understand the requirements for patient safety. The inexperienced Dental Core learners should not be expected to be on call for the first two weeks in post nor until they have been suitably trained in the medical interventions required of them and should not start the post on night shifts or cross cover with other specialities e.g. ENT.</p> <p>Areas of good practice in induction were cited as the learning environments that provided the didactic two day CITY course, two day shadowing, plus three day induction. The learners felt that this should be introduced as standard induction across Yorkshire &amp; Humber.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean, and Local Education Provider leads	
<b>Action 1</b>	Review and develop school wide induction package.	<b>July 2017</b>
<b>Action 2</b>	Local Education Providers to review local inductions to ensure they are relevant and fit for purpose	<b>July 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>6, 6.5</b>	<b>4.2</b>	<b>2016/DENT/04</b>
<b>Requirement</b>	List of competencies and areas for development for each Undergraduate as they move into Dental Foundation training	
<b>Educational Environment (if applicable)</b>	Dental Schools, Primary Care Dental Practices within Dental Foundation Training	
<b>Specialty (ies) (if applicable)</b>		
<b>Learner Level</b>	Undergraduate, Dental Foundation Training	
<b>Details of the Concern</b>	<p>The Dental Foundation educators reported concerns regarding the lack of information received from Dental Schools regarding the abilities of their graduates as they move into Dental Foundation training. Dental Foundation educators felt that undergraduate training has changed immensely over the past few years and were concerned that as a group they had not been informed of these changes. The learners' clinical experience on graduation is not fed into the start of the Foundation year. As a result a significant number of Dental Foundation educators felt that their expectations of learners' abilities and knowledge did not match the reality and were consequently unable to develop a suitable structured training pathway.</p> <p>Additionally this could potentially cause patient safety issues if Dental Foundation learners were given clinical procedures that were beyond their competence. An assumption of generic competency does not allow for individual variation amongst all learners.</p> <p>The panel felt that greater collaboration between the Universities and HEE YH was required at the point of graduation. In order to increase the amount of support for the Dental Foundation educators, a list of competencies (graduate passport) for each Undergraduate learner as they leave Dental School would help fill this gap and would illustrate areas for development as well as clinical competencies.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean, Chris Deery - Dean of the School of Clinical Dentistry, Sheffield and Helen Whelton - Dean of the School of Dentistry, Leeds	
<b>Action</b>	Raise with COPDEND and Dental Schools Council and discuss possible solutions including the introduction of a graduate passport.	<b>August 2017</b>

HEE Domain	HEE Standard	Identification Number
6	6.5	2016/DENT/05
<b>Requirement</b>	Introduction of a period of Foundation Training for Hygiene & Therapy learners	
<b>Educational Environment (if applicable)</b>	Dental Schools	
<b>Specialty (ies) (if applicable)</b>	Hygiene & Therapy learners	
<b>Learner Level</b>		
<b>Details of the Concern</b>	<p>A significant number of Hygiene &amp; Therapy learners expressed concerns regarding the amount of support they received after leaving Dental School. It was felt there was little provision for help and assistance following graduation and moving into employment. They felt that how they managed in the workforce was dependent on the amount and quality of support provided by the employing practice. As this will be variable the learners felt vulnerable and described their experience as “pot luck” when comparing themselves to Dental Foundation learners who have a structured, formal period of supervision following graduation.</p> <p>The panel felt the launch of Hygiene &amp; Therapy learners straight out into practice could explain attrition in this profession and would recommend a period of structured training, similar to that received by Dental Foundation learners, to be considered for Hygiene &amp; Therapy learners.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean	
<b>Action 1</b>	Explore the possibility of the introduction of a Dental Therapy foundation training programme. This will include considering a funded programme development.	<b>April 2017</b>
<b>Action 2</b>	Explore the possibility of a structured preceptorship, similar to that currently in nursing and other allied health professions.	<b>April 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>1</b>	<b>1.5</b>	<b>2016/DENT/06</b>
<b>Requirement</b>	Improvements to inadequate IT systems	
<b>Educational Environment (s)</b>	Leeds Teaching Hospital, Sheffield Teaching Hospitals	
<b>Specialty (ies)</b>	All	
<b>Learner Level (s)</b>	All	
<b>Details of the Concern</b>	<p>There is a need to address a variety of IT problems that could have a negative effect on patient safety and certainly impacts on all learning. There were reports of missing notes, theatre lists without notes and a clinic with 20 patients booked in and none arriving.</p> <p>The IT system at Undergraduate level was felt to be unsuitable and is impacting on patient safety and training. Scanning of radiographs was reported to not be occurring which led to patients being exposed to radiation on a second occasion unnecessarily. Two systems are in operation – EDMS for clinics and Lorenzo for the booking system.</p> <p>There was criticism of the ‘skinny file’ system which consisted of one piece of paper in a file from clinic which is then couriered to Manchester to be scanned mid-treatment. Patients were reported to be either not turning up to clinics, or turning up to theatre lists with no notes being available. This inefficient system was felt to foster significant patient safety issues.</p>	
<b>Responsible person and or organisation</b>	Alistair Speirs – Clinical Director, School of Dentistry Leeds, Tilly Loescher - Clinical Director of Charles Clifford Dental Services	
<b>Action</b>	Review of EPR and IT systems to ensure there is minimal impact on patient safety	<b>March 2017</b>

HEE Domain	HEE Standard	Identification Number
2, 1	2.2	2016/DENT/07
<b>Requirement</b>	Access to an effective escalation process for concerns	
<b>Educational Environment (if applicable)</b>	Dental Schools, Charles Clifford Dental Hospital	
<b>Specialty (ies) (if applicable)</b>	Undergraduate learners, Dental Speciality learners	
<b>Learner Level</b>		
<b>Details of the Concern</b>	<p>There were reports of undermining behaviour of Undergraduate and Dental Speciality learners. Concerns have been previously raised by learners without any positive action being evident as a result. This has created a culture whereby learners' concerns went unreported as it was felt no action would be taken. For example Orthodontic and Undergraduate learners reported having issues with certain tutors, but took the view that it was better not to say anything due to previous experience. This has been reinforced by a Dental Speciality Educator. In addition one Dental Speciality learner raised concerns in the ARCP in September, but had not heard anything regarding the concern since.</p> <p>An appropriate Exit Survey needs to be in place to ensure that honest feedback is gathered regarding the learners' training experience. The Training Programme Director, Educator and Learner inductions need to include a clear escalation route for issues. Escalation routes could also be included in MIAD.</p>	
<b>Responsible person / organisation</b>	Health Education England, all Local Education Providers	
<b>Action 1</b>	All Local Education Providers to ensure that their induction process includes an escalation route for complaints from learners.	<b>April 2017</b>
<b>Action 2</b>	Ensure appropriate exit surveys are in place to enable data to be available to allow for trend analysis.	<b>April 2017</b>
<b>Action 3</b>	Dental schools to review their use of appropriate exit placement surveys to enable analysis and sharing with Health Education England.	<b>April 2017</b>



<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>1, 5</b>	<b>1.1, 5.1</b>	<b>2016/DENT/08</b>
<b>Requirement</b>	Access to an effective escalation process for concerns	
<b>Educational Environment (if applicable)</b>	Sheffield Teaching Hospitals	
<b>Specialty (ies) (if applicable)</b>	Dental Nurses	
<b>Learner Level</b>		
<b>Details of the Concern</b>	<p>Dental Nurses from the University of Sheffield reported concerns that their education was suffering due to the frequency of Tutor absences. When concerns have been raised they are informed the sessions will be rescheduled, but this does not occur. The Dental Nurses feel their feedback is not properly managed but are unaware of any further escalation process for their concerns.</p> <p>The panel felt that this could have a direct impact on a learner's ability to progress. It is imperative that Dental Nurses are aware of the escalation process in which to air their concerns.</p>	
<b>Responsible person / organisation</b>	Sheffield Teaching Hospitals	
<b>Action 1</b>	To ensure that the induction process includes guidance of escalation routes for concerns.	<b>April 2017</b>
<b>Action 2</b>	To ensure appropriate training and educational support is maintained during tutor absences.	<b>Feb 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>5</b>	<b>5.1, 5.2</b>	<b>2016/DENT/09</b>
<b>Requirement</b>	Access to appropriate training to enable progress	
<b>Educational Environment (if applicable)</b>	All educational environments	
<b>Specialty (ies) (if applicable)</b>	Dental Speciality learners	
<b>Learner Level</b>		
<b>Details of the Concern</b>	<p>Oral Surgery trainees felt they had not been given access to appropriate teaching in Maxillofacial surgery to reach the competencies required to progress.</p> <p>Whilst the panel were aware that this was a national issue and that the curriculum in Oral Surgery is currently being re-written, there is an immediate duty of care requirement to protect the trainee currently in post and ensure they receive the correct training.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean, with lead Oral Surgery TPD	
<b>Action</b>	Ensure that all Oral Surgery training posts are able to adequately deliver the required curriculum.	<b>June 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>1</b>	<b>1.5</b>	<b>2016/DENT/10</b>
<b>Requirement</b>	Provide sufficient resources for learners	
<b>Educational Environment (if applicable)</b>	Sheffield Teaching Hospitals	
<b>Specialty (ies) (if applicable)</b>		
<b>Learner Level</b>	Dental Speciality learners	
<b>Details of the Concern</b>	<p>Some Dental Speciality learners reported a severe lack of facilities. The space they share was felt to be a “cubby hole” with 12 people sharing an office with four computers. One learner reported that when a patient does not arrive, there is nowhere to go and use the time to do alternative administrative work.</p> <p>The lack of resources has a direct impact on the learners’ ability to progress with the required elements of learning. For example; one learner confirmed they had on more than one occasion had to borrow a consultant’s laptop due to the lack of available computers.</p>	
<b>Responsible person / organisation</b>	Sheffield Teaching Hospitals	
<b>Action 1</b>	Review the current facilities to ensure appropriate provision to support learners’ development.	<b>March 2017</b>
<b>Action 2</b>	Provide the required appropriate facilities within 12 months.	<b>Dec 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>3</b>	<b>3.1</b>	<b>2016/DENT/11</b>
<b>Requirement</b>	Ensure Learners are able to attend study days	
<b>Educational Environment (if applicable)</b>	All	
<b>Specialty (ies) (if applicable)</b>		
<b>Learner Level</b>	Dental Core learners	
<b>Details of the Concern</b>	<p>The Dental Specialty learners had funding available for study leave and reported no problems being able to access their study days. However, a significant number of Dental Core learners felt they had no similar framework in place and expressed concerns about being able to attend study days due to the amount of bureaucracy required.</p> <p>Dental Core learners reported being unclear as to what study days they should attend. In addition, when working an on-call rota and holding a bleep, they reported that being released for study days can be problematic. Any learner working night shifts should not be rostered to work the night before a study day and the panel felt that the rota co-ordinator should be responsible for ensuring this does not occur.</p> <p>Trusts need to meet Health Education England's (working across Yorkshire &amp; Humber) standard that all Dental Core learners will attend mandated study days and if necessary the Programme should be run twice to ease staffing pressure.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean / Ghazala Ahmad-Mear - Associate Postgraduate Dean, HEE YH	
<b>Action</b>	Review Dental Core Trainee study day programme to facilitate learner attendance and work in partnership with Local Education Providers to develop this programme.	<b>June 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>5</b>	<b>5.1, 5.2</b>	<b>2016/DENT/12</b>
<b>Requirement</b>	Access to appropriate clinical opportunities	
<b>Educational Environment (if applicable)</b>	Sheffield	
<b>Specialty (ies) (if applicable)</b>	Oral Surgery	
<b>Learner Level</b>	Dental Core	
<b>Details of the Concern</b>	<p>Dental Core learners in Sheffield reported that the number of procedures they perform is low and they do not feel they are exposed to a full range of opportunities. Dental learners in Foundation posts were found to be removing more teeth than Dental Core learners.</p> <p>Whilst it was clear the number of opportunities for Dental Core learners need to increase, the panel recognised that this will require more patients with accompanying appropriate IT systems. This could be achieved by Dental Core learners accessing the community where oral surgery is needed. If necessary this could be achieved in collaboration with primary care.</p>	
<b>Responsible person / organisation</b>	Sheffield Teaching Hospitals, Tilly Loescher - Clinical Director of Charles Clifford Dental Services	
<b>Action</b>	Trust to ensure an appropriate range and number of opportunities for clinical training is available to sufficiently meet the curriculum requirements.	<b>June 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>1</b>	<b>1.1</b>	<b>2016/DENT/13</b>
<b>Requirement</b>	Pro-active approach required to prevent negative educational consequences for learners of staffing levels	
<b>Educational Environment (if applicable)</b>	All educational environments within a hospital setting	
<b>Specialty (ies) (if applicable)</b>	All	
<b>Learner Level</b>	All learners in a hospital setting	
<b>Details of the Concern</b>	<p>Staff shortages were reported to be having a negative impact on all dental learners within a hospital setting. When learners are asked to cover other staff, their level of exposure to training and education reduces. For example the Dental Technician Trainer cohort has reduced by 50%, but they are still delivering the same programme.</p> <p>The panel were concerned at the educational consequences of staff shortages and the potential number of learners who may not be progressing due to gaps in staffing levels. Whilst there was no sense that trainees were doing clinics unsupervised, clinical teaching sessions should be reconfigured in line with staff shortages.</p> <p>Trusts should also be pro-active and inform HEE YH if there is a freeze in recruitment or a gap in staffing levels. Any potential impact of staff shortages on the learning environments will also be assessed as part of HEE processes.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean and all Local Education Providers	
<b>Action</b>	Local Education Providers to review Tariff/Sift funding to ensure an appropriate number of educators are allocated to clinical sessions.	<b>June 2017</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>4</b>	<b>4.2</b>	<b>2016/DENT/14</b>
<b>Requirement</b>	Reduce access to Performer List delays	
<b>Educational Environment (if applicable)</b>	All	
<b>Specialty (ies) (if applicable)</b>		
<b>Learner Level</b>	Dental Foundation	
<b>Details of the Concern</b>	<p>The Dental Foundation Educators expressed concern with Performer List access delays from Primary Care Support England. A Dental Foundation learner can only treat patients for three months post-graduation without a performer number. If the situation continues it will have an impact on training, learner progression and patient treatment pathways as learners will be unable to continue to treat patients.</p> <p>In addition a Dental Foundation Educator did not receive two expected payments from Primary Care Support England as part of his Dental Foundation work which had a massive impact on practice funding.</p> <p>It was recognised that this is a national problem, but it is recommended that communication streams between NHS England Yorkshire &amp; Humber and Primary Care Support England be improved to ensure early awareness of any potential problems is disseminated to all appropriate stakeholders.</p>	
<b>Responsible person / organisation</b>	James Spencer – Postgraduate Dental Dean	
<b>Action</b>	To continue to work with NHS England to find a suitable way forward.	<b>Ongoing</b>

<b>HEE Domain</b>	<b>HEE Standard</b>	<b>Identification Number</b>
<b>1</b>	<b>1.5</b>	<b>2016/DENT/15</b>
<b>Requirement</b>	Improvements to inadequate Radiography facilities	
<b>Educational Environment (s)</b>	Sheffield Teaching Hospitals/Charles Clifford Dental Hospital	
<b>Specialty (ies)</b>	All	
<b>Learner Level (s)</b>	All	
<b>Details of the Concern</b>	<p>Undergraduate learners reported that they have access to X-ray machines but that they are normally broken or being repaired, this has been the case for the past two years. This means that learners have to move patients to equipment further away. Learners expressed concern over moving Root Canal patients fitted with rubber dam and with files in canals which then move out of place as the patient moves to and from the equipment.</p> <p>Another issue relating to this is that qualified nurses have to take the radiographs and have to be taken off clinic in order to do them. This is slowing down treatment of the patient as learners are waiting for nurses to be available.</p>	
<b>Responsible person and or organisation</b>	Tilly Loescher - Clinical Director of Charles Clifford Dental Services	
<b>Action</b>	Review of radiography equipment to ensure there is minimal impact on patient safety. Review of the organisation of nurse availability for taking radiographs.	<b>March 2017</b>