

## Programme Review Findings Form

To be completed by the Visit Chair, please return your fully completed form to the Quality Manager. Incomplete forms will be returned.

Section 1: Details of the Visit	
Programme Name:	Restorative Dentistry
LEP (Trust/Site) reviewed:	Leeds Dental Institute/Charles Clifford Dental Hospital Programme Review held at AM: HEYH, Willow Terrace Road, Leeds PM: HEYH, Don Valley House, Sheffield
Date of Visit:	March 16 2015

Section 2: Findings from the Visit					
No	LEP (Trust & Site)	Area	Issue	Recommendation	Timeline
1.	LDI	WEST	Electronic Patient Record (EPR) 'SALUD' is ineffective. Trainees raised the recurrent issues as a potential patient safety concern. It is not easily possible to review patient history on the system and it is also not possible to review multiple screens at once causing concern that something may be missed in a treatment plan.	The Trainers assured the panel that paper copies of the files are still available and that it is practice for files required to be scanned. It is noted however that this has not been occurring since January. A process must be put in place to ensure "SALUD" is fit for purpose and that the EPR does not pose a patient safety threat.	30/09/2015
2.	LDI	WEST	Trainees reported initiating and completing their own journal club with a check sheet of the correct curriculum to ensure they are meeting requirements.	The trainers assure they follow the correct curriculum, however as there is no audit trail. A trainee directed curriculum delivery is not appropriate. Trainer directed training sessions and other curriculum delivery elements must be incorporated into timetables with a clear audit trail.	30/09/2015

3.	LDI	WEST	Induction (Consent) - Although trainees felt the Induction was very good and enabled them to commence in post on the first day confidently, they advised there had been no consent training or reference to consent at all.	Consent policy and a list of procedures that may require consenting (including levels of trainee that can consent for them) must be included in Departmental Induction.	03/06/2015
4.	LDI	WEST	Trainees advised they have minimal experience and exposure to Cleft and Palate patients.	Trainers must formalise the experience and exposure to Cleft and Palate through liaison with the Cleft Lead	30/09/2015
5.	CCDH	SOUTH	The Trust induction is presented to trainees in August and February. Any new starters outside of these times are not guaranteed to receive a Trust induction. One trainee reported starting in April and having to wait until August for a Trust induction.	The Trust need to ensure that all new trainees receive a Trust induction when starting in their post, irrespective of their start date.	30/05/15
6.	CCDH	SOUTH	Both Trainees and Trainers agreed that the issue of consent would only be encountered for surgical procedures. However, four out of the five trainees were unaware of the Trust consent policy. The Trainers felt that consent training is given as part of their ongoing training.	The Trust need to ensure that all trainees receive training in consent for surgical procedures at induction. The panel recommend the process for a new starter should include an early stage peer review to identify any gaps.	30/05/15
7.	CCDH	SOUTH	Senior support in open clinics format was felt to be easily available, but outside of this it could be sometimes difficult to obtain. For instance, the weekly Poly-clinics were deemed useful but the trainees needed to book in time with consultants so a good degree of planning was required. The Trainees felt they would benefit from increased training and supervision. The Trainers reported they would be willing to increase the regularity of these clinics but lack of space was a problem.	The Trust to audit the teaching accommodation available with a view to increasing the number of Polyclinics sessions if possible. The panel felt that it would be beneficial to the trainees to increase these in view of the enthusiasm shown for increased training and supervisory opportunities.	30/09/15

**Section 3. General comments**

No	LEP (Trust & Site)	Area	
1.	LDI	WEST	Impressive Supervision. All trainees appreciated how accessible the supervision is and how well supported they felt.
2.	LDI	WEST	Trust induction is very good; very informative, well thought out and happens in a timely manner with all IT and IDs provided quickly. Length of 3-4 day departmental induction is good, would be strengthened further with the inclusion of consent information.
3.	LDI	WEST	Curriculum Delivery Resources is good. Study Leave and funding is easily accessible.
4.	LDI	WEST	All trainees enjoy the experience, the trainee culture is good and all trainees would recommend the post without hesitation to peers.
5	CCDH	SOUTH	All Trainees felt there were no barriers to giving their patients safe care and they all would be happy for their families to be treated at CCDH.
6.	CCDH	SOUTH	All Trainees have an assigned Educational Supervisor and appreciate the annual rotation as it enables them to gain a different perspective.
7.	CCDH	SOUTH	The curriculum is delivered on a Trainer advised, Trainee led approach and the Trainees reported that opportunities to carry out procedures are equitably distributed.
8.	CCDH	SOUTH	No problems with bullying and harassment were reported and all the Trainees were aware of the opportunities to feedback via the GMC, HEYH and COPDEND annual survey.
9.	CCDH	SOUTH	The Trainees' work-life balance was reported to be adequate with changes throughout the year, but the Trainees felt no pressures in terms of service provision versus training.

## Final Comments

<b>Section 4: Outcome (please detail what action is requested following the review)</b>	
No further action required – no issues identified	
Monitoring by School	Yes
Speciality to be included in next round of annual reviews	
Level 2: Triggered Visit by LETB with externality	
Level 3: Triggered Visit by LETB including regulator involvements	

<b>Section 5: Decision (To be completed by the Quality Team)</b>
Next programme Review to take place in three years.