

Specialty Monitoring report – corrected in December 2022

Training Commissioner: Health Education England: London, Kent, Surrey and Sussex (LKSS)

Education Quality Assurance Lead: Martin McElvanna

Date of monitoring: October 2022, corrected December 2022

Action number (Requirement)	Progress towards report actions
1 (P10)	<p>Action: LKSS should provide evidence of any follow up actions from the comments in the Lay representative report for ARCP and External representative (SAC) report for ARCP.</p> <p>The GDC further reviewed the full submission of documents in July 2022 and LKSS' observations in the specialty report of February 2022.</p> <p>We consider that this Action had been fully addressed in the original submission paperwork. Requirement P10 is Met.</p>
2 (P13)	<p>Action: LKSS should provide clarification on the relationship between the external ARCP process and the internal LKSS quality assurance process.</p> <p>The GDC further reviewed the full submission of documents in July 2022 and LKSS' observations in the specialty report of February 2022.</p> <p>We consider that this Action had been fully addressed in the original submission paperwork.</p>
3 (P13)	<p>Action: LKSS should provide evidence on how trainees' WBA feedback for orthodontic StR Year 1 WBA feedback for paediatric dentistry StR Year 3 was adopted by the SAC to inform changes and improvements to the ARCP process.</p> <p>The GDC further reviewed the full submission of documents in July 2022 and LKSS' observations in the specialty report of February 2022.</p> <p>We consider that this Action had been fully addressed in the original submission paperwork. Requirement P13 is Met.</p>

<p>4 (P14)</p>	<p>Action: LKSS should provide evidence of how assessment processes are developed, refined, and monitored within the quality assurance framework.</p> <p>The GDC further reviewed the full submission of documents in July 2022 and LKSS' observations in the specialty report of February 2022.</p> <p>We consider that this Action had been fully addressed in the original submission paperwork.</p>
<p>5 (P14)</p>	<p>Action: LKSS should provide evidence of external reports (such as the SAC, is applicable) on ARCPs, together with a description on how these reports are reviewed.</p> <p>LKSS provided further commentary and an update on this action.</p> <p>LKSS explained that the SAC representative and lay representative both report on the ARCP. We had sight of two SAC external reports for Orthodontics and Restorative Dentistry from July 2022.</p> <p>LKSS also shared COPDEND's recent guide for SAC representatives to support them in achieving consistency and quality in their role: Review of Competence Progression: Excellence in External Representation, August 2022.</p> <p>The external representative reports are shared with the Associate Deans (AD) and Postgraduate Dental Dean (PGDD). The SAC report is also submitted to the relevant SAC, with the ARCP outcomes shared. SAC representatives work across all regions to ensure there is some standardisation of the process and consistency in the award of outcomes. Each SAC report and ARCP outcomes reports are reviewed and discussed at the subsequent SAC meeting. Reports from external representative are managed centrally by LKSS' Healthcare Education Team (HET).</p> <p>LKSS gave further commentary on how concerns raised are managed. Action plans are created in discussion with the specialty TPD and shared with the STC as appropriate. Actions identified are reviewed and tracked at regular Dental Operational Group (DENO) meetings. The DENO meetings are focused on delivering to the HEE Quality framework for all dental trainees across LKSS.</p> <p>If there are concerns specifically related to the clinical learning environment, these are escalated to one of the following:</p> <ul style="list-style-type: none"> • North London Quality Operational Group • South London Quality Operational Group • KSS Quality Meeting Oversight Group. <p>The PGDD and ADs attend these meetings and contribute to the monitoring process in addition to providing updates on actions. This is the forum for quality intervention decisions to be agreed.</p>

	We consider that this Action has now been fully addressed. Requirement P14 is Met.
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