

INSPECTION REPORT

Education Provider / Awarding Body:	City & Guilds
Programme / Award / Qualification:	Level 3 Diploma in Dental Nursing (QCF)
Remit and Purpose:	Full inspection referencing the <i>Standards for Education</i> to determine approval of the award for the purpose of registration with the GDC as a dental nurse
Learning Outcomes:	<i>Preparing for Practice (Dental Nurse)</i>
Programme Inspection Dates:	21-22 January (at City & Guilds Office) Remote interviews with providers (full panel via teleconferencing) <ul style="list-style-type: none"> - Learn Direct (13/03/2015) - Bradford college (23/04/2015)
Examination Inspection Dates:	Provider visits (single inspector) <ul style="list-style-type: none"> - Training 2000 Blackburn (16/04/2015) - Birmingham Dental Hospital (17/04/2015) - South Thames College Merton (5/05/2015) - Dental Support Services, Stratford, London (05/05/2015) - Tameside College (16/05/2015) Provider visit (full panel) 2-3 June at John G. Plummer & Associates, Great Yarmouth
Inspection Panel:	Alan Kershaw (Lay Chair) Fiona Sandom (DCP) David Young (Dentist)
GDC Staff:	Luke Melia (Lead QA Officer) Laura Harrison (Support QA Officer)
Outcome:	Recommended that the Level 3 Diploma in Dental Nursing awarded by City & Guilds is approved for the registration of dental nurses to the GDC register.

Inspection summary

The City & Guilds Level 3 Diploma in Dental Nursing was found to be a well-structured award that provided dental nurses with a suitably robust qualification for joining the GDC register. Areas of improvement were identified but overall the inspectors were confident that successful students were achieving the level of safe beginner.

The inspection panel acknowledged that the diploma was delivered nationwide at a variety of centres with the potential for students to be based within different clinical sites (private practices, hospitals, local dental surgeries). This required the structure of the diploma to have an open assessment strategy to fit with the different characteristics of where a student may be working clinically.

The inspectors found that City & Guilds had a strong quality assurance framework in place to ensure there was a consistent standard of student attainment across centres. Centres employed Internal Quality Assurers (IQAs) to sample assessment results at delivery level, which were then reviewed by External Quality Assurers (EQAs) who were GDC registrants employed by City & Guilds. The registrant inspectors were able to attend a number of EQA visits and observed a consistent review of quality and governance by the individuals performing the EQA role.

While the IQA and EQA systems provided assurance that the propriety of assessment techniques was reviewed, the inspectors felt there remained some question in relation to maintaining a level of consistency across providers. They considered that key assessment elements should be introduced to make the assessment of core skills more uniform amongst students taking the diploma. This was particularly important when considering clinical experience, because the variety of patient care a trainee dental nurse would actually be involved in was dependent on the site and format of the training centre at which they had enrolled.

The inspectors felt that more stringent examination protocols were required for the four knowledge based units tested by online examinations, as well as some further traditional standard setting. There was no formal sign-up or pathway for when the examinations could be taken; and a number of informal processes were identified that might be considered loopholes where weaker candidates could potentially pass after enough attempts. In addition, there were only four versions of each exam and no limit on the number re-sits. There was also no time limit on when a re-sit could be taken.

The inspectors did however accept City & Guilds' assurances that learners would not be awarded the diploma unless they had been successful in all four externally tested units in addition to demonstrating competence through the remainder of the units within their student portfolio. The assessment of the evidence within portfolios, whilst varied, was seen to be robustly quality assured.

The inspectors wish to thank all the staff, students, and external stakeholders involved with the inspections. The hard work, co-operation and assistance with arranging the inspector visits and facilitating the teleconferences were very much appreciated.

Inspection process and purpose of Inspection

1. As part of its duty to protect patients and promote high standards within the professions it regulates, the General Dental Council (GDC) quality assures the education and training of student dentists and dental care professionals (DCPs) at institutions whose qualifications enable the holder to apply for registration with the GDC and new qualifications where it is intended that the qualification will lead to registration.
2. The aim of this quality assurance activity is to ensure that these institutions produce a new registrant who has demonstrated, on graduation, that he or she has met the outcomes required for registration with the GDC. This is to ensure that students who obtain a qualification leading to registration are fit to practise at the level of a safe beginner.
3. GDC inspections focus on four Standards, with a total of 29 underlying Requirements. These are contained in the document *Standards for Education*.
4. The purpose of this inspection was to make a recommendation to the GDC to determine whether the programme should be approved as a route for registration as a dental nurse. The GDC's powers are derived under the Dentists Act 1984 (as amended) under The General Dental Council (Professions Complementary to Dentistry) (Qualifications and Supervision of Dental Work) [DCP] Rules Order of Council 2006.
5. Inspection reports may highlight areas of strength and draw attention to areas requiring improvement and development, including actions that are required to be undertaken by the provider. Where an action is needed for a Requirement to be met, the term 'must' is used to describe the obligation on the provider to undertake this action. For these actions the inspectors may stipulate a specific timescale by which the action must be completed or when an update on progress must be provided. In their observations on the content of the report, the provider should confirm the anticipated date by which these actions will be completed. Where an action would improve how a Requirement is met, the term 'should' is used and for these actions there will be no due date stipulated. Providers will be asked to report on the progress in addressing the required actions through the annual monitoring process. Serious concerns about a lack of progress may result in further inspections or other quality assurance activity.
6. The provider of the qualification has the opportunity to provide factual corrections on the draft report. Following the production of the final report the provider is asked to submit observations on, or objections to, the report and the actions listed. Where the inspection panel have recommended that the programme is sufficient for registration, the Council of the GDC have delegated responsibility to the GDC Registrar to consider the recommendations of the panel. Should an inspection panel not be able to recommend sufficiency, the report and observations would be presented to the Council of the GDC for consideration.

The Inspection

7. This report sets out the findings of an inspection of the Level 3 Diploma in Dental Nursing (QCF) awarded City & Guilds. The GDC publication *Standards for Education* (version 1.0 November 2012) was used as a framework for the inspection.
8. The inspection comprised two full inspection panel visits, two full inspection panel teleconferences, and five single inspector visits to individual providers delivering the programme. The first full panel inspection was carried out on 21 and 22 January 2015 at

the City & Guilds offices in London, the second occurred on 2 and 3 June at JG Plummer & Associates, a practice based provider in Great Yarmouth.

9. Between January and June, the inspectors convened two remote meetings (via teleconference) with all External Quality Assurers (EQAs) for City & Guilds; and two internal Quality Assurers (IQAs) from panel chosen providers. During the same period the two registrant members of the panel attended five EQA visits to observe City & Guilds' processes for quality assuring delivery and assessment, and to view student logbooks.
10. This report contains the panel's findings following the whole range of visits and teleconferences. In addition, the inspectors reviewed supporting documentation prepared by the City & Guilds, and their providers, to evidence how the individual Requirements under the *Standards for Education* had been met.

Overview of Qualification

11. The City & Guilds Level 3 Diploma in Dental Nursing (QCF) has been designed to meet the learning outcomes in the GDC's latest curriculum document, *Preparing for Practice* (published in late 2011). It became a live qualification in February 2014. As of January 2015, there were 50 providers approved to deliver the award, with around 1000 students registered to date. This number is expected to grow quickly as all City & Guild providers make the change from the older style diploma. The expectation is that there will eventually be in the region of 126 centres, registering between 1200 to 2200 students per year.
12. The qualification is made up of 11 practical units which are assessed in a student portfolio and four knowledge based units that are tested by online examinations.
13. The programme takes 12 months to two years to complete, depending on the prior experience of a learner and whether they are studying full time or part time. The inspectors identified three teaching models based on where a student is enrolled on the award.
 - Regional corporate providers such as JG Plummer employ student dental nurses and schedule them on clinics in local practices. Their contracts of employment include conditions of learning. Teaching appears to be delivered through classroom contact and eLearning.
 - Dental hospitals such as Birmingham use the various placement opportunities for students to get a breadth of experience on clinic. Teaching appears to be delivered through daytime classroom sessions.
 - College providers such as Tameside have day and evening classes for students who are predominantly trained in General Dental Practices in the local area.

Evaluation of Qualification against the *Standards for Education*

14. As stated above, the *Standards for Education* were used as a framework for this inspection. The provider was requested to undertake a self-evaluation of the programme against the individual Requirements under the *Standards for Education*. This involved stating whether each Requirement was met, partly met or not met; and to provide evidence in support of their evaluation. The inspection panel examined this evidence,

requested further documentary evidence and gathered further evidence from discussions with staff and students.

15. When applying the GDC *Standards for Education*, the inspectors were mindful of the awarding body structure which has City & Guilds creating a programme framework for regional centres to deliver. It was accepted that this arrangement spanned a number of formats based across three primary sites - corporate providers, dental hospitals, and local colleges. Each type of educational set-up was visited over the inspection period to review student portfolios and City & Guilds' quality assurance mechanisms. Teleconferences with key personnel from randomly selected centres were also incorporated into the inspectors' consideration of the award.
16. The inspection panel used the following descriptors to reach a decision on the extent to which the Level 3 Diploma in Dental Nursing (QCF) awarded City & Guilds meets each Requirement:

A Requirement is **met** if:

"There is sufficient appropriate evidence derived from the inspection process. This evidence provides the inspectors with broad confidence that the provider demonstrates the Requirement. Information gathered through meetings with staff and students is supportive of documentary evidence and the evidence is robust, consistent and not contradictory. There may be minor deficiencies in the evidence supplied but these are likely to be inconsequential."

A Requirement is **partly met** if:

"Evidence derived from the inspection process is either incomplete or lacks detail and, as such, fails to convince the inspection panel that the provider fully demonstrates the Requirement. Information gathered through meetings with staff and students may not fully support the evidence submitted or there may be contradictory information in the evidence provided. There is, however, some evidence of compliance and it is likely that either (a) the appropriate evidence can be supplied in a short time frame, or, (b) any deficiencies identified can be addressed and evidenced in the annual monitoring process."

A Requirement is **not met** if:

"The provider cannot provide evidence to demonstrate a Requirement or the evidence provided is not convincing. The information gathered at the inspection through meetings with staff and students does not support the evidence provided or the evidence is inconsistent and/or incompatible with other findings. The deficiencies identified are such as to give rise to serious concern and will require an immediate action plan from the provider. The consequences of not meeting a Requirement in terms of the overall sufficiency of a programme will depend upon the compliance of the provider across the range of Requirements and the possible implications for public protection."

Standard 1 – Protecting patients

Providers must be aware of their duty to protect the public. Providers must ensure that patient safety is paramount and care of patients is of an appropriate standard. Any risk to the safety of patients and their care by students must be minimised

Requirements	Met	Partly met	Not met
1. Students will provide patient care only when they have demonstrated adequate knowledge and skills. For clinical procedures, the student should be assessed as competent in the relevant skills at the levels required in the pre-clinical environments prior to treating patient	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Patients must be made aware that they are being treated by students and give consent	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Students will only provide patient care in an environment which is safe and appropriate. The provider must comply with relevant legislation and requirements regarding patient care	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. When providing patient care and services, students are to be supervised appropriately according to the activity and the student's stage of development	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Supervisors must be appropriately qualified and trained. Clinical supervisors must have appropriate general or specialist registration with a regulatory body	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Students and those involved in the delivery of education and training must be encouraged to raise concerns if they identify any risks to patient safety	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Should a patient safety issue arise, appropriate action must be taken by the provider	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Providers must have a student fitness to practise policy and apply as required. The content and significance of the student fitness to practise procedures must be conveyed to students and aligned to GDC student fitness to practise guidance. Staff involved in the delivery of the programme should be familiar with the GDC Student Fitness to Practise Guidance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

GDC comments

Requirement 1: Students will provide patient care only when they have demonstrated adequate knowledge and skills. For clinical procedures, the student should be assessed as competent in the relevant skills at the levels required in the pre-clinical environments prior to treating patient (*Requirement Met*)

The inspection panel was assured that candidates would be involved in patient care only when they had demonstrated the adequate knowledge and skills. To some extent this was considered by the provider or employer at the initial stages of accepting a person on to the diploma. The inspectors noted that Individual centres had different intake policies but there was always some evaluation of a student's suitability for a role as a dental nurse in training,

which included an interview and could include aptitude tests. The GDC permits dental nurses in training to work if they are waiting to start a registrable qualification.

Once accepted onto the programme, the inspectors heard from staff and students that an initial assessment of skills and experience was made before the programme of study commenced. This identified the specific training needs of candidates, the support and guidance the student would require, and an evaluation of any Recognition of Prior Learning (RPL).

The inspectors saw evidence that student inductions took place at each of the providers that were seen during the inspection period. A checklist in the student portfolios was followed and signed-off with signature from the learners, a work place mentor and the training provider. Although there could be some degree of variation from provider to provider, the inspectors were assured that all students would undertake an initial programme of study that included core topics such as patient safety, confidentiality, and working in a clinical area.

The External Quality Assurers (EQAs) held responsibility for reviewing the suitability of the local induction procedures. EQAs were GDC registrants employed by City & Guilds to run the schedule of on-site visits to quality assure all aspects of delivery of the diploma. The inspectors were informed that, should an EQA find any deficiencies in the area of induction, an action plan would be devised with further training for the provider to complete within a short, monitored time frame.

Requirement 2: Patients must be made aware that they are being treated by students and give consent (*Requirement Met*)

Within the sample of providers visited, the inspection panel felt that there was consistent evidence to show patients were being made aware that a student dental nurse was assisting with their treatment. The initial evidence cited by City & Guilds was their document *Supporting Customer Excellence Centre Manual*. This guidance stated that assessors must ensure that any member of the public involved in the student's assessment gives informed consent, especially if there is any risk of intrusion into areas of privacy and/or confidentiality.

Initially, the inspectors were concerned that this remit for obtaining consent was too narrow but were reassured by the broader scope of consent being obtained at the providers visited. Name badges clearly indicated a candidate was in training and patients were informed in advance that a student nurse would be assisting the dentist. There was evidence that this aspect was checked by the EQAs on their visits. The panel felt that, within the context of the relationship between a patient and a dental nurse, this level of identification and consent was appropriate.

Requirement 3: Students will only provide patient care in an environment which is safe and appropriate. The provider must comply with relevant legislation and requirements regarding patient care (*Requirement Met*)

The inspection panel saw evidence that all centres and practices went through an accreditation process to deliver the diploma. A standard Qualification Approval Process was followed that tested the suitability of the clinical areas and staff resources for supervision and assessment. Centres were required to have appropriate Health & Safety policies and procedures which included ensuring that work environments were safe and complied with all relevant legislation. Centres had responsibility to ensure that workplaces were regularly monitored through internal quality assurance mechanisms. This facet is routinely checked during EQA visits.

Requirement 4: When providing patient care and services, students are to be supervised appropriately according to the activity and the student's stage of development (*Requirement Met*)

The inspection panel was told that it was a requirement from City & Guilds that all centres must have agreements in place with workplaces that specified roles and responsibilities. There was evidence that centres must confirm that students have workplace mentors who will liaise with the primary assessor to ensure an appropriate level of supervision was maintained at all times. The IQAs held responsibility for internally monitoring supervision and support for their students. This area was then audited during EQA visits to ensure compliance.

The inspectors discussed supervision and support with some students and members of staff and felt there was a strong understanding of the need for tailored supervision according to a candidate's needs and stage of development. The inspectors were confident that any deficiencies in this respect would be highlighted and addressed within the local procedures, or flagged during an EQA visit.

Requirement 5: Supervisors must be appropriately qualified and trained. Clinical supervisors must have appropriate general or specialist registration with a regulatory body (*Requirement Met*)

The inspection panel saw evidence that City & Guilds placed an expectation on their centres for students to be supervised by appropriately qualified supervisors at all times. Resource requirements for centres stated that staff delivering the qualification should be able to demonstrate that they meet the following occupational expertise requirements:

- Be occupationally competent or technically knowledgeable in the areas for which they are delivering training and/or have experience of providing training. This knowledge must be current and to the same level as the training being delivered;
- Hold a qualification recognised by the General Dental Council for registration and demonstrate on-going occupational competence;
- Have recent relevant experience in the specific area they will be assessing and up to date knowledge of the legislation pertaining to decontamination within the relevant sector.

The inspectors were told that centre staff may undertake more than one role, for example tutor and assessor or internal quality assurer, but cannot internally verify their own assessments. It was seen that this area was once again audited during EQA visits.

Requirement 6: Students and those involved in the delivery of education and training must be encouraged to raise concerns if they identify any risks to patient safety (*Requirement Met*)

The inspection panel considered there to be a good understanding of the importance of raising concerns in their discussions with staff, students, IQAs and EQAs.

Formal teaching of the student responsibility to raise concerns was seen in Unit 302: *The role and responsibility of a dental nurse*. It included a learning outcome entitled *Understand the role and responsibility of a dental nurse*, which covered safeguarding patients from harm, consequences of unprofessional behaviour and safe working practices.

The inspectors noted that City & Guilds relied on the duty of care of assessors and focused

their guidance on stopping assessments where patient safety was at risk. There was a stated expectation that assessors should report any such concerns to a workplace supervisor and to the centre's IQA.

The inspectors felt that the City & Guilds guidance was of a more narrow focus than was actually seen to be occurring in practice. IQAs reported a wider remit that covered day to day delivery for each student on the programme. There was an understanding that the reporting of concerns must be encouraged and proactively monitored at a practice level. This sentiment was echoed by all EQAs, who expected to be able to review a log of any patient safety concerns and relevant literature for how matters were managed. This was consistently described by individuals involved across the three teaching models of private provider, dental hospital, and college-based delivery.

The inspectors agreed that City & Guilds should review its guidance to reflect more accurately what was happening operationally. More comprehensive guidance for students and staff to raise concerns, in line with the current understanding of the IQAs and EQAs, would add further value to the programme in this area.

Requirement 7: Should a patient safety issue arise, appropriate action must be taken by the provider (*Requirement Met*)

The inspection panel was confident that appropriate action would be taken by City & Guilds should a patient safety issue arise. IQAs, EQAs, local staff and students offered assurances that, should they come forward with a patient safety issue, the management at centre level and City & Guilds could be trusted to take all necessary action. In corroboration, senior management at City & Guilds showed confidence in the IQA and EQA systems, which the inspectors were told would be used to manage any patient safety incidents with targeted action plans, training and/or referrals, in the more serious cases, for fitness to practise action.

As outlined in the previous Requirement (6), IQAs and EQAs described a consistent approach to reporting patient safety concerns and managing them at the centre level. However, the inspectors had some concerns that detailed examples were limited and the EQA process appeared somewhat at arms length with no overall central record held by City & Guilds. While the inspectors appreciated the diploma was offered nationwide, in a variety of formats, it was felt that there should be closer recording of the nature of patient safety incidents occurring in regard to student dental nurses. Recording such data in more detail would provide practice level information that could identify gaps or patterns of behaviour and be fed back into the curriculum at a strategic level. The inspectors agreed that this could be of real value to the diploma as the programme develops.

Requirement 8: Providers must have a student fitness to practise policy and apply as required. The content and significance of the student fitness to practise procedures must be conveyed to students and aligned to GDC student fitness to practise guidance. Staff involved in the delivery of the programme should be familiar with the GDC Student Fitness to Practise Guidance (*Requirement Part Met*)

The inspection panel was informed that City & Guilds expected centres to have a policy concerning students' fitness to practice in order to comply with GDC requirements; and that this should be communicated to staff and students as part of the programme of delivery. It was within the EQA's remit to check that the policy was in place and monitor how centre staff and students were made aware of the procedures.

The inspectors agreed that the IQAs, EQAs, staff and students showed a good awareness of their respective responsibilities in conveying and understanding fitness to practise policy. However, the inspectors felt that City & Guilds needed to be more involved in this key aspect of

the programme and take a lead in defining appropriate policy. While the expectation on local providers provided some assurances, it was agreed that there must be more centralised management at awarding body level that included the annual recording of all incidents of student fitness to practise in relation to the diploma. Such data was not available at the inspection, which was disappointing. In light of the culture change across the health care sector since the publication of the Francis Report (February 2013), the inspectors felt it was now a reasonable expectations for providers to be in a position to audit the most serious breaches of professional standards by their students, where fitness to join the GDC register had been questioned. Such information will be an expectation for all future GDC annual monitoring exercises.

Actions

Req. Number	Actions for the provider	Due Date (if applicable)
2	City & Guilds should revise its Qualification Handbook to reflect the procedures for identifying student dental nurses that were seen in operation within practices and centres delivering the diploma. Name badges and other appropriate signifiers should be made mandatory for all clinical environments a dental nurse in training works in	Update to be provided through the 2016 GDC Annual Monitoring exercise
6	City & Guilds should revise its Qualification Handbook to reflect the attitudes and good practices in relation to raising concerns that were seen in operation at practice and centre levels. Formal guidance for students and staff to raise concerns, in line with the current understanding of IQAs and EQAs, should be developed at the earliest opportunity	Update to be provided through the 2016 GDC Annual Monitoring exercise
8	City & Guilds must provide an annual summary of all issues of student fitness to practise across their centres. This information will be an expectation for all future GDC annual monitoring exercises.	Update to be provided through the 2016 GDC Annual Monitoring exercise

Standard 2 – Quality evaluation and review of the programme
The provider must have in place effective policy and procedures for the monitoring and review of the programme

Requirements	Met	Partly met	Not met
9. The provider will have a framework in place that details how it manages the quality of the programme which includes making appropriate changes to ensure the curriculum continues to map across to the latest GDC outcomes and adapts to changing legislation and external guidance. There must be a clear statement about where responsibility lies for this function	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The provider will have systems in place to quality assure placements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Any problems identified through the operation of the quality management framework must be addressed as soon as possible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Should quality evaluation of the programme identify any serious threats to the students achieving learning outcomes through the programme, the GDC must be notified at the earliest possible opportunity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Programmes must be subject to rigorous internal and external quality assurance procedures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. External examiners must be utilised and must be familiar with the learning outcomes and their context. Providers should follow QAA guidelines on external examining where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15. Providers must consider and, where appropriate, act upon concerns raised or formal reports on the quality of education and assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

GDC comments

Requirement 9: The provider will have a framework in place that details how it manages the quality of the programme which includes making appropriate changes to ensure the curriculum continues to map across to the latest GDC outcomes and adapts to changing legislation and external guidance. There must be a clear statement about where responsibility lies for this function (*Requirement Met*)

The inspection panel was informed that overall responsibility for the qualification was with the Portfolio Manager, who was supported by three sector specific consultants - a Chief Examiner, a Standardisation External Quality Assurer (SEQA) and a Technical External Quality Assurer (TEQA). All three of these roles shared a responsibility for informing City & Guilds, as the Awarding Organisation, of any significant changes to legislation and GDC requirements which would impact the delivery of the qualification.

Should any changes be made to the diploma, City & Guilds held the responsibility to provide updates to the assessment centres and make all necessary amendments to guidance documents, unit descriptions and remits, and any associated programme or assessment materials. It appeared the EQAs and IQAs were closely involved in such processes.

Overall, the inspectors were satisfied that the City & Guilds management framework had a suitable structure; but there was some sense that the pool of expertise currently being utilised was too small. It was seen that the same person was fulfilling the SEQA and TEQA roles in addition to performing a considerable schedule of EQA duties for a large number of centres. While benefits could be appreciated by the panel for someone being a SEQA or TEQA and also undertaking EQA visits, working in all three titles was perceived as a risk as sufficient cover was not apparent.

In addition, the inspectors were not satisfied that the Chief Examiner and a SEQA/TEQA provided an 'external' view of the diploma. The Chief Examiner was described as an internal role that scrutinised the validity of examination questions, coverage of learning outcomes and completed work to devised pass rates. This was clearly a function integral to operational delivery of the programme's assessment structure, not an outside overview of its processes. The same can be said for the SEQA/TEQA who was also fulfilling EQA responsibilities and was evidently very important to programme function. While technically these individuals may be considered external by City & Guilds, the inspectors felt that the roles could not accurately be described as 'external' as understood in the sense of appointing an external examiner to a qualification. This has impacted later Requirements (13, 14 and 22), where actions will be needed.

**Requirement 10: The provider will have systems in place to quality assure placements
(Requirement Met)**

The inspection panel noted that City & Guilds used a risk analysis system at what was described as Qualification level to determine the degree of quality assurance to which centres will be subjected, when delivering that qualification.

City & Guilds assigns each qualification an associated Specific Qualification Risk level on a scale of Low, Medium and High, according to a range of mitigating factors, risks and resource issues. This risk level is for internal use by City & Guilds.

It was explained to the inspectors that the specific risk category a qualification is allocated gets established by the Portfolio Team responsible for the award. This was then added to a shared Qualification Risk log that took into consideration other relevant factors such as Health & Safety, physical resources, media interests etc. This criterion is then considered, along with centre risk and local knowledge to determine the type and range of quality assurance activities to be scheduled by the quality team for each centre delivering the diploma.

City & Guilds centres wishing to offer a qualification must go through an approval process before delivery and assessment can commence, demonstrating that they have the appropriate resources to do so. Once Qualification approval is granted, centres will also be subject to ongoing quality assurance monitoring. This is undertaken for each qualification that a centre is delivering.

As part of the post-approval external quality assurance activities, centres are monitored (through desk-based activities and actual centre visits) and are awarded a Qualification Approval Risk Status for each City & Guilds qualification they deliver. This is based upon the centre's ability to meet the criteria outlined in the City & Guilds document *Our Quality Assurance Requirements*.

Each Qualification Approval Risk Status is based on a risk-based assessment strategy, and have the following outcomes:

- **Low** - The centre has the ability to register learners and claim for certificates at will. This is also known as Direct Claims Status. Any issues identified, could be easily corrected without further consequence and do not have an adverse effect on the learner.
- **Med** - The centre may register learners at will. However, any claims for certification must be recommended by a City & Guilds EQA then confirmed by the quality team. Issues identified could potentially damage the integrity, credibility and validity of the qualification and/or be detrimental to the learner
- **High** - The centre is unable to register or certificate learners. Issues identified could have a high impact on the integrity, credibility and validity of the qualification or the effective operation of a centre as a whole, if corrective action is not taken quickly

The inspectors heard that, at the centre level, City & Guilds placed a requirement on providers to have documented quality systems that can be audited at EQA visits. These were seen to be in place at the providers inspected.

It was observed that, when an EQA visited a centre or practice for monitoring, they completed a Centre Activity Report (CAR) that detailed how well centres were delivering and assessing learners. The inspectors reviewed the approval monitoring criteria outlined in the City & Guilds document *Our Quality Assurance Requirements* and considered the guidance appropriate. The EQA made recommendations, in the CARs, for the continuing or changing of the Qualification Approval risk status based on their findings. This was further reviewed with relevant historical information by the City & Guilds Quality Co-ordinators to confirm or amend the EQA's recommendation.

The inspectors were informed that there had been situations when centres were required to complete actions for their status to improve. Recent examples included the instance of an IQA who left a provider. This resulted in the centre's right to certificate students being suspended until a suitable replacement was employed. At another centre, the implementation of EQA-led standardisation training was seen as a result of the findings during an EQA visit. The exercise included a three month follow-up to review how well the training was being embedded.

Requirement 11: Any problems identified through the operation of the quality management framework must be addressed as soon as possible (*Requirement Met*)

The inspection panel saw that the main vehicle for identifying threats to delivery at a centre and practice level was the EQA visits. The six individuals in this role are the front line of the City & Guilds quality assurance process and vital to the integrity of the diploma.

The registrant inspectors were able to attend a number of EQA visits and considered the process to be suitably robust and consistent. The centres were informed six weeks in advance that an EQA visit would be happening. A candidate list, sampling plan and staff list were requested and used to target who needed to be spoken with and what further information would be looked at.

At the visits, it was observed that EQAs held a meeting with all relevant staff and provided feedback from City & Guilds before going through a process of checking centre documentation, which included:

- Minutes of course meetings
- Registration, CPD, training and staff support
- Correspondence with City & Guilds
- Checks to see updated material from City & Guilds was incorporated into the file and modules
- IQA-assessor feedback documentation
- Assessor and IQA role specifications
- Standardisation meeting minutes
- Staff CV
- Fitness to practise documentation
- Local QA file.

The EQA also followed up on any discrepancies found from previous visits and had the opportunity to observe teaching or interview students. In addition, the EQAs were responsible for sampling assessment decisions and the IQA's strategy for sampling student portfolios. This element of their work will be considered at Requirement 16.

The EQA report was seen to be completed within 2 days of the visit and sent to the territory office, who processed it and sent it on to relevant centre. There was an IT system, *Walled Garden*, for this to be done electronically.

The inspectors noted a lack of formal guidance literature surrounding the EQA role. Unlike the IQA role and process, which had a comprehensive City & Guilds guidance document - *Guidance on Internal Quality Assurance of Qualification* – the inspectors could not easily identify a formal role profile or guidance for an EQA. Additionally, common practices that the EQA performed were not formalised. For example, there was evidence that calibration meetings were a regular feature at centre level with EQA involvement, though City & Guilds guidance suggested this was only a potential mechanism for standardisation. Additionally, the review of student portfolios was made easier by a colour-coordinated system for marking notes on assessment sheets. Black was for student, blue was for assessor, green was for IQA, and red was for EQA. It was felt these approaches should be formally set down in the awarding body's literature.

Overall, the inspectors were assured that the EQA system was working well, with a commendable dedication demonstrated by those in the role. However, it was seen that only six individuals were responsible for a diploma that is delivered nationally. Whilst there was assurance that any problems identified through the EQA process would be addressed, the inspectors felt that City & Guilds should be mindful of the sustainability of such a small team.

Additionally, it was seen that the two most experienced EQAs were responsible for the bulk of the centres, having more than double the total amount of centres covered by the four other EQAs. The inspectors were not certain that suitable back-up strategies were in place or that succession planning had been considered in sufficient detail. Though it was heard by the panel that there was good initial training for the newer EQAs, including one shadowing visit and one supported visit, the inspectors felt that the role was so integral to the success of the diploma that extra support should be devised for less experience EQAs. Achieving a more even distribution of centres between team of EQAs should also be a short to medium-term goal.

Requirement 12: Should quality evaluation of the programme identify any serious threats to the students achieving learning outcomes through the programme, the GDC must be notified at the earliest possible opportunity (*Requirement Met*)

The inspection panel was satisfied by the framework outlined in earlier Requirements together

with the IQAs' and EQAs' appreciation of the importance of identifying areas of risk as early as possible. Personnel at City & Guilds showed a good understanding of their responsibilities as an awarding body of a registerable qualification. The inspectors were therefore confident that any serious threats to students' achieving learning outcomes would be identified with the GDC notified at the appropriate juncture.

Requirement 13: Programmes must be subject to rigorous internal and external quality assurance procedures (*Requirement Part Met*)

The inspection panel was satisfied that City & Guilds subjected its programme to a wide array of internal quality assurance, with a small but dedicated team of sector-specific personnel. At a centre level, there appeared appropriate scrutiny from City & Guilds using its risk-based system of low, medium and high categorisations outlined in Requirement 10. Nonetheless, the inspectors agreed that for this Requirement to be met, a conventional external examiner was needed as detailed at Requirement 9 and closely linked to Requirements 14 and 15.

Requirement 14: External examiners must be utilised and must be familiar with the learning outcomes and their context. Providers should follow QAA guidelines on external examining where applicable (*Requirement Not Met*)

As referenced earlier in this Standard, the programme did not have an external examiner in the conventional sense of employing someone external to the qualification (and employment of the awarding body), to review process and overall assessment strategy. The inspectors were mindful of the set-up of the award and that some degree of externality was provided by the very nature of the qualification's structure. Further assurances were provided by the quality assurance measures that had already been outlined, which satisfied the inspectors that appropriate rigour and validity was seen in the assessment outcomes. However a traditional external examiner was considered to be a vital component in any current professional qualification; and City & Guilds must work as quickly as possible to bring in an external examiner or verifier to produce an annual independent overview of the award.

Requirement 15: Providers must consider and, where appropriate, act upon concerns raised or formal reports on the quality of education and assessment (*Requirement Part Met*)

As outlined in earlier Requirements, the inspection panel reviewed evidence that indicated City & Guilds had acted on centre level concerns in relation to education and assessment through the IQA and EQA processes. Though there was no evidence to suggest that formal reports would not be addressed in similar fashion, the inspectors felt that without the possibility of reviewing external examiner reports, there was limited information for how an external quality evaluation would be processed. While every indication was seen that City & Guilds would develop an appropriate procedure for feeding such material into the programme design, the inspectors felt they could not deem this Requirement met without specific evidence in the area.

Actions

Req. Number	Actions for the provider	Due Date (if applicable)
9	City & Guilds should review the number of dental specific experts it currently utilises within its strategic framework. The work should be spread across a number of appropriately qualified individuals with suitable cover in place should someone become unavailable at short notice	Update to be provided through the 2016 GDC Annual Monitoring exercise

<p>11</p>	<p>(i) City & Guilds should produce formal guidance with a role specific profile for External Quality Assurers (EQAs). The procedures for EQA visits should be formally captured within this literature</p> <p>(ii) City & Guilds should review whether the current provision of EQAs is sufficient. Efforts should be made to ensure work is spread across a number of appropriately qualified individuals with suitable cover in place should someone become unavailable at short notice</p> <p>(iii) City & Guilds should review whether the current provision for training new EQAs is sufficient.</p> <p>(iv) Achieving a more even distribution of centres within the team of EQAs should be a short to medium term goal for City & Guilds.</p>	<p>Update to be provided through the 2016 GDC Annual Monitoring exercise</p>
<p>14</p>	<p>City & Guilds must work as quickly as possible to bring in an external examiner or verifier to produce an annual independent overview of the award. This must follow the traditional structure of an external examiner with annual reports available for scrutiny by outside auditors</p>	

Standard 3– Student assessment

Assessment must be reliable and valid. The choice of assessment method must be appropriate to demonstrate achievement of the GDC learning outcomes. Assessors must be fit to perform the assessment task

Requirements	Met	Partly met	Not met
16. To award the qualification, providers must be assured that students have demonstrated attainment across the full range of learning outcomes, at a level sufficient to indicate they are safe to begin practice. This assurance should be underpinned by a coherent approach to aggregation and triangulation, as well as the principles of assessment referred to in these standards	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. The provider will have in place management systems to plan, monitor and record the assessment of students throughout the programme against each of the learning outcomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Assessment must involve a range of methods appropriate to the learning outcomes and these should be in line with current practice and routinely monitored, quality assured and developed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Students will have exposure to an appropriate breadth of patients/procedures and will undertake each activity relating to patient care on sufficient occasions to enable them to develop the skills and the level of competency to achieve the relevant GDC learning outcomes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. The provider should seek to improve student performance by encouraging reflection and by providing feedback ¹	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Examiners/assessors must have appropriate skills, experience and training to undertake the task of assessment, appropriate general or specialist registration with a regulatory body	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22. Providers must ask external examiners to report on the extent to which assessment processes are rigorous, set at the correct standard, ensure equity of treatment for students and have been fairly conducted	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23. Assessment must be fair and undertaken against clear criteria. Standard setting must be employed for summative assessments	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24. Where appropriate, patient/peer/customer feedback should contribute to the assessment process	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

¹ Reflective practice should not be part of the assessment process in a way that risks effective student use

25. Where possible, multiple samples of performance must be taken to ensure the validity and reliability of the assessment conclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. The standard expected of students in each area to be assessed must be clear and students and staff involved in assessment must be aware of this standard	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

GDC comments

Requirement 16: To award the qualification, providers must be assured that students have demonstrated attainment across the full range of learning outcomes, at a level sufficient to indicate they are safe to begin practice. This assurance should be underpinned by a coherent approach to aggregation and triangulation, as well as the principles of assessment referred to in these standards (*Requirement Part Met*)

The inspection panel agreed that the evidence provided in advance of the inspection demonstrated that the learning outcomes for a dental nurse from *Preparing for Practice* were mapped appropriately against the programme assessments. Further consideration of the assessment strategy satisfied the inspection panel that students had demonstrated attainment across the full range of learning outcomes though it was felt that some aspects of the structure could still be improved.

The diploma is structured into 15 modules, with 11 practical units assessed in a student portfolio, and four knowledge-based units tested by online examinations. To be successful, learners must have:

- Produced a completed portfolio of evidence for units 268, 301, 302, 304, 306-312 containing examples of observed practice in the learner’s workplace. Additional evidence to support practical competence may include reflective accounts, assignments, assessor devised questions, outcomes of research-based activities and witness testimonies.
- Successfully completed four online (*Evo/ve*) multiple choice tests covering units 305, 313-315

As set down in the student handbook, the diploma’s prime source of evidence for competency-based learning outcomes is assessor observation. Assessor requirements are defined in the City & Guilds programme handbook, which will be considered in detail under Requirement 22. Specific to Requirement 16, the inspectors reviewed the validity and quality assurance of the decisions made by assessors, and how City & Guilds assured itself, as the awarding body, that appropriate achievement of all learning outcomes was maintained across the various formats of such a widely delivered award.

Portfolio of evidence

The inspectors saw that the compilation, assessment and review of student portfolios were the primary methods for evidencing student competency. City & Guilds did not provide specific portfolio templates for centres to use, though a generic example was available for new providers to model their version on. The portfolio could be held electronically where the IT facilities were available.

It was seen by the panel that, outside of professional observation, a wide variety of additional sources of information could be used to evidence student achievement in their portfolios. These included:

- Work products – These were any relevant products of a learner’s work
- Confidential records – Assessor consideration of confidential material that could not feature in student portfolios
- Questioning – Oral or written questions with answers recorded. This often occurred during professional observations
- Professional discussion – A structured review of learners’ practice with outcomes captured through audio recording or written summary
- Original Certificates – Certificates of training and attendance that are checked for validation
- Projects / Assignments – Developed with assessor to cover an outstanding area of assessment
- Reflective Accounts – Description of learners actions and reflection on why particular actions or behaviours were necessary
- Case Studies – These were taken from real life practice and needed to be authenticated by an assessor
- Witness Testimony – Colleagues, allied professionals and individuals with whom the learner works were permitted to provide testimony to their performance for assessor review
- Expert Witnesses – An assessor-chosen expert witness could be responsible for observing learners’ practice and providing testimony for portfolio units

The inspectors understood that schemes of work for each module were designed in advance by assessors and matched to the learner and the specific topics of the unit. The grading for all portfolio units was simply pass or fail.

The EQAs play a vital part in standardising portfolio evidence. The inspectors who attended the visits observed a thorough process of review being undertaken in regard to assessor decisions. There was evidence that IQAs were sampling the decisions of all assessors with newer people in the role having extra support and being subject to wider evaluation. It was seen that EQAs scrutinised a predetermined sample of portfolios from students at various points in the course, plus some randomly selected on the day. The EQAs considered the evidence submitted for the achievement of outcomes, the feedback provided by assessors, and the IQA portfolio sampling strategy. The inspectors saw examples of assessor and IQA decisions being flagged for review by the EQA, and discussed with centre staff to ensure standardisation.

The inspectors considered that the depth of knowledge within some of the student work was not high, though adequate for a safe beginner. There was concern that weaker candidates could eventually get through the programme with enough support. Measures should be explored by City & Guilds to discern when a student is to be deemed an outright fail.

While it was appreciated that some element of freedom was necessary in the structure of the portfolio, to fit with the differing formats of delivery, the inspectors were not certain that the balance was quite right yet. Further development should be done to build up core pieces of work to cover key assessment areas in units so that they are more uniform. This would allow for a better perception of weak and strong students, which wasn't always apparent in the sample of portfolios reviewed. The expertise of the EQAs should be utilised in this area. All six individuals indicated a clear understanding of the standard of work they were expecting of a successful candidate. The inspectors agreed that formally capturing this insight would be of real value to the programme.

Online Examinations

The inspectors considered the four knowledge based units, 305, 313, 314 and 315, that were assessed using individual online assessments. It was seen that the tests were fixed in form and consisted of multiple choice questions. The current design consisted of 25 questions in a 40 minute test on the Evolve secure system, which could be accessed only by following appropriate process and with specific permissions.

The inspectors were told that content of the tests was based on the assessment criteria of each of the units. The questions had been written by experts in the field of dental nursing. There was a rigorous editing process for composing questions, which was overseen by the TEQA, SEQA and Chief Examiner, who determined the pass mark using the Angoff or modified Angoff standard setting technique. Students sat the examinations in controlled conditions abiding by the Joint Council for Qualifications (JCQ) protocols and City & Guilds procedures.

The inspectors were satisfied that the exam questions were of an appropriate design but could not fully understand the exact process for determining the pass mark. While the Angoff method is well recognised, the inspectors were unable to see how Angoff could have been employed when all four examinations had a uniform pass mark of 76%. The inspectors agreed that this area required some review and clarification.

The inspectors noted the examinations were on demand and there was no formal sign-up or pathway for when the examinations should be taken. In addition, a number of informal processes were seen that might be considered loopholes where weaker candidates could potentially pass the assessments after enough attempts. There was a range of versions of each of the exams to allow for re-sit opportunities, however these were limited, and students could re-sit the exams any number of times. There was also no time limit on when a re-sit could be taken, so technically a re-sit might be done on the same day. The inspectors accepted the assurances from City & Guilds that such a situation was protected against with the IQA and EQA systems, but it was felt that a formal protocol should be developed at the earliest opportunity.

The inspectors accepted City & Guilds' assurances that learners would not be awarded the diploma unless they had been successful in all four externally tested units in addition to demonstrating competence through the remainder of the units within their student portfolios. The assessment of the evidence within portfolios, whilst varied, was seen to be robustly quality assured.

Requirement 17: The provider will have in place management systems to plan, monitor and record the assessment of students throughout the programme against each of the learning outcomes (*Requirement Met*)

The inspection panel was satisfied that, within the awarding body structure, City & Guilds had developed an appropriate system to plan, monitor and record the overall attainment of students

on the diploma. The focus of central calibration was the online examinations, with all results scrutinised for patterns, anomalies and suitability of questions. Close scrutiny of how questions aligned to learning outcomes was evident, with some psychometric analysis of data occurring every six months.

Student portfolios were not monitored directly by City & Guilds. It was the responsibility of IQAs and EQAs to ensure that a consistent and robust level of evidence was being seen from centre to centre. The IQA and EQA processes have been discussed at length in connection with earlier Requirements. After discussions with the individuals in the roles, the inspectors were satisfied that there was a system in place that assured, within a reasonable margin, that competency based assessments were suitably planned, monitored and recorded at centre level.

The inspectors appreciated that stringently setting a particular framework for the portfolio work might prove counter-productive as the programme is delivered in such a variety of formats. However, as indicated in Requirement 16, further work is required by City & Guilds to ensure the right balance is always being struck between allowing centres to operate a design that suits the local region and site of training, and a consistent and safe level of skill being achieved and represented in the evidence reviewed in student portfolios.

Requirement 18: Assessment must involve a range of methods appropriate to the learning outcomes and these should be in line with current practice and routinely monitored, quality assured and developed (*Requirement Partly Met*)

The inspection panel accepted that there was a range of assessment that could be used as a method for evidencing competency in a student portfolio but, as outlined in earlier Requirements, the options and combinations of work were undefined and there was no mandatory element for students to pass units. Assessors decided in discussion with a student what assessment could be completed to evidence a competency, how observed practice would take place, and how many observations there would be.

While the IQA and EQA systems provided assurance that the propriety of the chosen assessment techniques was reviewed, the inspectors felt there remained some question in relation to maintaining a level of consistency across providers in such an open-ended system. It was thought that compulsory evidence to illustrate student achievement in key assessment areas should be established, with City & Guilds taking the lead in setting out what constitutes an appropriate range of attainment for any style of delivery, and the minimum number of observations required to be valid evidence. This element is particularly important when auditing the breadth of clinical experience each student acquires, which will be explored further under Requirement 19.

Requirement 19: Students will have exposure to an appropriate breadth of patients/procedures and will undertake each activity relating to patient care on sufficient occasions to enable them to develop the skills and the level of competency to achieve the relevant GDC learning outcomes (*Requirement Partly Met*)

The inspection panel was satisfied that the 11 competency units set a schedule for students to be assessed in a suitable range of clinical experience. However, the variety of patient care a trainee dental nurse would actually be involved in appeared to be dependent on the site and format of the training centre. Within the current framework, it was difficult for the inspectors to appreciate how City & Guilds assured itself that exposure to an array of clinical environments was comparable, student to student, practice to practice.

The inspectors appreciated that the structure of the diploma had to be dynamic to allow for the various forms of delivery; but more work was needed to monitor the different characteristics of

the delivery formats, particularly in relation to exposure to a range clinical situations. It was seen that whether the programme was delivered in private practice, hospital based, or college based could significantly influence the breadth of care a student dental nurse assisted with.

The inspectors were satisfied that the IQA and EQA process provided enough assurances that a certain degree of consistency was maintained throughout the delivery of the diploma. However it was thought this area must be reviewed to ensure every effort is made to keep student experience as consistent as possible across the delivery sites. This may mean that a student nurse studying in a small practice may need to be swapped between practices or sent for sessions at different locations.

Requirement 20: The provider should seek to improve student performance by encouraging reflection and by providing feedback² (*Requirement Met*)

The inspection saw evidence that feedback and reflective practice was well embedded in the delivery of the diploma. The relationships between the student and work placement supervisor, and between student and assessor, appeared to encourage reflection with an emphasis on feedback being provided and planned into schemes of work. This element was seen to be reviewed by the IQAs and EQAs at the providers visited.

Requirement 21: Examiners/assessors must have appropriate skills, experience and training to undertake the task of assessment, appropriate general or specialist registration with a regulatory body (*Requirement Partly Met*)

Assessor requirements were defined in the City & Guilds programme handbook, which was reviewed by the inspection panel. The inspectors had some concerns in relation to the consistency of the language in this area. The stipulations for assessors fluctuated between 'should' have a particular attribute and 'must' have a particular attribute. This included possessing registration with the GDC where it appeared to be possible for someone to work in the role of assessor without registration for up to 18 months (while registration was obtained under an action plan). Though assurances were given that this would be a rare occurrence in practice, the inspectors felt the guidance language should be consistent and registration (with a relevant regulatory body) be a 'must' have attribute for assessors.

The inspectors saw that witnesses could provide testimony for student performance for an assessor to consider. City & Guilds guidance described these individuals as colleagues, allied professionals and individuals with whom the learner worked. There was also provision for an assessor to sanction an expert witness, who could then observe learners' practice and provide testimony for portfolio units. It was stated that expert witnesses must meet the following criteria:

- the same vocational expertise as assessors
- a working knowledge of the competences on which their expertise is based
- current expertise and occupational competence i.e. within the last two years, either as a dental nurse, dental practitioner or oral health manager or a healthcare professional with expertise in decontaminating instruments and devices in a health setting. This experience should be credible and clearly demonstrable through continuing learning and development.

The inspectors were informed that learners could have more than one assessor or expert

² Reflective practice should not be part of the assessment process in a way that risks effective student use

witness involved in the assessment process to ensure an occupationally competent individual had made the assessment. Where more than one assessor or expert witness was involved, there had to be a named assessor who was responsible for the overall co-ordination of the assessment for the learner. They held responsibility for integrating, planning and directing assessment for the whole where other assessors or expert witnesses had been involved.

The inspectors heard that the co-ordinating assessor must be a qualified assessor, who was occupationally competent, occupationally experienced and experienced in the assessment of work-based learning. It was expected that co-ordinating assessors would work closely with IQAs to ensure standardised practice and judgements within the assessment process.

Requirement 22: Providers must ask external examiners to report on the extent to which assessment processes are rigorous, set at the correct standard, ensure equity of treatment for students and have been fairly conducted (*Requirement Not Met*)

As referenced in Standard Two, the programme did not have an external examiner in the conventional sense of someone external from the qualification reviewing process and overall assessment strategy. The inspection panel agreed that a traditional external examiner was a vital component in any current professional qualification and City & Guilds must work as quickly as possible to bring in an external examiner or verifier to provide a more independent overview of the award.

Requirement 23: Assessment must be fair and undertaken against clear criteria. Standard setting must be employed for summative assessments (*Requirement Partly Met*)

The inspection panel was satisfied that the assessment model overall was fair and set against clear criteria. However, the inspectors agreed that standard setting for the online examinations required improvement.

As outlined in Requirement 16, the inspectors were informed that the Angoff method was used to standard-set the exams, though this appeared to be incorrect as all four online examinations had a uniform pass mark of 76%. The mechanism for standard setting seemed to be a process of detailed discussion between the Chief Examiner, SEQA, TEQA and City & Guilds assessment staff. It was appreciated that this provided a discernible level to pass the exam but this could be strengthened with the addition of more formal standard setting.

As referenced under earlier Requirements, City & Guilds must also consider how best to maintain a consistent level of achievement within student portfolios. While the IQA and EQA systems provided assurance of the propriety of the chosen assessment techniques, the inspectors felt there needed to be further standardisation in the schemes of work for key assessment areas across the competency-based units evidenced within the student portfolio.

Requirement 24: Where appropriate, patient/peer/customer feedback should contribute to the assessment process (*Requirement Partly Met*)

The inspection panel noted that peer and patient feedback could be utilised within schemes of work in student portfolios, but there was no compulsory component in any of the competency units. There was some evidence of general patient feedback being sought at the providers visited, though the information collected did not appear linked to assessments. It was felt that the programme would benefit from having an element of mandatory peer and patient feedback within the assessment strategy.

Requirement 25: Where possible, multiple samples of performance must be taken to ensure the validity and reliability of the assessment conclusion (*Requirement Met*)

The inspection panel reviewed the pre-inspection mapping provided in advance of the inspection within Annex Two of the GDC inspection documentation. This document requested that the School outline when and how the relevant learning outcomes from *Preparing for Practice* were to be assessed across the programme.

The initial mapping, though basic, was triangulated with supporting evidence from oral discussions and further paperwork considered over the course of the inspections. The inspectors were satisfied that multiple samples of performance were being taken, but felt the mapping could be improved. The creation of key assessment elements for student portfolios would help improve the mapping as they could be used as a point of reference for blueprinting. It could identify essential schemes of work that every student should complete, and set out the range of supplementary evidence that would be acceptable to support achievement of a learning outcome.

Requirement 26: The standard expected of students in each area to be assessed must be clear and students and staff involved in assessment must be aware of this standard (*Requirement Partly Met*)

The inspection panel was assured that the standard expected of students was clear to students at the point of delivery, where assessors worked with candidates to design schemes of work. It was felt that the assessment standard was largely well communicated to centres through the City & Guilds documentation. The IQA and EQA processes were integral to this system's operating successfully in practice with a degree of consistency and standardisation. As outlined under earlier Requirements, the inspectors felt that core pieces of work to cover key assessment areas were required to benchmark the level of student attainment captured within the portfolios.

Staff and students seen at the centres during the inspection period indicated that they were aware of the expected standard and felt the assessment model suited their needs and the style of the qualification.

Actions

Req. Number	Actions for the provider	Due Date (if applicable)
16	<ul style="list-style-type: none"> (i) City & Guilds should seek to review the key assessment areas in units, and the associated guidance, so that all students are assessed in a more uniform manner. The expertise of the EQAs should be utilised in developing this area (ii) City & Guilds must look to introduce more stringent examination protocols. There must be a defined number of re-sit opportunities that includes a specific minimum timeframe before the next attempt can be made. No student should be permitted to re-take the examination after attempting every available version of an examination 	Update to be provided through the 2016 GDC Annual Monitoring exercise

18	City & Guilds must introduce some elements of compulsory evidence for the student portfolios to illustrate student achievement in key assessment areas. The awarding body should take the lead in setting out what constitutes an appropriate range of attainment for any style of delivery, and the minimum number of observations required to be considered valid evidence	Update to be provided through the 2016 GDC Annual Monitoring exercise
19	City & Guilds must review how much influence the site and format of training has on the variety of patient care a trainee dental nurse will be exposed to. Every effort must be made to keep student experience as consistent as possible across the delivery sites. This may mean that a student nurse studying in a smaller practice may need to be supported in swapping between other practices or sent for sessions at different locations	Update to be provided through the 2016 GDC Annual Monitoring exercise
21	City & Guilds must review its guidance for assessors to make GDC registration a mandatory requirement for anyone fulfilling the role.	Update to be provided through the 2016 GDC Annual Monitoring exercise
23	City & Guilds must include a traditional method of standard setting for its online examinations. There must be evidence that a technique such as Angoff or modified Angoff has been incorporated in each individual version of the examinations created	Update to be provided through the 2016 GDC Annual Monitoring exercise

Standard 4 – Equality and diversity

The provider must comply with equal opportunities and discrimination legislation and practice. They must also advocate this practice to students

Requirements	Met	Partly met	Not met
27. Providers must adhere to current legislation and best practice guidance relating to equality and diversity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Staff will receive training on equality and diversity, development and appraisal mechanisms will include this	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Providers will convey to students the importance of compliance with equality and diversity law and principles both during training and after they begin practice	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GDC comments

Requirement 27: Providers must adhere to current legislation and best practice guidance relating to equality and diversity (*Requirement Met*)

The inspection panel considered the City & Guilds equality and diversity policies. The document Supporting Customer Excellent Centre Manual was seen to have a comprehensive and regularly monitored section on equality and diversity, which included current legislation and best practice.

There was clear evidence of a commitment to promoting equality of opportunity and embracing diversity at all centres offering the diploma. This area was within the remit of the EQAs and seen to be checked at the visits the inspectors attended.

Requirement 28: Staff will receive training on equality and diversity, development and appraisal mechanisms will include this (*Requirement Met*)

The inspection panel saw evidence that EQAs monitored centre staff training records to ensure that training in equality and diversity was kept up to date at each centre. A strong commitment to maintaining skills in the area was seen at John G. Plummer & Associates, where the review of training was included in staff appraisals.

Requirement 29: Providers will convey to students the importance of compliance with equality and diversity law and principles of the four UK nations both during training and after they begin practice (*Requirement Met*)

The inspection panel was assured that students were taught the importance of compliance with equality and diversity legislation. Guidance from City & Guilds emphasised that local compliance needed to be taken into account when assessing the area. Students at John G. Plummer & Associates showed a good awareness of equality and diversity issues and of their responsibility to uphold current best practice.

Summary of Actions

Req. Number	Action	Observations Response from Provider	Due date
2	City & Guilds should revise its Qualification handbook to reflect the procedures for identifying student dental nurses that were seen in operation within practices and centres delivering the diploma. Name badges and other appropriate signifiers should be made mandatory for all clinical environments a dental nurse in training works in	City & Guilds has started the review of the Qualification handbook to meet the recommendation. The updated documentation will be available during the Annual Monitoring exercise.	Update to be provided through the 2016 GDC Annual Monitoring exercise
6	City & Guilds should revise its Qualification handbook to reflect the attitudes and good practices in relation to raising concerns that were seen in operation at practice and centre levels. Formal guidance for students and staff to raise concerns, in line with the current understanding of IQAs and EQAs, should be developed at the earliest opportunity	City & Guilds has started the review of the Qualification handbook to meet the recommendation. The updated documentation will be available during the Annual Monitoring exercise.	Update to be provided through the 2016 GDC Annual Monitoring exercise
8	City & Guilds must provide an annual summary of all issues of student fitness to practise across their centres. This information will be an expectation for all future GDC annual monitoring exercises.	City & Guilds will investigate a system for recording issues of student fitness to practice across all centres. The information will be available during the Annual Monitoring exercise.	Update to be provided through the 2016 GDC Annual Monitoring exercise

9	<p>City & Guilds should review the number of dental specific experts it currently utilises within its strategic framework. The work should be spread across a number of appropriately qualified individuals with suitable cover in place should someone become unavailable at short notice</p>	<p>City & Guilds is confident that we have sufficient number of EQAs. We did recognise that centres needed to be more evenly allocated across the EQAs currently active. A full review has already taken place and centres more evenly distributed. We are satisfied that this will be supported by our continuous monitoring of allocation. Updated information on the allocation will be available during the Annual Monitoring exercise.</p>	<p>Update to be provided through the 2016 GDC Annual Monitoring exercise</p>
11	<p>(i) City & Guilds should produce formal guidance with a role specific profile for External Quality Assurers (EQAs). The procedures for EQA visits should be formally captured within this literature</p> <p>(ii) City & Guilds should review whether the current provision of EQAs is sufficient. Efforts should be made to ensure work is spread across a number of appropriately qualified individuals with suitable cover in place should someone become unavailable at short notice</p> <p>(iii) City & Guilds should review whether the current provision for training new EQAs is sufficient.</p> <p>Achieving a more even distribution of centres within the team of EQAs should be a short to</p>	<p>(i) City & Guilds provides extensive guidance to our team of EQAs. This includes:</p> <ul style="list-style-type: none"> • Role profiles • EQA manual, user guides, exemplars <p>In addition EQAs have access to :</p> <ul style="list-style-type: none"> • 2 day EQA inductions for new EQAs • An internal TAQA centre for new EQAs working towards the EQA qualifications • An annual EQA portfolio briefing • Monthly EQA Quality updates • EQA portfolio updates throughout the year, including Portfolio alerts • Performance management processes and procedures • Annual EQA reviews <p>City & Guilds will be happy to provide all evidence available during the Annual Monitoring exercise.</p>	<p>Update to be provided through the 2016 GDC Annual Monitoring exercise</p>

	medium term goal for City & Guilds.	(ii) As specified in paragraph 9 the reallocation of centres per EQAs has already taken place.	
14	City & Guilds must work as quickly as possible to bring in an external examiner or verifier to produce an annual independent overview of the award. This must follow the traditional structure of an external examiner with annual reports available for scrutiny by outside auditors	City & Guilds uses industry professionals in the development of the qualification and employs external consultants for verification and for marking assessments who must be familiar with the Learning Outcomes of the qualifications they are working on. We will investigate the feasibility of contracting an external consultant to undertake an additional independent review of the award.	Update to be provided as soon as action is completed
16	<p>(i) City & Guilds should seek to review the key assessment areas in units, and the associated guidance, so that all students are assessed in a more uniform manner. The expertise of the EQAs should be utilised in developing this area</p> <p>(ii) City & Guilds must look to introduce more stringent examination protocols. There must be a defined number of resits that includes a specific minimum timeframe before the next attempt can be made. No student should be permitted to re-take the examination after attempting every available version of the examination</p>	<p>City & Guilds is in the process of producing additional guidance for dental nursing providers, to include guidance around assessment. The City & Guilds EQAs will be fully involved in the production of this guidance</p> <p>(ii) City & Guilds is conducting a review of the examination protocols and will introduce restrictions around the number of resits permitted, to include a minimum timeframe before the next attempt.</p>	Update to be provided through the 2016 GDC Annual Monitoring exercise

18	City & Guilds must introduce compulsory evidence to illustrate student achievement in key assessment areas. The awarding body should take the lead in setting out what constitutes an appropriate range of attainment for any style of delivery, and the minimum number of observations required to be valid evidence	City & Guilds has started the process of review of the guidance for providers around assessment.	Update to be provided through the 2016 GDC Annual Monitoring exercise
19	City & Guilds must review how much influence the site and format of training has on the variety of patient care a trainee dental nurse will be exposed to. Every effort must be made to keep student experience as consistent as possible across the delivery sites. This may mean that a student nurse studying in a smaller practice may need to be supported in swapping between other practices or sent for sessions at different locations	City & Guilds feels that the responsibility for training sits firmly with the centre rather than the Awarding Organisation. The ability to offer appropriate training and assessment is considered at initial approval of a provider. We monitor any potential issues via EQA activity. Further guidance for providers is also provided in the City & Guilds centre manual. Evidence of this guidance will be provided during the Annual Monitoring exercise.	Update to be provided through the 2016 GDC Annual Monitoring exercise
21	City & Guilds must review its guidance for assessors to make GDC registration a mandatory requirement for anyone fulfilling the role.	City & Guilds has started the process of review of the guidance for assessors to ensure the requirement for GDC registration is highlighted.	Update to be provided through the 2016 GDC Annual Monitoring exercise
23	City & Guilds must include a traditional method of standard setting for its online examinations. There must be evidence that a technique such as Angoff or modified Angoff has been incorporated in each individual version of the examinations created	City & Guilds can confirm that each version of the on line tests have been developed using Angoff. We do have extensive evidence of Angoff grade boundaries setting for each version of the test and will be happy to provide the	Update to be provided through the 2016 GDC Annual Monitoring exercise

		evidence during the Annual Monitoring exercise.	
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Observations from the provider on content of report

City & Guilds would like to take this opportunity to thank colleagues from the General Dental Council (GDC) and the panel of inspectors for providing their report following the inspection of the City & Guilds Level 3 Diploma in Dental Nursing.

The inspection at our Offices in January 2015 was conducted in a considered and professional manner. The subsequent remote interviews and provider inspections were also conducted in a professional manner and the inspectors were keen not to cause too much disruption to our providers. This was much appreciated by City & Guilds and the providers alike.

We are grateful for the opportunity to comment on the report and respond to the recommendations

City & Guilds values the input of the GDC and will use the feedback in order to improve the Level 3 Diploma in Dental Nursing.

We will address the recommendations and actions in the report to ensure that our qualification continues to meet the criteria for registration with the GDC.

Recommendation to the GDC

The inspectors recommend that this qualification is approved for holders to apply for registration as a dental nurse with the General Dental Council.