

Report Addendum

Programme provider:	University of Dundee - BDS
Education Quality Assurance (EQA) Lead:	Angela Watkins
Education Associates (EAs)	Amanda Orchard – Chair Aardhna Tugnait – Dentist Registrant Pamela Ward – Dentist Registrant
Date of Inspection:	Sign off meeting – 9 th April 2024 Exams & Inspection 7 th & 8 th May 2024 Board Assessment 16 th May 2024

Summary

The purpose of this inspection was to conclude the new programme inspection for the 4D BDS programme which took place in 2023. During COVID-19 the Scottish government announced that all students in Scotland would complete an additional year of study to ensure they are not disadvantaged by the pandemic.

The panel found the exams to be fit for purpose and are assured that students will graduate as safe beginners. The ISCE's are clearly mapped to the GDC Learning outcomes and there is clear standard setting, and all staff are aware of these standards.

The panel observed a calibration meeting with the team prior to the ISCEs, this was then followed up with several re-calibration meetings for each station after the first few students. This allowed the staff to discuss initial findings and calibrate further and the panel found this to be a good practice.

The ISCEs are very well organised and delivered in a relaxed environment. The panel discussed this format of the ISCE's with the External Examiners and concluded that the ISCEs are fair and support both the students and staff wellbeing during a stressful process. The panel did not observe any concerns that this format was giving any unfair advantages or disadvantages to students. The panel are assured that this model works for this programme, however, professionalism of the formal process should be always maintained.

This was the first time that the ISCE had been run and the panel felt the exam was fairly conducted.

A training video was sent out to examiners prior to the assessment to aid consistency of approach. The teamwork between examiners during the calibration processes and the revisiting calibration during the exam was noteworthy.

It is assumed that, while maintaining its validity and reliability, in moving forward the ISCE has the potential for further development, Consideration could be given to the further separation of the stations and making more use of actors.

Positive feedback was received from External Examiners who were present during the calibration process and throughout the examination. Provision was made for an External Examiner to attend remotely as there was travel disruption.

It was observed that a candidate who was upset during the assessment was adequately supported.

During the Inspection the panel were given a progress update on the actions required following the Inspection in 2023.

Requirement number	Action	Progress	Requirement Status
9	The next cyclical review will take place in 2025, the provider must inform the GDC of changes to programme using the GDC Programme Modification process.	The school acknowledges the updated process for reporting programme modifications to the GDC and the process was followed for some recent changes to the programme.	Met
11 & 17	The provider must return, as a minimum, to pre-Covid patient feedback collection.	The programme has returned to pre-Covid patient feedback in academic year 2023-24. The panel found the patient feedback to be of good quality.	Met
20	External Examiners must not be involved in the examination of candidate.	This requirement was actioned with immediate effect.	Met
7 & 14	The provider should make better use of the LiftUpp system by capturing and unifying all sources of information on students' progress especially relating to limits on practice and context to be available in one central place.	The school has met with staff from LiftUpp to explore whether LiftUpp would be able to act as a central resource for all sources of student progress information. Presently, LiftUpp software is unable to do this. The panel are assured that the provider has developed a central resource where all information regarding student progress can be accessed by staff.	Met
8	Fitness to Practice Policy should be reviewed regularly and in line with university internal quality assurance schedule.	The panel found that the document had been amended and no longer had any version control. The provider must ensure that all formal policies have a named person of responsibility and a review date.	Partly Met

		<p>The provider should consider producing a local process to ensure that GDC guidance is clearly linked.</p> <p>During the inspection the panel met with the students where the panel were concerned that their understanding of the FtP Policy and Raising Concerns Policy was limited. This did not reflect the findings of the panel during the 2023 student interviews; therefore, the provider must ensure that these areas continue to be presented until the end of the programme.</p>	
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The panel have now determined that Requirements 9, 11, 14, 17 20 are now considered Met & 8 remain as Partly Met. No further inspection activity is required, and the provider will be return to annual monitoring during 2025-26.

Following this Inspection the recommendation from the panel is that the programme is sufficient to allow students to become registrants with the GDC.