INSPECTION OF THE UNIVERSITY OF CENTRAL LANCASHIRE ORTHODONTIC THERAPY PROGRAMME

ROYAL COLLEGE OF SURGEONS OF EDINBURGH

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REPORT OF THE INSPECTORS

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OVERVIEW

This report describes the General Dental Council (GDC) inspection of the Orthodontic Therapy programme of the University of Central Lancashire (UCLan).

We were noted the commitment and enthusiasm of the staff we met involved with delivering the curriculum both at UCLan and in the workplace. We were impressed with the dedication of the students. The appointment of the Practice Learning Facilitators helps to ensure the quality of the workplace training experience and adds to the high levels of support students receive on the programme. We noted that feedback received from the students had been acted upon, and changes were planned for the next cohort. Students gain an extensive amount of clinical experience after the introductory course. There are excellent facilities at UCLan and we observed that the students are full members of the university.

We felt that as students commence their practical experience in the workplace, rather than at UCLan, the institution should provide firm directions regarding the amount of supervision required by workplace mentors, when the student first treats patients. We also felt that the programme would be improved by a further registrant, in addition to the workplace mentor, observing the student working clinically. We felt that the monitoring and analysis of student treatment figures should be undertaken on a regular basis. The students felt that the introductory course could be improved by spreading out the required lectures over this period and introducing practical work at an earlier stage.

We considered that all learning outcomes in Developing the Dental Team (DDT) will be met by this programme.

Purpose and GDC process

1. The General Dental Council (GDC) is responsible for defining the outcomes required of dentist and dental care professional (DCP) education and training (i.e. the knowledge, skills and attitudes that an applicant for registration must demonstrate in order to join the dentists or DCP register). It quality assures education and training programmes which are intended to lead to registration with the GDC, to ensure that the outcomes it requires are met by such programmes.

2. The purpose of the inspection was to assess whether the UCLan Orthodontic Therapy programme is sufficient for registration with the GDC as an orthodontic therapist (OT). This programme is comprised of the UCLan and Institute for Postgraduate Dental Education training programme and the final examination delivered by the Royal College of Surgeons of Edinburgh (RCS Edinburgh).

3. This report sets out the findings of a one-day inspection of the programme using the assessment principles and guidelines set out in Developing the Dental Team (DDT) as a benchmark. The report highlights the many areas of good practice, but also draws attention to areas where issues of improvement and development could be made or need to be addressed. The report is based on the findings of the inspection and on consideration of supporting documents prepared prior to the inspection and made available during the inspection. The programme providers and awarding body will be given the opportunity to correct any factual errors and then submit their observations. The report will be considered by the Education Committee (or other designated board or committee) of the GDC, under its new council, and will be published on the GDC website.
4. The students will sit the RCS Edinburgh Diploma in Orthodontic Therapy examination. This was last inspected in 2008 for the Bristol Orthodontic Therapy Course. An inspection will be made of the examination in November or December 2009 and a separate report will be prepared.

Introduction

5. We met all of the students on the course and the course leader. We also met several people involved with the delivery of the curriculum at UCLan, staff involved with student welfare and education, as well as course tutors and three workplace mentors (including the course leader, who is also a workplace mentor). Additionally, a number of workplace mentors had completed detailed questionnaires about the programme.

6. There were 16 students in the first cohort of the programme, though one had left the programme at the time of the inspection. All students were registered with the GDC, with most registered as dental nurses and some as hygienists and/or therapists. There are no plans to change the number of students in the annual intake.

7. The programme runs for 45 weeks and begins with a 4 week introductory course based at UCLan. There are a number of study days throughout the programme, which are also based at UCLan. For the remainder of the programme, the students are based at their workplaces across the United Kingdom.

8. We were impressed with the modern facilities available at UCLan, including the clinical skills laboratories. Students are supplied with a laptop computer loaded with appropriate software, and with email and internet access, for the duration of the programme.

9. In the workplace, students are taught and supervised by an orthodontist registered on the GDC specialist list. The orthodontist’s experience, the training they have received and their workplace are all considered as part of the application process. They must be accepted as a mentor for the student to enter the programme. Regular workplace visits are undertaken by Placement Learning Facilitators (PLFs). PLFs perform a number of roles in the programme (see paragraph 21).

10. We were pleased to note that students are full members of the university and are provided with access to full university facilities.

Curriculum: Management and Delivery

11. The foundation of the curriculum is taught in the four-week introductory course and supplemented by the study days. The introductory course and the study days incorporate both theoretical and practical components. This programme follows a similar format to the other orthodontic therapy programmes offered in the UK.

12. The workplace mentors all attended two days’ training which focused on assessment. The students attended the first training day, where the mentors worked together to agree the basic level of attainment for exercises and to define what was meant by competence. The trainers that we spoke to, or received a questionnaire from, felt that the training received was fit for purpose.

Addressing the Learning Outcomes in DDT

13. We felt that the learning outcomes of DDT will be covered by this training programme. The RCS Edinburgh final examination will be inspected to ensure that the learning outcomes will be adequately tested.
Core Course and Study Days

14. The introductory course aims to deliver the knowledge and skills to prepare students for clinical practice.

15. The students do not have their first clinical experience until they begin in the workplace. Prior to treating patients, students first practise on phantom heads before progressing to undertaking exercises, such as taking impressions and fitting separators, on each other.

16. At the end of the introductory course, the students sit a practical test. The student will progress to the workplace training element of the programme if they pass. We were assured that students will not pass if patient safety is in question.

Workplace Training

17. Students spend the majority of the programme in workplace training. The workplace training is normally based in the practice where they are employed. All workplace mentors are on the GDC specialist list for orthodontics. The mentors supervise the students when performing procedures and check the treatment before the patient leaves the surgery.

18. We felt that the programme would benefit from the students' clinical work being observed and assessed, at some stage, by someone other than their own mentor. The current structure of the programme means that only the mentor will formally assess the student working clinically on patients. Ideally the person should also be an orthodontist (and be registered on the GDC specialist list).

19. A normal week in practice consists of a student spending around 3.5 days working clinically (under supervision), 1 day undertaking self-directed study, plus a minimum of 1 hour in a tutorial with their mentor. We were informed that for future cohorts, the minimum tutorial time will be extended to 2 or 3 hours per week.

20. Mentors and students are provided with guidance about what to discuss in tutorials by the course leader. However, the mentor and students could adapt the tutorials according to the needs of the student.

21. We were concerned that there were no firm guidelines issued regarding the level of support provided by the mentor for the student’s first patient treatments. We felt that this was important, as these are the first treatments that the student will undertake on the programme. For this cohort, all the mentors we met appeared to provide adequate support for this period; some mentors spent the whole first week acting as nurse to the student. It could not be guaranteed that all mentors, in this or in future cohorts, would do this. In the interests of patient protection, we feel it is necessary for the programme providers to specify an appropriate level of support for the first stages of the workplace training.

22. UCLan has appointed four part-time Placement Learning Facilitators (PLFs) to ensure the quality of the experience in the workplace setting, that students are well supported, and to address any individual issues that they have. The role also exists to make sure that the mentor has had the necessary guidance and support to undertake their role. The university has experience of using staff in this role in their nursing programme. Each workplace has been visited by a PLF on two occasions. Mentors and students meet with the PLF on these occasions, in addition to meeting them on study days and contacting them by telephone or email. For future years, one person will fill the role of the PLF for all of the workplaces.
23. It was confirmed that if a mentor was to withdraw from the programme, UCLan would ensure that the student was found a substitute workplace to continue their training.

24. We were informed that it can be difficult for the students to get significant experience of adult orthodontic patients. We understand that the majority of adult patients are treated privately and would not be appropriate for student practice. We would encourage the programme leads to find means to increase student exposure to adult patients so that they can meet the relevant learning outcomes in DDT.

**Quality Assurance systems**

25. We were pleased to note that there was a course management committee with student representation. The notes of these were available at the inspection.

26. We felt that careful monitoring of student exposure to adequate types and numbers of procedures, throughout the programme, should be used by mentors to ensure each student has appropriate clinical experience. We felt that the processes which exist to collate and manage student clinical data could be made more robust and transparent.

27. We felt that the inclusion of the PLF role aided the quality assurance of the programme.

**Assessment**

28. We were pleased that the training of workplace mentors has a focus on the assessment of students. Mentors use a three-point competency system to assess students work in the practice; work is marked as Novice, Beginner, or Competent.

29. Students are assessed by ‘Direct Observation of Procedural Skills’ (DOPS) competency assessments throughout the programme, where the mentor observes and marks the student’s work. There are a number of competencies for students to complete and they cannot progress to the final exam until these have been completed successfully.

30. Students also must undertake a reflective learning log whilst in the workplace setting. This log must be completed satisfactorily for a student to progress to the final examination.

31. The final summative assessment is the RCS Edinburgh Diploma in Orthodontic Therapy examination, which will be inspected in November/December 2009.

32. Students will sit a final university examination in order to gain entry to the RCS examination. An external examiner has been appointed for the university examinations. He is sent the final university examination papers, as well as students’ marked work. He also examines in the case presentations and vivas for these examinations.

**Staffing issues (including workplace trainers)**

33. Workplace mentors can contact the course leaders by telephone and email. There was also an internet message board set up for mentors and the course tutors to talk to each other. The mentors we spoke to felt well supported in their role and very positive about the programme.

34. Some workplace trainers we spoke to, or had received questionnaires from, indicated that when applying they did not realise the level of commitment involved to
be a mentor. We noted that this had been explained by the course leads during the application process.

**Student issues**

35. Due to the intensity of the introductory course, students stated that they would have liked advance notice of the subjects to be covered before they began the programme. The course leaders have noted this feedback and agreed for future cohorts that a reading list will be sent out a month in advance of the commencement of the programme. Students also felt that during the early stages of the course, practical elements could be used to break up the blocks of lectures.

36. Students felt that better information could have been provided regarding the accommodation available for the core programme and study days. The course leaders have noted this feedback and aim to provide better advice for future cohorts. We were pleased that this, and other, student feedback received has been acted on.

37. We were told by the students that they would have liked more information about the format of the RCS Edin final exam. We noted that this information was to be provided on the study day of the inspection and had been sent to students earlier in the programme.

38. Students praised the staff on the programme and felt that they could be approached with any issues. Students felt that they had pastoral support from their mentor, the PLF and the course leader. They praised the benefits of having access to university support systems, including the internet based WebCT system where they can access lectures and course material.

**Requirements**

**To the University of Central Lancashire**

- Firm guidelines on a minimum level of supervision for the early stages of patient treatment in the workplace should be issued to the workplace mentors for the 2010 cohort. (20)

**Recommendations**

**To the University of Central Lancashire**

- Investigate ways for the student to have an orthodontist (registered on the GDC specialist list), other than the mentor, evaluate their clinical work. (18)
- The programme directors should investigate ways in which collection and management of student clinical treatment data, throughout the programme, can be made more robust and transparent. (26)