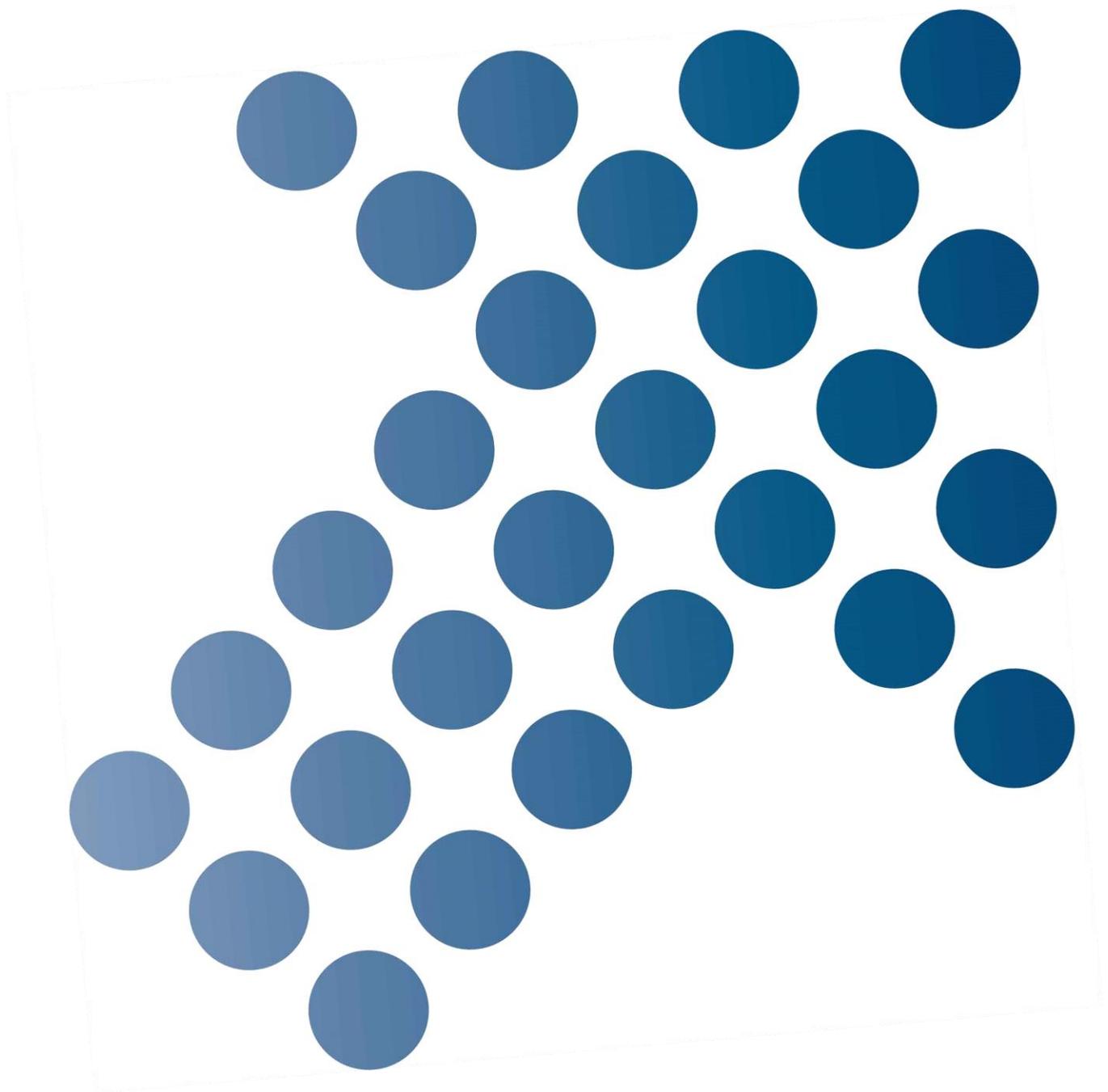


The learning outcomes review process



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Part one: Introduction

About the learning outcomes

The General Dental Council's learning outcomes for dental team registration are contained in the document [*Preparing for practice*](#), first published in 2011 and revised in 2015.

Preparing for practice describes the outcomes that an individual must be able to demonstrate by the end of their dental training, in order to register with the GDC as a dental professional and member of the dental team. The registered dental team comprises:

- Dentists
- Dental therapists
- Dental hygienists
- Dental nurses
- Orthodontic therapists
- Clinical dental technicians
- Dental technicians

The learning outcomes reflect the knowledge, skills, attitudes and behaviours a registrant must have to practise safely, effectively and professionally in the relevant registration category. Dental education and training should produce an individual who can demonstrate, on successful completion of an assessed education or training programme, that they have met the outcomes required for registration as a dental professional with the GDC. The aim is to develop a rounded professional who, in addition to being a competent clinician and/or technician, will have the range of professional, communication, management and leadership skills required to begin working as part of a dental team and be well prepared for independent practice.

The learning outcomes form the foundation upon which a registrant is expected to develop and maintain their knowledge and skills throughout their professional career. The outcomes derive from, and are consistent with, the GDC's [*Standards for the Dental Team*](#) and requirements for lifelong learning.

More information about the development of the learning outcomes, and the learning outcomes model, can be found in the introduction to [*Preparing for practice*](#).

Roles and responsibilities

The purpose of **the GDC** is set out by the Health and Social Care Act (2008) and is:

- to protect, promote and maintain the health, safety and well-being of the public
- to promote and maintain public confidence in the profession

- to promote and maintain proper professional standards and conduct for members of those professions.

The GDC's statutory role in relation to education and training is outlined in the Dentists Act 1984.

To fulfil its role and purpose, the GDC must ensure that those who join our registers are fit to practise as a safe beginner at the point of registration and are well equipped for a career in dentistry. **The GDC** is therefore responsible for defining the outcomes required, and to seek assurance that these are met through the education, training and assessment of future registrants. The outcomes describe the knowledge, skills, attitudes and behaviours the individual should be able to demonstrate.

Education and training providers are responsible for designing and delivering qualifications that will develop individuals into professionals who demonstrate these learning outcomes. The design of the learning outcomes provides a balance of detail, for consistent interpretation, flexibility for responding to developments in dental practice, legislation and healthcare in general and to encourage innovation among education and training providers. Providers are expected to develop more detailed learning outcomes from the high-level outcomes that fit and relate to their curriculum.

It is for each **education and training provider** to design their curriculum and programme to suit their circumstances, providing it consistently trains professionals who meet the learning outcomes. Providers must design their assessments so that they assess students against all the required learning outcomes.

When the GDC quality assures education and training programmes, evidence will be sought from the education and training provider that demonstrates students and trainees are assessed appropriately in all the learning outcomes for the relevant registrant category.

Regular review of learning outcomes

- Learning outcomes will be periodically reviewed to ensure they best reflect current and future dental practice. Regular reviews should also be less onerous for education providers to implement than infrequent, but more fundamental, reviews.
- Since the initial publication of *Preparing for practice* in 2011, the learning outcomes have been reviewed once, in 2015. Until recently, however, there has been no official process for the regular review of learning outcomes, or specific plans for their future review.
- To remedy this, the GDC developed and agreed a process for regular review of the learning outcomes, following a public consultation, in 2018-19. Guidance on the new process was published in 2019. The process will become effective from 2020.

- More information on the decision to establish a regular review of learning outcomes is available in [the GDC's response to its consultation on education processes](#).

Purpose of this document

This document describes the new regular review of learning outcomes and gives details of the next steps in the process.

Part two: The process

Overview

The GDC will regularly review and recommend changes to the dental team learning outcomes in *Preparing for practice* every three to four years.

The three- to four-year review period reflects the need to keep the learning outcomes up to date with current and anticipated future dental practice. This also acknowledges that major changes have resource implications for providers and can require a lengthy implementation process, therefore any shorter regular review period would be impractical. The GDC also considers a three- to four-year review period sufficient to assess the impact of any changes before the next scheduled review. A longer period would not allow the flexibility for the outcomes to reflect changes in practice nor would it allow changes to be reflective of current practice.

The GDC will conduct continuous evidence gathering to inform potential changes to the learning outcomes. This includes evidence on the performance of the extant learning outcomes, and analysis of the current and future state of dentistry, and national oral health need, suggesting the need for changes to the learning outcomes.

Proposed changes to the learning outcomes will be developed with the assistance of an expert reference group, with whom the GDC will consult at least once per year.

The role of the reference group will be advisory only. The GDC Council reserves the right to make decisions on the content of the learning outcomes.

Proposed changes to the learning outcomes will be subject to full public consultation.

Evidence gathered which is relevant to the learning outcomes will be summarised on the GDC website periodically (www.gdc-uk.org).

Three years into the review period, the GDC, with the aid of the reference group, will decide whether the evidence gathered to date is sufficient in itself to warrant consultation on proposed changes to learning outcomes. The alternative will be to postpone any changes for another year, which will allow further evidence gathering to take place.

The GDC will make an exception to certain elements of the above process if it considers that urgent changes to the learning outcomes, with clear implications to patient safety, must be made.

Evidence gathering

The GDC's evidence gathering will include that which relates to the performance of the existing learning outcomes, and an analysis of changes in practice and/or existing and anticipated oral health need of the public. It will also consider changes to legislation and policy.

Regular reviews will not look solely at the learning outcomes that exist, but consider broader questions and trends, such as the population's oral health need, public expectations of dental professionals, and any implications from data on complaints made to the GDC about dental professionals. The GDC already carries out research into, and analysis of, these broader policy areas, and it is key to the success of the regular review project that it is coordinated and engaged with this separate but related work.

Sources of evidence the GDC will consider include:

- a dedicated email inbox, promoted on the GDC website, for external parties (including education and training providers) to submit feedback on the learning outcomes
- monitoring of education and training providers, which will seek providers' feedback on the effectiveness of the current learning outcomes and in particular any recent changes to the outcomes
- quality assurance activity including inspections of education and training programmes
- analysis of complaints data from the GDC's fitness to practise function, and the Dental Complaints Service
- analysis of external complaints data, e.g. from the NHS, if available
- the annual GDC registrant survey
- the GDC patient and public survey
- GDC policy or regulatory changes, e.g. to the *Standards for the Dental Team*, or the *Scope of Practice*
- external policy, regulatory and legislative changes
- relevant surveys of students, trainees and trainers
- external pieces of research and educational literature.

GDC staff will monitor all the above sources for items of potential relevance to the learning outcomes. This list is not exhaustive and additional evidence will be reviewed as appropriate.

Once a year, the GDC will review the evidence received to date with the reference group and provide a summary of that evidence on the GDC website.

Reference group

A GDC reference group, including external experts, will meet to review evidence received and consider what, if any, changes should be proposed to the learning outcomes as a result.

Remit

The reference group may make recommendations regarding:

- a draft summary of evidence considered for publication on the GDC website

- whether the GDC should consult on changes to the learning outcomes in the third or fourth year of the review cycle
- the content of any consultation proposing changes to the learning outcomes, including the specific wording of learning outcomes and the justification for those changes
- where further evidence should be sought on potential changes to the outcomes

Following a public consultation on changes to the learning outcomes, the reference group will have an opportunity to consider an analysis of the responses, and provide comment.

The reference group's role is advisory only. The GDC Council will make decisions on consultations and changes to the learning outcomes.

The GDC may, at its discretion, consult the reference group, or its members, throughout the year for expert opinion on matters relating to the learning outcomes.

Membership

The reference group will consist of members drawn from the GDC's existing Education Associates, including an educationalist. If additional expertise is required or desirable, members may be enlisted from outside this group.

In any event, membership of the group should represent a range of professional backgrounds, including general dental practitioners, dental care professionals, academics and non-registrants. Through its membership, the group should also represent multiple nations of the United Kingdom.

Education Associates' contracts are for a term of three years. Any Education Associates who are also members of the reference group will be reconfirmed or replaced in the latter role at the expiry of that contract term.

Additional support

At any time, the GDC may decide to contract additional outside expertise to supplement the reference group on a temporary or fixed-term basis. For example, the GDC might contract an educationalist at the point of rewriting learning outcomes for public consultation.

Major and minor changes

When proposing and consulting on changes to the learning outcomes, the GDC will distinguish between "major" and "minor" changes.

A *major* change might alter the meaning of a learning outcome, add or delete an outcome, introduce new skills or requirements, or have implications for a registrant's scope of practice. **The GDC will consult on *major* changes only once every three-to-four years and expect providers to implement major changes from the commencement of the next programme cohort.**

A *minor* change might be to amend the language or emphasis of an outcome, but not its substantial meaning. It therefore would not substantially affect the framework of a curriculum or the delivery of a training programme already in progress. **The GDC may consult on *minor* changes at its discretion, i.e. more frequently than every three-to-four years. As minor changes should not affect the delivery of a programme, the GDC considers such changes should be proposed and published as and when they become relevant.**

The GDC will expect providers to implement *minor* changes as soon as realistically possible and within 8 weeks from the date of being asked to do so, regardless of the state of any affected programmes.

In addition, the GDC will reserve the right to make **administrative changes**; e.g. to correct formatting errors, at its discretion and without consultation.

Process of consultation for major and minor changes

Initial decision on when to make major changes

In the third year of the review period, GDC staff, in conjunction with the reference group, will agree on whether to consult on major changes to the learning outcomes within the next year, or to defer changes for another year. If the GDC does not make changes to the learning outcomes after three years, it **must** propose changes after four years.

Initial decision on when to make minor changes

The GDC, in conjunction with the reference group, may elect to consult on minor changes at any time. The audience of the consultation will be decided according to those potentially affected by the change and may be education providers, students, the public and patients, or other relevant bodies. The GDC may also decide to defer minor changes until it is prepared to also consult on major changes; this will be left to GDC's discretion.

Consultation process

Proposed changes to the learning outcomes—whether major or minor—will be subject to public consultation.

Any consultation will include the specific proposed revisions to the learning outcomes, as well as a rationale for why they are being proposed.

The GDC may find it necessary to contact particular groups directly to ensure they provide input into the consultation, e.g. dental students.

Post-consultation

At the close of the consultation, the GDC will analyse the responses received, and make amendments to its intended revision of the learning outcomes accordingly.

A summary of the consultation responses will be provided to the reference group, along with an opportunity to comment.

The GDC should then brief SLT and Council by:

- providing a summary of the consultation responses;
- seeking approval to a draft of the GDC's response to the consultation feedback, which should demonstrate how the GDC has taken that feedback into consideration; and
- seeking approval to publish a revision of *Preparing for practice*, based on the consultation feedback and the GDC's own review process.

Publication

The GDC will publish:

- its response to the consultation; and
- a new version of *Preparing for practice*; and
- an accompanying statement detailing:
 - what has changed and why;
 - what changes are considered to be "major" or "minor"; and
 - a timetable for the implementation of those changes, based upon their categorisation as "major" or "minor".

At the same time, the GDC will write directly to providers with the information and documentation above.

Post-implementation

Through its monitoring activities, the GDC will confirm providers' compliance with learning outcome changes and invite feedback on any recent changes. This feedback will seek to find out how the learning outcomes are working in practice.

Urgent changes

The GDC will make an exception to certain elements of the above process if it considers that urgent changes to the learning outcomes, with clear implications to patient safety, must be made.

The GDC may become aware of potential urgent changes at any time in the course of regular evidence gathering. In that event, the GDC will consider whether to consider the matter in the course of the regular review cycle. The GDC may enlist the expertise of the reference group in making this decision.

If it is decided to proceed, then GDC staff will follow an abbreviated form of the above process, by:

- convening a meeting of the reference group by email or conference call to agree how the text of *Preparing for practice* should be amended to implement the urgent change; and agree the rationale for that change;
- inform education providers upon convening the reference group that a potential major change has been identified and further information will be forthcoming;
- proceeding to SLT and Council for approval to publish the proposed change; and
- publishing a revision of *Preparing for practice*, with an accompanying statement clarifying what has changed and why, and writing directly to providers with that same information.

If the GDC is satisfied that the change in question is urgent, and has clear implications for patient safety, then it will not consult on the proposed change.

The GDC will expect providers to implement urgent changes as soon as realistically possible and within nine months of being asked to do so, regardless of the state of the programme.

Part three: Next steps

The first review following the above process will take place in 2020. It is anticipated that the entire process will take approximately nine months to complete with publication of the final, updated learning outcomes taking place in early 2021.

How you can share your views

A dedicated inbox is open now at learningoutcomes@gdc-uk.org. Comments on the current learning outcomes and suggestions for change can be sent to this address at any time.

As detailed above, the GDC will gather evidence from multiple sources to feed into the review. Anyone wishing to contribute to the review process may submit their suggestions for evidence by using the inbox. Additionally, there will be other methods for you to feed in your views. We ask that any suggestions for possible changes are accompanied by a clear rationale why a change should be made and, where possible, evidence that supports the suggestion.

We will publish further updates on the review on our website.

Reference group recruitment

The appointment of members to the reference group will commence in late 2019. As stated above, we will seek to use current Education Associates in the composition of this group.

Queries, comments and concerns

The learning outcome review inbox will be monitored throughout the year. All comments should be directed to the inbox along with any questions arising from this process document.