

ORE Registrant Survey

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1. Introduction

The Overseas Registration Examination Advisory Group (OREAG) commissioned research for 2016 to investigate stakeholder perceptions of the effectiveness of the ORE in preparing overseas qualified dentists for UK dental practice. This research comprises two elements.

2. Survey Objectives

The survey has a number of objectives.

The GDC has relatively little information about what happens to ORE qualified dentists once they graduate. This survey aimed to provide some evidence about this and to provide useful data to inform the qualitative study.

The survey of ORE qualified dentists was carried out to investigate where this cohort of dentists are currently working in the UK, and what type of practice they are working in (i.e. independent practices, NHS trusts, hospitals, etc.) as well as collecting information on ORE qualified dentists' career paths and experiences in gaining employment in the UK.

This information would also inform the qualitative research, by providing contextual information about ORE graduates and their work experience to inform the research design and questions.

3. Methodology

The ORE is a statutory examination that was most recently reviewed and updated from its predecessor, the International Qualifying Examination (IQE) in 2008. To ensure consistency of the cohort of participants and accuracy of information for the follow up

qualitative work (only interested in ORE stakeholders, not IQE), only those ORE qualified dentists between 2009 and 2014 were selected to participate in the survey.

The 2009-2014 cohort of dentist registrants (1106 in total) was identified from the GDC register. The survey questions were designed collaboratively between the GDC research team and two members of the OREAG. The survey was sent to this cohort between 24th of November 2014 and the 15th of December 2015.

The survey questionnaire is attached as Appendix A.

4. Results

The results of the survey are summarised below. 465 responses were received (42%). 77% of respondents were female.

There was a great deal of diversity in terms of the different countries of primary qualification identified by the respondents. In total, respondents came from 40 different countries. The top five countries of origin were as follows: 53% (245) ORE graduates identified India as their country of primary qualification. 14% (64) came from Pakistan. Other countries with significant numbers of ORE graduates were Nigeria 3.9% (18) and Iraq 3.7% (17) and Egypt 14 (3%) respectively.

4.1 PASSING THE ORE EXAM

The survey asked respondents how many times they had attempted the exam

For the ORE Part 1, 79% said they had attempted the examination once and 17% had two attempts and 4% had attempted it three times. For the ORE Part 2, 35% had attempted it once and 42% twice and 17% three times.

The survey asked what year respondents had passed the ORE and this is set out in Table 1 below.

Table 1: Which year did you pass the ORE?

Year	% Passing exam
2009	17.6%
2010	20.2%
2011	5.2%
2012	10.3%
2013	20.4%

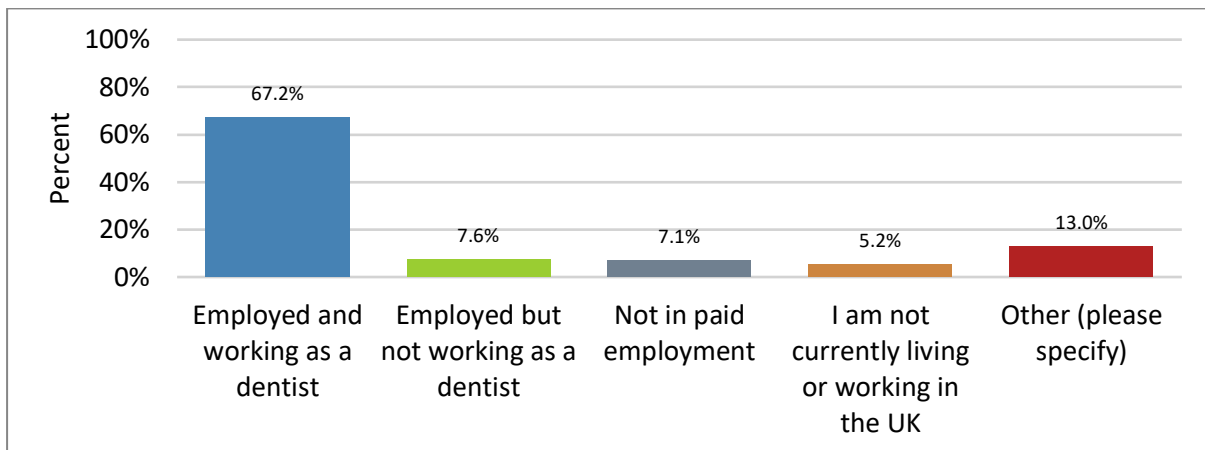
2014	26.2%
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Sample 465

4.2 EMPLOYMENT OF ORE GRADUATES

The survey asked ORE graduates about their current employment and the results are set out below in Figure 1 below

Figure 1 THE EMPLOYMENT STATUS OF ORE GRADUATES



Sample: 463

The 'Other' category when analysed includes a number of responses that could be recorded into the four main categories. The adjusted figures are set out in Table 2 below

Table 2. Employment status of ORE graduates including the analysis of the 'other' category

CATEGORY	%
Employed and working as a dentist	71.3
Employed but not working as a dentist	8
Not in paid employment	13.7
I am not currently living or working in the UK	5.2

Sample 463

78% of those who were not currently employed as a dentist were seeking employment as one.

4.3 LOCATION OF WORK

For those working as a dentist, the survey asked respondents to specify the type of practice that they worked in and this is set out in Table 3 below.

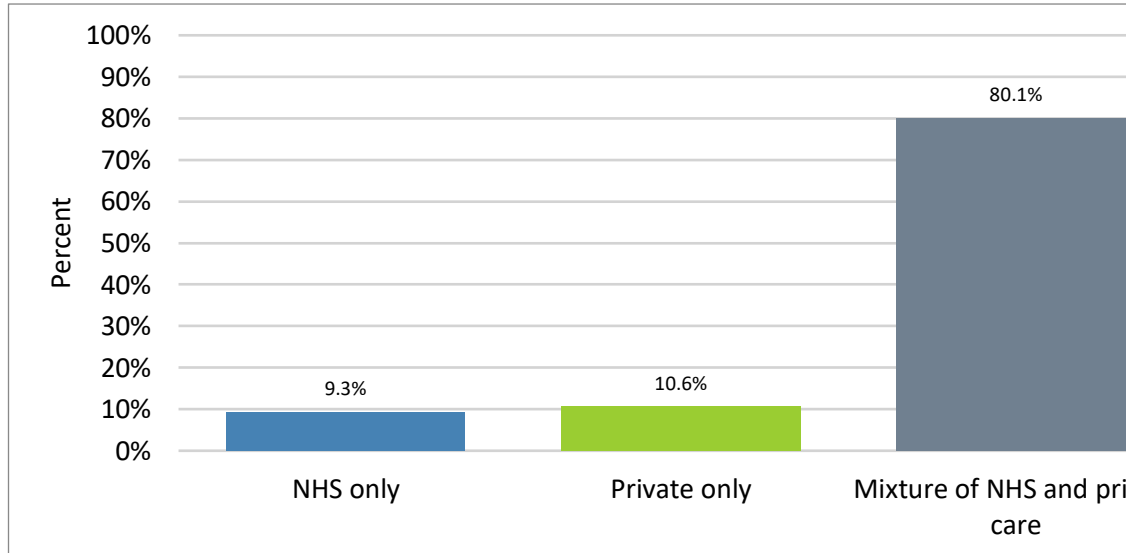
Table 3: Type of practice for ORE graduates working as dentists

PRACTICE TYPE	PERCENTAGE
Independently owned practice	47.9
Corporately owned practice	39.5
University Teaching Hospital	7.1
Community Dental Clinic	1.3
Salaried Primary Dental Services	3.9
Primary Care Trust	5.1
Armed Forces	0.0
Don't Know	0.0
Other	7.3

Sample 311

4.4 TYPE OF DENTAL CARE PROVIDED BY ORE GRADUATES EMPLOYED AS DENTISTS

The type of dental care provided by ORE graduates practising as dentists is set out below in Figure 3

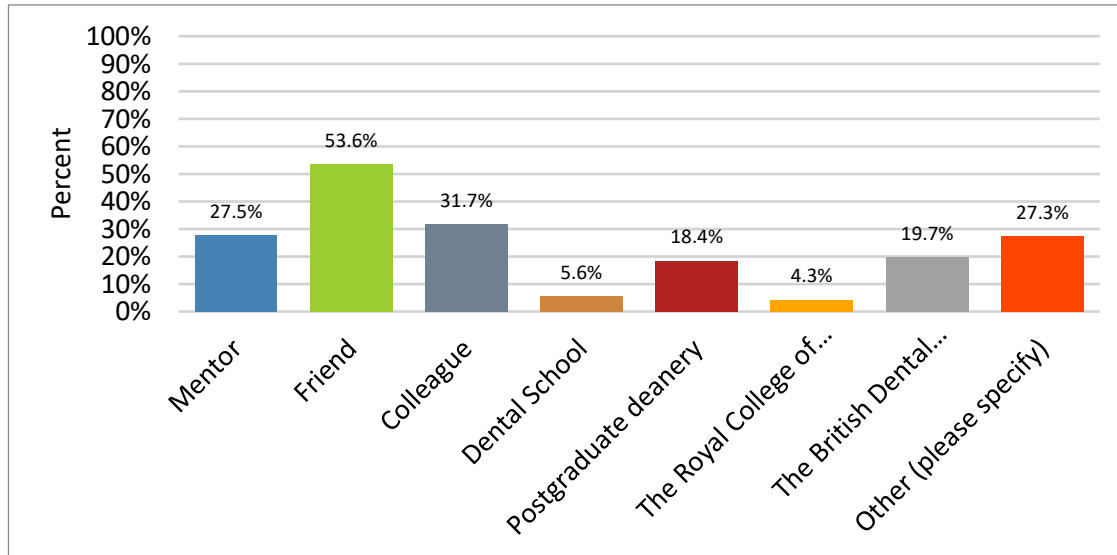


Sample: 311

The 10.6% who practised privately were asked whether they had previously provided NHS dental care in the past. 88% responded no (caveat – small sample size: 33).

4.5 ADVICE IN FINDING EMPLOYMENT AS A DENTIST IN THE UK

Figure 4 ORE graduates were asked about how they approached finding employment. They were asked whom they approached for help and advice in finding employment.



Sample: 461

The vast majority had consulted a friend (53.6%) or colleague (31.7%). 18.4% stated they approached a postgraduate deanery for help and advice in finding employment.

Just over 27% specified 'Other'. A breakdown of the choices made in this category are set out below. Of the 119 responses to this question, 14 did not say or gave answers that could not be classified. Some gave more than one response and where this is the case, they have been counted in each categories outlined below.

Category	Number
Found work in Dental Practice that I already worked in	9
Other Dental Practices	25
Recruitment Agency	11
Other websites	14
Applied in BDJ website/journal	21
Social Media	2
NHS website	2
RAGU/refugee council	1
IDH website	2
BDA/BDA website	3
RAGU/Refugee Council	1

Colleagues/Other Dental professionals I know	7
All of the categories mentioned	1
Myself/No help	21
COPDEND	1
	112

4.6 ORE GRADUATES WORKING IN THE NHS

The survey featured several questions specifically for ORE graduates working in the NHS.

Respondents were asked “how long was the interval between your date of first registration with the GDC, and the point that you secured a training place (that led you to being allocated a performer’s number)?”

The responses are set out in Table 4 below

Table 4: Length of interval between date of first registration with the GDC and securing a training place

Length of time	Percentage
Less than 6 months	36.2%
6 months to 1 year	30.9%
1 to 2 years	21.6%
More than 2 years	11.3%

Sample: 282

Respondents were asked whether they were recommended additional training as part of their vocational training equivalence placement. 35% of ORE graduates said that they were, and the survey further asked them to specify the type of additional training that they were recommended to take. They could select all that applied. Their responses are set out in Table 5 below

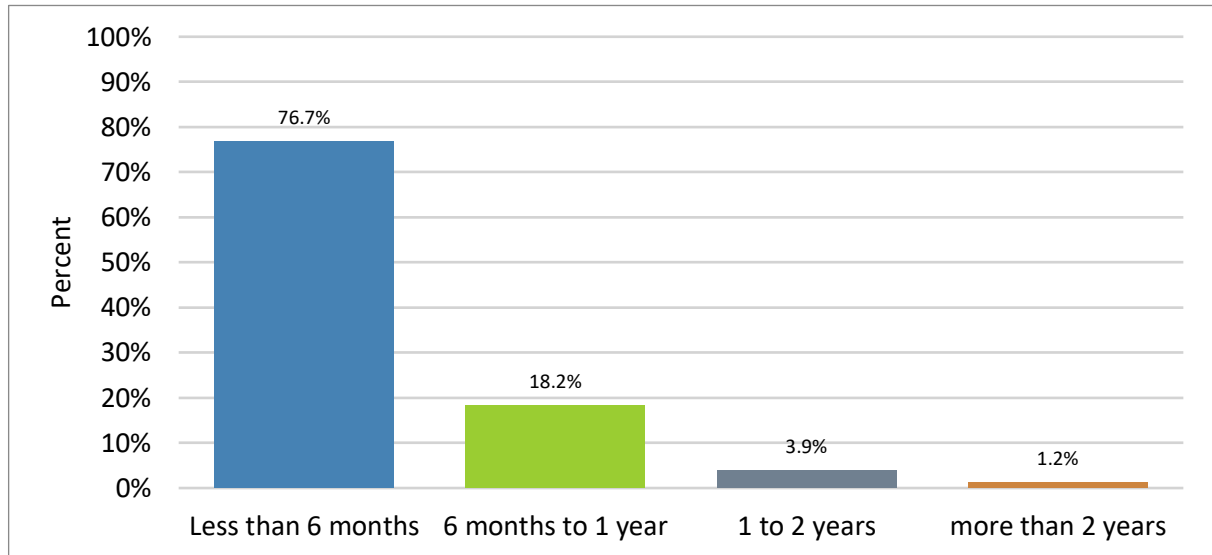
Table 5: Type of additional training course recommended

Type of Additional Training Course	Percentage
Training courses on how the NHS is run and managed	83.0%
Course covering CPD in GDC recommended core topic areas	83 %
Clinical skills courses using simulation (e.g. dental manikin)	36%
Supervised clinical practice	54%
Other	7%

Sample 98

The survey asked the length of time between ORE graduates finishing VT equivalence training and finding paid employment which allowed them to work unsupervised. The response is set out below in Figure 5.

Figure 5: Interval between finishing VT equivalence training and finding paid employment where you were able to work unsupervised.



Sample 282

5. Analysis of open questions

Three questions in the survey were open questions which allowed respondents to provide their response in their own words. These questions generated substantial amounts of valuable data that have now been analysed. A summary of the response to the questions is presented below.

The questions were :

- Q17 (section 5.1) this included a follow up question for those who selected that they said they had approached a dental school or postgraduate deanery and asked them to specify which one.
- Q18 (section 5.2) this asked respondents “As an ORE candidate, were there any barriers you faced in the UK?”
- Q19 (section 5.3) this asked “Do you have any other comments that you would like to make about your career as a dentist in the UK?”

5.1 Dental schools or postgraduate deaneries approach for advice. Of the 127 that responded to this question, there were 108 that nominated one or

more specific dental schools or postgraduate deaneries. Those that didn't, preferred not to say or gave non-specific information. The dental schools and deaneries that the respondents named are in Table 6 and 7 respectively below.

Table 6: Deaneries approached for advice

Deanery	Count
London	21
West Midlands	13
East of England	8
Wales	8
North West	7
Yorkshire and Humber	7
East Midlands	6
Kent, Surrey and Sussex	5
Thames Valley and Wessex	3
Scotland	2
North East	1
Northern Ireland	1
South West	0
Total	82

Table 7: Dental schools or other bodies that were approached:

Dental School / Other Body	Count
Kings College	7
Royal College of Surgeons	3
Leeds	3
Eastman Dental Hospital	2
UCLAN	1
Sheffield	1
Queens college	1
NACDPE	1
Manchester	1
Liverpool	1
Glasgow	1
COPDEND	1
Cardiff	1
ADEC	1
Aberdeen	1
Total	26

5.2 Barriers facing ORE dentists

Question 18 was an open question that asked whether there were any barriers that were faced in the UK, focusing on the following three areas in particular:

- In gaining, or trying to gain employment
- Once you started employment as a dentist
- Or that you continue to face in employment

Of the 465 respondents to the survey, 430 answered this question. Some made no comment or said that they had encountered no barriers. Many of the comments tended to cover several aspects of these areas in a single comment. The open question format also meant that some respondents did not restrict their comments to these areas but also made general comments. The length of text varied from a single word answer to several lines of text. As a result, there is some overlap with the responses to question 19.

Availability of VTE Places

The overwhelming barrier highlighted by registrants to employment related to obtaining a VTE place. Many respondents mentioned the difficulty of finding a VTE place and some stated that finding a place was harder than passing the ORE exam. Some reported making large numbers of applications and it taking years but being unable to find a place at all. Some had to relocate in order to find a place or were unable to move to find a place.

Many commented that this was because VTE places were not funded, as compared with VT places for UK students. They felt that there was no incentive to provide VTE places, or financial benefit in employing an ORE dentist. Some mentioned that the application process was lengthy and that there was a lot of paperwork involved for the ORE dentist and practices. They specifically highlighted the lack of information or a list of dentists who offer VTE to enable dentists to identify VTE places. Most described the lack of support from deaneries as inadequate, though a few said the deaneries had been helpful.

Others highlighted the fact that it was impossible to obtain VTE in the NHS without a performer's number while private practices require UK experience. Some commented that the only way they had been able to obtain a VTE position was by accepting reduced pay, working unpaid, or having to pay for the VTE place themselves. Some mentioned lower UDA values being paid to ORE dentists.

Others mentioned that it was only because of contacts or connections that they had been able to find a place. Some mentioned that finding a mentor as part of VTE was a barrier.

Some reported that awareness of VTE among Dentists was low and that there was a lack of guidance for trainers and trainees about what VTE entails.

Experience of VTE

For those who found a VTE place, some commented that VTE was not similar to VT training. Others commented that ORE dentists were not treated as favourably as UK graduates on VT, highlighting that there were free study days available from the deaneries for UK students but not for ORE students though they were treating the same dental population.

They felt that the standard of training was inconsistent and discriminatory. One respondent commented that not many patients were booked during their VTE and that they could have gained more experience. One felt that the focus was on achieving the UDAs rather than understanding the NHS system.

“I’m in better place now, but felt like a guinea pig and unsafe then, VTE was very stressful. Needs tighter regulations, as employers expects you to be as productive as an UK experienced NHS dentist from day 1.”

Others were more positive, saying that VTE prepared them well for UK dentistry:

“It was hard to get the first job.... I had to relocate from London to Norwich but that turned out for the best in the end as I had an amazing mentor who also offered me a job post VTE. It was a very important learning curve and exposure to dentistry in UK.”

Employment and Unemployment

A variety of barriers were highlighted regarding employment. Many commented that most employers wanted UK work experience and that this was a barrier to gaining employment. Some felt this was particularly the case for private practices and that obtaining work in private practices was difficult. In the absence of paid work, some respondents were advised to work unpaid which they could not do. Many mentioned that the requirement to have a performer number and the difficulty in obtaining one, acted as a barrier.

Some commented that paid work was not available in the area where they lived. Others had been asked to binding contacts that tied them to the same employer for the following three years and were not paid comparable UDA rates.

Some felt that there was little recognition of the high standards of dentistry that was required to pass the ORE by employers. Others felt there was little support from employers.

Some cited the expense involved in paying for courses, certificates and registration. Obtaining a visa was also identified as a major barrier to obtaining employment.

“It is very hard to gain employment after ore, people reject the applications as soon as they hear ore/vte”

A small number of respondents viewed the ORE and employment positively:

Not at all, everything went smooth, and the experience gained through the ORE journey was priceless as this really prepared me for UK dentistry (very different from my experience in France and Algeria)

The ORE Examination

Some respondents questioned the cost and value for money of the ORE. One respondent commented that the ORE was negatively perceived by employers, compared with UK qualifications and not seen as an equivalent.

“The ORE should be a qualification or a degree rather than an exam.”

“People are not aware that ORE is a very stringent and rigorous exam that requires uncompromising skill on behalf of the candidate and the candidate who passes ORE has the necessary baseline skill that can be further polished with proper guidance”

Others felt that it didn't test the clinical skills (e.g. extractions) required in general dental practice or prepare them for NHS dentistry. Some noted that as a result, the ORE was not in itself sufficient but additional courses were required to understand the system. Some felt it didn't offer value for money, given the level of support provided after the exam. One felt that the support to ORE candidates was inadequate with no recommended courses and that feedback to those who did not pass the exam was poor.

A number of respondents noted that taking the IELTS language test (sometimes more than once if it expired in the interim) was a barrier. Moreover, the NHS does not accept the same IELTS score as the GDC, and that this creates an inconsistency as the scores achieved are sufficient for private patients but not the NHS. If they don't have any UK work experience, are required to sit a clinical language assessment worth costing an additional £150. Respondents felt that passing the second stage of the ORE demonstrated their language and communication proficiency and that they should not have to take an additional test. Instead, they felt that the GDC should provide ORE dentists with an English language competency certificate to demonstrate that.

Support for ORE dentists

Many respondents commented on the level of support and assistance available to ORE graduates and post exam guidance, and felt there was no support pathway. Information about the performers list was not clear and lists of practices providing VTE were not available. Some felt they were left to navigate the system themselves and were abandoned:

“No help for us what so ever, left in the jungle all alone to find VT, no central place to apply to get the VT placement.”

The BDA, GDC, NHS England were identified as organisations that could do more. Others commented on the length of time it takes to make applications (one year) and the complexity of the paperwork.

“The major thing is we don't have any support of deanery (funding or so), LAT or any organisation”.

Fairness and Equity

Many of the responses conveyed a sense that ORE dentists were treated differently than UK and EU trained dentists and felt vulnerable to poor treatment.

They felt the preference of UK experience by private dentists disadvantaged overseas graduates. For some this meant having to accept unpaid work, pay for their own VTE or being paid lower rates than other dentists which made them feel exploited. Others pointed to unfairness and poor treatment in the workplace and the impact it could have. One noted that she was advised not to get pregnant for the next one and a half years.

“Being foreign was an issue, the stigma of 'being different'; 'not having qualified here, so the assumption that I'm less skilled by fellow colleagues'; the damage to one's self esteem is quite considerable. You end up questioning yourself after a while”

Some pointed to the lack of a level playing field or discrimination as a result of the funding system for VT and VTE or awareness and assumptions about the ORE.

[There is] “Prejudice against overseas trained dentists who have no UK experience in dentistry. Most dentists prefer to employ UK trained dentists for vocational training which is funded by the government rather than the equivalence which is not funded.”

“sometimes employers assume less qualification did to the fact that I have qualified abroad although I have taken the PRE and completed one year VT”

Others point to what they perceive as the advantages that EU trained dentists have in obtaining employment. For others there was a perception that their position leads to exploitation.

“It is like a nightmare. There are jobs, but no one is willing to trust you or hire you despite GDC approving of you because you are an overseas graduate. Those who are ready to take you up have ulterior motives. You are exploited and made to work for no or minimal pay. The situation is really bad.”

The impact on ORE graduates was expressed in some responses:

“Yes ,nothing can be worse than to be an overseas dentist in the UK”

“I wouldn’t wish it on my worst enemy”

The situation is summed up by one respondent as follows:

YES, personally I believe that once an overseas candidate successfully passes the ORE exams; the overseas and home candidates should both stand an equal chance, be given equal opportunities and be no different in any aspect. This would be the true meaning of equality amongst diversity and reflect on a fairer system.

One of the main barriers was in the method of procuring a placement. An overseas candidate was advised by the deanery that it is up to the candidate to find a job and then ring the deanery.

In order to find a job the most common methods were a) walk in /send CV to all the nearby practice managers only to be ignored and quite aptly described by a colleague " as being treated as a Leper of the dental society". Most dentists weren't aware of what a VTE is and how it is different from a VT... and the very few who knew, saw it as an opportunity of financial exploitation (by either paying the candidate nothing / or asking the candidate to pay in monthly / or by paying them below the minimum wages) they would also be enticed into signing a contract with the employer for X number of years after the VTE. In the light of all these injustice and the failure to impartialize the system, fuels the injustice more thereby creating many very disappointed, frustrated dentists with a very low morale. The Exploitation occurs not just financially but also emotionally and creates a lot of mental stress.

Positive Comments

A number of respondents did not encounter any barriers in finding employment while others made positive comments about how the ORE had equipped them for work.

“I was accepted as a VDP candidate from the first attempt, and afterwards finding jobs were easy.”

“My past experience from my original country helped a lot, in addition I have obtained MFDS while I was preparing for ORE exam, all these paved the way to get a good job offers ”

“The only hurdle was trying to get a VT equivalence position or job in order to get a performer number besides that everything else has been fine.”

5.3 Any other comments

The second open question asked if there was anything else the participants would like to comment on. Of the 465 participants, 344 made comments, in the

themes outlined below. Many participants made comments that spanned across numerous themes.

Fairness and Equity

A very common theme of comments was surrounding the unfair treatment of ORE dentists after passing the exams. This related to the working conditions that some have had to accept in order to secure a VTE. Many mentioned accepting positions without pay, and various mentioned having to pay principal dentists, mentors or practices to secure a placement. Others mentioned exploitative contracts regarding lower payment compared to their peers (for example less pay per UDA), longer hours and being locked into contracts at low pay for a few years. Also emerged was a feeling that ORE dentists did not know where to go to for help and that the GDC should assist and set standards for this. Some participants called for the setting up of a standardised minimum wage plan to make the placements more transparent and fair, and so ORE dentists aren't able to be taken advantage of.

“ORE candidates are subjected to exploitation like working without a pay, compulsory long term contracts, paying the practice and mentor, working for longer shifts, weekends etc”

“no one has questioned the practice owners and small corporates who exploit others”

“I know people who actually pay to be trained and some who are only earning 5 pounds per UDA”

Others mentioned discrimination due to their nationality or foreign qualification, especially in reference to EU graduates, who they felt should be treated equally when not having a UK qualification. Various mentioned the fact that the lack of awareness of the ORE exams (in terms of the difficulty and achievement in obtaining them and therefore being recognised as UK equivalent) meant that ORE dentists were being treated as inadequate compared to their UK and EU peers.

“The ORE examination is a rigorous and competitive method of testing competencies for overseas dentists....the local dental clinic owners do not know the level of expertise needed to pass this examination”.

VTE

Another significant theme was surrounding obtaining a VTE position. Many ORE dentists felt that VTE positions were difficult to obtain, difficult to navigate through the system, and too few positions for the number of dentists graduating. Some commented that Scotland was a more simple and accessible process than in England. And a few commented around the inconsistency of VTE positions depending on the deanery (for example, London offering 6 month, part time placements versus others offering full time one year placements). Many commented on the lack of funding available for VTE, and also the low or no wage available to themselves individually.

“Unpaid VTE is unfair especially considering how much money has already been invested by ORE candidates to enter the field”

“Many of us struggle to get a VTE placement... it’s much easier for the local graduates as they have a structured process”

Support for ORE dentists

The most common theme was regarding the lack of support for ORE dentists once they pass the exams. Many participants stressed the need for a framework or guidance to obtain VTE positions after passing the ORE exams. Many felt lost as to how to approach gaining a VTE position, and called for additional support in this process- guidance on who to approach, setting up a generalise recruitment/interview process. Additionally, many found that there was a general misunderstanding or lack of knowledge about the ORE in the dental community. There was one suggestion about ORE dentists being prepared to pay extra to help facilitate and standardise the VTE recruitment process.

“There is no clear pathway for them to follow to get jobs or be integrated into the system”

“ORE dentists are really struggling to gain access to the mainstream of dentistry”.

“I really wish there was more support and guidance available for the overseas graduates as I feel we are just hung out to dry”.

“Be assured we are prepared to pay for this process through GDC rather than behind doors”

A significant proportion of participants commented on the negative impact the ORE exam, employment opportunities and unfair employment contracts were having on their life, including feeling disheartened, disappointment and stress which was impacting on their personal and family life.

“Sometimes I feel lost, and helpless and vulnerable too... how am I supposed to gain work experience in the UK if no one offers VTE? It's a catch 22 situation”

“Being registered through the ORE route does not mean the end of struggle. It just marks the beginning of another bigger cycle of humiliation, lack of self-respect and self doubt!”

ORE exam

Many felt that with the high costs of the exams, the GDC was not doing enough to support the dentists after passing, and also warning potential applicants to the ORE about the visa, working and recruitment factors they would face once passing exams. Various participants were unaware about visa restrictions to work until they had graduated, which added an extra burden to securing work. Some felt that the GDC should restrict numbers of those sitting the ORE to match the number of VTE placements available, rather than set false hopes by allowing a large number to go through the exam process.

“If there aren't enough VTE placements then reduce intake for part 1, no point having qualified people when they can't get a VTE”

“STOP conducting exams if there is no way to provide the performer number... principal dentists are abusing the system”

Many expressed regret about doing the ORE exams given the lack of career opportunities and unemployment, and said they would not recommend this process to others.

“The expenses and anxieties of the ORE exam are not worth the outcome”.

“[I] feel like all the manual efforts [and] monetary aspects put in for the exam is all meaningless”

“had there been more information about what the whole registration involves or at least like testimonials or something on the GDC website, many people would think twice before going through this whole process”

GDC

A large proportion of participants called on the GDC to take action over assisting the ORE dentists once they have passed the exam. This included:

- Making the process more transparent- more warnings/information about what to expect once passing the exams (visas, employment opportunities);
- better signposting for VTE placements and standardising the recruitment process in terms of applying for placements and wages;
- signposting for help when facing unfair treatment in employment;
- instilling equality and diversity in the profession for when working with registrants from another country;
- creating standards about hiring ORE dentists and policies on equality/ exploitation;
- increasing awareness of the ORE exam to the dental sector.

Positive experiences

A proportion of participants commented on the positive experiences they have had since passing the ORE. However they noted that they were fortunate compared to the experiences of their ORE colleagues. They also mentioned that success/ positive career did not come without hard work and stress.

“I am very very fortunate to find employment...the ORE prepared me better for work in the UK than an EU candidate because after the ORE you are well versed in legislative matters as well as the idiosyncrasies of dental practice in the UK”.

“It has been difficult at times but with good guidance and colleagues and strong will it's not impossible to succeed”

ORE Candidate Survey

The initial questions are about you. Please select one option.

Q1. What is your gender?

- Male
- Female

Q2. What is the country where you gained your primary qualification (degree or diploma)? Please state:

(open question)

Q3. How many attempts did you have at part 1 of the ORE?

- One
- Two
- Three
- Four

Q4. How many attempts did you have at part 2 of the ORE?

- One
- Two
- Three
- Four

Q5. In what year did you pass part 2 of the ORE?

- 2009
- 2010
- 2011
- 2012
- 2013
- 2014

The next few questions are about what you are doing post-registration

Q6. What is your current employment status in the UK?

- Employed and working as a dentist
- Employed but not working as a dentist
- Not in paid employment
- I am not currently living or working in the UK
- Other _____

Q7. If you are currently working as a dentist, please select where you work- select all that apply

- independently owned dental practice
- corporately owned dental practice (e.g. IDH/Mydentist, ADP, Oasis)
- University Teaching Hospital
- District General Hospital
- Community Dental Clinic
- Salaried Primary Care Dental Services

- Primary Care Trust
- Armed Forces
- Other ... please specify
- NA
- I don't know

Q8. If you are currently working as a dentist, please select which kind of dental care you provide?

- NHS only
- Private only
- Mixture of NHS and private care
- NA

Q9. If you are not working as a dentist, what is your employment?

- Working in a dental surgery in a non-clinical role (egg. receptionist, sterilisation, practice manager)
- Working in another health role that is not dentistry (egg. health care worker, carer, in a hospital or nursing home)
- Working in the services industry (egg. telecommunications, taxi driver, customer service)
- Government- including local, NHS, and central government departments
- Other- please specify

Q10. If you are not employed as a dentist, are you currently seeking work as one?

- Yes
- No

Q11, 12 and 13 relate to working in the NHS. If you do not work as a dentist in the NHS currently, please select NA

Q11. If you are currently working as a dentist in the NHS, how long was the interval between the date of first registration and the time that you were able to secure a training place that led to you being allocated a performer's number?

- Less than 6 months
- 6 months to 1 year
- 1 to 2 years
- More than 2 years

- NA

Q12. If you are currently working as a dentist in the NHS, were you recommended to take any additional training as part of your Vocational Training (VT) equivalence placement? Please select all that apply.

- Yes
- No

Q13. If yes, please select from below:

- Training courses on how the NHS is run and managed
- Courses covering CPD in GDC recommended core topic areas
- Clinical skills courses using simulation (e.g. Dental Manikin)
- Supervised clinical practice
- Other, please specify.....

Q14. If you are currently working as a dentist in the NHS in the UK, how long was the interval between finishing that training (VT equivalence) and finding paid employment where you were able to work unsupervised?

- Less than 6 months
- 6 months to 1 year
- 1 to 2 years
- More than 2 years
- NA

Q15. If you are currently working as a dentist in another setting other than NHS, how long did it take you to gain paid employment?

- Less than 6 months
- 6 months to 1 year
- 1 to 2 years
- More than 2 years
- NA

The next questions are about the process you went through to find employment. Please complete this section even you were not currently employed as a dentist. Question 16 in this section requires you to write a few sentences.

Q16. Whom did you approach for help or advice in finding employment as a dentist in the UK?

Please select all that apply

- Mentor
- Friend
- Colleague

- Dental School(s)- please specify
 - Postgraduate deanery- please specify
 - The Royal College of Surgeons
 - The British Dental Association
 - Other, please specify
-

Q17. You indicated that you approached a dental school or postgraduate deanery for advice, please specify which one(s):

(open question, if selected deanery/dental school above)

Q18. As an ORE candidate, were there any barriers you faced in the UK? Please give details on any/all of the following:

- In gaining, or trying to gain employment
- Once you started employment as a dentist
- or that you continue to face in employment
- *(open question)*

Q19. Do you have any other comments that you would like to make about your career as a dentist in the UK?

(open question)

Q20.

The General Dental Council may wish to carry out some further follow up research about this subject within the next 12 months. Would you be willing to take part in further research? You may be invited to take part in more in-depth interview, or a focus group. Please be assured that your individual responses to today's survey will remain confidential.

- Yes
- No

