General Dental Council

protecting patients,
regulating the dental team

Education Quality Assurance Inspection Report

Education Provider/Awarding Body	Programme/Award	Inspection Dates
Pearson	Diploma in Dental Technology	Birmingham: 7-8 February 2018 Leeds: 12-13 March 2018 Sheffield: 14-15 March 2018 Belfast: 16-17 April 2018 Lambeth: 23-24 April 2018 Nottingham: 14-15 May 2018 Sheffield Re-Inspection: 12-13 July 2018

Outcome of Inspection	Recommended that the Diploma in Dental Technology continues to be approved for the graduating cohort to register as a Dental Technician.

Inspection summary

Remit and purpose of inspection:	Inspection referencing the *Standards for Education* to determine approval of the award for the purpose of registration with the GDC as a Dental Technician
Learning Outcomes:	Preparing for Practice (Dental Technology)
Programme inspection dates:	Birmingham: 7-8 February 2018 Leeds: 12-13 March 2018 Sheffield: 14-15 March 2018 Belfast: 16-17 April 2018 Lambeth: 23-24 April 2018 Nottingham: 14-15 May 2018 Sheffield Re-Inspection: 12-13 July 2018
Inspection team: GDC Staff members:	Katie Carter (Chair and Non-Registrant Member) Chris Parker (DCP Member) Alison Williams (Dentist Member) Rachael Mendel (Quality Assurance Officer) Krutika Patel (Quality Assurance Officer) James Marshall (Quality Assurance Manager) (Leeds & Sheffield only)

Pearson is the awarding body for the BTEC Diploma in Dental Technology. The panel inspected the 6 centres that offer the Pearson qualification. The panel would like to thank the staff at all six centres for the help and hospitality offered to the GDC inspection team during the inspection process. The panel found many examples of staff at all six centres who were shown great dedication and commitment to supporting and teaching their students.

Although all the centres are following the same curriculum, the panel noted that each had interpreted Pearson guidance slightly differently and none of the programmes were running in exactly the same way. While it is a good thing that centres have the opportunity to develop and deliver courses that suit their own environment and student cohort, the panel did find a number of examples of differences that mean that students across the qualification are not receiving a fair and equitable education and assessment.

The Pearson specification is extremely lengthy and the majority of the centers running the course have small staff numbers. The panel observed that many providers found it difficult for them to introduce all the policies and procedures, in full. Pearson should review its guidance for brevity and clarity and take more responsibility monitoring and supporting centres, in particular where staff numbers are low of there are a number of new staff.

Pearson should also take a more proactive role in facilitating discussions between all centres, in order to share good practice and discuss consistency in output between the centres.

Background and overview of qualification

Birmingham	
Annual intake	34 students
Programme duration	70 weeks over 2 /years 105 weeks over 3 years
Format of programme	<u>Fulltime course</u> Year 1 Diploma Units 1-5 + 3 Extended Diploma units Year 2 8 Extended Diploma Units <u>Part-time Course</u> <u>Year 1</u> <u>5 Diploma units</u> Year 2 6 Extended Diploma Units <u>Year3</u> <u>5 Extended Diploma Units</u>
Leeds	
Annual intake	18 students
Programme duration	46 weeks over 3 years
Format of programme	e.g.: Year 1: basic knowledge, clinic attendance, shadowing 2: knowledge and simulated clinical experience 3: direct patient treatment 4-5: direct patient treatment, clinic attendance, outreach, placements
Sheffield	
Annual intake	55 students
Programme duration	68 weeks over two years
Format of programme	- Study programme - 540 hrs per academic year (including, Dental L3, Tutorial, Work Experience, Enrichment, Mathematics and English where applicable) 12 units delivered over two years - Six units during year one and six units during year two - Session delivery – combination of theoretical and practical - Assessment – theory and practical, covering all of the grading criterion within each unit - Work experiences hours achieved over the duration of the programme
Belfast	
Annual intake	▪ 5 students

Programme duration	▪ 114 weeks over 3 years
Format of programme	**Year 1** Unit 1 Fundamentals of Dental Technology Unit 2 Medical Emergencies, First-aid and Communication in the Dental Team Unit 3 Dental Anatomy Unit 9 Dental Laboratory Compliance **Year 2** Unit 4 Basic Dental Materials Science Unit 5 Legislation, Professionalism and Ethics in Dentistry Unit 6 Dental Public Health and Preventative Dentistry Unit 7 Removable Complete Prosthodontics Unit 8 Removable Partial Prosthodontics Unit 16 Work-based Learning in Dental Technology Students take part in shared learning with the BDS Undergraduates. Each student is paired with a BDS student to provide complete prosthodontic treatment for a patient and attend all clinical sessions. Patient work is completed by the students in the School of Dental Technology under supervision. Logbooks are completed to provide evidence for Units 5 and 16. Students also gain real work experience in the Hospital Dental Laboratories, under the supervision of appointed GDC registered mentors. They attend one day per week and are rotated within the three dental specialties. Logbooks are completed by the students and feedback is provided by the mentor to enable self-reflection. **Year 3** Unit 10 Design of Fixed Prosthodontics Unit 11 Complex Dental Materials Science Unit 12 Techniques for Manufacturing Fixed Prosthodontics Unit 13 Orthodontic Therapy Principles Unit 14 Design, Manufacture and Modification of Orthodontic Appliances Unit 15 Advanced Dental Technology Techniques and Procedures. Students gain real work experience in a Commercial Dental Laboratory. They attend one day per week, complete a logbook and receive feedback from their GDC registered mentor to enable self-reflection.

Nottingham	
Annual intake	12 students per year into year 1
Programme duration	34 weeks over 12 months x 3 years
Format of programme	e.g.: Year 1: basic knowledge – Units 1 - 5 2: 6 units which focus on knowledge and skills on more complex practical work 3: 6 units which focus on knowledge and skills of complex appliances. Throughout the 3 years students will be employed in dental laboratories.

The GDC wishes to thank the staff, students, and external stakeholders involved with the programme for their co-operation and assistance with the inspection.

Outcome of relevant Requirements[1]

	Standard One					
	Birmingham	Leeds	Sheffield	Belfast	Lambeth	Nottingham
1	Met	Met	Not Met	Met	Met	Met
2	Met	Met	Part Met	Met	Met	Met
3	Met	Met	Not Met	Met	Met	Met
4	Met	Met	Not Met	Met	Met	Met
5	Met	Met	Not Met	Met	Met	Met
6	Met	Met	Not Met	Part Met	Met	Met
7	Met	Met	Part Met	Met	Met	Met
8	Met	Met	Not Met	Part Met	Part Met	Met
	Standard Two					
9	Met	Met	Part Met	Part Met	Met	Met
10	Met	Met	Not Met	Part Met	Met	Part Met
11	Part Met	Met	Part Met	Part Met	Part Met	Part Met
12	Part Met	Met	Not Met	Part Met	Met	Part Met
	Standard Three					
13	Met	Met	Part Met	Met	Met	Met
14	Met	Met	Not Met	Met	Met	Part Met
15	Met	Met	Not Met	Met	Met	Met
16	Met	Met	Part Met	Part Met	Met	Part Met
17	Part Met	Part Met	Part Met	Met	Part Met	Part Met
18	Met	Met	Not Met	Part Met	Met	Met
19	Met	Met	Not Met	Met	Met	Met
20	Part Met	Part Met	Part Met	Part Met	Part Met	Part Met
21	Met	Met	Part Met	Met	Met	Met

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[1] All Requirements within the *Standards for Education* are applicable for all programmes unless otherwise stated. Specific requirements will be examined through inspection activity and will be identified via risk analysis processes or due to current thematic reviews.

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.

Requirement 1: Students must 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 patients.

Pearson		The way in which the qualification is delivered varies greatly between the different centres, including in the way in which the providers make use of work placements and in-house lab experience. It is not always clear how much experience the students are gaining in these settings and how much some of the providers rely on these work placements to develop their students' skills. It is recommended that Pearson scrutinises with more care the way in which all providers monitor and assess clinical progression through the programme to ensure that students gain adequate experience of all required skills. Pearson should consider being more prescriptive of the time that students should spend in work placements, be they in industry/commerce or in provider laboratories that mimic the workplace, and the expectations of what the student should be doing in these settings. It is the view of the panel that if clearer and more prescriptive guidance was given, many of the problems observed with this qualification would fall away.
BMET	Met	An introductory session is provided to students, before they can enter the laboratories. This covers basic health and safety and expectations of working in a laboratory setting. Poor behaviour from students results in them being removed from the laboratory setting and doing practical work in-house. The college also has dedicated staff who manage the work placement relationships and assist students in getting placements in working laboratories.
Leeds	Met	An induction session is provided to students, before they can enter the laboratories. This covers basic health and safety and expectations of working in a laboratory setting. Poor behaviour from students results in them being removed from the laboratory setting and doing practical work in-house. The college also has dedicated staff who manage the work placement relationships and assist students in getting placements in working laboratories. The school also conducts speed tests with the students, so that they are prepared for the working environment. Although there are no exams within the Pearson qualification, Leeds has introduced further assessments of practical work at the end of each term, that works as a gateway, to ensure that students have the skills to progress. The panel were impressed with the range and thoroughness of the work done in this area by this provider.

Sheffield	Not Met	At the initial visit, the panel did not see any evidence to assure them that the students had adequate knowledge and skills to work in a laboratory or produce devices that would be fit for purpose. A lack of practical work was made available at the inspection. The practical work that was made available was not considered to be of an adequate standard of a safe beginner, with no logical monitoring of the practical work. At the second visit, there was evidence of more practical work for the inspectors to see, with a clearer grading scale and assessment being used, but also that many of the students had still not completed enough practical work to an acceptable standard. The college must ensure that students are obtaining adequate knowledge and skills and assessed appropriately to ensure students are safe to produce technically sound devices.
Belfast	Met	An introductory session is provided to students, before they can enter the laboratories. The cohort is small, and so an over reliance on the staff monitoring student progression informally has been adopted. While the panel were assured that the students were competent, there was no formal clinical data records to demonstrate this, with no assessments to ensure student were progressing appropriately. A larger student cohort would make this informal method of assessing competence untenable.
Lambeth	Met	The college demonstrated a detailed induction process into the laboratories to ensure that the students were aware of expectations while working in a laboratory setting. There were clear policies set out to demonstrate expectations and ensure health and safety requirements were met. In addition to this, they also included an additional test to the Pearson requirements, at the end of year 1, to ensure students were progressing appropriately.
Notting-ham	Met	The college demonstrated a detailed induction process into the laboratories to ensure that the students were aware of expectation while working in a laboratory setting.

Requirement 2: Providers must have systems in place to inform patients that they may be treated by students and the possible implications of this. Patient agreement to treatment by a student must be obtained and recorded prior to treatment commencing.

BMET	Met	There is no documentation in place to inform patients that their devices may have been made or partially made by a student. However, when the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted. Although students are not likely to have any direct contact with patients, it is recommended that students when teaching about consent and that a patient consent form is made available, so they are aware of it, should the need arise.
Leeds	Met	The panel saw evidence of laboratory tickets, which inform the dentist fitting the device that a student may have been involved in the production of the device. No such paperwork exists to inform patients of the same.

		When the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted.
Sheffield	Part Met	There is no documentation in place to inform patients that their devices may have been made or part made by a student. However, when the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted. Although students are not likely to have any direct contact with patients, it is recommended that students are taught about consent and that a patient consent form is made available, so they are aware of it, should the need arise.
Belfast	Met	When the students are working in the BDS clinics, consent is taken for students to be involved in patient treatment, however this consent isn't specifically for the dental technician's involvement, but for students from the wider dental team. However, when the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted. It is recommended that written consent from the patient should be obtained, and that the patient is made aware of any involvement the trainee dental technician will have in their treatment.
Lambeth	Met	There is no documentation in place to inform patients that their devices may have been made or part made by a student. However, when the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted. Although students are not likely to have any direct contact with patients, it is recommended that when students are taught about consent, they are provided with an example of a patient consent form is made available, so they are aware of it, should the need arise.
Nottingham	Met	There is no documentation in place to inform patients that their devices may have been made or part made by a student. However, when the students are in work placements, no device is sent out to a patient without it being checked by their mentor and signed off by a GDC registrant. There is then the additional check of it being seen by a dentist before being fitted. Although students are not likely to have any direct contact with patients, it is recommended that when students are taught about consent, they are provided with an example of a patient consent form is made available, so they are aware of it, should the need arise.

Requirement 3: Students must only provide patient care in an environment which is safe and appropriate. The provider must comply with relevant legislation and requirements regarding patient care, including equality and diversity, wherever treatment takes place.		
BMET	Met	The panel saw evidence of inspections of workplaces by provider staff taking place prior to students going on their work placements. This included conducting a health and safety check and ensuring that working environments were safe for students. As some of the students were between 16 and 18 years old, additional consent forms from guardians are required, and students receive a health check to ensure they can work in a laboratory. All relevant staff are GDC registered and have completed equality and diversity training. The college do not check whether equality and diversity is completed by workplace mentors. While the mentors do not assess the students, it would be good practice for mentors to do equality and diversity training.
Leeds	Met	The panel saw evidence of check lists completed three times a year for each workplace, assessing them as safe for students. Placements are also monitored very closely throughout the student placement. The students are also provided a handbook for use during their work placements, in order to log what they are doing while there. This is signed off by the mentor and monitored by teaching staff. All relevant staff are GDC registered and have completed equality and diversity training. The school do not check whether equality and diversity training is completed by mentors. While the mentors do not assess the students, it would be good practice for mentors to do equality and diversity training.
Sheffield	Not Met	The laboratories in the college were not considered fit for purpose by the panel, some of the equipment was either poorly maintained or not working. The students informed the panel of ongoing material shortages within the college, that prohibited them from developing their practical skills. Some students stated that they were bringing in material from the laboratories that they worked in, in order to be able to complete their assignments. The panel also heard about very poor staff: student ratios and not being provided with enough support while in the laboratories. The limited number of available work placements are not being formally checked to ensure they are safe for students. There are currently no policies or procedures for staff to follow, to ensure that the work placements are appropriate. When speaking with the students, the panel was told that students are not supported with finding work placements, and although it is a requirement of the course, the majority had not had any work placement experience. The panel were also informed about additional hurdles that students under 18 faced with getting work placements, because of the additional documentation required. They did not feel supported by the college in securing placements.

		The college must develop a robust process for assisting students both in finding work placements, and for ensuring that they are safe. The panel were extremely concerned to find that some of the staff who teach and assess students were not registered with the GDC and equality and diversity training had not been completed by all staff involved in the programme. The college must ensure that all staff are appropriately registered, qualified and trained in order to teach on the course.
Belfast	Met	The panel saw evidence of inspections of workplaces by provider staff taking place prior to students going on their work placements. Students are also required to do an induction with their workplace, this covers health and safety regulations, fire exits etc. The in-house laboratories in which students train, have to adhere to the Trust policies and procedures, and students are required to complete mandatory training before they are able to go into these laboratories. All relevant staff are GDC registered and have completed equality and diversity training. The school do not check whether equality and diversity training is completed by mentors. While the mentors do not assess the students, it would be good practice for mentors to do equality and diversity training.
Lambeth	Met	The panel were satisfied that the facilities in the college were appropriate and that students were able to learn in a safe environment. All work placements are visited by the college and a member of staff has responsibility for monitoring all work placements. Due to the logistics of visiting all the laboratories – there are many of them and they are geographically disparate, relationships are built through telephone conversations. It is recommended that a more formal and systematic approach to reviewing the work placements should be considered. All relevant staff are GDC registered and have completed equality and diversity training, which they repeat annually. The college is hoping to provide equality and diversity training for work placement mentors and an update on this should be provided to the GDC.
Nottingham	Met	Students are provided with a health and safety document for the college laboratories. All students on this course are already employees of the laboratories/workplaces where they do their diploma training. The provider has decided, therefore, that no formal inspection of the workplaces is required. The college does however try to build relationships with the laboratories that the students are employed in, through phone conversations. All relevant staff are GDC registered and have had relevant training.

Requirement 4: When providing patient care and services, providers must ensure that students are supervised appropriately according to the activity and the student's stage of development.

Pearson		Although the workplace supervisors/mentors do not assess any of the student work, Pearson should consider introducing clear criteria for the nature of the relationship between provider and workplaces in order to ensure that workplace experience is valuable and safe and to strengthen the learning experience of the students.
BMET	Met	Students are appropriately supervised in the laboratories at Birmingham College. The workplace supervisors, although not involved in the assessment of students were engaged in the students' learning and progression.
Leeds	Met	Students at Leeds are supervised appropriately, with good staff: student ratios in laboratories. Students all have one to one meetings with their tutors every 8 weeks where progress is monitored. The workplace supervisors, although not involved in the assessment of students, were engaged in the students' learning and progression.
Sheffield	Not Met	The students at Sheffield stated that although teaching staff were extremely dedicated, they didn't have enough time available to support them all effectively. A small number of staff support a large cohort of students, many of them under 19 and it was evident that the staff were over stretched and unable to support all students appropriately. This issue was magnified by staff attrition and a lack of replacement staff and an apparent lack of understanding of the course fundamentals and GDC regulatory requirements on the part of some in College management... The small number of workplace supervisors that the panel were able to speak to were positive and encouraging and were quite prepared to support and help students. However, it was clear that engagement between the provider and workplace supervisors was almost non-existent, and what there was, was led by the latter. The college must ensure that all have the opportunity to obtain good quality experience in a work placement, and that the relationship between work placements and the college must also be formalised.
Belfast	Met	The students are supervised appropriately within the laboratories, with the staff student ratio never being higher that 5:1 The workplace supervisors were positive about supporting the students. They were not involved in the assessment of the students.
Lambeth	Met	Students at Lambeth are supervised with appropriate staff: student ratios in laboratories. In the laboratories there is always one tutor and one lab technician. Students stated that they were supported both in the laboratories and throughout the course.
Nottingham	Met	Students are well supported within the laboratories, with one staff member and one technician being present at all times. One to one time with a staff member in the laboratories is also available for any students who may be struggling.

Requirement 5: Supervisors must be appropriately qualified and trained. This should include training in equality and diversity legislation relevant for the role. Clinical supervisors must have appropriate general or specialist registration with a UK regulatory body.

BMET	Met	All relevant staff are GDC registered and have completed equality and diversity training. The school do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training.
Leeds	Met	All relevant staff are GDC registered and have completed equality and diversity training. The school do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training. However, the school does check that all workplace supervisors are registered and an induction with the students and supervisors at the start of their work placements is compulsory. During induction, supervisors are shown examples of good, completed practical work, which the panel considered a good way to try and calibrate student experience between work placements.
Sheffield	Not Met	Not all relevant staff were registered with the GDC during the initial inspection, which was contradictory to the information provided prior to the inspection taking place. The teaching team at Sheffield College were relatively new and inexperienced and did not hold the appropriate registration or qualifications to teach the students. The teaching team had not been provided with adequate support from the college and were therefore not able to provide the students with appropriate training. The school do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training. The college must ensure that all staff involved with the programme are appropriately qualified.
Belfast	Met	All relevant staff are GDC registered and have completed equality and diversity training. The school do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training.
Lambeth	Met	All relevant staff are GDC registered and have completed equality and diversity training. The college staff have personal development plans and opportunities to obtain additional training as part of their role. The school do check that all workplace supervisors are registered, however, they do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training.

Nottingham	Met	All relevant staff are GDC registered and have completed equality and diversity training. The college have been supportive of the teaching staff gaining further qualifications and time is allocated for staff to obtain CPD throughout the year. The college do not check whether equality and diversity is completed by workplace supervisors. While the supervisors do not assess the students, it would be a recommendation to encourage mentors to do equality and diversity training.

Requirement 6: Providers must ensure that students and all those involved in the delivery of education and training are aware of their obligation to raise concerns if they identify any risks to patient safety and the need for candour when things go wrong. Providers should publish policies so that it is clear to all parties how concerns should be raised and how these concerns will be acted upon. Providers must support those who do raise concerns and provide assurance that staff and students will not be penalised for doing so.

BMET	Met	Students are taught about raising concerns and a clear process for students to raise concerns was evidenced.
Leeds	Met	Students are taught about raising concerns and the student and supervisor handbooks contained information about the process of raising concerns. It was evident from speaking to the students that they were aware of the need for candour and one student gave an example of how that duty had been acted upon in their workplace.
Sheffield	Not Met	The college was not able to provide any evidence of raising concerns, duty of candour or any other related policies. While the panel was told that these areas were taught on the programme, there was no evidence that they were well understood by staff or students.

The college must ensure that all those involved in the programme, both staff and students are aware of their duty and the process to raise concerns and the need for candour when things go wrong. The college must also ensure that policies and process are in place to address concerns when they are raised. |
| Belfast | Part Met | Students are taught about raising concerns early on within the course, and they use Datix for recording clinical data incidents. Datix is an NHS wide process and while it is important students are aware of it, the panel recommends that the provider develops more programme-specific policies that are robust enough for any risks to be dealt with appropriately. |
| Lambeth | Met | Students are taught about raising concerns throughout the programme. Students demonstrated an understanding of raising concerns and duty of candour.

The panel also saw evidence of the raising concerns policy having been used. The panel was also pleased to note evidence of students' professionalism being monitored throughout the course. |
| Nottingham | Met | Students are taught about raising concerns throughout the course, and there are raising concerns and student fitness to practise policies. Although no concerns were raised within the dental technology programme, an example of a concern raised by another department was provided to the panel. |

Requirement 7: Systems must be in place to identify and record issues that may affect patient safety. Should a patient safety issue arise, appropriate action must be taken by the provider and where necessary the relevant regulatory body should be notified.

BMET	Met	The devices that are made by students within the college are not fitted to patients, so there is no risk to patient safety within the college environment. Students are, however, taught about patient safety and raising concerns. Although no devices are fitted to patients, a system should be in place to simulate what would happen if a student felt that their device was fit for purpose when it wasn't. While students are in work placements, any devices that are sent out to patients to be fitted are checked and signed off first by a registered dental technician, ensuring patient safety. However, the college should work with the work placements, to ensure that proper procedures are in place, to enable them to log when a device produced by a student is not fit to be sent out to patients. This will provide students with further learning opportunities.
Leeds	Met	The devices that are made by students for assessment within the School do not get sent to patients, so there is no risk to patient safety within the college environment. Students are however taught about patient safety and raising concerns. The school also makes use of Datix, in order to log any concerns relating to patient safety and the panel saw evidence of this. While students are in work placements, including within the hospital laboratory of the Dental Institute, any devices that are sent out to patients to be fitted are first checked and signed off by a registered dental technician, ensuring patient safety.
Sheffield	Part Met	The poor quality of some of the practical work provided to the panel suggested a lack of understanding of the importance of patient safety on this programme. Although no devices produced by students are fitted to patients, a system should be in place to simulate what would happen if a student felt that their device was fit for purpose when it wasn't. While students are in work placements, any devices that are sent out to patients, to be fitted are first checked and signed off by a registered dental technician, ensuring patient safety This step ensures that patient safety is ensured as no unsafe device will reach a patient. However, the college should work with the work placements, to ensure that proper procedures are in place, to enable them to log when a device produced by a student is not fit to be sent out to patients. This will provide students with further learning opportunities.
Belfast	Met	The devices that are made by students within the university do not get sent to patients, so there is no risk to patient safety within the college environment. Students are however taught about patient safety and raising concerns. Although no devices are fitted to patients, a system should be in place to simulate what would happen if a student felt that their device was fit for purpose when it wasn't. Datix is used at a university level, but due to the low risk to patients from the dental technology students, this software is not utilised as robustly as it could be on this programme.

		While students are working within the trust, any devices that are sent out to patients, to be fitted are first checked and signed off by a registered dental technician. However, the college should work with the work placements, to ensure that proper procedures are in place, to enable them to log when a device produced by a student is not fit to be sent out to patients. This will provide students with further learning opportunities.
Lambeth	Met	The devices that are made by students within the college do not get sent to patients, so there is no risk to patient safety within the college environment. Students are however taught about patient safety and raising concerns. Although no devices are fitted to patients, a system should be in place to simulate what would happen if a student felt that their device was fit for purpose when it wasn't. While students are in work placements, any devices that are sent out to patients, to be fitted are first checked and signed off by a registered dental technician, ensuring patient safety. This step ensures that patient safety is ensured as no unsafe device will reach a patient.
Nottingham	Met	The devices that are made by students within the college do not get sent to patients, so there is no risk to patient safety within the college environment. Students are however taught about patient safety and raising concerns. Although no devices are fitted to patients, a system should be in place to simulate what would happen if a student felt that their device was fit for purpose when it wasn't. While students are in work placements, any devices that are sent out to patients, to be fitted are first checked and signed off by a registered dental technician, ensuring patient safety. This step ensures that patient safety is ensured as no unsafe device will reach a patient.

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. Providers must also ensure that the GDC's Standard for the Dental Team are embedded within student training.

BMET	Met	The policy presented to the panel was a college-side one, not specific to dental technology and the programme does not have a system in place to record low level student concerns. The course curriculum does cover standards for the dental team and student fitness to practise across a number of modules. The college also makes use case studies on the GDC website, to further embed this learning. The provider should consider producing a course-specific FtP policy, to include a system for monitoring low level professionalism concerns.
Leeds	Met	The provider has a good student fitness to practise policy. Standards for the dental team and student fitness to practise are covered in a variety of well thought through ways, throughout the course. Both staff and students were aware of the fitness to practise policies and discussed how it was embedded within their teaching.

		Students are expected to sign a code of conduct and a Fitness to Practise agreement when they start the course.
Sheffield	Not Met	While, standards for the dental team and student fitness to practise are taught as part of some course modules, the panel did not see any evidence of a student fitness to practise policy. The programme must create student fitness to practise policy, in line with the requirements of what is a registrable qualification. This policy should cover the monitoring of low-level professionalism concerns.
Belfast	Part Met	The fitness to practice policy is trust wide not course specific. Policies and processes must be relevant and specific to the dental technology programme to ensure that if any issues are raised, they can be dealt with appropriately. The programme does not have a system in place to record low level student concerns. This should be introduced to ensure that students' performance and professionalism are being monitored appropriately. Standards for the dental team and student fitness to practise are addressed in a number of ways multiple times throughout the programme
Lambeth	Part Met	The programme uses a 'career ready standards' document and monitors students' professionalism robustly. However, this document doesn't thoroughly cover student fitness to practise and could be adapted to include the principles of student fitness to practise.
Nottingham	Met	The panel saw evidence of a student fitness to practise policy and how low-level student concerns, such as attendance and lateness, are monitored and discussed at progress board meetings. Standards for the dental team and student fitness to practise are addressed multiple times throughout the course. Both staff and students were aware of the fitness to practise policies and discussed how it was embedded within their teaching.

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.

Requirement 9: The provider must 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.

Pearson		While all the centres follow the Pearson specifications, the panel would recommend that Pearson reviews the specifications on a regular basis, to ensure that it is no longer outdated.
BMET	Met	The programme follows the Pearson specification, and therefore any major changes to the programme are the responsibility of Pearson. The Edexcel programme does not reflect modern practices in Dental Technology and should continue to be revised with necessary changes to keep up with digital dentistry. On a programme level, the panel saw evidence of termly meetings to discuss assessment strategy and weekly team meetings that

| | | were used to discuss any changes to the programme that the college felt were necessary.

The panel also saw evidence of the wider college quality assurance processes and how the quality assurance of the course fed into the wider quality assurance frameworks. |
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| Leeds | Met | The programme follows the Pearson curricula, and therefore any major changes to the programme are made through Pearson and the curriculum is amended.

At a programme level, Leeds is able to adapt the assignments and assessment process to work within the school structure. The panel saw evidence of the programme quality management meetings and monthly programme committee meetings, where all aspects of the programme were discussed, including student progression. |
| Sheffield | Part Met | The programme follows the Pearson curricula, and therefore any major changes to the programme are made through Pearson and the curriculum is amended.

There was no evidence during the first inspection that the College quality staff had any understanding or knowledge of this course and that the College's QA processes were relevant or sensitive to the needs of this course. During reinspection the panel received some reassurance that college QA was being adapted to meet the needs of this course, though those adaptations had yet to result in significant and sufficient improvements to satisfy the panel that this requirement was met. |
| Belfast | Part Met | The programme follows the Pearson curricula, and therefore any major changes to the programme are made through Pearson and the curriculum is amended.

This is a very small course and QA is almost completely ad hoc and lacking in formality. The course team should consider how it might introduced more robust procedures with some external oversight for reviewing and making changes to the course. |
| Lambeth | Met | The programme follows the Pearson curricula, and therefore any major changes to the programme are made through Pearson and the curriculum is amended.

On a programme level, the panel saw evidence a quality assurance framework, and how changes to the programme are monitored through College committee structures. It was evident that the wider college framework supported the programme and that the quality assurance processes were robust. |
| Nottingham | Met | The programme follows the Pearson curricula, and therefore any major changes to the programme are made through Pearson and the curriculum is amended.

At a programme level the panel saw evidence of the quality assurance framework and how student progression was monitored and how small changes to the programme could be made efficiently and quickly. |

Requirement 10: Any concerns identified through the Quality Management framework, including internal and external reports relating to quality, must be addressed as soon as possible and the GDC notified of serious threats to students achieving the learning outcomes. The provider will have systems in place to quality assure placements.

Pearson		It was clear to the Panel that Pearson's QA process was not identifying concerns with course delivery at some of the course providers. The Standards Verifier process, as is, is not appropriate for a course of this nature. Pearson should develop an inspection process that ensures the programme is being delivered to produce safe beginners fit to be registered with the GDC as dental professionals
BMET	Met	The panel saw evidence of the quality management framework and a quality improvement plan. Although the plan was useful, it was basic. The panel saw evidence of how the standard verifier reports were disseminated and addressed through the quality management framework.
Leeds	Met	The panel saw evidence of the quality management framework and a quality improvement plan. The panel saw evidence of how the standard verifier reports were disseminated and addressed through the quality management framework. The programme had procedures in place to inform the GDC of any concerns.
Sheffield	Not Met	The panel saw no evidence of the quality management framework or a quality improvement plan. The panel did not see any evidence of how the standard verifier reports were disseminated and addressed through the quality management framework. There did not appear to be any mechanisms in place for the college to inform the GDC of any major concerns to the programme. A system must be developed to disseminate and address information through the quality management framework. A system must also be put in place to ensure that the GDC is informed of any major concerns to the programme.
Belfast	Part Met	The panel saw evidence of quality assurance activity, although this was undertaken by the small programme staff team. The panel saw concerns were raised in the QRD report; however, it was not evident how these concerns were addressed. The panel saw evidence of how the standard verifier reports were disseminated and addressed but again, this was within the small programme team, and there appeared to be no scrutiny of the programme at wider trust level or elsewhere.
Lambeth	Met	The panel saw evidence of the quality management framework. The panel saw evidence of how the standard verifier reports were disseminated and addressed through the quality management framework.
Nottingham	Part Met	The panel saw evidence of the quality management framework, but it was not clear how threats and changes that are noted in reports are addressed, actioned and monitored. The programme should clearly outline the process for addressing concerns.

Requirement 11: Programmes must be subject to rigorous internal and external quality assurance procedures. External quality assurance should include the use of external examiners, who should be familiar with the GDC learning outcomes and their context and QAA guidelines should be followed where applicable. Patient and/or customer feedback must be collected and used to inform programme development.

Pearson		As noted above, Pearson, requires that both internal and external verification takes place. While the process will work for many Pearson courses, it does not work for this qualification. It was evident to the panel that t not all programmes were consistently adhering to the internal verification process. It was particularly difficult for some of the smaller programmes to robustly internally verify the assessments, due to small staff numbers and lack of resources. Pearson should be aware of this and consider how alternative forms of support could be provided to ensure the IV process is valid and avoids conflicts of interest. The view of the panel is that the external verifier for the dental technology programme should be a registered dental technologist at all times. As well as reviewing a sample of student written work the EV should, for all courses, also review of a sample of students' practical work, in situ, at the provider.
BMET	Part Met	Feedback is not collected in a systematic manner. As students do not usually have direct contact with patients, it is difficult to collect feedback from patients. However, the college should create a mechanism for work placements to feed into the programme, which can then be used for programme development.
Leeds	Met	(The Manager of Dental Nursing and Technology Education meets with the Dental Institute General Manager on a monthly basis to discuss strategic issues and QA and is expected to provide a copy of and discuss all external quality reviews with the General Manager before a response is returned to the external reviewer. The General Manager of the LDI provides support to the Manager of Dental Nursing and Technology Education. When devices are made for patients at Leeds Dental Institute, a feedback leaflet is sent out and, on occasion, returned by the dentist to the DT trainee. Feedback is also provided by workplace supervisors due to the strong working relationships the programme has developed. The programme should continue to collect feedback and use it to inform course development.
Sheffield	Part Met	Feedback is not collected in a systematic manner. As students do not usually have direct contact with patients, it is difficult to collect feedback from patients. However, the college should create a mechanism for work placements to feed into the programme, to assist with programme development.
Belfast	Part Met	The panel saw evidence of student feedback being collected annually and used to inform an annual action plan. However, employee feedback is collected informally, on an ad hoc basis. The programme should formalise the process for employee feedback collection, which can then be used for programme development.

Lambeth	Part Met	Feedback is not collected in a systematic manner. As students do not usually have direct contact with patients, it is difficult to collect feedback from patients. However, the college should create a mechanism for work placements to feed into the programme, which can then be used for programme development.
Nottingham	Part Met	Feedback is not collected in a systematic manner. As students do not usually have direct contact with patients, it is difficult to collect feedback from patients. However, the college should create a mechanism for work placements to feed into the programme, which can then be used for programme development.

Requirement 12: The provider must have effective systems in place to quality assure placements where students deliver treatment to ensure that patient care and student assessment across all locations meets these Standards. The quality assurance systems should include the regular collection of student and patient feedback relating to placements.

Pearson		Pearson should provide programme-relevant guidance on the selection and QA of work placements and on the amount of workplace experience students should be getting. This guidance should include information on what should be expected of workplace supervisors. This is with a view to ensuring that students get a fair and equitable experience across the programme and the best use is made of workplaces in assisting in course development.
BMET	Part Met	The programme visits all the work placements and a health and safety assessment is done for all placements. The panel saw evidence that staff had visited each of the work placement laboratories.

In order to ensure that students are gaining experience in all dental technology modalities, the laboratories at the college provide additional support for those students who are in specialised work placements.

There was no evidence that student feedback on placements is collected and used to inform course development and the development of relationships with workplaces. |
| Leeds | Met | The programme visits each of the work placements and maintains a relationship with each laboratory through telephone conversations. Each laboratory is assessed to ensure it is a safe working environment for the student.

The students are also required to complete a work-based logbook that is signed by the workplace mentor. The students also have a formal one to one meeting with programme staff to discuss their work placements and raise any concerns that they may have. Students complete an evaluation sheet at the end of each placement. This information could be used to further develop the relationships with work placements. |
| Sheffield | Not Met | There was no evidence that work placements were being assessed for suitability by the programme staff. Students also indicated that the majority of them had not been able to find a work placement and had no experience in a working laboratory. |

		The college must improve this aspect of the programme to a level where the students are getting equitable, safe and useful experiences in workplaces. The college used simulated work placements which was limited to 6 students at any one time. This does not compensate for the lack of real work placement.
Belfast	Part Met	The programme staff visit the work placements and have informal phone conversations with them. While this is currently working, the process should be formalised and documented to ensure that health and safety is adhered to at the work placements and that the students are working in a safe environment. No student feedback is collected from work placements. The programme should strive to collect student feedback relating to work placements that can be used to further develop the course and build stronger relationships with work placements.
Lambeth	Met	The staff visit each a work placement when they are taking a student for the first time they receive a visit and training from the WBL mentor, before the student commences their WBL. The WBL mentor also completes a H & S questionnaire. The quality assurance of the work placements is fairly light touch but is working because of the dedication of the staff. A wide variety of placements are available, and the staff assist students with finding placements. However, there is a reliance on students informing the college if there are safety concerns on placement and the college should work towards making the quality assurance of work placements more robust. Feedback is not collected from the work placements. This should be done to inform course development.
Nottingham	Part Met	As the students are already employed when they start the programme, the college has limited recourse for intervention. The quality assurance of the process is low level, with phone conversations taking place and the work placement supervisors being provided with a handbook outlining what the college expectations are. The college should strive to make the quality assurance of work placements more robust. Feedback is not collected in a formal manner from students or mentors. This is a lost opportunity as the students are in these placements four days a week. Student and mentor feedback should be collected to inform programme development.

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.		

Requirement 13: To award the qualification, providers must be assured that students have demonstrated attainment across the full range of learning outcomes, and that they are fit to practise at the level of a safe beginner. Evidence must be provided that demonstrates this assurance, which should be supported by a coherent approach to the principles of assessment referred to in these standards.

Pearsons		The Pearson curriculum meets the GDC learning outcomes with a comprehensive and coherent approach to assessment. However, as mentioned above, Pearson should consider reviewing their curriculum to ensure that it remains up to date.
BMET	Met	Although the centres are limited in how much they can adapt the assessment strategy due to the need to follow the Pearson specifications, it was evident that the programme assesses the students thoroughly across the full range of learning outcomes. The panel were also assured, based on the written and practical assessments that they saw, that the assessments were being marked at the appropriate level and the students are fit to practise at the level of a safe beginner.
Leeds	Met	Although the centres are limited in how much they can adapt the assessment strategy due to the need to follow the Pearson specifications, it was evident that the programme assesses the students thoroughly across the full range of learning outcomes. The panel were also assured, based on the written and practical assessments that they saw, that the assessments were being marked at the appropriate level and the students are fit to practise at the level of a safe beginner. The programme saw evidence of completed student portfolios and practical work completed to a standard of a safe beginner. The programme also monitored what the students were doing during their work placements, to ensure that any additional experience that a student required, was addressed, so that they could be assured each student was able to demonstrate attainment across the full range of learning outcomes.
Sheffield	Part Met	Although the programme was following the Pearson curricula, the panel did not initially see evidence of students attaining experience across the full range of learning outcomes. It was not evident to the panel that how progress was being monitored, and when assessments were marked, that they were being marked to an appropriate level. The panel returned in July to review the assessments, and while the programme had demonstrated some improvement, and the panel was able to see evidence that students had completed the assessments set out by Pearson, it was not clear that they had been assessed appropriately and that completing students were fit to practise as safe beginners.

		The college should formalise their assessment strategy to ensure that student progression can be monitored appropriately to ensure that students are attaining the full range of learning outcomes.
Belfast	Met	The Pearson curriculum meets the GDC learning outcomes with a comprehensive and coherent approach to assessment. Although the centres are limited in how much they can adapt the assessment strategy due to the need to follow the Pearson specifications, it was evident that the programme assesses the students thoroughly across the full range of learning outcomes. The panel were also assured, based on the written and practical assessments that they saw, that the assessments were being marked at the appropriate level and the students are fit to practise at the level of a safe beginner. The panel saw evidence of a range of practical assessments and were assured that students were gaining enough experience to practise at the level of a safe beginner. However, due to the small cohort size, student progression and monitoring was not done formally. The programme should formalise their approach to monitoring students working in placements and in the dental school laboratory, to ensure students are gaining experience in all modalities of dental technology.
Lambeth	Met	Although the centres are limited in how much they can adapt the assessment strategy due to the need to follow the Pearson specifications, it was evident that the programme assesses the students thoroughly across the full range of learning outcomes. The panel were also assured, based on the written and practical assessments that they saw, that the assessments were being marked at the appropriate level and the students are fit to practise at the level of a safe beginner. The college demonstrated how they reinforced technical skills through additional practical work that the students carried in in the laboratories. This additional work could be captured by the college and used to further monitor student progression and attainment of the learning outcomes.
Nottingham	Met	Although the centres are limited in how much they can adapt the assessment strategy due to the need to follow the Pearson specifications, it was evident that the programme assesses the students thoroughly across the full range of learning outcomes. The panel were also assured, based on the written and practical assessments that they saw, that the assessments were being marked at the appropriate level and the students are fit to practise at the level of a safe beginner.

Requirement 14: The provider must have in place management systems to plan, monitor and centrally record the assessment of students, including the monitoring of clinical and/or technical experience, throughout the programme against each of the learning outcomes.

BMET	Met	The programme uses Promonitor to record all student assessments and monitor student progression. It keeps track of when assignments

		are handed in, a mark is added and feedback for each assessment can be included here to. It also allows the college to record any additional information relating to the student, such as low-level concerns, or absenteeism. The college does not formally record what students are doing in the college laboratories, which is a missed opportunity. In order to obtain a more robust view of student progression, the college should aim to record and monitor the technical appliances student produce prior to completing their assignments.
Leeds	Met	The programme monitors student progression extensively both in the laboratories where they learn and at Leeds Dental Institute, through tracking sheets and practical observation sheets. They also make use of the student logbooks when in their work placements to ensure students are obtaining a range and breadth of experience and this is monitored to ensure students are progressing appropriately.
Sheffield	Not Met	Markbook is used to record and monitor students written assessments. There was also evidence that students were given some feedback on their written assessments. The panel did not, at the first inspection, however, s see evidence of how practical work was recorded and assessed and were told that marking was all done at the end of each term, making it impossible for student progression to be monitored throughout the term. The panel saw evidence of some work placement logbooks, but it was clear that they had not been monitored with any regularity. . The college must ensure that student progression is recorded and monitored continuously and systematically so that any concerns can be addressed in a timely manner.
Belfast	Met	The panel saw evidence of all student assessments being centrally recorded. The clinical experience of students in the laboratories and hospital are not centrally recorded or formally monitored. The work placement logbooks are used to record what the student does each day, and is signed off by the mentors, however, this is not being used as a tool to track student development and the progression of their technical skills. The programme does not formally record what students are doing in the college laboratories, which is missed opportunity. In order to obtain a more robust view of student progression, the programme should aim to record and monitor the technical appliances student practise prior to completing their assignments.
Lambeth	Met	The programme uses Promonitor to record all student assessments and monitor student progression. It keeps track of when assignments are handed in, a mark is added and feedback for each assessment can be included here too. It also allows the college to record any additional information relating to the student, such as low-level concerns, or absenteeism. The college does not formally record what students are doing in the college laboratories, which is missed opportunity. In order to obtain a more robust view of student progression, the college should aim to

		record and monitor the technical appliances student practise prior to completing their assignments.
Nottingham	Part Met	The college uses two systems to record marks, Turnitin and Interact, however these systems cannot be synced and therefore staff must manually input marks into the system. However, the college monitors progression through formal practical and, written assessments. The college does not formally record what students are doing in the college laboratories, which is missed opportunity. In order to obtain a more robust view of student progression, the college should to aim to record and monitor the technical appliances student practise prior to completing their assignments.

Requirement 15: Students must have exposure to an appropriate breadth of patients/procedures and should 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.

BMET	Met	The panel saw evidence of a range and breadth of technical appliances being produced to a safe beginner standard. There were variations in the experience that the students were getting at their work placements, however, the work placements do not form part of the assessment process, and it is a requirement of the course, that each module is passed, for the students to pass the course. Students have access to developing technologies, such as cadcam and the Strauman Suite, which provides students with a greater breadth of experience. The college should strive to create a more robust approach to monitoring what students are doing in their placements, in order to ensure students are a full range and breadth of experience.
Leeds	Met	The panel saw evidence of a range and breadth of technical appliances being produced to a safe beginner standard. The centre is not able to provide practical exposure to techniques in digital technology, but this is being addressed with a proposed collaboration with a major dental provider. This short fall is also addressed through lectures and videos, as well as through work placements.
Sheffield	Not Met	The panel did not see any evidence to assure them that students were obtaining a range and breadth of experience. The appliances that the panel were shown, were not fit for purpose. Students were also limited in the amount of experience they could gain due to a lack of materials available, poor maintenance of the laboratories and lack of resources. The college is aware of these issues, and must continue to work towards addressing them, so students are able to gain an appropriate range and breadth of experience.
Belfast	Met	The panel saw evidence of a range and breadth of technical appliances being produced to a safe beginner standard.

Lambeth	Met	The panel saw evidence of a range and breadth of technical appliances being produced to a safe beginner standard.
		Students were also provided the opportunity to change work placements, if they were working in a one modality laboratory, and wanted to gain further experience in other modalities.
Nottingham	Met	The panel saw evidence of a range and breadth of technical appliances being produced to a safe beginner standard.
		The college is not able to provide practical exposure to techniques in digital technology. However, this short fall is addressed through lectures and videos, as well as through work placements.

Requirement 16: Providers must demonstrate that assessments are fit for purpose and deliver results which are valid and reliable. The methods of assessment used must be appropriate to the learning outcomes, in line with current and best practice and be routinely monitored, quality assured and developed.

Pearson		The Pearson specification is extremely detailed and provides the centres with a clear description of what should be assessed. The Panel were slightly concerned by the complexity and repetitive nature of the specification and would suggest some rethinking by Pearson to ease the burden on providers.
		More importantly, the panel was very concerned that, , given the nature of the qualification, by the heavy reliance on written and theory-based assignments. Pearson should consider introducing more practical assessments, as is appropriate given that this is a registrable qualification for a career in a highly practical profession.
		The panel also noted that the grading criteria for assessments could be improved. While students were able to gain a pass, merit or distinction in written work, they were only able to obtain a pass or fail for practical assessments. This is inappropriate for this type of qualification, for the reasons outlined above and does not allow for the recognition of high level practical skills that students are encouraged to achieve to become skilled Dental Technicians
BMET	Met	The panel saw evidence that the assignments are written according to Pearson guidelines, and that a variety of assessment methods were used. This included, written assignments, presentations and group work.
		The programme team meets every two weeks to discuss student assessments and progress.
Leeds	Met	The panel saw evidence that the assignments are written according to Pearson guidelines, and that a variety of assessment methods were used. This included, written assignments, presentations and group work. The panel noted that Leeds Dental Institute was blending the written and technical work into individual assignments which was working effectively for them.
		The programme team meet regularly to discuss student assessments and progress.

Sheffield	Part Met	The panel saw evidence of the completed written assessments which were satisfactory. However, there was no initial evidence of an assessment process for practical work. During the second visit to the college, the panel saw evidence that students had completed practical assignments. However, concerns were raised that the assignments were not being assessed appropriately at the level of a safe beginner. The college should continue to develop their assessment plan and ensure that all staff are appropriately trained and calibrated to assess student performance.
Belfast	Part Met	The panel saw evidence that the assignments are written according to Pearson guidelines, and that a variety of assessment methods were used. This included, written assignments, presentations and group work. The programme team meet during the summer to discuss all assessments and make changes; however, this is not documented. The programme should formalise their procedures, and document when and why changes are made to the programme as a matter of good practice and to ensure adequate handover to any new staff team.
Lambeth	Met	The panel saw evidence that the assignments are written according to Pearson guidelines, and that a variety of assessment methods were used. This included, written assignments, presentations and group work The college reviews all assessments at the end of the year and uses feedback from SPOC to feed into this process. Staff also make use of two industry days/year, where they can go into industry, to ensure they are up to date with best practice.
Nottingham	Part Met	The panel saw evidence that the assignments are written according to Pearson guidelines, and that a variety of assessment methods were used. This included, written assignments, presentations and group work. The staff team meet at the end of each academic year to review assessments, but this process is not documented. The programme should formalise the review process and document any changes made to the assessment process.

Requirement 17: Assessment must utilise feedback collected from a variety of sources, which should include other members of the dental team, peers, patients and/or customers.

Pearson		Pearson should strive to formalise the process of feedback collection to be used as part of the assessment process
BMET	Part Met	For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum.
Leeds	Part met	Feedback is not being utilised as part of the formal assessment process. For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum.

		(workplace mentors have to provide a report on student performance every six months and at the end of placement, this is used by the programme team to help determine if the student is professional in their behaviour and if they are considered a safe beginner by the mentor. These reports were in the student's portfolio at the time of Inspection).
Sheffield	Part Met	Feedback is not being utilised as part of the assessment process. For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum.
Belfast	Part Met	Feedback is not being utilised as part of the assessment process. For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum. The students work alongside BDS students, which is a unique opportunity that could be utilised better in order to gain feedback from the wider dental team.
Lambeth	Part Met	Feedback is not being utilised as part of the assessment process. For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum.
Nottingham	Part Met	Feedback is not being utilised as part of the assessment process. For a number of reasons, feedback is not used as part of the assessment process: not having direct patient access, not working with the wider dental team and it not being required as part of the Pearson curriculum.

Requirement 18: The provider must support students to improve their performance by providing regular feedback and by encouraging students to reflect on their practice.

BMET	Met	Students are taught about reflection. The panel saw evidence of student reflection in work placement logbooks and in assessments. The panel saw evidence of feedback provided to students on their written assignments.
Leeds	Met	Students are taught about reflection and are then provided with feedback on the quality of their practical work, at which point students are also given the opportunity to reflect on their performance. The panel also saw evidence of reflection in their logbooks. Personal tutor meetings are scheduled into the timetable, to ensure that each student has the opportunity to regularly discuss their progress with their tutor.
Sheffield	Not Met	There was no evidence provided to indicate that students were reflecting on their performance at any stage throughout the course. Students did however indicate that staff provided feedback.

		The process of reflection and feedback should be formalised and recorded.
Belfast	Part Met	The panel saw evidence of students' reflection in their work placement logbooks. Mentors were also able to provide feedback during this reflective process. There is no time set aside for students to have formal progress meeting. As the cohort is currently small, this is done informally, however, the programme should aim to formalise these meetings and record what is said, to ensure that progress is being monitored and tracked appropriately and that any problems can be dealt with effectively.
Lambeth	Met	The panel saw evidence of reflection and feedback taking place, but this varied, depending on the unit. The same applied to the work placement logbooks. Some reflection and feedback was evidenced, but it varied depending on the student. The college should strive for a more consistent, formalised approach to feedback and reflection.
Nottingham	Met	The panel saw evidence of reflection and feedback for both the practical and written assessment. There was also evidence of feedback from work placement mentors in the logbooks from Year 1.

Requirement 19: Examiners/assessors must have appropriate skills, experience and training to undertake the task of assessment, including appropriate general or specialist registration with a UK regulatory body. Examiners/ assessors should have received training in equality and diversity relevant for their role.

Pearson		The standard verifier is not always a registered dental technician. Pearson should ensure that the standard verifier is a registered technician, making the verification process more robust.
BMET	Met	The panel saw evidence that all examiners/assessors have appropriate equality and diversity training and are registered with the GDC. Staff are provided with appropriate training, as well as being supported by the college to obtain further training.
Leeds	Met	The panel saw evidence that all examiners/assessors have appropriate equality and diversity training and are registered with the GDC. Staff are provided with appropriate training, as well as being supported by the Leeds Dental Institute to obtain further training.
Sheffield	Not Met	At the initial inspection, it was evident that not all staff were appropriately trained or qualified, not all staff were GDC registered. After the inspection, staff who were not GDC registered ceased any involvement in assessments until they had obtained GDC registration. Staff also indicated that they were not being provided with the necessary support from the college to obtain further training. The college must ensure that all those involved in the training and assessment of students are appropriately qualified or supported to obtain appropriate qualifications.

Belfast	Met	The panel saw evidence that all examiners/assessors have appropriate equality and diversity training and are registered with the GDC. Staff are provided with appropriate training, as well as being supported by the college to obtain further training.
Lambeth	Met	The panel saw evidence that all examiners/assessors have appropriate equality and diversity training and are registered with the GDC. Staff are provided with appropriate training, as well as being supported by the college to obtain further training.
Nottingham	Met	The panel saw evidence that all examiners/assessors have appropriate equality and diversity training and are registered with the GDC. Staff are provided with appropriate training, as well as being supported by the college to obtain further training.

Requirement 20: 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. The responsibilities of the external examiners must be clearly documented.

| Pearson | | The Pearson qualification requires a standard verifier, who is appointed by Pearson, to review randomly selected assignments from various modules twice a year. The panel saw evidence of this taking place, however there were concerns that there was a more emphasis on checking whether the process was being followed rather than ensuring that the assessments were appropriate and being graded at the correct level. As mentioned previously Pearson should ensure that the standard verifier is a qualified dental technician. Pearson should also ensure that there is calibration between the standard verifiers, as it was noted by the panel that some of the recommendations contradicted each other.

As the standard verifier is not always a registered technician, they are not able to assess any of the practical work of the students or provide feedback on specific aspects of the course, as they lack the required expertise. This therefor makes all programmes vulnerable, as there is limited external input into the course.

While the programmes were following the Pearson specifications, the requirement was not met due to the way the external verifier assessed the work. It is not robust enough for Pearson to do a paper based/electronic assessment of the work, and it should be a Pearson requirement to look at the practical work and visit each of the centres. The standard verifier must be provided access to students practical work, by visiting the centres. |
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| BMET | Part Met | The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. However, the panel did not feel that this standard was fully met due to the way the EV assessed the |

		work and that it was not robust for Pearson to do a paper-based assessment of the work. The panel saw evidence of completed standards verifier reports.
Leeds	Part Met	The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. The panel saw evidence of completed standards verifier reports. The programme has included additional termly practical assessments, and a type of gateway assessment at the end of year 1, to make the assessment process more robust. While is this to be commended, Pearson, as the provider, should be ensure that their assessment process is robust enough that additional assessments are not necessary.
Sheffield	Part Met	The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. The panel saw evidence of completed standards verifier reports.
Belfast	Part Met	The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. . However, the panel did not feel that this standard was fully met due to the way the EV assessed the work and that it was not robust for Pearson to do a paper-based assessment of the work. The panel saw evidence of completed standards verifier reports.
Lambeth	Part Met	The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. However, the panel did not feel that this standard was fully met due to the way the EV assessed the work and that it was not robust for Pearson to do a paper-based assessment of the work. The panel saw evidence of completed standards verifier reports.
Nottingham	Part Met	The programme is following the Pearson specifications regarding external input, through the use of standards verifiers, to ensure that the process of assessment is being done correctly. However, the panel did not feel that this standard was fully met due to the way the EV assessed the work and that it was not robust for Pearson to do a paper-based assessment of the work.

		The panel saw evidence of completed standards verifier reports.

Requirement 21: Assessment must be fair and undertaken against clear criteria. 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. An appropriate standard setting process must be employed for summative assessments.

Pearson		The Pearson curriculum is clearly set out and outlines the assessments that need to be completed. The programme works well in most centres because the staff are committed to training the students and ensuring that the students have obtained the necessary skills and competencies to practise at a safe beginner level, However, the providers have interpreted the assessment requirements very differently. This, in itself is not necessarily a problem. However, in practice there were wide discrepancies between the programmes that have the potential to provide inequitable experiences for students and to produce graduates who are not safe beginners. Pearson should work with the centres to provide some standardisation in the assessment processes for written and practical work and should set up a system for ensuring that centres can collaborate, share best practice, calibrate and standard set in a meaningful way. For example, if assessment were shared amongst the centres, as well as standardising the programme across centres, it would facilitate the development of a question bank and reduce the duplication of work, as each centre could share questions.
BMET	Met	The programme is following the assessment methodology set out by in the curricula. There were clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable.
Leeds	Met	The programme is following the assessment methodology set out by in the curricula. There were clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable. The programme was standard setting to the best of their ability, given the small team numbers, with each tutor setting the assignments and another member of the team reviewing them before they are given to the students.
Sheffield	Part Met	The programme is following the assessment methodology set out by in the curricula. However, initially there was no clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable was not taking place. When the panel revisited the programme, these concerns had been addressed, and the panel saw evidence of grading criteria being set for each assessment, as well as assessments being marked by two staff members. The college should continue to develop the assessment strategy and ensure that the assessment process is being followed correctly.

Belfast	Met	The programme is following the assessment methodology set out by in the curricula. There were clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable.
Lambeth	Met	The programme is following the assessment methodology set out by in the curricula. There were clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable.
Nottingham	Met	The programme is following the assessment methodology set out by in the curricula. There were clear grading criteria available for each assessment and the internal verification process is used to ensure marking is fair and equitable.

Summary of Action

Req. number	Action	Observations & response from Provider	Due date
Birmingham			
11	The college should create a mechanism for work placements to feed into the programme, which can then be used for programme development.	Feedback from placements and Employer Liaison meetings will be recorded and used to guide course development. This will feed into the Quality improvement action plans. A template for mentor/placement feedback will be generated and incorporated into placement documentation	AM
17	Pearson should strive to formalise the process of feedback collection to be used as part of the assessment process	See above on consultation with Pearson	AM
Leeds			
17	Pearson should strive to formalise the process of feedback collection to be used as part of the assessment process	It will not be possible for the Leeds Dental Institute to complete this action until changes are made by Pearson. The team will however, endeavour to ensure that students are encouraged to reflect on the feedback they are given from both tutors and workplace supervisors to support their learning, progress and improvement of their practical skills	AM
Sheffield			
1	The college must ensure that students are obtaining adequate knowledge and skills and assessed appropriately to ensure students are safe to produce technically sound devices	It is planned for the staff to carry out industry updating. Regular assessments/reviews are carried out in regards to the quality of the students' technical devices. All devices are safely stored.	AM
2	The college should teach students about consent and make a patient consent form available, so students are aware of it, should the need arise	Embedded within the programme through practical assessments.	AM
3	The college must develop a robust process for assisting students both in finding work placements, and for ensuring that they are safe	Work experience strategic principles have been developed and implemented. It has been agreed with RT (Head of Careers, Employability and Work Experience) that the Faculty will recruit 1 FTE Industry Placement	AM

		Coach – Dental and Science for the upcoming academic year.	
4	The college must ensure that all students have the opportunity to obtain good quality experience in a work placement. The relationship between work placements and the college must also be formalised	Work experience strategic principles have been developed and implemented. It has been agreed with RT (Head of Careers, Employability and Work Experience) that the Faculty will recruit 1 FTE Industry Placement Coach – Dental and Science for the upcoming academic year.	AM
4	The college must formalise the relationship between work placements		AM
5	The college must ensure that all staff involved with the programme are appropriately qualified	All staff are GDC registered and possess or are working towards a recognised teaching qualification.	AM
6	The college must ensure that all those involved in the programme, both staff and students are aware of their duty and the process to raise concerns and the need for candour when things go wrong.	As a provider of education, the College does not provide students with direct clinical contact with dental patients. However, the College does provide access to Policies and Procedures in relation to Safeguarding, Prevent Strategy, Complaints Procedures and Appeals Policy etc. Along with being provided a policies and procedures handbook, students are taught about these policies throughout the programme.	AM
6	The college must also ensure that policies and process are in place to address concerns when they are raised		AM
7	The college should develop a system to simulate what would happen if a student felt that their device was fit for purpose when it wasn't	As a provider of education, the College does not provide students with direct clinical contact with dental patients. However, the College does provide access to Policies and Procedures in relation to Safeguarding, Prevent Strategy, Complaints Procedures and Appeals Policy etc. Along with being provided a policies and procedures handbook, students are taught about these policies throughout the programme. Regular assessments/reviews are carried out by staff in regards to the quality of the students' technical devices. Constructive feedback is provided to the students if their device is not fit for purpose.	AM
8	The programme must create student fitness to	Students undertake a number of assessments linked directly with	AM

	practice policy, in line with the requirements of what is a registrable qualification	legislation and professionalism. Within these units, the students study the scope of practice set by the GDC and other relevant professional standards. Students are given access to the GDC Professional Standards and the GDC Students Fitness to Practice. During induction, the students signed a learner agreement. This learner agreement also requires the students to sign that they do not have criminal record when enrolling. For students under the age of 19, this application is currently processed through the Health and Social Care Academy, a sister Academy to Dental. Fitness to practice, student conduct and discipline is dealt with in-line with the Sheffield College Policies and Procedures and any concerns are escalated through the correct procedure.	
9	The programme should continue to develop their Quality Management Framework	Currently, the responsibility of mapping the Level 3 BTEC course to the GDC learning outcomes lies with Pearson. Pearson have recently renewed this course, to be reviewed in 2020. Any updates are applied by Pearson and staff are notified and apply where required. The Sheffield College requires that the Quality Nominee deals with any changes to the BTEC specification. The staff concerned with the delivery of the Dental Technology course apply these changes to the course. This is not assessed by staff as they are not part of the BTEC specification.	AM
10	A system must be developed to disseminate and address information through the quality management framework	The Head of Academy will directly contact the GDC in regards to any significant changes or concerns in relation to the delivery of the programme. Any concerns requiring actions that have the potential to impact on the achievement of the learning outcomes set by the GDC are forwarded to the quality nominee, who informs the GDC.	AM
10	A system must also be put in place to ensure that the GDC is informed of any major concerns to the programme		AM

11/12	The college should create a mechanism for work placements to feed into the programme, to assist with programme development	The Head of Academy will directly contact the GDC in regards to any significant changes or concerns in relation to the delivery of the programme. Any concerns requiring actions that have the potential to impact on the achievement of the learning outcomes set by the GDC are forwarded to the quality nominee, who informs the GDC. Work experience strategic principles have been developed and implemented. It has been agreed with RT (Head of Careers, Employability and Work Experience) that the Faculty will recruit 1 FTE Industry Placement Coach – Dental and Science for the upcoming academic year.	AM
12	The college must develop relationships with work placements to ensure students are getting equitable, safe and useful experiences in workplaces	Work placement providers were invited to attend an induction meeting at the College during Feb.19. This meeting provided the placement providers with information regarding the standards expected of the quality of the students training. The meeting also gave the College and placement providers an opportunity to forge stronger links.	AM
13	The college should formalise their assessment strategy to ensure that student progression can be monitored appropriately to ensure that students are attaining the full range of learning outcomes	Assessment plans were constructed prior to the academic year commencing. This includes a timetable of set dates for assignments. This was then applied to the construction of the Markbook (grade tracking) and the calendar within the software. The timetable was also released to students at the beginning of the year and they were provided with other relevant supporting documents e.g. student handbooks and policies and procedures etc. Assignments are re-written in accordance with the advancement within the industry and education. These are signed off by the Course Leader.	AM

14	The college must ensure that student progression is recorded and monitored continuously and systematically so that any concerns can be addressed in a timely manner	Markbook is the central point for grade inputting/tracking. All staff input the grades after assessment has been carried out and verified. New staff are provided with training as part of their induction.	AM
15	The college is must continue to work towards addressing them the range and breadth of experience the students achieve at a safe beginner level.	Students are required to construct a variety of dental appliances within orthodontics, removable prosthetics and fixed prosthodontics. It is encouraged that the learners complete the necessary steps to construct each appliance. This provides the students with opportunity to perform an even wider variety of tasks from manipulation of modelling wax work, casting dental models, casting of alloys and to the firing of ceramics etc.	AM
16	The college should continue to develop their assessment plan and ensure that all staff are appropriately trained and calibrated to assess student performance	Assessment plans were created at the beginning of the academic year. This includes a timetable of set dates for assignments. This was then applied to the construction of the Markbook (grade tracking) and the calendar within the software.	AM
17	The programme must strive to collect feedback from student workplace mentors and peers and use this to feed into the assessment process	The work placement competency logs have boxes available for placement employers to leave comments about the learners' work undertaken within the laboratory setting. This information is reviewed and contributes towards to potential assessment process changes. For example, Unit 16.	AM
18	The process of reflection and feedback should be formalised and recorded	Practical work assessment (PWA) sheets are completed at the end of each appliance. Reflection logs have been introduced and included in the students' portfolio for the end of each term. Pearson documentation is used by all staff to provide constructive feedback	AM

		and provide the students with the opportunity to reflect upon their work.	
19	The college must ensure that all those involved in the training and assessment of students are appropriately qualified or supported to obtain appropriate qualifications	All staff are GDC registered and possess or are working towards a recognised teaching qualification.	AM
21	The college should continue to develop the assessment strategy and ensure that the assessment process is being followed correctly	The College's assessment strategy has been updated and is available at request.	AM
Belfast			
6	The programme should develop more programme-specific policies that are robust enough for any risks to be dealt with appropriately.	We are currently in the process of reviewing and updating all our policies and procedures to ensure that any possible risks can be dealt with appropriately.	AM
8	The programme should develop a system to record low level concerns to ensure that students' performance and professionalism are being monitored appropriately.	The School of Dental Technology have developed a new system for recording low level concerns in the form of a student contract. If a concern regarding a student's performance or professionalism has been identified, a meeting will take place with the student and Head of School to discuss the issues and initially provide support and an action plan. The student and Head of school with sign the contract and agree a date for review. Student Development and Review meetings will take place throughout the year to discuss performance. Strengths and weaknesses are identified and an action plan put in place to help the student improve. Performance and professionalism are also measured during work placements. The workplace mentors provide feedback in the students' logbooks and additionally, they will be provided with a 'Measuring Professionalism' document to record low level concerns which is fed back to the	AM

		school for review. Minor issues will be resolved with a student contract, however, the Fitness to Practise policy will be referred to for more serious issues.	
8	The programme should create a programme specific student fitness to practise policy, in line with the requirements of what is a registrable qualification.	The School of Dental Technology has a Fitness to Practise policy that is specific to the programme, however, it has been reviewed and updated accordingly, taking into account the requirements of a registerable qualification	AM
11	The college should create a mechanism for work placements to feed into the programme, to assist with programme development.	Workplace mentors provide feedback in the student logbook which highlights areas of good practise and also areas for improvement. In addition to this, we have developed a 'Measuring Professionalism' document which will be made available to the workplace providers, allowing them to document low level concerns they may have regarding a student's performance or professionalism. The document is then used to develop an action plan for improvement.	AM
16	The programme should formalise their procedures, and document when and why changes are made to the programme as a matter of good practice and to ensure adequate handover to any new staff team.	During the summer, all assessment briefs are reviewed and updated if required. This is recorded on the Pearson 'Internal Verification of Assignment Brief' document. In addition to this, the Lead IV will develop a document which allows the assessor to provide more detail on the reasons why a change has been made and how it will improve the programme.	AM
17	Pearson should strive to formalise the process of feedback collection to be used as part of the assessment process	The clinical and dental laboratory logbooks will be reviewed and updated to include a section to enable the dental team to provide student feedback	AM
18	The programme should aim to formalise and record progress meetings to ensure that progress is being monitored and tracked appropriately and that any problems can be dealt with effectively.	Formal Student Development and Review meetings will take place throughout year to give students an opportunity to discuss problems they may be having and put an action plan in place. Progress will be monitored and tracked accordingly.	AM
Lambeth			

8	The programme should create student fitness to practise policy, in line with the requirements of what is a registrable qualification.	Agreed. To be implemented by September 2019	AM
11 and 12	The college should create a mechanism for work placements to feed into the programme, to assist with programme development.	Agreed. To be implemented by October 2019	AM
17	Pearson should strive to formalise the process of feedback collection to be used as part of the assessment process	Agreed.	AM
Nottingham			
10	The programme should clearly outline the process for addressing concerns.	There is an action plan system in place following the receipt of SV reports and required actions which detail changes needed and what has been completed for improvement. The IQA process is also set up to monitor these actions.	AM
11 and 12	The college should create a mechanism for work placements to feed into the programme, to assist with programme development.	As our programme is a part time course, the vast majority of our students are already employed by the dental laboratory and therefore are not technically on work placement. However, we are in the process of reviewing our curriculum offer and will consider what opportunities we can use to assist this development.	Jan 2020
14	The college should to aim to record and monitor the technical appliances student practise prior to completing their assignments.		AM
16	The programme should formalise the review process and document any changes made to the assessment process.	This is documented through the IQA of all assignments briefs each year including those that are retained where comments are made to identify that the assignment is still fit for use. All new assignments will also follow this IQA process and therefore documentation is available to confirm this.	AM

| 17 | The programme must strive to collect feedback from student workplace mentors and peers and use this to feed into the assessment process. | We already gain feedback from the workplace mentors through the Workplace Learning Log that students are required to maintain. This year we have extended this to each of the 3 years of the programme rather than just year 3. The learning log forms part of the assessment in Unit 16.   We will review this again at the end of the academic year as part of the course review process to identify how we can capture peer feedback too, with a view to implementing in September 2019.
To formally inform any other part of the assessment process Pearson would need to incorporate this into the qualification. | Sept 2019 |

Observations from the provider on content of report

Birmingham

The content appeared to be a fair assessment of the course delivery at BMet

Leeds

The Management Team of the Leeds Dental Institute is content with the report and would like to thank the Inspection team for their comments, observations and courtesy throughout the Inspection.
We are, however, disappointed at having only achieved a Part Met decision on requirements 17 and 20. Whilst we realise that there are clearly issues around these requirements it would appear that these issues are related to failures in the Pearson qualification specification.
The Programme Team will endeavour to address the action required for requirement 17 as far as they are able but obviously cannot undertake any further action in relation to requirement 20 unless Pearson change their requirements for Standard Verification Reviews.

Sheffield

None provided

Belfast

Requirement 2 - The dental technology students are present during each clinical session. The patient is made aware of their involvement and consent is obtained verbally.

Requirements 3 &5 - All GDC registered mentors within the hospital dental laboratories have completed equality and diversity training as part of their mandatory training. Prior to students going on their private laboratory work placements in the 3rd year of the programme, equality and diversity training is provided for the workplace mentors during the initial visit to the laboratory by the Quality nominee.

Requirement 6 - The School of Dental Technology has a Raising Concerns policy specifically for students which is reviewed annually. During the next review, we intend to develop a system to make it more robust in order to deal with risks appropriately.

Requirement 8 - The School of Dental Technology does have a Fitness to Practice policy in place specifically for students. However, we intend to develop a system to record low level concerns to ensure that students' performance and professionalism are being monitored appropriately.

Requirement 12 - Students provide feedback on their work placements, although it is not formally documented. A system will be put in place to record all feedback collected from students and workplace mentors, which will be used to develop the programme.

Requirement 16 - Internal Verification of assignment briefs takes place during the summer to ensure all assignment briefs are fit for purpose. Pearson templates are used for this process which includes a section to document any actions required and a date for completion. The documentation is signed and dated by the assessor and internal verifier.

The programme will formalise our procedures, and document when and why changes are made to the programme as a matter of good practice and to ensure adequate handover to any new staff team

Lambeth

None provided

Nottingham

Requirement 2 - All devices made in College are for assessment purposes only and are never sent out for fitting

Requirement 7 – With every practical appliance a student submits they complete a reflective account when they must comment as to whether a device is fit for purpose and what they must do to correct it.

Requirement 10 - There is an action plan system in place following the receipt of SV reports and required actions which detail changes needed and what has been completed for improvement. The IQA process is also set up to monitor these actions.

Requirement 14 - The College will introduce a recording document for each student to record every practical completed during each of the 3 years.

Requirement 16 - All assignment briefs are reviewed annually as a requirement of BTEC. However, we will record on our Progress Board minutes at the end of the year, changes recommended for the following academic year.

Recommendations to the GDC

Education associates' recommendation	Qualification continues to be approved for holders to apply for registration as a dental technician with the General Dental Council
Date of re-inspection	Re-inspection of Sheffield College in 2020

Annex 1

Inspection purpose and process

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. It also quality assures new qualifications where it is intended that the qualification will lead to registration. The aim of this quality assurance activity is to ensure that institutions produce a new registrant who has demonstrated, on graduation, that they have met the learning outcomes required for registration with the GDC. This ensures that students who obtain a qualification leading to registration are fit to practise at the level of a safe beginner.

2. Inspections are a key element of the GDC's quality assurance activity. They enable a recommendation to be made to the Council of the GDC regarding the 'sufficiency' of the programme for registration as a dentist and 'approval' of the programme for registration as a dental care professional. The GDC's powers are derived under Part II, Section 9 of the Dentists Act 1984 (as amended).

3. The GDC document 'Standards for Education' 2nd edition1 is the framework used to evaluate qualifications. There are 21 Requirements in three distinct Standards, against which each qualification is assessed.

4. The education provider is requested to undertake a self-evaluation of the programme against the individual Requirements under the Standards for Education. This involves stating whether each Requirement is 'met', 'partly met' or 'not met' and to provide evidence in support of their evaluation. The inspection panel examines this evidence, may request further documentary evidence and gathers further evidence from discussions with staff and students. The panel will reach a decision on each Requirement, using the following descriptors:

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"

5. Inspection reports 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 QA team aims to send an initial draft of the inspection report to the provider within two months of the conclusion of the inspection. 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' or 'approval', the report and observations would be presented to the Council of the GDC for consideration.

7. The final version of the report and the provider's observations are published on the GDC website.