



Quality Assurance Framework  
for  
Dental Workforce Development

**This Quality Assurance Framework for Dental Workforce Development was developed for COPDEND by Professor Linda Prescott-Clements, working in consultation with the Expert Advisory Group (Appendix 1).**

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## **Foreword and acknowledgements**

The Committee of Postgraduate Dental Deans and Directors UK (COPDEND) has commissioned this Quality Assurance Framework to support both providers of Continuing Education and Development for dental professionals and for Dentists and Dental Care Professionals (DCPs) themselves. It is informed by evidence and designed to be a practical tool for use by 'Providers' and to help dental professionals to make informed choices about their continuing professional development (CPD). The Committee of Postgraduate Dental Deans and Directors UK (COPDEND) is grateful to the many CPD providers, dentists, DCPs, individuals and organizations who have contributed to this Framework and especially to Professor Linda Prescott Clements, Mr Tony Anderson and colleagues for carrying out the extensive research and development that underpins this work.

Helen Falcon, COPDEND Chair, Oxford UK December 2015

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## Introduction

Continuing Education and Development of the Dental Workforce in the UK is driven by the requirements of dental registrants, by their regulatory body the General Dental Council (GDC), to undertake recommended Continuing Professional Development (CPD) and so remain up-to-date throughout their careers. The completion of regular and effective CPD is considered vital in maintaining dental professionals' competence and ensuring they remain up to date and fit for practice. In order to remain registered with the General Dental Council, UK dentists must currently complete 250 hours CPD every 5 year cycle, of which a minimum of 75 hours must be verifiable CPD<sup>1</sup>. Dental Care Professionals (DCP's) must currently complete 150 hours CPD, of which 50 hours must be verifiable. A recent study investigating CPD in Dentistry in the UK highlighted the large number of CPD providers, and variation within the types of delivery and quality of provision<sup>2</sup>. There may often be significant cost implications for dental professionals in terms of completing CPD and value for money in terms of high quality education is important. This Framework centres on the CPD requirements of the dental workforce in the UK

Evidence to inform the development of a Quality Assurance Framework was identified during the research via two methods: (1\*) an extensive review of the published literature (from databases and grey literature) with regard to CPD quality, effectiveness and quality assurance mechanisms from a range of professional contexts worldwide, and (2)\* an audit (comprising over 50 in-depth interviews with a range of CPD providers) of quality assurance processes currently in place across the sector. This encompassed different types of CPD format, mode of delivery and provider. The consideration of this data (\*published separately to this document in a report to COPDEND) and the subsequent development of the framework was supported by an Expert Advisory Group of key stakeholders (Appendix 1).

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<sup>1</sup> Within the legislation it states that "Verifiable" CPD means CPD for which there is documentary evidence that – a) the dentist/DCP has undertaken the CPD; and b) the CPD has – i) concise educational aims and objectives; ii) clear anticipated outcomes; and iii) quality controls." <http://www.gdc-uk.org/Aboutus/Thecouncil/Pages/governancemanual.aspx>

<sup>2</sup> ICF GHK (2013) Rapid Industry Assessment of CPD in Dentistry. <http://www.gdc-uk.org/Newsandpublications/research/Documents/Rapid%20Industry%20Assessment%20of%20CPD%20in%20Dentistry%20FINAL.pdf>

## Definition of CPD

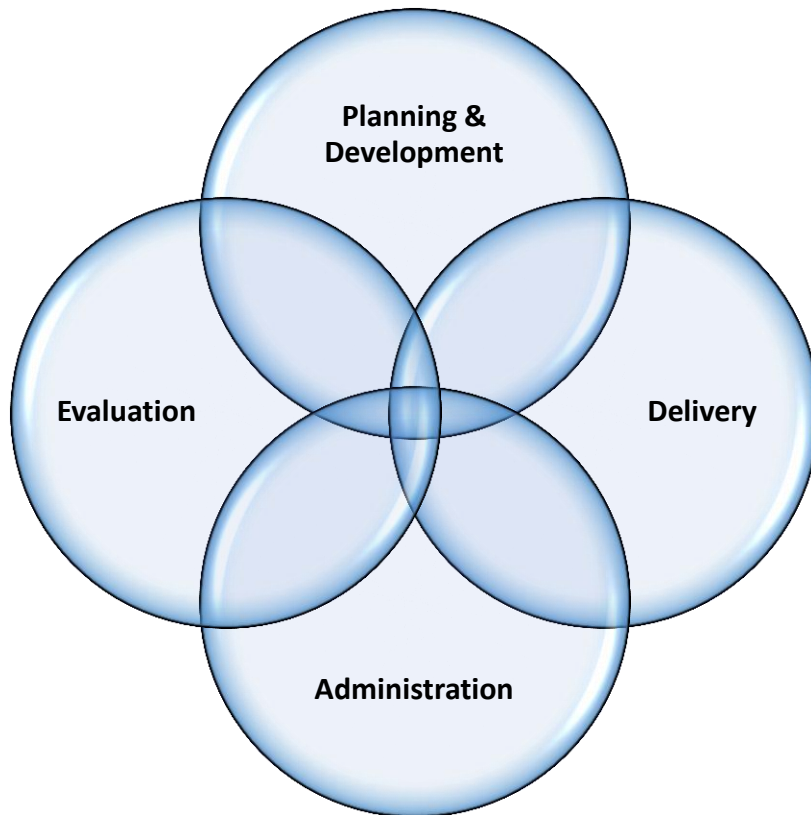
CPD has been defined by the GDC as follows: “CPD for dental professionals is defined in law as lectures, seminars, courses, individual study, and other activities, that can be included in your CPD record if it can be reasonably expected to advance your professional development as a dentist or dental care professional, and is relevant to your practice or intended practice”.

## Scope of the Framework

This Framework encompasses different types of CPD provision (face to face, ‘hands-on’, online, journal and conference formats), from a range of different providers (private / commercial providers, academic institutions and postgraduate deaneries).

## Framework Overview

The Framework is structured around four principle areas vital to quality CPD: Planning and Development, Delivery, Evaluation and Administration.



The sections within the Framework are as follows:

- 1. CPD Planning & Development**
  - 1.1. Educational Aims & Learning Outcomes*
  - 1.2. Educational Design & Development*
- 2. CPD Delivery**
  - 2.1. Teachers & Trainers*
  - 2.2. Delivery Methods*
  - 2.3. Assessment of Participants' Learning*
- 3. CPD Evaluation**
- 4. CPD Administration**

Two levels of quality are described within the Framework: “Expected standard” and “Enhanced provision”.

Expected  
Standard

Describes the minimum required quality criteria considered appropriate to ensure effectiveness in terms of educational impact.

Enhanced  
CPD

Describes enhanced provision that encompasses processes that demonstrate improvements in the quality of provision beyond the ‘expected standard’. Activities are developed and delivered by experts in their field, have evidence-informed content and use effective & engaging delivery methods. CPD activities in this category have been shown through evaluation to lead to high levels of participants’ satisfaction, & have a demonstrable positive educational impact on participants’ practice and/ or patient outcomes.

### How to Use this Framework

For each of the four areas highlighted above, a range of key quality criteria for CPD are described in tables, representing provision that meets the “Expected Standard” and also for “Enhanced Provision”. If the CPD activity / provider fulfils the performance criteria and can provide supporting evidence in this respect, this is indicated as having “MET” the level.

This Framework focusses upon CPD *activities*, although a number of the quality criteria may be relevant to the *provider*, i.e. across all of their provision.

**In order for a CPD activity to reach the “Expected Standard” or “Enhanced Provision” level, all the quality criteria for that level should be met.** Providers should be able to support declarations of meeting quality indicated with evidence if necessary, as it is anticipated that CPD users may request this information (particularly in areas where it may be difficult for them to assess compliance for themselves). Providers may wish to make such evidence accessible to potential participants of CPD activities via websites or marketing material. Where supporting evidence can be provided, providers may claim that the CPD activity meets the COPDEND quality criteria for Dental CPD. However, use of the COPDEND logo is not allowed without specific prior consent. Review of the evidence supporting the quality criteria within this framework should be carried out as follows:

**“Expected Standard”** Self-assessment by the provider, with supporting evidence available to potential CPD users upon request.

**“Enhanced Provision”** External review of the evidence supporting the quality criteria, by an independent party with relevant expertise. Supporting evidence available to potential CPD users upon request.

***Those responsible for ‘independent external review’ (4.7), ‘appropriate and/or educational expertise’ (1.1.6;1.2.4; 2.3.2), or ‘independent and/or 3<sup>rd</sup> party input’ (1.1.6; 1.2.4; 2.1.3), must satisfy themselves that those involved in providing this activity are appropriately qualified to act in this capacity***

Further guidance for the interpretation of the quality criteria is provided in the second part of this Framework. A glossary of terms is in Appendix 2.

# Quality Criteria for CPD



## 1. CPD Planning and Development

1.1	Educational Aims, Objectives and Learning Outcomes	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
1.1.1	Clear and concise educational aims, objectives and learning outcomes are available for the CPD activity.	YES	YES		<ul style="list-style-type: none"> <li>• Written documents, such as course programme, CPD certificate, flyer.</li> <li>• Online programme</li> <li>• Other documents e.g. speaker agreement for activity, lesson plans, or within conference delegate pack</li> </ul>
1.1.2	Educational aims, objectives and learning outcomes are published in advance and are easily accessible by potential participants of the CPD activity, so that the content and relevance of the activity can be considered before registering.	YES	YES		<ul style="list-style-type: none"> <li>• Publication of evidence for 1.1.1 before the activity (date available), i.e. marketing documents, emails, flyers, online, provider website.</li> </ul>
1.1.3	Educational objectives and learning outcomes are specific, measurable, achievable relevant and time-bound (SMART).	YES	YES		<ul style="list-style-type: none"> <li>• CPD supporting documentation, e.g. programme, certificates, slides.</li> <li>• Website / online info for CPD activity</li> <li>• Speakers contracts</li> <li>• Conference delegate pack</li> </ul>
1.1.4	Participants have an opportunity to provide feedback regarding whether the educational aims, objectives and learning outcomes for the CPD activity have been achieved. (see also section 3)	YES	YES		<ul style="list-style-type: none"> <li>• Feedback forms (paper / online) with appropriate content i.e. linked to aims, objectives, LO’s.</li> <li>• Other course evaluation documents e.g. record of focus groups, written reports</li> </ul>
1.1.5	Educational aims, objectives and learning outcomes are documented, e.g. on certificates provided for the CPD activity.	YES	YES		<ul style="list-style-type: none"> <li>• Certificates</li> <li>• See also examples in 1.1.1.</li> </ul>
1.1.6	Educational aims, objectives and learning outcomes are written by an appropriate individual with subject-matter expertise, and reviewed by an independent third party with appropriate	YES	YES		<ul style="list-style-type: none"> <li>• CPD documentation, website</li> <li>• Speaker contract</li> <li>• Certificates</li> </ul>

	expertise, to ensure they are appropriate and relevant for the target audience.				<ul style="list-style-type: none"> <li>• Documents signed off by third party</li> </ul>
1.1.7	Educational aims, objectives and learning outcomes for the CPD activity address an identified training need for the individual.	NO	YES		<ul style="list-style-type: none"> <li>• Consideration of participants' PDPs.</li> <li>• Evidence that participants have been given the opportunity to share their personal training needs with provider (or individual developing/delivering content)</li> <li>• Pre-activity assessment</li> <li>• Links to appraisal process.</li> </ul>
1.1.8	Educational aims, objectives and learning outcomes are reviewed (and if appropriate, revised) following evaluation of the CPD activity (including participants' feedback on their relevance).	YES	YES		<ul style="list-style-type: none"> <li>• Documentation of changes over time e.g. in database</li> <li>• Quality reports, course review meeting minutes etc</li> <li>• Course evaluation records</li> </ul>
1.1.9	The review of educational aims, objectives and learning outcomes are integrated into the providers' formal quality assurance and improvement strategy.	NO	YES		<ul style="list-style-type: none"> <li>• Quality assurance and improvement strategy documents, inc. policy and records of evaluations.</li> </ul>

1.2	Educational Design & Development	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
1.2.1	The content is developed by recognised experts in the specific subject area that the CPD activity is focusing upon.	Yes	yes		<ul style="list-style-type: none"> <li>• Speaker agreement / contract.</li> <li>• Credentials of developer, e.g. cv, qualification, experience, publications, job spec</li> </ul>
1.2.2	The qualifications, experience and expertise of the individual responsible for developing the content of the CPD is reviewed by the provider, and details made available to potential participants in advance of the CPD activity.	Yes	Yes		<ul style="list-style-type: none"> <li>• Evidence of review, e.g. signed document, meeting record</li> <li>• Details published in course documentation (marketing docs), e.g. website, flyer, database</li> </ul>
1.2.3	Content is explicitly evidence-based or evidence-informed where possible, and sources and / or supporting evidence for the content is referenced so that participants are informed.	Yes	Yes		<ul style="list-style-type: none"> <li>• Declaration by course developer</li> <li>• Course content includes sources of evidence e.g. publications.</li> </ul>
1.2.4	Content is reviewed to check that it is current, accurate and appropriate for the target audience by an independent third party with appropriate expertise. Reviews of content take place prior to the activity being delivered for the first time, and at regular intervals thereafter (where participant feedback is also considered).	No	Yes		<ul style="list-style-type: none"> <li>• Document signed by third party confirming review has taken place.</li> <li>• Record of meeting(s) when review was undertaken.</li> <li>• Database or schedule of dates reviews have taken place.</li> </ul>
1.2.5	The instructional design of the activity uses evidence-based educational strategies to maximise participant engagement (including strategies to address the needs of audiences where different professional groups are learning together).	No	Yes		<ul style="list-style-type: none"> <li>• Course programme highlights strategies used.</li> <li>• Participant feedback on effectiveness of engagement strategies.</li> </ul>
1.2.6	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, through consideration of the prior knowledge of the participants.	No	Yes		<ul style="list-style-type: none"> <li>• Evidence that prior knowledge considered, e.g. through discussion with participants, PDPs, pre-assessment, or description of prior knowledge needed to take course.</li> <li>• Documentation of educational</li> </ul>

					strategies used, e.g. CPD programme, delivery plan etc.
1.2.7	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, by ensuring contextual relevance for the target audience.	No	Yes		<ul style="list-style-type: none"> <li>• Log books, work records of participants considered.</li> <li>• Evidence within CPD delivery plan, course content etc.</li> </ul>
1.2.8	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, by incorporating time for reflection, discussion, questions and providing feedback.	No	Yes		<ul style="list-style-type: none"> <li>• Documented within CPD programme, delivery plan, etc</li> <li>• Participant feedback on these areas.</li> <li>• Written reflection by participants</li> </ul>

## 2. CPD Delivery

2.1	Teachers and Trainers	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
2.1.1	Individuals responsible for the delivery of the CPD are identified through robust and transparent processes, on the basis of their experience and expertise in the subject matter.	Yes	Yes		<ul style="list-style-type: none"> <li>• Recruitment policy &amp; process recorded</li> <li>• Speaker(s) (or online developer) CVs, qualifications, prior experience etc.</li> <li>• Previous feedback regarding speaker, or peer review.</li> </ul>
2.1.2	The individual responsible for delivering the CPD has the necessary qualifications (relevant to the subject matter), experience and / or expertise. These attributes are reviewed by the provider and recorded.	Yes	Yes		<ul style="list-style-type: none"> <li>• Qualifications (evidence checked e.g. certificates), record of relevant experience (CV, Biography)</li> <li>• Signed record the qualification / experience have been reviewed.</li> </ul>
2.1.3	The qualifications, experience and expertise of the individual responsible for delivering the CPD activity is reviewed by the provider, checked by an independent third party with appropriate expertise and details made available to potential participants in advance of the CPD activity.	No	Yes		<ul style="list-style-type: none"> <li>• Record of review by 3<sup>rd</sup> party &amp; provider</li> <li>• Trainer database or register of expertise</li> <li>• Online information or within conference packs</li> </ul>
2.1.4	Teachers / trainers are fully prepared to deliver the CPD, and have an understanding of the target audience, their prior knowledge and experience, and the context within which they work.	No	Yes		<ul style="list-style-type: none"> <li>• Record of induction / briefing notes including relevant info on participants</li> <li>• Speaker agreement / course plan</li> <li>• Pre-course survey or assessment</li> </ul>
2.1.5	The CPD activity has been checked for conflicts of interest regarding the individual responsible for delivering the CPD, and where these exist they are communicated directly to participants in advance of (and during) the activity.	Yes	Yes		<ul style="list-style-type: none"> <li>• Documentation, e.g. course program, website info, conference pack</li> <li>• Evidence within CPD content e.g. slides, online</li> </ul>

					<ul style="list-style-type: none"> <li>• Signed declaration form</li> </ul>
2.1.6	The CPD activity is checked for promotion or sponsorship, and where this exists this is explicitly declared to participants. (see also section 4).	Yes	Yes		<ul style="list-style-type: none"> <li>• Declaration within content, e.g. slides, course materials, online, conference pack</li> </ul>
2.1.7	Teachers / trainers have undertaken formal training in educational theory and methods, and have attained formal recognition by an appropriate nationally recognised body.	No	Yes		<ul style="list-style-type: none"> <li>• Certificates, CV's</li> <li>• Teacher register / database</li> </ul>

2.2	Delivery methods	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
2.2.1	There is a single point of contact for participants prior to, during and following a CPD activity, to manage administrative and educational queries.	Yes	Yes		<ul style="list-style-type: none"> <li>• Contact details recorded on marketing docs, CPD programme, online, conference pack etc.</li> </ul>
2.2.2	Delivery methods are appropriate for the learning objectives, anticipated outcomes, and target audience.	Yes	Yes		<ul style="list-style-type: none"> <li>• Participant feedback on delivery methods, relevance etc.</li> <li>• Record of review</li> <li>• CPD activity plan</li> </ul>
2.2.3	Delivery methods use appropriate techniques to ensure the effective and consistent engagement of participants in the CPD activity.	Yes	Yes		<ul style="list-style-type: none"> <li>• Participant feedback on engagement</li> <li>• CPD activity plan, detailing strategies used</li> </ul>
2.2.4	Delivery methods employ techniques that enhance participants’ understanding and learning, such as questioning, discussion, time for reflection, feedback etc.	Yes	Yes		<ul style="list-style-type: none"> <li>• Participant feedback on perceived educational impact</li> <li>• CPD activity plan, detailing strategies used</li> </ul>

2.3	Assessment of participants' learning	Required for "Expected" Standard	Required for "Enhanced" Provision	MET? Yes/No	Examples of potential supporting evidence
2.3.1	The CPD activity includes an assessment of participants' learning (knowledge, skills or behaviours relevant to the learning outcomes of the activity), using appropriate assessment methods.	Yes	Yes		<ul style="list-style-type: none"> <li>Assessment documentation, including areas targeted and method used, e.g. knowledge test, observation, simulation etc.</li> </ul>
2.3.2	The design of assessment content / questions, and marking criteria, are reviewed by an individual with educational expertise to ensure they are robust.	No	Yes		<ul style="list-style-type: none"> <li>Signed record of review</li> <li>Reviewers qualifications / experience</li> </ul>
2.3.3	Feedback is provided to participants following the assessment of their learning, in a format that enables individual participants to understand whether the activity has increased (or confirmed) their knowledge, skills and / or behaviours.	No	Yes		<ul style="list-style-type: none"> <li>Feedback documentation (example), record of discussion (if verbal).</li> </ul>
2.3.4	A minimum standard or pass-mark is applied to the assessment, of which achievement is necessary in order to be given documentary evidence of recognition such as a CPD certificate / award. This standard is sufficiently challenging, set using robust processes, and is considerate of the target audience.	No	Yes		<ul style="list-style-type: none"> <li>Documents highlighting the standard and how it was identified (e.g. through benchmarking, previous data analysis etc.)</li> </ul>
2.3.5	Assessments are marked either objectively, or by an individual with appropriate expertise in the subject matter (e.g. teacher / trainer).	No	Yes		<ul style="list-style-type: none"> <li>Documents highlighting marking process (e.g. electronic, observation), including any details of criteria used for judgements if not objective.</li> </ul>
2.3.6	Assessment methods have been tested and shown to be robust in terms of validity and reliability.	No	Yes		<ul style="list-style-type: none"> <li>Evaluation data / report</li> </ul>
2.3.7	Pre- and Post- activity assessments are used to identify levels of prior knowledge and measure learning achieved via the CPD activity. ( <i>where appropriate</i> )	No	Yes		<ul style="list-style-type: none"> <li>Pre- &amp; post- assessment documents (examples).</li> <li>Indication why 'not appropriate' if not in place.</li> </ul>



### 3 CPD Evaluation

	CPD Evaluation	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
3.1	Structured feedback is obtained from individual participants following each CPD activity.	Yes	Yes		<ul style="list-style-type: none"> <li>• Feedback form (paper / online)</li> <li>• Collated feedback report</li> </ul>
3.2	Participants are able to provide feedback anonymously.	Yes	Yes		<ul style="list-style-type: none"> <li>• Documented process for anonymisation</li> </ul>
3.3	Where questionnaires are used to obtain feedback from participants, the content and questions are directly relevant to the CPD activity being evaluated, with space available for detailed feedback and suggestions.	Yes	Yes		<ul style="list-style-type: none"> <li>• Example of feedback questionnaire, including structure (Qu’s asked, space for comments etc.) and relevance to CPD activity.</li> </ul>
3.4	Feedback from participants is requested regarding their satisfaction with the CPD activity in terms of educational effectiveness, including (1) achieving the learning objectives and outcomes, (2) quality of educational design and delivery, (3) relevance, (4) ability to engage participants, (5) value for money, (6) absence of commercial bias or promotion.	Yes	Yes		<ul style="list-style-type: none"> <li>• Example of structured questionnaire including questions targeting each of the 6 areas.</li> </ul>
3.5	Structured feedback from participants is requested regarding the perceived impact of the CPD activity, on future practice and / or patient care and outcomes.	No	Yes		<ul style="list-style-type: none"> <li>• Example of structured feedback relating to perceived impact</li> </ul>
3.6	Outcomes of CPD activities on the participant and / or their practice are investigated using appropriate evaluation methods, and the results (from previous evaluations of the activity) are made available for participants.	No	Yes		<ul style="list-style-type: none"> <li>• Reports detailing previous evaluations available to participants (published online or available upon request).</li> <li>• Report or outcomes evaluation data.</li> </ul>
3.7	The longer term impact of CPD activities on the participant and / or patients is investigated through follow up evaluation at an appropriate time period after the event.	No	Yes		<ul style="list-style-type: none"> <li>• Report or evaluation data over longitudinal timeframe, e.g. database, follow-up emails, follow-up surveys or KPIs.</li> </ul>

3.8	Feedback from participants is routinely analysed in a systematic manner, and reviewed by all those responsible for the development and delivery of the CPD activity.	Yes	Yes		<ul style="list-style-type: none"> <li>• Evaluation strategy and data repository e.g. database, file etc.</li> <li>• Signed report following review, or record of review meeting</li> </ul>
3.9	Participant feedback data is recorded and stored appropriately.	Yes	Yes		<ul style="list-style-type: none"> <li>• Details of how data recorded and stored, e.g. reports, database</li> </ul>
3.10	Concerns raised by participants are considered by providers and addressed where appropriate in subsequent activities.	Yes	Yes		<ul style="list-style-type: none"> <li>• Quality improvement strategy</li> <li>• Audits, review meeting records</li> <li>• Record of concerns raised and changes made to CPD activity (or reason why no changes made)</li> </ul>
3.11	Participant feedback regarding CPD activities is embedded within a formal quality improvement process, with clear feedback loops to educational development.	No	Yes		<ul style="list-style-type: none"> <li>• Quality improvement process documentation</li> <li>• Evidence that feedback loops are in place e.g. review meetings, documented changes to CPD activity, audit</li> </ul>
3.12	Multiple sources of evidence are considered in the quality improvement process for CPD activities, including participant feedback, assessment results and needs analysis. Longitudinal data is considered for courses that are repeated periodically.	No	Yes		<ul style="list-style-type: none"> <li>• Quality improvement strategy documents</li> <li>• Examples of documents used e.g. feedback questionnaires, assessments</li> <li>• Longitudinal data in database / records</li> <li>• Quality review meeting records / notes</li> </ul>
3.13	The Provider has a published policy about managing complaints or concerns that is made available to potential participants.	Yes	Yes		<ul style="list-style-type: none"> <li>• Policy document</li> <li>• Evidence of publication e.g. website, emails etc</li> </ul>

## 4 CPD Administration

	CPD Administration	Required for “Expected” Standard	Required for “Enhanced” Provision	MET? Yes/No	Examples of potential supporting evidence
4.1	Details of the CPD activity are published in advance and available to participants, including details of the activities aims, learning objectives and anticipated outcomes, format, teacher / trainer (or developer for online or printed CPD), duration and cost.	Yes	Yes		<ul style="list-style-type: none"> <li>CPD activity details on e.g. website, flyer, marketing documents, CPD programme, conference pack</li> </ul>
4.2	Appropriate records are kept securely by the provider, including the number of verifiable CPD hours completed by participants, title, aims, objectives and learning outcomes of each CPD activity, and evaluation data.	Yes	Yes		<ul style="list-style-type: none"> <li>Example of records kept (e.g. register, files, database)</li> <li>Governance documents</li> </ul>
4.3	Documentary evidence (e.g. CPD certificates) are provided to participants upon completion of the activity, where evidence of engagement with the CPD activity can be demonstrated. These include the title and learning outcomes for the activity, and the number of verifiable CPD hours.	Yes	Yes		<ul style="list-style-type: none"> <li>Certificates with relevant content</li> </ul>
4.4	Documentary evidence (e.g. CPD certificates) include a prompt for the CPD user to reflect on their learning and link this to their professional development plan.	No	Yes		<ul style="list-style-type: none"> <li>CPD Certificate with prompt</li> <li>Other documentary evidence of prompt, e.g. email, online system</li> </ul>
4.5	The provider has a quality assurance policy for CPD activities, including transparent processes for quality improvement.	Yes	Yes		<ul style="list-style-type: none"> <li>Quality assurance policy</li> <li>Quality improvement strategy and evidence of implementation e.g. database, records, audit, review meetings</li> </ul>
4.6	Internal quality reviews of provision are carried out at appropriate and regular intervals.	No	Yes		<ul style="list-style-type: none"> <li>Documents recording review processes e.g. reports, meeting records (with dates), action plans, database</li> </ul>

4.7	Quality assurance of CPD activities includes independent external review.	No	Yes		<ul style="list-style-type: none"> <li>Signed document from external reviewer</li> </ul>
4.8	Continual improvements to CPD provision are documented.	No	Yes		<ul style="list-style-type: none"> <li>Quality improvement records with dates, e.g. database, files, meeting notes</li> </ul>
4.9	CPD activities are checked for presence of commercial interests or commercial support / promotion, and where these exist they are disclosed to participants in advance.	Yes	Yes		<ul style="list-style-type: none"> <li>Evidence on materials distributed prior to the activity, e.g. marketing material, course programmes, online, conference packs, slides prior to lecture...</li> </ul>
4.10	Educational content and any commercial sponsorship, support or promotion are kept completely separate.	Yes	Yes		<ul style="list-style-type: none"> <li>CPD activity documentation</li> <li>Speaker agreements, declaration</li> <li>Layout of activity (online / conference)</li> </ul>
4.11	The provider has a formal system of quality management relevant to CPD provision.	Yes	Yes		<ul style="list-style-type: none"> <li>Quality management policy documents and evidence of implementation, e.g. records, database, files</li> </ul>
4.12	The learning environment (and facilities) are appropriate, supporting participant engagement and learning.	Yes	Yes		<ul style="list-style-type: none"> <li>Participant feedback</li> <li>Review / report from provider</li> </ul>

# Quality Criteria Guidance Notes

**Those responsible for ‘independent external review’ (4.7), ‘appropriate and/or educational expertise’ (1.1.6;1.2.4; 2.3.2), or ‘independent and/or 3<sup>rd</sup> party input’ (1.1.6; 1.2.4; 2.1.3), must satisfy themselves that those involved in providing this activity are appropriately qualified to act in this capacity**

## 1 CPD Planning and Development

1.1	Educational Aims, Objectives & Learning Outcomes	Description / Additional Notes	Responsibility (A,B or C)*
1.1.1	Clear and concise educational aims, objectives and learning outcomes are available for the CPD activity.	<i>Educational aims, objectives and learning outcomes should be written in clear English, free from unnecessary jargon / acronyms, and accurately reflect the content and context of the provision.</i>	<b>A</b>
1.1.2	Educational aims, objectives and learning outcomes are published in advance and are easily accessible by potential participants of the CPD activity, so that the content and relevance of the activity can be considered before registering.	<i>Educational aims, objectives and learning outcomes should be published on marketing material, and websites.</i>	<b>A</b>
1.1.3	Educational objectives and learning outcomes are specific, measurable, achievable, relevant and time-bound (SMART).	<i>“Outcomes” may include the outcomes on the individual participant, their practice, and / or patients.</i>	<b>C</b>
1.1.4	Participants have an opportunity to provide feedback regarding whether the educational aims, objectives and learning outcomes for the CPD activity have been achieved. (see also section 3)	<i>Best practice would move beyond a single global question on a feedback form such as ‘Have all the learning outcomes been met?’ to provide participants with the opportunity to comment on each of the Learning Outcomes individually, and provide qualitative feedback on each and the degree they feel that they have been met or otherwise.</i>	<b>A</b>
1.1.5	Educational aims, objectives and learning outcomes are documented, e.g on certificates provided for the CPD activity.	<i>This allows participants to easily access the necessary information to evidence CPD activities.</i>	<b>A</b>
1.1.6	Educational aims, objectives and learning outcomes are written by an appropriate individual with subject-matter expertise, and reviewed by an independent third party with appropriate expertise, to ensure they are appropriate and		<b>A</b>

	relevant for the target audience.		
1.1.7	Educational aims, objectives and learning outcomes for the CPD activity address an identified training need for the individual.	<i>Various mechanisms exist to identify training needs, from priorities identified as being relevant to all professionals such as GDC, CQC topic recommendations etc., to individual professionals' training needs such as via appraisal, self-assessment and reflection on practice, addressing concerns etc. Individual training needs analysis is also the responsibility of the user, and provider input to this process may not be possible.</i>	<b>C</b>
1.1.8	Educational aims, objectives and learning outcomes are reviewed (and if appropriate, revised) following evaluation of the CPD activity (including participants' feedback on their relevance).	<i>Review should consider a range of evidence, including participant feedback, training needs information and contextual factors / relevance, to ensure that educational aims, objectives and learning outcomes remain appropriate.</i>	<b>A, B</b>
1.1.9	The review of educational aims, objectives and learning outcomes are integrated into the providers' formal quality assurance and improvement strategy.	<i>The processes for review, including how often, by whom, and the evidence / data considered during the process should be identified within the strategy. Reviews and changes to educational aims, objectives and learning outcomes should be recorded.</i>	<b>A</b>

- \* **A = The organisation either commissioning or providing the CPD activity (or both).**  
**B = The co-ordinator of the CPD activity**  
**C = The individual(s) delivering and / or developing the CPD activity**

1.2	Educational Design & Development	Description / Additional Notes	Responsibility (A,B or C)*
1.2.1	The content is developed by recognised experts in the specific subject area that the CPD activity is focusing upon.	<i>“Recognised experts” would include individuals with specialist knowledge or qualifications in the area, or those who have published in the area.</i>	<b>B</b>
1.2.2	The qualifications, experience and expertise of the individual responsible for developing the content of the CPD is reviewed by the provider, and details made available to potential participants in advance of the CPD activity.	<i>Reviews of qualifications and experience should be transparent and where a conflict of interest occurs (between the reviewer and the proposed teacher / trainer) this should be declared.</i>	<b>A, B</b>
1.2.3	Content is explicitly evidence-based or evidence-informed where possible, and sources and / or supporting evidence for the content is referenced so that participants are informed.	<i>The references / evidence-base should be available for participants to consider both during and after the activity, e.g. on information sheets, website etc. Where evidence is not available, this should be made clear to participants.</i>	<b>C</b>
1.2.4	Content is reviewed to check that it is current, accurate and appropriate for the target audience by an independent third party with appropriate expertise. Reviews of content take place prior to the activity being delivered for the first time, and at regular intervals thereafter (where participant feedback is also considered).	<i>Where content is developed by the teacher / trainer, the third party may be a member of the provider organisation, or external expert where available.</i>  <i>‘Regular intervals’ would depend on the frequency that the activity is provided, but for face to face courses this should be at least annually.</i>	<b>A, B</b>
1.2.5	The instructional design of the activity uses evidence-based educational strategies to maximise participant engagement (including strategies to address the needs of audiences where different professional groups are learning together).	<i>In addition to attendance monitoring i.e. registers that sign ‘in’ and ‘out’ (or log activity whilst online), strategies may include (but not be limited to) initiatives such as regular questioning, discussion, exercises throughout and during provision, quizzes throughout the activity, and assessments.</i>	<b>C</b>
1.2.6	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, through consideration of the prior knowledge of the participants.	<i>Strategies may include (but not be limited to) initiatives such as requesting contextual information from participants in advance so that content can be targeted, raising contextual relevance during discussions, strategies to ensure relevance for audiences of mixed professionals or those with a varying degree of prior experience.</i>	<b>C</b>



1.2.7	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, by ensuring contextual relevance for the target audience.	<i>Strategies may include (but not be limited to) initiatives such as requesting contextual information from participants in advance so that content can be targeted, raising contextual relevance during discussions, strategies to ensure relevance for audiences of mixed professionals or those with a varying degree of prior experience.</i>	<b>C</b>
1.2.8	The instructional design of the activity uses evidence-based educational strategies to enhance participant learning, by incorporating time for reflection, discussion, questions and providing feedback.	<i>Such strategies should be embedded within the activity, at (appropriate) and regular intervals, rather than a single short opportunity at the end of the activity.</i>	<b>C</b>

- \* **A = The organisation either commissioning or providing the CPD activity (or both).**  
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**C = The individual(s) delivering and / or developing the CPD activity**

## 2 CPD Delivery

2.1	Teachers and Trainers	Description / Additional Notes	Responsibility (A,B or C)*
2.1.1	Individuals responsible for the delivery of the CPD are identified through robust and transparent processes, on the basis of their experience and expertise in the subject matter.	<i>Experience and expertise in the subject matter should be prioritised, although availability and cost are also important factors. Any conflicts of interest between the provider staff and potential teachers / trainers should be declared.</i>	<b>A, B</b>
2.1.2	The individual responsible for delivering the CPD has the necessary qualifications (relevant to the subject matter), experience and / or expertise. These attributes are reviewed by the provider and recorded.	<i>Reviews of qualifications and experience should be transparent and where a conflict of interest occurs (between the reviewer and the proposed teacher / trainer) this should be declared.</i>	<b>A, B</b>
2.1.3	The qualifications, experience and expertise of the individual responsible for delivering the CPD activity is reviewed by the provider, checked by an independent third party with appropriate expertise and details made available to potential participants in advance of the CPD activity.	<i>Where content is developed by the teacher / trainer, the third party may be a member of the provider organisation, or external expert where available. Details could be provided on marketing material, or easily accessible (and signposted) on websites.</i>	<b>A, B</b>
2.1.4	Teachers / trainers are fully prepared to deliver the CPD, and have an understanding of the target audience, their prior knowledge and experience, and the context within which they work.	<i>Providers should provide orientation for new teachers / trainers where required, and details of the target audience (ideally for individual participants where variation exists)</i>	<b>C</b>
2.1.5	The CPD activity has been checked for conflicts of interest regarding the individual responsible for delivering the CPD, and where these exist they are communicated directly to participants in advance of (and during) the activity.	<i>Conflicts of interest should be communicated clearly on all marketing material in advance of provision (when participants are choosing activities), and again at the onset of provision.</i>	<b>C</b>
2.1.6	The CPD activity is checked for promotion or sponsorship, and where this exists this is explicitly declared to participants. (see also section 4).	<i>This may include (but is not restricted to) use of branded services, products, medicaments and materials in lectures and demonstrations. Wherever possible generic terminology should be used and /or all relevant products described.</i>	<b>C</b>
2.1.7	Teachers / trainers have undertaken formal training in		

	educational theory and methods, and have attained formal recognition by an appropriate nationally recognised body.		<b>A, B, C</b>
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- \* **A = The organisation either commissioning or providing the CPD activity (or both).**
- B = The co-ordinator of the CPD activity**
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2.2	Delivery Methods	Description / Additional Notes	Responsibility (A,B or C)*
2.2.1	There is a single point of contact for participants prior to, during and following a CPD activity, to manage administrative and educational queries.	<i>The contacts for administrative and educational queries may be different individuals within the provider organisation, or the point of contact may be teacher / trainer themselves. Contact details should be clear to participants.</i>	A, B
2.2.2	Delivery methods are appropriate for the learning objectives, anticipated outcomes, and target audience.	<i>Delivery methods should reflect the objectives and be those most effective to achieve the anticipated outcomes, prioritising learner engagement, and opportunities for reflection and feedback. E.g. delivery methods for CPD activities focusing on the development of practical skills should involve demonstration and opportunity for practice, CPD aiming to enhance knowledge should include opportunities for dialogue, contextual discussions, or assessment with feedback.</i>	C
2.2.3	Delivery methods use appropriate techniques to ensure the effective and consistent engagement of participants in the CPD activity.	<i>Strategies may include (but not be limited to) initiatives such as registers that sign 'in' and 'out' (or log activity whilst online), regular questioning, discussion, exercises throughout and during face to face provision, quizzes throughout the activity, and assessments.</i>	C
2.2.4	Delivery methods employ techniques that enhance participants' understanding and learning, such as questioning, discussion, time for reflection, feedback etc.	<i>There is strong evidence that active engagement of participants increases the effectiveness of educational activities.</i>	C

- \* **A = The organisation either commissioning or providing the CPD activity (or both).**  
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2.3	Assessment of Participants' Learning	Description / Additional Notes	Responsibility (A,B or C)*
2.3.1	The CPD activity includes an assessment of participants' learning (knowledge, skills or behaviours relevant to the learning outcomes of the activity), using appropriate assessment methods.	<i>Assessment methods should reflect the educational aims and learning outcomes, e.g. CPD to enhance knowledge could use MCQs, short answer questions etc, whereas CPD teaching practical skills may be assessed using experts judgements following observed performance. Participants' self-assessment alone is not considered to be effective in this context.</i>	<b>B, C</b>
2.3.2	The design of assessment content / questions, and marking criteria, are reviewed by an individual with educational expertise to ensure they are robust.	<i>For example, to ensure MCQs are sufficiently challenging, free from bias and unambiguous etc.</i>	<b>A, B</b>
2.3.3	Feedback is provided to participants following the assessment of their learning, in a format that enables individual participants to understand whether the activity has increased (or confirmed) their knowledge, skills and / or behaviours.	<i>In addition to the results from the assessment (correct / incorrect answers) this would ideally include further detailed feedback, or signposting to content or further learning opportunities.</i>	<b>A, B</b>
2.3.4	A minimum standard or pass-mark is applied to the assessment, of which achievement is necessary in order to be given documentary evidence of recognition such as a CPD certificate / award. This standard is sufficiently challenging, set using robust processes, and is considerate of the target audience.	<i>"Sufficiently challenging" should ensure that the pass mark is unlikely to be achieved by 'guessing' alone, and is indicative of having achieved the learning outcomes.</i>	<b>B, C</b>
2.3.5	Assessments are marked either objectively, or by an individual with appropriate expertise in the subject matter (e.g. teacher / trainer).		<b>C</b>
2.3.6	Assessment methods have been tested and shown to be robust in terms of validity and reliability.		<b>C</b>
2.3.7	Pre- and Post- activity assessments are used to identify levels of prior knowledge and measure learning achieved via the CPD activity. ( <i>where appropriate</i> )		<b>C</b>

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### 3 CPD Evaluation

3	CPD Evaluation	Description / Additional Notes	Responsibility (A,B or C)*
3.1	Structured feedback is obtained from individual participants following each CPD activity.	<i>This should include the opportunity to provide qualitative comments on the activity, across a range of areas (not limited to 'tick boxes'). Feedback should be directly relevant to the specific CPD activity, and not just relate to the environment.</i>	<b>A, B</b>
3.2	Participants are able to provide feedback anonymously.		<b>A, B</b>
3.3	Where questionnaires are used to obtain feedback from participants, the content and questions are directly relevant to the CPD activity being evaluated, with space available for detailed feedback and suggestions.	<i>Questions should ideally be targeted appropriately rather than generic forms across all provision. Appropriate content for participant questionnaires includes: achievement of the learning outcomes of the CPD event with regard to achievement of the educational outcomes, content coverage and extent of knowledge imparted, usefulness and relevance of the information provided, skills of the presenter, and suitability of the venue.</i>	<b>A, B, C</b>
3.4	Feedback from participants is requested regarding their satisfaction with the CPD activity in terms of educational effectiveness, including (1) achieving the learning objectives and outcomes, (2) quality of educational design and delivery, (3) relevance, (4) ability to engage participants, (5) value for money, (6) absence of commercial bias or promotion.	<i>Appropriate content for participant questionnaires includes: achievement of the learning objectives / outcomes of the CPD event with regard to achievement of the educational outcomes, content coverage and extent of knowledge imparted, usefulness and relevance of the information provided, skills of the presenter, and suitability of the venue.</i>	<b>A</b>
3.5	Structured feedback from participants is requested regarding the perceived impact of the CPD activity, on future practice and / or patient care and outcomes.	<i>This level of feedback could be sought immediately following participation in the CPD activity. This can be with regard to any area of practice, including non-clinical aspects.</i>	<b>A</b>
3.6	Outcomes of CPD activities on the participant and / or their practice are investigated using appropriate evaluation methods, and the results (from previous evaluations of the activity) are made available for participants.	<i>Appropriate evaluation methods will depend on the type of CPD / learning. A number of methods / tools have been used to measure the outcomes of CPD on practitioners, including questionnaires, knowledge tests, performance assessment, post-activity interviews and detailed (structured) reflective accounts. A range of outcomes</i>	<b>A, B</b>

		<i>can be measured, depending on the aims and learning outcomes of the CPD: in addition to changes in knowledge, skills and behaviours, outcomes could include confidence, self-efficacy, teamwork and commitment to change.</i>	
3.7	The longer term impact of CPD activities on the participant and / or patients is investigated through follow up evaluation at an appropriate time period after the event.	<i>For priority or recurring courses / core topics, the collection of baseline data on patient or clinical outcomes and subsequent longitudinal data may be helpful to understand the impact of such CPD.</i>	<b>A, B</b>
3.8	Feedback from participants is routinely analysed in a systematic manner, and reviewed by all those responsible for the development and delivery of the CPD activity.	<i>Analysis should take into account individual feedback and that of the entire cohort / participants.</i>	<b>A,B</b>
3.9	Participant feedback data is recorded and stored appropriately.		<b>A</b>
3.10	Concerns raised by participants are considered by providers and addressed where appropriate in subsequent activities.	<i>Responses and decisions made following concerns should be recorded to ensure that feedback over time can be considered, i.e. providers can look back at previous feedback to identify patterns.</i>	<b>A</b>
3.11	Participant feedback regarding CPD activities is embedded within a formal quality improvement process, with clear feedback loops to educational development.		<b>A, B</b>
3.12	Multiple sources of evidence are considered in the quality improvement process for CPD activities, including participant feedback, assessment results and needs analysis. Longitudinal data is considered for courses that are repeated periodically.		<b>A,B</b>
3.13	The Provider has a published policy about managing complaints or concerns that is made available to potential participants.	<i>Could be made available on website or upon request.</i>	<b>A</b>

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## 4 CPD Administration

4	CPD Administration	Description / Additional Notes	Responsibility (A,B or C)*
4.1	Details of the CPD activity are published in advance and available to participants, including details of the activities aims, learning objectives and anticipated outcomes, format, teacher / trainer (or developer for online or printed CPD), duration and cost.	<i>Information should be clear and easily accessible, on marketing material and websites.</i>	<b>A</b>
4.2	Appropriate records are kept securely by the provider, including the number of verifiable CPD hours completed by participants, title, aims, objectives and learning outcomes of each CPD activity, and evaluation data.		<b>A</b>
4.3	Documentary evidence (e.g. CPD certificates) are provided to participants upon completion of the activity, where evidence of engagement with the CPD activity can be demonstrated. These include the title and learning outcomes for the activity, and the number of verifiable CPD hours.	<i>Where there is no evidence of engagement with the activity, the documentary evidence should be withheld.</i>	<b>A</b>
4.4	Documentary evidence (e.g. CPD certificates) include a prompt for the CPD user to reflect on their learning and link this to their professional development plan.	<i>An example of areas which could be included on documentary evidence e.g. certificates to prompt reflection are (i) Why was this activity selected for CPD? (ii) What was the learning need or objective that was addressed? (iii) What was the outcome of the activity? (iv) Further learning needs (v) Links with PDP</i>	<b>A</b>
4.5	The provider has a quality assurance policy for CPD activities, including transparent processes for quality improvement.	<i>Quality Assurance policies and quality improvement strategies should be available to participants if requested.</i>	<b>A</b>
4.6	Internal quality reviews of provision are carried out at appropriate and regular intervals.	<i>Reviews should involve multiple individuals with appropriate expertise, and consider a range of evidence and feedback regarding CPD effectiveness.</i>	<b>A</b>
4.7	Quality assurance of CPD activities includes independent		<b>A</b>



	external review.		
4.8	Continual improvements to CPD provision are documented.	<i>This should be part of the overall Quality Improvement strategy, and such data should link to reasons / drivers such as participant feedback or changes in target audience, prior experience of participants etc.</i>	<b>A</b>
4.9	CPD activities are checked for presence of commercial interests or commercial support / promotion, and where these exist they are disclosed to participants in advance.	<i>Such declarations should be present on marketing material in addition to the documentation for the CPD activity (e.g. conference programme, course flyers).</i>	<b>A</b>
4.10	Educational content and any commercial sponsorship, support or promotion are kept completely separate.		<b>A</b>
4.11	The provider has a formal system of quality management relevant to CPD provision.		<b>A</b>
4.12	The learning environment (and facilities) are appropriate, supporting participant engagement and learning.		<b>A</b>

## Appendix 1: Expert Advisory Group

Helen Falcon (Chair)	Chair of COPDEND, Postgraduate Dental Dean Health Education Thames Valley & Wessex
Linda Prescott-Clements	Director, Prescott Clements Associates
David Hussey	Postgraduate Dental Dean, Northern Ireland Medical & Dental Training Agency
Jonathan Cowpe	Director, Postgraduate Dental Education, Wales Deanery
Stephen Lambert-Humble	Postgraduate Dental Dean, Health Education Kent, Surrey & Sussex
Tony Anderson	Director of Postgraduate GDP Education, NHS Education for Scotland
Jane Moore	Past-Chair, Dental Tutor Representative Group
Donna Hough	Head of Dental Education & Workforce Development, Health Education North West
Andrew Gould	The Dental Channel
Trevor Burke	Editor, Dental Update / University of Birmingham
Paul Mendelsohn	Chief Executive, CODE
Andrew Hadden	Faculty of General Dental Practice (UK)
Kathy Harley	Dean, Faculty of Dental Surgery, Royal College of Surgeons, England (until June 2014)
Nigel Hunt	Dean, Faculty of Dental Surgery, Royal College of Surgeons, England (from June 2014)
John Darby	Chair of Examination Board, National Examining Board for Dental Nurses
Judith Husband	Chair, British Dental Association, Education & Ethics Committee
Stephen Hancocks	Editor in Chief, British Dental Journal
Lisa Howells	Senior Dental Officer, Welsh Government

## Appendix 2

### Glossary of terms

- “Provider” An organisation which provides CPD for Dentists and Dental Care Professionals in the UK. Examples of providers include Deaneries, Academic Institutions, and private companies specialising in CPD provision.
- “Trainer” or “Teacher” The individual responsible for delivering the CPD: this may be the speaker at a face to face course, podcast, or conference, or the author of a journal article.