

**A Reference Guide for  
Postgraduate Dental Core Training  
in the UK**

**The Dental Silver Guide  
September 2018**

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## ONE: INTRODUCTION

### 1.1 Dental core training in the UK

There are over 600 dental core trainees (DCTs) in training at any one time in the UK. Dental core training is available at three levels: DCT1, DCT2 and DCT3.

This guide is to help those who propose to enter training, those in training and those who quality manage and administer training, in order to ensure a consistent approach irrespective of where that training takes place.

The guidance in this document is applicable UK wide but there are important national variations in terminology and implementation.

Since June 2012 Health Education England (HEE) has had the responsibility in England of supporting the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.

NHS Education for Scotland (NES) has responsibility for developing and delivering education and training for the healthcare workforce to enable excellence in health and care for the people of Scotland. The Northern Ireland Medical and Dental Training Agency (NIMDTA) and Health Education and Improvement Wales (HEIW)<sup>1</sup> have similar roles.

### 1.2 Roles and responsibilities

Postgraduate Deans/Directors (PGDDs), working for HEE, NES, NIMDTA or HEIW, are responsible for the development of the dental core training curriculum, devising assessments, the quality management of dental core training programmes and posts, appointment of trainees, trainers and training programme directors (TPDs) and for the regular review of trainees.

Employing organisations will employ dental core trainees and issue their terms and conditions of employment. HEE, NES, NIMDTA and HEIW do not normally employ trainees and therefore this Guide is not a guide to employment. It is a guide to training.

Training providers (NHS Trusts and Health Boards) should provide well-supervised training to ensure both patient safety and the development of the dental workforce.

### 1.3 Standards for Dental Core Training

Approval of dental core training programmes and posts rests with the PGDDs working for HEE, NES, NIMDTA or HEIW.

Dental core training programmes must conform to the GDC *Standards for the Dental Team*, and the COPDEND (Committee of Postgraduate Dental Deans and Directors) *Curriculum for Dental Core Training*.

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<sup>1</sup> The Wales Deanery will be known as Health Education and Improvement Wales after the 1st October 2018. Between the 1<sup>st</sup> – 30<sup>th</sup> September 2018 (inclusive) trainees will be under the existing Wales Deanery

## TWO: SETTING UP A TRAINING POST

Before setting up a new training post the following need to be considered:

- The workforce demand for the post
- The physical capacity and the educational capacity for the post
- Funding
- Appropriate approval/advice
- Quality Management and Quality Assurance

### 2.1 The workforce demand for the post

Workforce data should inform the number of posts necessary to ensure a supply of dentists with skills enhanced through dental core training. For new posts this is particularly important although in time evidence of need might also be required for replacement posts.

Demand will be determined by the need of the local population and advice should be sought from dental public health groups and commissioners and providers of service as appropriate.

### 2.2 Capacity for the post

Reference must be made to the dental core training curriculum to ensure that any training requirements are available at the proposed site of training. This may include laboratory facilities and access to specialised equipment. Library facilities and access to IT are generic requirements for all dental training posts. PGDDs will also need to be assured of the adequacy of dental chair allocation, theatre allocation etc. along with a sufficient number of trained support staff.

Educational capacity i.e. supervision by appropriately trained individuals is required and PGDDs will need to ensure that all educational and clinical supervisors have sufficient time in their job plan and the necessary resources to carry out their educational/training duties. It is a requirement that all trainees have a named educational supervisor. It is expected that all clinical and educational supervisors have the necessary qualifications and skills to train at this level. *See Chapter 5 and COPDEND Standards for Dental Educators.*

Recommended trainer: trainee ratios will vary from specialty to specialty and will depend on the type of activity being undertaken on each session. Both numbers of dental core trainees and other students/trainees will need to be taken into account. The weekly timetable will need to be scrutinised and approved by PGDDs with all sessions having a named clinical supervisor.

Similarly, there must be sufficient patient load to ensure the required number of procedures and supervised learning events, at the appropriate level, can be undertaken by the trainee and that the case mix is varied. If the case mix will not give all the experience required, consideration must be given to utilisation of more than one unit to ensure the curriculum can be fulfilled.

GDC standards state that dentists providing treatment in a hospital setting should be supported by a GDC registrant or a registrant of another healthcare regulator.

## 2.3 Funding

There are two main sources of funding for dental core training posts recognised by:

- HEE, NES, NIMDTA or HEIW
- NHS Trusts or Health Boards

### **HEE, NES, NIMDTA or HEIW funded posts**

HEE part fund all DCT posts at 50%. NES, NIMDTA or HEIW fund at 100%. The level of funding is dictated by the Terms and Conditions for dental core training. Commissioning new training posts will require funding to be identified for the duration of the post.

### **NHS Trust or board funded posts**

An NHS trust/health board, in order to support dental core training, may fund a training post if they have a need for the service in the future. The level of funding required is dictated by Terms and Conditions for dental core training. From the trainee's perspective the source of the funding will make no difference to the training they receive. The quality of training and the management of the training are irrespective of the source of funding; however, the source of funding must be clearly identified on any database held by the PGDD.

## 2.4 Approval of the post and programme

Approval of dental core training programmes and posts rests with PGDDs working for HEE, NES, NIMDTA or HEIW. A programme consists of a series of placements which may be in a range of training environments involving more than one provider and a number of trainees. PGDDs working for HEE, NES, NIMDTA or HEIW approve training programmes. PGDDs delegate management of programmes to Associate PGDDs, TPDs and/or advisers. A post refers to the placement held by a particular trainee, and a number of posts may make up a programme.

The PGDD will expect the minimum standards set out in the curriculum. The timetable will need to be submitted to check compliance with the curriculum, and every session must have a named clinical supervisor who has the required skills and experience. For trainees with full registration with the General Dental Council the clinical supervisor may be off-site out of hours but must be easily contactable. For temporary registered trainees there must be a dental registrant present on site at all time. Each trainee must have a named educational supervisor who may be responsible for a number of trainees. As a rule, the educational supervisor is a senior dentist who can fulfil the commitments as listed in 5.3.

Normally all aspects of the curriculum will be delivered by the providers (NHS Trusts/Health Boards) in a particular area on behalf of HEE, NES, NIMDTA or HEIW. In exceptional circumstances, trainees may need to spend part of their training time in neighbouring regions.

## 2.5 Quality Management and Quality Assurance of dental core training posts and programmes

PGDDs working for HEE, NES, NIMDTA or HEIW are required to have robust quality management processes in place to manage the delivery of training and to ensure progress of trainees within the training. Patient safety needs to be the priority for all those who manage or are involved in training programmes (*see Chapter 6*).

## THREE: APPOINTING A TRAINEE

### 3.1 Recruitment

- Entry into dental core training is achieved through a National Recruitment process.
- All dental core training posts will start in September to align with dental foundation / vocational training and specialty training
- Multiple agencies are involved in the recruitment process: PGDDs working for HEE, NES, NIMDTA or HEIW and the employers/providers.

### 3.2 Process for recruitment

Posts should be discussed with, and agreed by, the relevant PGDD.

### 3.3 National recruitment

Entry to the DCT programme is only through the National Recruitment process. This is led by the National Recruitment team, overseen by the Dental Core Training Advisory Group on behalf of COPDEND, and the dental core training Lead Dean. The Medical and Dental Recruitment and Selection (MDRS) programme Dental Recruitment Sub-group oversees all national dental recruitment processes.

### 3.4 Local recruitment

Vacancies may arise within programmes and be subject to local recruitment exercises. Advice from the local Human Resources team should be sought to ensure that any recruitment and appointment process is compliant with best practice.

In England it is at the discretion of local Trusts whether they wish to fill these posts through a local recruitment round. These vacancies cannot be advertised or appointed as Dental Core Training posts and can only be appointed at Locum Appointment for Service (LAS) or Trust Grade level (SHO).

A different arrangement applies in Scotland, Wales and Northern Ireland where, subject to the approval of the Postgraduate Dental Dean, applicants may be appointed as Dental Core Trainees if they meet the nationally agreed person specification.

### 3.5 Academic appointments

Currently there are no NIHR funded Core Training programmes, but this is under review. When in place academic appointments must also adhere to best recruitment practices. For NIHR appointments please see the relevant documentation on the NIHR website (applicable in England only). Trainees applying for academic posts would be expected to **go through the national recruitment process as well as any local, academic selection process**. This is to ensure that they meet the benchmark for appointment as a DCT. Ideally the national recruitment process should be completed after the local academic selection.



### 3.6 Person specification

A person specification is a profile of the skills and aptitudes required of the trainee. It lists the criteria that will be used in selecting candidates. There are nationally agreed person specifications for DCT1, DCT2 and DCT3 posts which must be used for national and local recruitment (*See COPDEND website*).

### 3.7 Essential criteria for entry to dental core training

A mandatory requirement for entry to dental core training is that candidates must be able to demonstrate the competences required at the end of dental foundation / vocational training either by successfully completing that training or by demonstrating that they have gained those competences through an equivalence process.

Candidates entering DCT2 or DCT3 programmes are expected to have achieved an Outcome 1 at the final RCP (Review of Competence Progression) (or demonstrate equivalent competences). For candidates entering with an Outcome 2, the identified developmental areas must be addressed before an interim RCP at month three. It is an individual trainee's responsibility to inform their TPD that they require an interim RCP. Failure to inform the TPD could result in removal from the programme.

Trainees must also be on the GDC register at the time of taking up the training post. This could include temporary registration (*see box below*).

#### Temporary Registration

Temporary registration allows dentists who are not eligible for full registration to practise dentistry in the UK if they have had the offer of a supervised post for training, teaching, or research purposes only, for a limited period.

An overseas qualified dentist can apply for temporary registration in specific approved posts if they hold a dental qualification from a university which is recognised by NARIC UK (the UK national agency for the recognition and comparison of international qualifications and skills) for the purposes of temporary registration.

Eligibility for certain training posts is dependent upon having a UK Border Agency visa. Advice should be sought from the National Advice Centre for Postgraduate Dental Education (NACPDE).

**Dentists with temporary registration can only practise under the supervision of a GDC registered consultant.**

Temporary registration is granted for approved posts in NHS hospitals, dental schools and other approved institutions. It is not currently granted for work in general or private practice, or in the **community / public dental services**.

Temporary registration directions are granted for a minimum of 180 days and a maximum of 365 days at a time. Temporary registration may be renewed, by means of applying, for **up to a maximum of 1826 days (5 years)**.

### 3.8 Job description

- A job description sets out the overall purpose of a role and the main tasks to be carried out
- The employing organisation or training provider will provide the job description
- The job description should always include an indicative timetable
- A template for DCT job descriptions is available (*See COPDEND website*)

### 3.9 Assessment panels

Assessment panels for national recruitment should normally include:

- PGDD or nominated deputy
- A lay representative
- Educational Supervisor representation
- Clinical trainer representation from the training programmes, which may include specialty trainees at ST3 and beyond

For local recruitment, the PGDD must be made aware of arrangements. The panel for local recruitment should normally include:

- Educational Supervisor representation
- Clinical trainer representation from the training programme

### 3.10 Advert

Dental core training posts available through the national recruitment process must be advertised nationally in a minimum of three places:

- Oriel (mandatory for England) or NES, NIMDTA or HEIW websites
- NHS Jobs or SHOW (Scotland's Health on the Web)
- Job Centre Plus

Before the advert is placed, the following should be in place/agreed:

- Date of interview
- Interview panel
- Start date
- Confirmation of PGDD approval
- Person specification
- Job description

### 3.11 Selection Process

The selection process must be demonstrably fair to all candidates.

The selection process must be through open competition and must be designed to identify and rank the candidates most likely to complete the programme successfully.

All appointment processes must conform to employment law and best practice in selection and recruitment.

The following need to be agreed in advance of the advertisement of the post(s):

- Application form. This should reflect the skills and aptitudes listed in the person specification
- Long listing and short-listing processes

### **Selection process format**

The format of the selection process for DCT national recruitment comprises a situational judgement test, three face-to-face stations (clinical, communication and clinical governance) and, for DCT2 and DCT3, a portfolio assessment. For local recruitment, a format similar to the DCT national recruitment format should be used. It may comprise an interview with clinical scenarios and portfolio assessment. How each component of the selection process is used in the final ranking should be discussed and agreed in advance.

### **Panel member training and calibration**

All panel members must have completed appropriate Equality and Diversity training within the past three years. Ideally panel members should be calibrated in advance of the selection process.

### **Interviews and stations**

Questions and ideal responses (with positive and negative indicators) should be agreed in advance and should test the appropriate areas of the person specification. All candidates should be asked the questions testing the same competences. Score sheets should be developed with clear scoring system. Care should be taken with the security of the questions.

### **Ranking candidates**

At the end of the recruitment process, the candidates should be ranked. In addition, decisions should be made as to whether any candidates are un-appointable, and the reasons why. The panel chair should ensure that there is agreed feedback available for candidates should they request it.

### **Preferencing**

If there are multiple posts available, then candidates should be asked to list posts in order of preference. Allocation to a specific post depends on ranking and preference.

### **Offering post and acceptance**

Once the posts(s) have been offered and accepted, information must be transferred to the employing organisation to allow pre-employment checks to be carried out.

## **FOUR: BEFORE TRAINING COMMENCES**

### **4.1. Handover – from recruitment to employment**

An offer of a place on a training programme following the national recruitment and selection process is not an offer of employment. HEE, NES, NIMDTA or HEIW do not normally employ trainees. The offer of employment can only be made by an employing organisation.

Once an allocation offer has been made by PGDDs on behalf of HEE, NES, NIMDTA or HEIW and the applicant has accepted, the following process is followed:

- The employing organisation to which the applicant has been provisionally allocated should be informed of the applicant's details by PGDDs working for HEE, NES, NIMDTA or HEIW, ideally within 12 weeks of the start date.
- The training start date confirmation is the responsibility of the PGDDs working for HEE, NES, NIMDTA or HEIW and must be communicated to the employing organisation once confirmed.
- The employing organisation will contact the applicant to confirm the pre-employment process and requirements e.g. Disclosure, occupational health clearance and GDC fitness to practise.
- Employers will require two recent references from previous employers and clinical supervisors. These are supplied by the recruiting HEE office/deanery if available. If an applicant has not supplied a reference it then becomes the responsibility of the employing organisation to address this issue.
- The employing organisation's offer of employment will be subject to it carrying out satisfactory pre-employment checks and receiving satisfactory references.
- The issuing of the contract of employment is the responsibility of the employing organisation(s). Some training programmes involve more than one employer, so trainees may have more than one contract of employment. Alternatively, one of the placements will act as the employer and be responsible for payroll with the other placement being cross charged for the service element of the training, within the second placement.

If an applicant is selected and offered a placement on a training programme by HEE, NES, NIMDTA or HEIW, these offers are subject to satisfactory pre-employment checks and the employing organisation ultimately has the right to refuse employment, but it must have valid reasons. If the employing organisation is unwilling to offer employment, and no other placement is feasible within the relevant training authority (the HEE Local Office, or NES, NIMDTA or HEIW) then the offer of a training programme to the applicant is likely to be withdrawn.

#### **4.2. Educational Agreement**

The Educational Agreement between the Provider of dental core training and PGDDs working for HEE, NES, NIMDTA or HEIW can be in the form of Learning and Development Agreement (LDA) or a Service Level Agreement (SLA). The LDA/SLA will be generic to the Provider rather than specific to dentistry, but it will set out the number of training posts commissioned with that Provider, the Standards required to be delivered and also the monitoring arrangements of the contract/ agreement.

#### **4.4. Performer/NHS List Number**

A number of dental core training posts require trainees to have a Performer/NHS List Number. This allows trainees to work in a primary care setting of the NHS. An application by the trainee to the appropriate organisation will be necessary to confirm their Performer/NHS List Number and should be made as early as possible. Without acceptance onto such a list, trainees will not be permitted to train and work in a primary dental care setting.

Full GDC Registration is one of the requirements of holding a Performer/NHS List Number.

## **FIVE: IN TRAINING**

### **5.1. Structure of training**

#### **Roles and responsibilities in training**

PGDDs:

- Development of the curriculum
- Devising assessments
- Quality management of dental core training
- Appointment of trainees and APGDDs, TPDs, Advisers

Training Providers:

- Well-supervised training to ensure both patient safety and the development of the dental workforce

Trainers (includes clinical supervisors, educational supervisors and TPDs):

- Teaching and supervising trainees
- Trained in equality and diversity and in appraisal and assessment of trainees
- Should have explicit and sufficient time in job plans for supervision of trainees (in the region of 0.125 - 0.25 SPA for up to four trainees)

### **5.2. Clinical supervisors**

Each trainee should have a named clinical supervisor for each clinical session. A clinical supervisor is a trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee's clinical work and providing constructive feedback. All clinical supervisors should:

- understand their responsibilities for patient safety
- be fully trained in the specific area of clinical care
- offer a level of supervision and support necessary to the competences and experience of the trainee and tailored for the individual trainee
- ensure that no trainee is required to assume responsibility for or perform clinical, operative or other techniques in which they have insufficient experience and expertise
- ensure that trainees only perform tasks without direct supervision when the supervisor is satisfied that they are competent so to do; both trainee and supervisor should always be aware of their direct responsibilities for the safety of patients in their care
- teach, provide feedback and undertake competence assessments, such as workplace-based assessments/supervised learning events
- have up-to-date equality and diversity training

### **5.3. Educational supervisors**

An educational supervisor is a trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a training placement or series of placements. An

educational supervisor may be responsible for a number of trainees, but normally no more than four.

Where possible, it is desirable for trainees to have the same educational supervisor for the whole of their training programme or for stages of training.

Educational supervisors should:

- be adequately prepared for the role and have an understanding of educational theory and practical educational techniques
- be trained to offer educational supervision and undertake appraisal and feedback
- undertake training in competence assessment for dental core training
- be trained in equality and diversity
- provide regular appraisal opportunities
- develop a learning agreement and educational objectives with the trainee which is mutually agreed and is the point of reference for future appraisal
- be responsible for ensuring that trainees maintain and develop their DCT learning portfolio and participate in the assessment process
- provide regular feedback to trainees on their progress
- ensure that reports are completed within the necessary timescales
- contact the employer and the PGDD should the level of performance of a trainee give rise for concern
- be able to advise the trainee about access to career management
- be responsible for their educational role to the TPD

#### **5.4. Associate PGDDs/TPDs/Advisers**

The day to day management of dental core training is carried out by Associate PGDDs/TPDs/Advisers.

Associate PGDDs/TPDs/Advisers are appointed by PGDDs working for HEE, NES, NIMDTA or HEIW.

Associate PGDDs/TPDs/Advisers have responsibility for managing dental core training programmes. They should:

- participate in the local arrangements developed by the PGDD to support the management of the training programme
- take into account the collective needs of the trainees
- provide support for clinical and educational supervisors
- contribute to the annual assessment outcome process
- help the PGDD manage trainees who are running into difficulties

#### **5.5. Review of Competence Progression (RCP)**

Dental core trainees should have an interim RCP at six months and a final RCP at the end of the year of training (normally within the last two months). The requirements for satisfactory final RCP outcomes are laid down in the DCT curriculum as follows:

- Completion of a minimum of 24 supervised learning events (SLEs)
- Completion of a clinical governance/quality improvement project (e.g. audit)

- Submission of a current personal development plan (PDP) and progress against that PDP
- Study day attendance record and continuing professional development (CPD) log which is appropriate for GDC requirements
- Completed multisource feedback (MSF)
- Evidence of satisfactory patient feedback
- Evidence of formal sign-off of the trainee's period of training by the Educational Supervisor

A final RCP will only be awarded to trainees who meet the above requirements, have been in post for at least 10 months and are in post at the time of the final RCP.

Interim RCP Panels will have a local composition and should consist of at least the following two panel members:

- Associate PGDD/TPD/Adviser for DCT
- Senior clinical trainer

Final RCP Panels should consist of at least three of the following four panel members:

- Associate PGDD/TPD/Adviser for DCT
- Senior clinical trainer
- Associate PGDD/TPD/Adviser for DCT or equivalent from another Deanery/HEE local office
- Lay representative

All panel members must be trained in equality and diversity issues and in the RCP process. The training should be kept up to date and refreshed every three years.

## 5.6. Before the RCP

### **What trainees should do in advance:**

Trainees should steadily build their portfolios throughout the training year. Evidence presented in their portfolios should be reviewed by the educational supervisor at the beginning of each training phase, at a midpoint and finally no later than three weeks before the RCP panel convenes.

It is trainees' responsibility to ensure that their evidence is available for the panel **no later than two weeks before the RCP.**

In order that they can proceed smoothly to their next phase of training, trainees must have an up to date portfolio, which demonstrates the competency progression required by their curriculum and includes:

- the relevant assessments
- an up to date educational supervisor's report.

### **What educational supervisors should do in advance:**

- Review the evidence for the RCP panel, including all assessments, personal development plan, curriculum completion, skills and development logs. If any evidence is lacking the ES should remind the trainee to complete it.
- Meet with the trainee and complete a structured report. It is vital that the report is as full as possible as this is a key piece of the evidence to the RCP panel.
- The report should:



- Reflect the learning agreement and agreed objectives
- Be supported by evidence from the SLEs
- Provide a summary comment regarding overall progress during training period
- Inform the TPD/Adviser in advance if a trainee is unlikely to be awarded a satisfactory outcome

**What the TPD/Adviser should do in advance:**

- Look at trainees' portfolios in advance of the RCP panel
- Identify likely problems that have not already been identified
- Alert the PGDD or deputy to any anticipated adverse ARCP outcomes

**The role of the PGDD or deputy**

The PGDD or deputy is present at RCPs to provide guidance and to assist in quality assurance of the process. The PGDD or deputy must be present at any panel involving cases where it is possible that a trainee could have an outcome indicating unsatisfactory progression.

**The role of the lay representative**

The lay representative will primarily review the process followed by the RCP panel, and the conduct of the panel. The lay representative should not be asked to judge whether the RCP outcome awarded to the trainee is appropriate or whether the trainee has made satisfactory progress. The lay representative may be asked on occasion to contribute a lay perspective to inform elements of the RCP panel's activities, but the role is to ensure the process is followed correctly not to give an opinion on the outcome or the trainee's progress. The lay representative is not performing the role of panel chairperson but has responsibility to ensure that, along with all the panel members, the conduct of the review conforms to good practice.

**The role of the external representative**

The external representative assists in the quality assurance of the RCP process. He or she reviews the submitted evidence from the trainee(s).

**Administrative support**

It is the role of the administrative support team to ensure that all trainees, educational supervisors, TPDs and the PGDD are aware of the timelines and timetable for the RCP. A minimum of eight weeks' notice should be given to trainees, educational supervisors, TPDs and RCP panel members of the RCP date.

**5.7. At the RCP**

The trainee should not be present during the panel review of the evidence submitted for the RCP. The RCP chair, with the other panel members, needs to confirm the RCP outcome. The RCP outcome decision is made from examination of the evidence provided. Evidence not provided by the trainee in advance of the panel convening cannot be taken into account.

The panel's role is:

- To review and consider the evidence provided by the trainee
- To make a judgement about the trainee's suitability to progress or confirm that training has been satisfactorily completed.
- Confirm the RCP outcome (see 5.8)
- Inform the trainee of the outcome awarded



**Meeting with trainees**

Trainees for whom an adverse RCP outcome is anticipated should be invited to meet with a representative of the RCP panel after the panel has reached a decision. The PGDD may also invite trainees with anticipated satisfactory RCP outcomes to attend. When invited, trainees must ensure that they make arrangements to attend following the RCP panel meeting to receive feedback as attendance is compulsory. Trainees who have had an adverse outcome may require a longer time to receive feedback and the reviews must be scheduled accordingly. The meeting with the trainee must only take place after the outcome has been decided by the panel and is not a debate with the trainee about which outcome is given. At the meeting, there should not be a trainer present from the department where the trainee is currently placed, nor their educational supervisor.

The RCP outcome, reasons for the outcome and any actions should be recorded on ePortfolio **or** on an RCP Outcome form (*Appendix 3*), as applicable.

**Outcome 1:**

The RCP panel report should highlight areas of achievement.

**Outcome 2:**

The RCP panel outcome report should clearly explain the reasons for the outcome.

**Outcome 5:**

Trainees given an outcome 5 are required to explain within five working days of being given the decision why evidence is missing and should expect to submit the missing evidence for consideration within ten working days of the decision. This provides consistency and is in line with best practice.

5.8. RCP outcomes table		
<b>Outcome 1 Interim</b>	<b>Predefined competences being demonstrated at an appropriate rate</b>	<ul style="list-style-type: none"> <li>The trainee has achieved all the competences within the dental core training curriculum at the rate required.</li> <li>Completed a minimum of 10 months of training in that specific year <b>and</b> be in post as a trainee at the time of the FRCP</li> </ul>
<b>Outcome 1 Final</b>	<b>Predefined competences successfully demonstrated</b>	
<b>Outcome 2 Interim</b>	<b>Development required with specific recommendations regarding the development of further competences during the remainder of that year of the training programme being made</b>	<ul style="list-style-type: none"> <li>There are some competences which have not been fully achieved and need to be further developed.</li> <li>Where such an outcome is anticipated, the trainee should normally appear before the panel.</li> <li>The panel will need to identify in writing the development which is required.</li> </ul>
<b>Outcome 2 Final</b>	<b>Development required with specific recommendations regarding competences that were specified in the original learning agreement but not yet demonstrated during this year of training</b>	
<b>Outcome 5</b>	<b>Incomplete evidence provided</b>	<ul style="list-style-type: none"> <li>The panel can make no statement about progress or otherwise since the trainee has supplied either no evidence or incomplete evidence to the panel.</li> <li>The trainee will have to supply the panel with a written account within a defined time period as to why the documentation has not been made available to the panel.</li> <li>The panel does not have to accept the explanation given by the trainee and can require the trainee to submit the required documentation by a designated date.</li> <li>Once the required documentation has been received, the panel should consider it (the panel does not have to meet with the trainee if it chooses not to and the review may be done “virtually” if practicable) and issue an assessment outcome.</li> </ul>

## 5.9. After the RCP

The external representative is expected to submit a report on the RCP process and the quality of training after each RCP panel (Form A&B, *Appendix 5*). Feedback from the external representative should be reviewed by the PGDD and any necessary actions taken.

The date and time of next RCP should be confirmed and notified to trainees, TPDs and RCP panel members.

### Summary of RCP timeline

	Action	Timing
<b>Before the RCP</b>	Date and venue communicated to RCP panel (including lay and external representatives) and trainees	6 months in advance
	Timetable sent to RCP panel and trainees	8 weeks in advance
	ES writes trainee report(s)	3 weeks in advance
	Trainees submit RCP documentation (e-Portfolio/paper)	2 weeks in advance
	RCP documentation made available to panel	2 weeks in advance
<b>At the RCP</b>	External and lay representatives to discuss process and agree an outcome	On day
<b>After the RCP</b>	RCP outcomes communicated to TPDs	Within 1 week
	Form A&B completed by external representative and returned to PGDD for any action	Within 1 month

### Planning the next phase of training

After receiving formal notification of their final RCP outcome trainees should meet with their educational supervisor to plan the next phase of training. Good quality written information provided to the trainee by the RCP panel is essential to this process. TPDs/Advisers should be involved in the planning of supportive and/or remedial training for trainees receiving outcomes 2 and 5.

If a trainee receives an outcome 2 at the final RCP this will have an impact on progression within training. There are two options to consider:

- a. If progressing to a further DCT year of training, the receiving PGDD must be notified. The trainee will be expected to address the highlighted concerns and an interim RCP will be arranged at the end of month three. If the trainee receives a further non-standard outcome they may be requested to leave the programme.
- b. If progressing to specialty training the trainee will not meet the national Person Specification and will be withdrawn from the selection process.

## 5.10. Reviews and appeals against a decision

Trainees will attend the RCP meeting in person if an adverse outcome is anticipated. In these cases, mitigating circumstances can be considered by the panel, in which a separate **review** will be unnecessary. A review of the panel's decision will only be necessary if there has not been an opportunity to consider mitigating circumstances and in this case a request to the panel must be made within 10 working days.

An **appeal** is the second stage of the process and is required when the review upholds the original decision and the trainee remains dissatisfied.

Appeal requests should be made in writing to the PGDD within ten working days of the trainee being notified of the RCP outcome or review decision, whichever is the later. The request must specifically state the grounds for appeal.

If accepted, the appeal is undertaken by a **different** group of educators to those on the original panel, and any subsequent review. The PGDD will convene an appeal panel to consider the evidence and to form a judgement. It should consider evidence from both the trainee and from those who are closely involved with their training such as the ES or TPD. Where the trainee has agreed to this, written-only evidence is acceptable. Should the trainee wish to submit additional documentary evidence for the panel to consider as part of the appeal, this must be received at least five working days before the appeal hearing.

An appeal panel should be composed of:

- a postgraduate Dean or an Associate Dean
- a senior clinician with training experience
- a lay adviser/representative

HEE, NES, NIMDTA or HEIW will also appoint a suitably qualified adviser to support the chair and advise on process.

Trainees may bring additional representation, such as a friend, colleague, or a representative from a professional body. It is not usual for a family member or legal representative to be present at appeals. If the trainee wishes to bring a legal representative, this will be at the discretion of the panel chair and requests must be made five working days in advance of the appeal hearing. Trainees will be notified in writing of the panel's decision with reasons within five working days where possible of the appeal hearing. The decision of the appeal panel is final and there is no further right of appeal.

The RCP appeal panel should not impose an increased sanction on the trainee. In such circumstances where new information has come to light that may inform such a decision, these issues will be brought to the attention of the PGDD.

## 5.11. Breaks in training

Dental core training posts are one-year fixed term contracts and training cannot normally be extended beyond that one-year period<sup>2</sup>.

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<sup>2</sup> Currently there is no Out Of Programme (OOP) allowance within this one-year fixed term training. If a trainee wishes to undertake training outside of the DCT programme this must be discussed in advance with the TPD and final approval is at the discretion of the PGDD

Trainees may be out of the training programme to which they were appointed for the following reasons:

- Maternity/Paternity/Adoption leave
- Sick leave
- Suspension

### **Sick leave**

All trainees who are unable to train and work on health grounds should be managed under employer Occupational Health arrangements and are eligible through their employer for statutory sickness absence and pay, which is dependent on their length of service. PGDDs will review any health matters, including Occupational Health advice, with trainees to ensure appropriate decisions are made regarding training.

Sickness absence of more than 10 days in any one year will impact on satisfactory completion. It is the trainees responsibly to inform their local HR / Medical Staffing department of any sickness absence and also record this in the e-portfolio.

### **Maternity, Paternity and Adoption leave**

Trainees must ensure that the PGDD's office and employer are aware of the dates of leave. No RCPs should be scheduled during this period of leave. Trainees on maternity or paternity leave may defer the start of training. This deferred start may be to the following year.

### **Return to training process**

On returning to training, the TPD should ensure that the trainee has a back to training interview with their ES or TPD or PGDD (as appropriate). At this meeting a learning plan should be developed, with patient safety an essential area for discussion. Those trainees returning after a period of ill-health will need an occupational health report which is generally organised by their employer.

### **Suspension**

The PGDD must be made aware of any disciplinary action against a trainee at the earliest possible stage and act on the information accordingly.

## **5.12. Less than full-time (LTFT) training applications**

HEE, NES, NIMDTA and HEIW have a strong commitment to helping all dentists in training reach their full potential and to ensuring all trainees have an appropriate work-life balance.

**All** trainees can apply for LTFT training at application or during training. Trainees will normally be required to undertake no less than 50% of full-time training. In exceptional individual circumstances which are agreed by the PGDD in advance, trainees may be allowed to undertake training at less than 50% of full time. These circumstances should be considered by the PGDD. Training at less than 50% of full time should be for a maximum of 12 months and should be subject to regular review to ensure appropriate career progression during the time. No trainee should undertake training at less than 20% of full time.

### **Eligibility for less than full-time training (LTFT)**

Employment legislation setting out the statutory right to request flexible working sets the minimum standards with which an employer must comply. The legislation does not set a priority order around reasons for requesting flexible working. The Dental Silver Guide should be considered as providing separate rights to this legislation, in the

context of requesting to undertake LTFT in a training programme. This reflects the tripartite nature of current practice of supporting LTFT between the trainee, HEE, NES, NIMDTA or HEIW and the employer/Host Training Organisation.

The only requirement to be permitted to train less than full time is a well-founded individual reason. In practice, COPDEND has agreed the following categories which serve as guidelines for prioritising requests for less than full-time training. Category 1 applications take priority.

**Category 1**

- Disability
- Ill health
- Responsibility for caring for children
- Responsibility for caring for ill/disabled partner, relative or another dependant

**Category 2**

- Unique opportunities for their own person/professional development, e.g. training for national/international sporting events
- Religious commitment – involving training for a particular role which requires a specific time commitment
- Development such as management courses, law courses etc.

Other well-founded reasons may be considered but will be prioritised by the PGDD and will be dependent on the capacity of the programme and available resources.

LTFT Trainees will:

- reflect the same balance of work as their full-time colleagues
- normally move between posts within rotations on the same basis as a full-time trainee

Trainees in LTFT training are not precluded from undertaking other work although they should ensure that in undertaking this work that it does not impact negatively on their training.

**5.13 Movement between HEE local offices, NES, NIMDTA and HEIW (inter-deanery transfers, IDT)**

Requests for an inter-deanery transfer (IDT) will only be considered where there has been a significant change in a trainee's situation which could not have been foreseen at the time of appointment to their current post.

There is no automatic entitlement or right for this to take place. Trainees will be expected to show they have well-founded reasons for wishing to move. Movement is at the discretion of both of the PGDDs involved. It is important that trainees give at least three months' notice in writing to their current PGDD that they are seeking a transfer (*Appendix 5*).

Trainees requesting transfer must meet one or more of the criteria for transfer e.g. significant life event, caring responsibilities, committed relationship.

Inter-Deanery Transfers are *not* appropriate for:

- educational or training reasons
- secondment to a different deanery
- rotation between Deaneries as part of a planned training programme
- undertaking research in a different deanery

### **Right of appeal**

Where a trainee is refused an inter-deanery transfer, the trainee may lodge an appeal with their host PGDD. The trainee will have 28 days from the date of notification in which to state, in writing, their reasons for appeal. Only the process, not the outcome may be appealed.

## **5.15 Managing serious concerns over professional competence and conduct**

It is expected that employing organisations will inform the PGDD if a trainee is involved in a Serious Incident. The PGDD and the employing organisation must work together to identify the most effective means of supporting the trainee, whilst ensuring that patient safety is maintained. Where appropriate, an action plan should be developed, documented and carried out. This process should involve the educational supervisor and TPD. There may also be a need for early involvement of services such as the Professional Support Unit provision in HEE, NES, NIMDTA and HEIW or the National Clinical Assessment Service (NCAS) to provide advice about how best to support the process.

It is the employing organisation's responsibility to take any necessary disciplinary action in relation to a trainee it employs. The PGDD must not be involved as a member of a disciplinary or appeal panel in any disciplinary procedure taken by an employing organisation against a trainee but may provide evidence to the panel.

If the employing organisation terminates the employment of a trainee owing to issues of behaviour, conduct and/or competence, the PGDD will withdraw the training post from the trainee. An RCP outcome will not be awarded in such circumstances.

## **SIX: QUALITY MANAGEMENT AND QUALITY ASSURANCE OF DENTAL CORE TRAINING**

### **6.1 Quality framework**

It is essential that all programmes meet the desired and appropriate standards to ensure patient care and safety. There are three elements to any quality framework:

#### **Quality Control**

This includes the quality standards imposed and monitored at provider level e.g. at trust/health board, University or practice level

#### **Quality Management**

This includes the standards developed by COPDEND and monitored by the PGDDs working for HEE, NES, NIMDTA or HEIW.

#### **Quality Assurance**

This includes the professional standards set and monitored by the regulator of the dental profession, the General Dental Council and educational standards developed by COPDEND.

### **6.2 Quality Control**

The quality of training *expected by* the commissioner is embraced in the Learning and Development Agreement which is agreed between commissioner and provider. This may incorporate Key Performance Indicators as a means of Quality Managing the provider.

All clinical supervisors and educational supervisors must ensure that trainees are aware of the GDC's Standards for the Dental Team.

Importantly, all clinical supervisors and educational supervisors must be appropriately trained to be responsible for overseeing a trainee's clinical work and providing constructive feedback during a training placement. See also 5.2 and 5.3.

There must be unambiguous lines of accountability for educational supervisors into both educational programme arrangements through the TPD but also into the management structure of the trainee's employer so that there is clarity about:

- who is providing educational supervision and their accountability
- the clear link between appraisal, assessment and planning of a trainee's educational programme and their performance as a dentist
- the transparency of the process ensuring the trainee is aware of the information being shared with the employer
- the arrangements for raising matters of clinical concern and professional performance about a trainee within the employing authority and with HEE, NES, NIMDTA and HEIW in line with wider regulatory requirements

All Clinical Supervisors should:

- understand their responsibilities for patient care, and be fully trained in the specific area of clinical care
- offer a level of supervision necessary and matched to the competences and experience of the trainee
- ensure that no trainee is required to assume responsibility for or perform clinical or operative techniques in which they have insufficient experience and expertise
- ensure the trainee only performs tasks without direct supervision when the supervisor is satisfied that they are competent to do so; both trainee and supervisor should be aware at all times of their direct responsibilities for the safety of patients in their care
- consider whether it is appropriate (particularly out of hours) to delegate the role of clinical supervisor to another member of the healthcare team. In these circumstances the individual must be clearly identified to both parties and understand the role of the clinical supervisor. The named clinical supervisor remains responsible and accountable overall for the care of the patient and the trainee
- be appropriately trained to teach, provide feedback and undertake competence assessment for trainees
- be trained in equality and diversity at least every three years
- escalate to the educational supervisor and employer any issues around poor performance of a trainee. The employer in turn must escalate these issues to the PGDD, explaining what action is being taken at trust level, if any. The PGDD and employer must work together to identify the most effective means of supporting the trainee whilst ensuring that patient safety is maintained at all times.

### **6.3 Quality Management and Quality Assurance**

Evidence that the provider is reaching the standards expected by the commissioner can be demonstrated in several ways. Triangulation of evidence is important.



**Trainee surveys**

These are confidential surveys run by PGDDs working for HEE, NES, NIMDTA or HEIW. It is confidential but does allow PGDDs to find out whether any units are not delivering good training. Trainees are expected to comply with all requests to complete Surveys in a timely and professional manner. This may be monitored through the FRCP process.

**Visits**

Some PGDDs working for HEE, NES, NIMDTA or HEIW organise regular visits to all provider units: others only organise triggered visits if, and when, a problem is raised by surveys or direct trainee complaints.

**RCP results**

These can help identify poorly performing units if results are triangulated sufficiently well with other evidence.

**PGDD approval process of the training programmes, posts and trainers**

Ensuring all educational supervisors, clinical supervisors and TPDs are suitably trained is an essential aspect of Quality Management.

**Appropriate identification of trainees who need remedial help and support, and delivery of that support by the commissioner and/or provider**

Those managing training programmes and trainees should have in place suitable monitoring of trainees requiring help and support. A Fitness to Practise or other appropriately named panel comprising the PGDD, suitably trained individuals and administrators should regularly meet to discuss trainees who are failing to achieve their milestones either due to lack of progress (those on interim RCP 2, sickness, failure at examinations) or those who have been involved with serious incidents at provider level (see 5.17).

### DCT Review of Competence Progression (RCP) Outcomes Form

<b>Trainee Forename:</b>			<b>Trainee Surname:</b>		
<b>Gender:</b> (please tick ✓)	<b>Male</b>	<b>Female</b>	<b>Date of entry to grade</b> <i>dd/mm/yy</i>	<b>GDC no.</b>	
<b>Educational Supervisor completing the report</b>					
<b>Date of review:</b>			<b>Period covered</b>	From:	To:
<b>Members of the panel:</b> (Lay, TPD, External, Academic, etc)	1.	2.	3.		
	4.	5.	6.		

<b>Approved clinical training gained through the period:</b>					
<b>Grade of training programme reviewed</b>	DCT1		DCT2		DCT3
<b>Placement / Post / Experience</b>			<b>Date from:</b>	<b>Date to:</b>	<b>FT / PT (as % FT)?</b>
1.					
2.					
3.					
<b>Documentation taken into account and shown to trainee (Insert ✓ as appropriate)</b>					
1. Educational Supervisor structured report		2. SLE forms		3. PDP	
4. CPD/study day log		5. Audit activity		6. Clinical activity log	
7. Teaching/research		8. Patient feedback		9. MSF	

RECOMMENDED OUTCOMES FROM THE PANEL		
<b>Satisfactory Progress</b> <span style="float: right;">✓</span>		
1: Interim	Predefined competences being demonstrated at the expected rate	
1: Final	Predefined competences successfully demonstrated	
<b>Unsatisfactory Progress or Insufficient Evidence</b> <i>(also complete Supplementary Evidence section)</i>		
2: Interim	Development required with specific recommendations regarding the development of further competences during the remainder of that year of the training programme being made	
2: Final	Development required with specific recommendations regarding the development of further competences that were specified in the original learning agreement but not yet demonstrated during this year of training	
5: Interim or Final	Incomplete evidence presented	

Signed by:	<i>(Panel Chair)</i>	Date
Signed by:	<i>(Trainee)</i>	Date
Signed by:	<i>(PGDD)</i>	Date

<b>FEEDBACK</b>			
<b>Detailed reasons for recommended outcome:</b>			
1.			
2.			
3.			
<b>Mitigating circumstances</b>			
<b>Competences which need to be developed</b>			
<b>Recommended actions</b>			
Signed by:		<i>(Panel Chair)</i>	Date
Signed by:		<i>(Trainee)</i>	Date
Signed by:		<i>(PGDD)</i>	Date
			Date of next review:

**DCT Review of Competence Progression (RCP)  
Outcomes Form**

Supplementary information for trainees who had an UNSATISFACTORY review outcome			
Code	Insert ✓	Reason for unsatisfactory outcomes	Explanatory notes
U1		Record Keeping and Evidence	Trainee failed to satisfactorily maintain their e-Portfolio including completing the recommended number of Supervised Learning Events; Audits; Research; structured Education Supervisors report; in accordance with recommendations for that particular Year of Training in line with the curriculum requirements.
U2		Inadequate Experience	Training post(s) did not provide the appropriate experience for the year of training being assessed in order to progress. As a result, the trainee was unable to satisfy the curriculum requirements for the year of training.
U3		No Engagement with Supervisor	Trainee failed to engage with the assigned Educational supervisor or the training curriculum in accordance with the requirements for that particular year.
U4		Trainer Absence	Nominated educational supervisor or trainer did not provide the appropriate training and support to the Trainee because of their absence on a sabbatical; through illness or other reasons; and no nominated educational supervisor deputy took over to ensure that an appropriate level of training was maintained. As a result, the trainee was unable to satisfy the curriculum requirements for the year of training.
U5			
U6			
U7		Trainee requires Deanery Support	Trainee has issues to do with their Professional personal skills for example: - behaviour / conduct / attitude / confidence / time keeping / communications skills etc and requires the support of the Deanery Performance Team.
U8		Other reason	

<b>Additional information for trainees who DID NOT HAVE A REVIEW</b>			
<b>Code</b>	<b>Insert ✓</b>	<b>Reason for unsatisfactory outcomes</b>	<b>Explanatory notes</b>
N1		Trainee Sick Leave	Trainee on long term sickness or other health issues have impacted on ability to complete the year of training being reviewed.
N2		Trainee Maternity/Paternity Leave	Trainee cannot be reviewed whilst on maternity leave
N3		Trainee not In Post Long Enough	Too soon to complete a meaningful Review within the RCP reporting period.
N4			
N5			
N6		Trainee Missed Review	Trainee did not attend the Review.
N7		Trainee Inter Deanery Transfer	Trainee left the programme early to take up a post in another Deanery
N8		Trainee reviewed in another Deanery	Trainee working in another Deanery who completed RCP.
N9		Trainee Contract Termination	Trainee left due to lack of progression without achieving competencies to a satisfactory level.
N10		Trainee Gross Misconduct	Trainee currently suspended from training either as a result of GDC Suspension or local Trust or other local disciplinary proceedings.
N11		Trainee Suspension	Trainee suspended for reasons other than gross misconduct.
N12		Other reason	

**DENTAL CORE TRAINING RCPs**  
**External Feedback Form: Process (Form A)**

The purpose of this form is for you, the external member of the RCP panel, to give feedback on how the RCP **Process** is conducted. Your comments are welcome.

RCP (please state specialty):

Date of RCP panel meeting:

		<i>Please tick</i>		<b>Evidence</b>	<b>Comments</b>
The appropriate paperwork was available prior to RCP	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
The trainee/s had seen and signed the appropriate documents prior to the RCP panel meeting	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
The composition of the RCP panel was appropriate and aligned to the Dental Silver Guide	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
There is a named educational supervisor for each trainee	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
RCPs take place at appropriate times in training	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
Do you feel that the RCP process you have taken part in is fit for purpose?	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
Was full consideration given to all the evidence submitted (including trainee comments)?	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			

### External Feedback Form: Quality (Form B)

The purpose of this form is for you, the external member of the RCP panel, to give feedback on the **Quality** of the training programmes provided. Your comments are welcome.

			Evidence	Comments
<i>Please tick</i>				
There is a regularly reviewed, structured and personal training plan for each trainee	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		
There is a regular structured appraisal for all trainees	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		
Trainees maintain a continuous career portfolio of progress and achievement	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		
<b>Clinical training</b> Are the caseload and case mix in accordance with the Curriculum requirements?	Excellent	<input type="checkbox"/>		
	Adequate	<input type="checkbox"/>		
	Poor	<input type="checkbox"/>		
<b>Non-clinical sessions</b> Are non-clinical sessions appropriate in terms of number and variety?	Excellent	<input type="checkbox"/>		
	Adequate	<input type="checkbox"/>		
	Poor	<input type="checkbox"/>		
Is the DCT Curriculum fulfilled?	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		

			Evidence	Comments
Please rate the quality of the training programme	<i>Please tick</i>			
	1 (Poor)	<input type="checkbox"/>		
	2 (Development required)	<input type="checkbox"/>		
	3 (Satisfactory)	<input type="checkbox"/>		
	4 (Above average)	<input type="checkbox"/>		
5 (Excellent)	<input type="checkbox"/>			
Are there any trainees/Programmes that you have concerns about? – If yes please comment	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		

**Please feel free to give further comments in the box below:**

Name:.....

Signed:.....

Return to:

**Thank you for completing this form.**



**APPENDIX 3**

**Application for an Inter-Deanery Transfer**

*Trainee to complete and return to current Postgraduate Dental Dean/Director (PGDD)*

<b>Name</b>							
<b>Contact Address</b>							
<b>E-mail address</b>				<b>Contact Tel</b>			
				<b>Date of appointment</b>			
<b>Year of training (circle)</b>	1	2	3				
<b>Date of most recent RCP</b>	<i>(all outcome forms to date <b>must be attached</b>)</i>						

<b>Reasons of application</b>
<p>Give a <b>brief</b> outline of the reasons for your application.  <i>(A more detailed explanation (one side A4) <b>must also be attached</b> to this application)</i></p>

I formally apply to transfer to .....and confirm that all the information given above is correct. I understand that:-

- I should not approach the PGDD in the region to which I am seeking transfer directly, but that my current PGDD will do this on my behalf if s/he confirms that I have sufficient well-founded reasons for the transfer
- I may be required to be interviewed by the PGDD in the region to which I wish to transfer
- In support of my application I attach:-
  - copies of all annual review outcomes to date
  - a detailed explanation of the reason for my request

**Signature of trainee** \_\_\_\_\_ **Date** \_\_\_\_\_

I approve the trainee’s application to transfer and confirm that the training details given above are correct.

**Signature of PGDD** \_\_\_\_\_ **Date** \_\_\_\_\_

This privacy notice is intended to provide transparency regarding what personal data HEE, NES, NIMDTA and HEIW will collect about you, how it will be processed and stored, how long it will be retained for and who will have access to your data.

Trainees should be aware that this privacy notice applies to all the processing of your personal data during the course of your training by HEE, NES, NIMDTA and HEIW. Your personal data is typically collected, but not exclusively, via the recruitment process and your Review of Competence Progression (ARCP).

Those responsible for training should ensure that trainees are aware of this information. This privacy notice should be available on each of HEE, NES, NIMDTA or HEIW website.

### TERMS USED IN THIS NOTICE

There are some terms that appear in the General Data Protection Regulation (2018) that are used in this notice. These are explained below:

**Personal Data:** Personal data can be anything that allows a living person to be directly or indirectly identified. This may be a name, an address, or even an IP address. It includes automated personal data and can also encompass pseudonymised data if a person can be identified from it.

**Sensitive Personal Data:** GDPR calls sensitive personal data as being in 'special categories' of information. These include personal information about the data subject's racial or ethnic origin, political opinions, trade union membership, religious beliefs, physical or mental health condition, sexuality and criminal record or activity.

**Processing:** In relation to personal data, processing means obtaining, recording, sharing or holding the data or carrying out any other operation or action.

**Data Subject:** the individual whom the personal data is about.

**Data Controller:** HEE, NES, NIMDTA or HEIW is the Data Controller meaning that they determine the purposes for which and the manner in which any personal data is to be processed. A controller is an entity that decides the purpose and manner that personal data is used or will be used.

**Data Processor:** A data processor processes personal data on behalf of the data controller under a contract and follows strict instructions from the data controller. Processing involves obtaining, recording, adapting or holding personal data.

**Third parties:** Any person/organisation that is not the data subject, data controller or data processor

**Data Recipients:** any person to whom the data is disclosed that processes that data on behalf of the data controller e.g. HEE, NES, NIMDTA or HEIW staff and lay representatives.

### OVERVIEW

In order to manage and quality assure your training, HEE, NES, NIMDTA or HEIW need to process information about you. HEE, NES, NIMDTA or HEIW do so in compliance with the General Data Protection Regulation (2018). The main concepts and principles of GDPR are the same as those in the Data Protection Act (1998) and the data protection principles set out in Article 6 apply. These principles require that personal data must:

- Be fairly and lawfully processed
- Be processed for a specific purpose
- When collected, be adequate, relevant and not excessive
- Be accurate and up to date
- Not be kept for longer than necessary
- Be processed in accordance with individual's rights
- Be kept secure and safeguarded from unauthorised access or accidental loss
- Only be transferred outside the European Economic Area when an adequate level of protection exists in the recipient country

The GDPR includes the following rights for individuals:

- the right to be informed
- the right of access
- the right to rectification
- the right to erasure
- the right to restrict processing
- the right to data portability
- the right to object
- the right not to be subject to automated decision-making including profiling

## **PROCESSING YOUR PERSONAL DATA**

HEE, NES, NIMDTA and HEIW will process your personal data for the following purposes and will usually entail the processing of your personal data on our management information systems:

1. To manage your training and programme – personal data collected for this purpose will be kept in your training file, which will usually contain your recruitment data (application form, recruitment documentation and any immigration records), ARCP records, significant correspondence and any other information pertinent to the effective management of your training and education.
2. To quality assure training programmes and ensure that standards are maintained – via local and national quality assurance teams and methods such as national training surveys.
3. To identify workforce planning targets - your data will be used to determine outputs from programmes and to inform the number of trainees required for specialties in the future.
4. Maintaining patient safety through the management of performance concerns - your personal data may be shared with the GDC should there be significant concerns regarding your fitness to practise.
5. To comply with legal and regulatory responsibilities including revalidation.
6. To contact you about training opportunities, events, surveys and information that may be of interest to you.

Access to your personal data is restricted to the authorised team within HEE, NES, NIMDTA or HEIW you are employed to manage your training. Access is also granted on a limited basis to recipients such as programme directors and lay representatives but only where necessary for a specified and legitimate purpose.

Your personal data will be retained for six years after you have left your training programme. At which point your personal data will be confidentially and securely destroyed.

## **PROCESSING YOUR SENSITIVE PERSONAL DATA**

Your sensitive personal data will only be processed if HEE, NES, NIMDTA or HEIW have received explicit consent from you or if alternative conditions in the General Data Protection Regulation (2018) are satisfied or if an exemption specified in the GDPR applies. The legal basis for processing sensitive personal data is listed in Article 9 of the GDPR

Sensitive personal data that we may need to share includes information relating to your health or criminal record should your employer or the GDC need to be made aware.

## **SHARING PERSONAL DATA**

HEE, NES, NIMDTA or HEIW will only transfer your personal data to third parties using secure channels and where it is needed to manage your training, for instance when rotating through placements or notifying colleges of ARCP outcomes.

HEE, NES, NIMDTA or HEIW will not transfer your data unless it is satisfied of the following matters.

1. That the conditions of the General Data Protection Regulation (2018) are met.
2. The data will be handled by the third party in accordance with the General Data Protection Regulation (2018).

We may occasionally have to send you information from third parties about matters of policy where those policy issues impact on education, training, workforce planning or other matters related to your training. Third parties may include the following non-exhaustive list: the UK Health Departments, Medical Royal Colleges, other deaneries, the General Dental Council, NHS Trusts/Health Boards and approved academic researchers. If you prefer, you can opt out of receiving information about general matters of policy impacting on education, training and workforce planning by contacting your Local Office / Deanery. The relevant Local Office / Deanery will provide you with further advice and guidance regarding any consequences of your request.

Where the data is used for analysis and publication by a recipient or third party, any publication will be on an anonymous and aggregated basis and will not make it possible to identify any individual. This will mean that the data ceases to become personal data.

## **YOUR RESPONSIBILITIES AND RIGHTS**

It is important that you work with us to ensure that the information we hold about you is accurate and up to date, so please inform HEE, NES, NIMDTA or HEIW immediately if any of your personal data needs updating or correcting.

All communications from HEE, NES, NIMDTA or HEIW will normally be by e-mail. It is therefore essential for you to maintain an effective and secure e-mail address, or you may not receive information about you posts and your assessments or other important news and information about your training.

If at any point you wish to gain a copy of your personal data that is held by HEE, NES, NIMDTA or HEIW, you may submit a subject access request in writing. Please note that a fee may apply. Depending on your location of training please contact one of the organisations below:

- Health Education England
- NHS Education for Scotland
- Health Education and Improvement Wales
- Northern Ireland Medical and Dental Training Agency

You have, in certain limited circumstances, a right to object to processing that is likely to cause you damage or distress or any decisions made by automated means that significantly affect you.

You also have a right to have inaccurate personal data rectified, blocked, erased or destroyed

If you wish to exercise any of these rights or have any concerns in relation to how your personal data is processed, please contact HEE, NES, NIMDTA or HEIW using the details above.

Should you wish to learn further information about data protection please visit the Information Commissioner's Office (ICO) website. The ICO deals with complaints about information matters and provides useful guidance.

## GLOSSARY OF TERMS

<b>ACF</b>	Academic Clinical Fellow
<b>CL</b>	Academic Clinical Lecturer
<b>COPDEND</b>	Committee of Postgraduate Dental Deans and Directors
<b>ES</b>	Educational Supervisor
<b>FT</b>	Full Time
<b>GDC</b>	General Dental Council
<b>HEE</b>	Health Education England
<b>HEIW</b>	Health Education and Improvement Wales
<b>ICO</b>	Information Commissioner's Office
<b>IDT</b>	Inter-Deanery Transfer
<b>LAT</b>	Locum Appointment for Training (not available in HEE)
<b>LAS</b>	Locum Appointment for Service
<b>LTFT</b>	Less than Full Time
<b>MRDS</b>	Medical and Dental Recruitment and Selection
<b>MSF</b>	Multisource feedback
<b>NES</b>	NHS Education Scotland
<b>NIHR</b>	National Institute of Health Research
<b>NIMDTA</b>	Northern Ireland Medical and Dental Training Agency
<b>PDP</b>	Personal Development Plan
<b>PGDD</b>	Postgraduate Dental Dean/Director
<b>PT</b>	Part time
<b>QA</b>	Quality Assurance
<b>RCP</b>	Review of Competence Progression
<b>SHOW</b>	Scotland's Health on the Web
<b>SLA</b>	Service Level Agreement
<b>SLE</b>	Supervised Learning Event
<b>SPA</b>	Supporting Professional Activity
<b>TPD</b>	Training Programme Director