

**Dental 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.

<b>RCP for the Training Programme / Specialty</b>	
<b>Deanery / HEE Local Office</b>	
<b>Date of RCP Panel meeting</b>	

Please insert $\surd$ or X			Evidence	Comments
The appropriate paperwork was available prior to RCP	Yes			
	No			
The trainee/s had seen and signed the appropriate documents prior to the RCP panel meeting	Yes			
	No			
The composition of the RCP panel was appropriate and aligned to the Dental Gold Guide	Yes			
	No			
There is a named educational supervisor for each trainee	Yes			
	No			
RCPs take place at appropriate times in training	Yes			

	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"/>		

<b>Dental RCPs</b> <b>External Feedback Form: Quality of Training</b> <b>Form B</b>				
The purpose of this forms 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	
Is there evidence that trainees are well supported in their training?	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"/>		
Clinical training - Do you have any concerns regarding the range of clinical opportunities available for any programme/trainee?	Yes	<input type="checkbox"/>		
	No	<input type="checkbox"/>		

Non-clinical training - Are non-clinical sessions appropriate in terms of number and activity?	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
Do all training posts give the opportunity for curriculum requirements to be fulfilled?	Yes	<input type="checkbox"/>			
	No	<input type="checkbox"/>			
Please feel free to give further comments					
<b>Name</b>					
<b>Signature</b>				<b>Date</b>	
<b>Please return to the Deanery / HEE Local Office</b>					