# A Reference Guide for Postgraduate Dental Foundation Training in England, Wales, and Northern Ireland

The Dental Blue Guide

**Second Edition - September 2022** 

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#### 1. Introduction

#### 1.1 Preface

The Dental Blue Guide has been produced by the UK Committee of Postgraduate Dental Deans and Directors (COPDEND) and will continue to be reviewed and updated regularly. This is a guide to Foundation Training in dentistry and therefore does not include information on pay or contractual issues. The Dental Blue Guide is not applicable in Scotland where separate arrangements apply. Throughout this guide, use of the term 'Educational Supervisor' should be taken to include the term 'Trainer' where this is used locally to describe the dentist appointed by a Postgraduate Dental Dean to train a FD. Education Supervisors do not act on behalf of HEE or make decisions on HEE's behalf. In addition, where the term 'FD' is used it should be taken to include Joint Dental Foundation Core Trainees when working in the Foundation Training (dental practice) element of their training. Throughout this guide, the term Postgraduate Dental Dean includes Directors of Postgraduate Dental Education.

#### 1.2. Background

With the introduction of a formal model for the assessment of Satisfactory Completion of Dental Foundation Training from September 2016, it was decided that a guide equivalent to the Medical and Dental Gold Guides was necessary. Consequently, whilst being specific for Dental Foundation Training, elements of this guide are based on the principles set out in the Medical and Dental Gold Guides.

For details on pay and payments to FDs and Educational Supervisors reference should be made to the Dental Statement of Financial Entitlement published by the Department of Health and equivalent documents for Wales and Northern Ireland.

For details on contractual matters and educational agreements, reference should be made to the documentation issued by COPDEND for HEE and the equivalent documents for Wales and Northern Ireland.

- **1.21** This edition is a consolidation of earlier versions of the Dental Blue Guide and Supplementary Guides and replaces all previous versions prior to September 2021.
- **1.22** The Guide is not a contractual document and will not cover every eventuality. There are occasions where it may be necessary to derogate from the guidance defined in this Guide.
- **1.23** The Postgraduate Dental Dean has discretion to offer flexibility in making derogations from the Dental Blue Guide in exceptional circumstances and for sound educational reasons such as to accommodate changes and innovations in training delivery.

#### 1.3 Definition of Dental Foundation Training

Dental Foundation Training is a relevant period of employment during which a dental practitioner is employed to provide a range of dental care and treatment and to attend such study days as that contract provides, with the aims and objectives of enhancing clinical and administrative competence and promoting high standards through relevant postgraduate training and in particular to:

- a) Enable the dental practitioner to practise and improve their skills;
- b) Introduce the dental practitioner to all aspects of dental practice in primary care;
- c) Identify the dental practitioner's personal strengths and weaknesses and balance them through a planned programme of personal development and training;
- d) Promote oral health of, and quality dental care for patients;
- e) Develop and implement peer and self-review, and promote awareness of the need for professional education, training and audit as a continuing process;
- f) Enable the dental practitioner to;
  - I. Make competent and confident professional decisions including decisions for referrals to other services.
  - II. Demonstrate that the dental practitioner is working within the guidelines regarding the ethics and confidentiality of dental practice,
  - III. Implement regulations and guidelines for the delivery of safe practice,
  - IV. Know how to obtain appropriate advice on, and practical experience of, legal and financial aspects of practice
  - V. Demonstrate that the dental practitioner has acquired skill and knowledge in the psychology of care of patients and can work successfully as a member of a practice team.

#### 1.4 Purpose of the Guide

A Guide to Dental Foundation Training (the 'Dental Blue Guide') is published to support the satisfactory completion model for Dental Foundation Training in England, Wales, and Northern Ireland. It would

The Dental Blue Guide does not address issues relating to terms and conditions of employment, (e.g., pay, contracts and educational agreements). Such matters should be addressed to the trainee's employer. Information on pay can be found in the relevant Statement of Financial Entitlement, published by the Department of Health and equivalent documents for Wales and Northern Ireland. Information on contracts and educational agreements can be found on the COPDEND website (www.copdend.org.uk).

This Guide sets out the arrangements agreed by the UK Health Departments in England, Wales and Northern Ireland to enable the implementation of a satisfactory completion model for Dental Foundation Training. The policy underpinning this Guide is applicable in all three administrations, but there are some important national variations in its implementation. These have been highlighted appropriately. COPDEND, on behalf of the three UK Health Departments or their representatives, will formally review the Dental Blue Guide on an annual basis.

#### 1.5 Roles and Responsibilities

Health Education England (HEE), Health Education and Improvement Wales (HEIW), NHS Education for Scotland (NES) and the Northern Ireland Medical and Dental Training Agency (NIMDTA) have responsibility for developing and delivering education and training for the healthcare workforce to enable excellence in health and care.

Arrangements for the Devolved Administrations - while HEE and NHS England (NHSE) are accountable for issues related to England only, they work with stakeholders as appropriate in areas where there may be implications for the rest of the UK. NIMDTA, HEIW and NES have similar lead roles for education and training in the Devolved Administrations.

#### 1.6 HEE Local Offices and Postgraduate Deaneries

The HEE Local Offices and Postgraduate Deaneries in the UK are responsible for implementing Dental Foundation Training in accordance with the approved curriculum. Postgraduate Dental Deans work with stakeholders to quality manage the delivery of Dental Foundation Training to COPDEND standards. The standards that must be delivered are normally set out in educational contracts between Deaneries/HEE Local Offices and educational providers.

# 1.7 Committee of Postgraduate Dental Deans and Directors (COPDEND)

COPDEND has produced standards of postgraduate dental education which apply to the quality management of all dental education and training programmes in the UK. Throughout this Guide the use of the title Postgraduate Dental Dean should be taken to include the title Director of Postgraduate Dental Education or equivalent.

#### 1.8 Postgraduate Dental Deans

Through their TPDs (TPD), Postgraduate Dental Deans (or their nominated deputies) are responsible for developing appropriate Dental Foundation Training programmes within practices that meet curriculum requirements. Deaneries/HEE Local Offices quality manage their processes to ensure that the training programmes meet the required standards as described in <u>Section G6</u>.

#### 1.9 FDs

All FDs must accept suitable placements or training posts which have been designated as part of the Dental Foundation Training programme prospectively approved by Deaneries/ HEE Local Offices. In placing FDs, Postgraduate Dental Deans or their representatives must consider the needs of FDs with specific health needs or disabilities. Employers and training placement providers must consider reasonable adjustments if FDs require these. The need to do so should not be a reason for not offering an otherwise suitable placement to a FD.

All FDs must have an educational contract/agreement with the relevant Deanery/HEE Local Office so that:

1. Progress in their training can be kept under review and supported where required.

2. Eligible FDs can be recommended to the Postgraduate Dental Dean for consideration of award of a Certificate of Satisfactory Completion of Dental Foundation Training at the end of their training.

#### 1.10 Dental Foundation Training Curriculum

COPDEND, in consultation with stakeholders, has developed the Dental Foundation Training curriculum in accordance with the principles of education and training set out in the COPDEND Standards and agreed with the Departments of Health. Only the approved curriculum can be used for delivering Dental Foundation Training programmes resulting in the award of Certificate of Satisfactory Completion of Dental Foundation Training and a performer number without conditions.

#### 1.11 General Dental Council (GDC)

The GDC is responsible for setting standards for all dental registrants. Whilst the GDC is not directly involved in the quality assurance of Dental Foundation Training, the principles and requirements of the *GDC's Standards for Education* apply to providers of all education and training programmes in dentistry.

#### 1.12 Performers and Dental Lists

The body responsible for dentists joining the Performers List in England is the NHS England working through Area Teams. The equivalent body in Wales is Gig Cymru Partneriaeth Cydwasanaethau (NHS Wales Shared Services Partnership) and in Northern Ireland the responsibility lies with the Health and Social Care Board working through Local Commissioning Groups.

Foundation Dentists require entry to the Performers List to continue in Foundation training and that they are responsible for securing entry on the Performers List without delay.

#### 1.13 Standards

COPDEND is responsible for agreeing a curriculum for training in the Dental Foundation Training programmes which meets the COPDEND standards for training. COPDEND's focus is on the learning outcomes stated in the curriculum and how they are assessed.

The curriculum describes outcomes in terms of demonstrated competences, knowledge, skills and attitudes. There is a complex relationship between outcomes, performance and experience which is time dependent.

#### 1.14 Structure

Foundation Dentist (FD) is the generic title for all trainees appointed to nationally funded Dental Foundation Training programmes. Where Dental Foundation Training programmes incorporate the equivalent of Dental Core Training Year 1 over a two-year period (longitudinal programmes), the FDs may be identified as JDFCT (Joint Dental Foundation and Core Training). The assessment of the non-Foundation elements will be separate from the Dental Foundation Training element and Dental Foundation Training assessment panels will not take account of performance in the non-Foundation elements.

#### 2. Setting Standards

#### 2.1 Approval of Training Programmes: standards of training

Approval of Dental Foundation Training programmes, and posts rests with the individual Deaneries/HEE Local Offices

A programme consists of allocation to a Dental Foundation Training Programme and a placement in a dental practice with a significant NHS commitment. The Deanery/HEE Local Office commissions Programmes of Dental Foundation Training which are based on a particular geographical area, which normally corresponds to the Deanery/HEE Local Office boundary. They are managed by a TPD (TPD).

Dental Foundation Training programmes/posts should conform to training standards equivalent to those set by the GDC and COPDEND which require successful FDs to have met the learning outcomes stated in the curriculum. Therefore, the HEE Local Office's/Deanery's task will be to collate and analyse information showing that successful FDs have met the relevant learning outcomes.

COPDEND may further develop Dental Foundation Training specific guidance in accordance with GDC and COPDEND standards.

#### 2.2 Quality management of postgraduate dental education

Postgraduate Dental Deans in the UK are responsible for the quality management of Dental Foundation Training programmes in their Deanery/HEE Local Office. The requirement to manage the quality of the delivery and outcomes of Dental Foundation Training through HEE/Deanery processes is a key element in the overall quality assurance approach.

The principles of quality management of Dental Foundation Training include the monitoring of a number of processes throughout the programme to assess the quality control of training including the:

- Approval process for training programmes, posts and Educational Supervisors
- Use of national and local surveys of Educational Supervisors and FDs to collect relevant perspectives on training programmes and their education outcomes
- Review of curriculum delivery and associated assessment system

The mechanism for providing external quality assurance of Dental Foundation Training is under discussion at the present time.

#### 2.3 Managing Dental Foundation Training

The overall management of a Dental Foundation Training programme rests with the Postgraduate Dental Dean.

The responsible agencies above require Postgraduate Dental Deans to have in place an educational contract with all providers of Dental Foundation Training that sets out the standards to which postgraduate dental education must be delivered and the monitoring arrangements of the educational contract.

#### **2.4 TPDs**

The overall management of Dental Foundation Training is carried out by Deanery/HEE Local Office appointed TPDs.

#### TPDs should:

- Participate in the management and delivery of the Dental Foundation Training programme(s) within the Deanery/HEE Local Office or across Deanery/HEE Local Office boundaries.
- Work with Associate Dental Dean to ensure that programmes deliver the Dental Foundation Training Curriculum and enable FDs to gain the relevant competences, knowledge, skills, attitudes and experience.
- Take into account the collective needs of the FDs in the programme when planning programmes.
- Provide support for Educational Supervisors within the programme.
- Contribute to the assessment outcome processes in Dental Foundation Training.
- Assist the Postgraduate Dental Dean to manage FDs who are experiencing difficulties by supporting Educational Supervisors and identifying remedial programmes where required.
- Ensure, with Deanery/HEE Local Office administrative support, that employers
  are normally notified at least two months in advance of the name and relevant
  details of the FDs who will be placed with them. From time to time, however, it
  might be necessary to recommend that FDs be placed at shorter notice.

#### 2.5 Educational and clinical supervision

Clinical placements should explicitly recognise that supervised training of a FD is a core responsibility, to ensure both patient safety and the development of the trainee/individual. The commissioning arrangements and educational contract between the Postgraduate Dental Dean and both the clinical placement and Educational Supervisor should be based on these principles.

Postgraduate Dental Deans should appoint locally based Dental Foundation Educational Supervisors to deliver educational and clinical supervision and training in line with the Dental Foundation curriculum. In doing so there needs to be clear lines of accountability to the placement providers and FD employers so that these educational roles are fulfilled and properly recognised.

Educational Supervisors should demonstrate their competence in educational appraisal and feedback and in use of structured learning events (also known as workplace-based assessments).

Postgraduate Dental Deans need to be satisfied that any individual involved in delivering training in addition to the appointed Educational Supervisor, has the required training and competence. This includes TPDs and clinical supervisors. Monitoring of the delivery and standard of such training will be part of the quality management arrangements. Educational Supervisors involved in appraisal and assessment of FDs must also be appropriately trained.

All FDs must have a named Educational Supervisor for their placement in their Dental Foundation Training programme post.

There should be explicit and sufficient time in an Educational Supervisor's commitment for both clinical and educational supervision of FDs for Dental Foundation Training.

#### 2.6 Role of the Educational Supervisor

An Educational Supervisor will be responsible for the overall supervision and management of an individual FD's progress during a training placement. The Educational Supervisor is responsible for the delivery of training as detailed in the FD's Educational Agreement.

Educational Supervisors should:

- Be adequately prepared for the role and understand educational theory and practical educational techniques e.g., have undertaken formal facilitated training and participated in relevant training programmes.
- Be trained to provide educational and clinical supervision and undertake assessment and feedback. The 'core values and knowledge' are stated in COPDEND's Standards for Dental Educators (<u>See section G7</u>).
- Undertake training in competence assessment for Dental Foundation Training.
- Be trained in equality and diversity.
- Provide regular assessment opportunities, which should take place throughout the placement.
- With the FD, develop a mutually agreed learning agreement and educational objectives which will be the point of reference for future assessment.
- Ensure that FDs for who they are responsible maintain and develop their Dental Foundation learning portfolio and participate in the Dental Foundation assessment process.
- Provide regular feedback to the FD on their progress.
- Ensure that the structured report which is a detailed review and synopsis of the FD's electronic portfolio and other required documentation is returned within the necessary timescales.
- Liaise with the TPD, the Associate/Deputy Dean and the Postgraduate Dental Dean should the level of performance of a FD give rise for concern.
- Be able to advise the FD about access to career advice.

Be accountable for their educational role

Educational Supervisors are responsible both for the educational assessment of Foundation Dentists, and also for review of their performance based on the GDC's ethical guidance document Standards for the Dental Team. This links educational appraisal and performance review of FDs. The mechanism for this is described in subsection 5.2.

It is essential that there are unambiguous lines of accountability for Educational Supervisors to the TPD, Associate/Deputy Dean and Postgraduate Dean, and also into the management structure of the FD's employer and clinical placement provider so that there is an understanding of:

- The clear link between the appraisal, assessment and planning of a FD's educational programme and their performance as a dentist.
- The transparency of the process ensuring that the FD is aware of the information being shared with the employer and the Deanery/HEE Local Office.
- The arrangements for raising matters of clinical concern and professional performance about a FD within the practice, employer organisation and with the Deanery/HEE Local Office in line with wider regulatory requirements.
- That where an Educational Supervisor is a performer or employee, clinical
  placement providers must ensure that Educational Supervisors have this role
  recognised within job planning arrangements and all are parties to the contract
  of employment.
- Educational Supervisors although appointed by Deanery/HEE Local Office in an educational capacity, carry out that role as part of their employment arrangements with the placement provider. Therefore, day-to-day management of Educational Supervisors rests with the placement provider.

#### 2.7 Clinical supervision

The FD's Educational Supervisor will also be their Clinical Supervisor for the majority of the week. There may also be occasions when there is a further nominated Clinical Supervisor (who will be a suitably experienced dentist working in the practice). In these circumstances the individual must be clearly identified to both parties and understand the role of the clinical supervisor. The named Educational Supervisor remains responsible and accountable overall for the training of the FD.

All Clinical Supervisors (whether or not also the Educational Supervisor) should:

- Understand their responsibilities for patient safety.
- Be fully trained in the specific area of clinical care.
- Offer a level of supervision appropriate to the competences and experience of the FD and tailored for the individual FD.
- Ensure that no FD is required to assume responsibility for or perform clinical, operative or other techniques in which they have insufficient experience and expertise.

- Ensure that FDs only perform tasks without direct supervision when the supervisor is satisfied that they are competent so to do; both FD and supervisor should always be aware of their direct responsibilities for the safety of patients in their care.
- Be appropriately trained to supervise, teach, provide feedback and undertake competence assessment of FDs.
- Be working on the same site as the FD.

#### 3. The Structure of Training

#### 3.1 General

Dental Foundation Training will be provided through Dental Foundation Training programmes and posts approved by the Deanery/HEE Local Office. Entry into Dental Foundation Training can only be achieved through open competition in the national recruitment process.

Once an applicant has taken up a place in a Dental Foundation Training programme they will subject to the demonstration of satisfactory progress, receive a Certificate of Satisfactory Completion of Dental Foundation Training (CSCDFT). Where satisfactory progress is not demonstrated and the period of required training has been exhausted, a Certificate of Completion of Dental Foundation Training (CCDFT) will be issued with the demonstrated competences identified. Either certificate will render them eligible to apply for entry into a Dental Performers List or equivalent. However a CCDFT will require demonstration of missing competencies within a set time period.

#### 3.2 The NHS Performers Lists

To practise as a dental practitioner in England or Wales, a dentist must be enrolled on the relevant Performers List, or equivalent. The equivalent in Northern Ireland is the Dental List of the Health and Social Care Board. Dentists who graduate from UK dental schools are required to undertake a period of formal Foundation Training as set out in The National Health Service (Performers Lists) (England) (Amendment) Regulations 2016 and the equivalent legislation in Wales and Northern Ireland.

It is the trainee's responsibility to progress initial entry to the performers list to facilitate FDT. If entry cannot be achieved within a 3 month period of starting the training programme, then training may be terminated.

#### 4. Becoming a FD

#### 4.1 Entry into Dental Foundation Training

Applicants must demonstrate they meet the requirements of the person specification applicable at that time to be able to commence Dental Foundation Training.

#### 4.2 Recruitment into Dental Foundation Training

The National Recruitment process for Dental Foundation Training in England, Wales and Northern Ireland is administered by London Regional Team reporting to Health Education England (HEE).

#### 4.3 Offers of employment

A FD will have an educational agreement with the Deanery/HEE Local Office that entitles them to continue in a training programme subject to satisfactory progress.

An allocation offer for a training programme following the assessment process is not an offer of employment. This can only be made by an employer who will need to ensure that the candidate who has been allocated meets the requirements of employability.

If an applicant is selected and offered a placement on a training programme through the national recruitment process, the employing organisation ultimately has the right to refuse employment. Examples for refusal will include failed Disclosure and Barring Service Enhanced Disclosure Certification, or Occupational Health checks, unresolved fitness to practice issues or if the checks highlight falsification of evidence on the part of the applicant. Under such circumstances, the relevant Postgraduate Dental Dean will, if appropriate, ensure that an alternative placement is found, but ultimately if the Postgraduate Dental Dean reasonably concludes that it is unlikely that an employing organisation willing to offer employment will not be found, then the offer of a training programme placement will be withdrawn.

On appointment of the FD to the training programme the Postgraduate Dental Dean will:

- ensure that an approved contract of employment and side letter is in place between the FD and their employer. This may be the Lead Employer.
- enter into an Educational Agreement with the FD setting out the obligations of the FD and those of the Postgraduate Dental Dean within the training programme
- enter into an Educational Agreement with the Educational Supervisor and the Educational Supervisor's employer (if different) setting out the obligations of the Educational Supervisor and the Educational Supervisor's employer (if different) and those of the Postgraduate Dental Dean within the training programme.

#### 4.4 Deferring the start of a Dental Foundation Training programme

FDs appointed to Dental Foundation Training cannot normally defer the start of their fixed term appointment and any deferment would need the agreement of the Postgraduate Dental Dean. The start of training may only be deferred on statutory grounds (e.g., maternity leave, ill health, reasonable adjustments for a disability).

#### 4.5 FD's Commitment

FDs appointed to Dental Foundation Training should:

- Be engaged in activities approved by and agreed with the Postgraduate Dental Dean.
- Ensure that their Educational Supervisor and TPD are aware of any absence from the training programme for e.g., sick leave. The Postgraduate Dental Dean, the employer and placement provider must be made aware of plans for prolonged absence (greater than ten working days).
- Agree to engage in the training and assessment process e.g., participate in setting educational objectives, appraisal, attend training sessions, undertake appropriate WBAs, and ensure that documentation required for the assessment process is submitted on time and in the appropriate format.
- Not undertake other work activities which compromise their training or make them non-compliant with European Working Time Regulations.
- Work 35 hours a week (excluding holidays) in their clinical placement or when a study day is organised a total of 35 hours a week as directed in the employment contract.

#### 4.6 When does Dental Foundation Training end?

Training will end when a FD:

- Has satisfactorily completed their Dental Foundation Training or,
- Has completed the allotted period of Dental Foundation Training (subject to a maximum of two years full-time or an equivalent period part-time) or,
- Is assessed by the relevant Postgraduate Dental Dean as not being suitable to complete training or,
- Voluntarily resigns their place in a training programme
- Is erased or suspended from the dental register (whether permanently or temporarily) or where restrictions are applied to their ability to practise where normally such measures are incompatible with continuing in a Dental Foundation Training programme or.
- Is unable to gain entry, erased or suspended from an NHS Performers List or equivalent (whether permanently or temporarily) or where restrictions are applied to their ability to practise where normally such measures are incompatible with continuing in a Dental Foundation Training programme or,

A FD dismissed by an employer because of conduct and capability procedures will normally be deemed by the Postgraduate Dental Dean to be unsuitable to continue in Dental Foundation Training and may have their place on the programme terminated.

#### 4.7 Arrangements for the Defence Dental Services

The Defence Dental Services (DDS) will continue to train dental officers in Dental Foundation Training programmes for practice in the Armed Forces. Professional training will follow, as closely as possible, the pattern required for NHS FDs as well as meeting the needs of the Armed Forces.

#### 4.8 Less than Full-Time Training (LTFT)

Less than full-time training shall meet the same requirements in Dental Foundation Training as full-time training, from which it will differ only in the possibility of limiting participation in dental activities by the number of hours worked per week.

All FDs can apply for less than full-time training at any time once they have been accepted into Dental Foundation Training. As for all other applicants wishing to enter Dental Foundation Training, competitive appointment into Dental Foundation Training is required but must not be affected or influenced by the applicant's wish to be considered for less than full-time training.

Less than full-time training is not guaranteed and remains at the discretion of the Postgraduate Dental Dean and the employer of the FD.

The aims of less than full-time training are to:

- Retain within the workforce dentists who are unable to continue their training on a full-time basis.
- Promote career development and work/life balance for dentists in training.
- Ensure continued training in programmes on a time equivalence (pro-rata) basis.
- Maintain a balance between less than full-time training arrangements, the educational requirements of both full and part-time FDs and service need.
- As far as possible, Postgraduate Dental Deans will seek to integrate less than full- time training into mainstream full-time training by ensuring equity of access to study days.
- A post that is approved for training may be considered to be approved for training on a less than full-time basis at the discretion of the Postgraduate Dental Dean.

#### 4.9 Eligibility for less than full-time training

To be permitted to train LTFT trainees requires a well-founded individual reason. It should be noted that requests to undertake LTFT are not guaranteed and will be dependent on capacity of the training programme/service needs.

#### Category 1;

- Disability
- III health
- Responsibility for caring for children
- Responsibility for caring for ill/disabled partner, relative or other dependant
- Religious commitment involving training for a particular role which requires a specific time commitment

#### Category 2;

- Unique opportunities for their own person/professional development, e.g., training for national/international sporting events
- Non-medical development such as management courses, law courses etc.
- Other well-founded reasons may be considered but will be prioritised by the Postgraduate Dental Dean 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

 Not be permitted to engage in any other paid or unpaid employment whilst in less than full-time training.

#### 5. Progressing as a FD

#### 5.1 Competences, experience and performance

The approved DFT curriculum for Dental Foundation Training defines the standards of knowledge, skills and behaviours which must be demonstrated in order to achieve the award of a Certificate of Satisfactory Completion of Dental Foundation Training (CSCDFT).

Competences, knowledge, skills and attitudes take time and systematic practice to acquire and to become embedded as part of regular performance. Implicit therefore in a competence-based programme of training must be an understanding of both the minimum level of frequency and experience and the time required to acquire competence and to confirm performance in the dental foundation training programme.

Assessment strategies for Dental Foundation Training must not deliver just "snapshots" of skills and competences but must deliver a programme of assessment which looks at the sustainability of competences and the clinical and professional performance of FDs in everyday practice.

The emphasis on workplace assessments aims to address this through assessing performance and demonstrating the standards and competences across the clinical and non-clinical domains with the Dental Foundation Training competency framework. It means that Educational Supervisors and FDs must be realistic about undertaking these assessments and that employers must ensure that appropriate opportunities are provided to enable this to happen effectively. Clearly, Educational Supervisors must make time available for the process.

FDs progress at different rates, depending on their own abilities, their determination, and their exposure to situations that enable them to develop the required knowledge, skills and behaviours in the context of NHS dental practice. It is important that Deaneries/HEE Local Offices, Educational Supervisors, FDs and employers are clear as to what is acceptable progress within Dental Foundation Training. This will enable reasonable limits for remediation to be set and so that FDs are aware of the boundaries within which remediation can and will be offered.

#### 5.2 Educational review

The purpose of educational review is to:

- Review, identify and agree educational needs at an early stage by agreeing educational objectives which are SMART (Specific, Measurable, Achievable, Realistic, Time bound).
- Provide a mechanism to receive the report of the Review of Competence Progression (RCP) panel and to discuss these with the FD.

- Provide a mechanism for reviewing progress at a time when appropriate remedial action can be taken if required .
- Assist in the development in FDs' self-reflection skills that will be needed throughout a professional career.
- Enable learning opportunities to be identified in order to facilitate a FD's access to these.
- Provide a mechanism for giving feedback on the quality of the training provided.
- Make training more efficient and effective for a FD.

Educational review is a developmental, formative process. It should enable the training for individual FDs to be optimised, taking into account the available resources and the needs of other FDs in the programme. Training opportunities must meet the training standards as set by the GDC and COPDEND.

Educational review should be viewed as a continuous process. As a minimum, the educational element of appraisal should take place at the beginning, middle, and towards the end of training, the last two elements marked by the RCP process, as described in the Guidance Supplement. However, appraisal may be needed more frequently, for example after an assessment outcome which has identified inadequate progress.

Each FD should have an educational plan, formed in partnership with the Educational Supervisor at the start of their training placement which sets out their specific aims and learning outcomes, based on the requirements of the curriculum for Dental Foundation Training. This will be updated following the Early Stage Review and Interim RCP and should form the basis of any appraisal discussions throughout all stages of training.

The Educational Supervisor and FD should discuss and be clear about the use of the e-Portfolio. Regular help and advice should be available to the FD to ensure that the e-Portfolio entries are developed to support professional learning.

Regular feedback should be provided by the Educational Supervisor on progress. This should be a two-way process, and in the context of an effective professional conversation. FDs should feel able to discuss the merits or otherwise of their training experience. The detailed content of the discussion which takes place within appraisal sessions should normally be confidential and a summary of the appraisal discussion should be agreed and recorded, and any agreed actions documented. Appraisal summaries should be part of the FD's portfolio.

The educational appraisal process is the principal mechanism whereby there is the opportunity to identify concerns about progress as early as possible. Examples of some early warning signs which should alert the Educational Supervisor that intervention may be required include:

- Failure to participate in undertaking structured learning events (workplace-based assessments) across all areas where these are required, or in specific instances;
- Issues raised in multi-source feedback information from either staff or patients;
- Significant or unexplained absences.

These concerns should be brought to the attention of the FD during appraisal meetings. Account should be taken of all relevant factors which might affect progress (for example, health or domestic circumstances) and should be recorded in the portfolio. A specific action plan to address the concerns should be agreed and documented between the Educational Supervisor and the FD. If concerns persist or increase, further action should be taken, either through the assessment process or, if timing is inappropriate, through direct contact with the TPD and Employer (where applicable), alerting them of these concerns.

#### 5.3 Early Stage Review (ESR)

In an educational programme which is normally of one-year's duration it is essential to identify relevant personal, professional and clinical needs at an early stage to enable supporting mechanisms to be put in place as soon as possible. It is not desirable that concerns with regard to competence progression should be first identified at the Interim RCP panel stage.

ESR is not, in itself, part of the RCP process but Panels should have the ability to review and consider the ESR documentation and any associated action plan to assist them in making a decision if necessary.

The ESR should be conducted within the training practice by the Educational Supervisor within the first two months of the start of Dental Foundation Training. Evaluation methods will include early review of skills, Direct Observation of Procedural Skills (DOPS), Multi-source feedback and clinical experience log.

Where the need for additional training support is identified, the Educational Supervisor should inform the programme TPD who will develop a structured action plan in conjunction with the Educational Supervisor and the FD to address the identified needs. The Postgraduate Dental Dean must be informed as soon as the need is apparent.

The action plan and specific reports by the Educational Supervisor and TPD on the FD's progress against agreed objectives must be made available for the Interim RCP panel as part of the review process.

#### 5.4 Purpose, Assessment and the Reviews of Competence Progression (RCP)

The review panels provide a formal in-absentia process which uses the evidence gathered by the FD, relating to his/her progress in the training programme. The Interim RCP will normally be undertaken at the mid-point of training and the Final RCP approximately 4-6 weeks before the end of training for all FDs and will enable the FD, the Postgraduate Dental Dean and employers to document that the competence and progress required is being gained at an appropriate rate and through appropriate experience. The Reviews are not in themselves a means or tool of assessment but have been designed to fulfil the following functions:

- Provide an effective mechanism for recording the evidence of the FD's progress within the training programme.
- Provide a means whereby the evidence of the outcome of formal assessment, (e.g., agreed work based assessments and other assessment strategies), which are part of the assessment programme, are coordinated and recorded to provide a coherent record of a FD's progress.

- Provided adequate documentation has been presented, to make judgements about the competence and progress of a FD.
- Provide a basis for formally implementing targeted and/or remedial training if deemed necessary by the panel.
- Provide a final statement of the FD's demonstration of the competences and requirements for Dental Foundation Training (Final RCP only) and, if satisfactory, a recommendation for award of CSCDFT.
- Ensure that the Educational Supervisor(s) and training opportunities in training
  placement is satisfactory. If any issues are identified with the training
  environment these should be reported directly to the Deanery/HEE Local Office.

The RCP process is applicable to all FDs, including the Dental Foundation Training element of Joint Dental Foundation Core Training schemes.

Assessment strategies will normally include Direct Observation of Procedural Skills (DOPS), A Dental Evaluation of Performance Tool (ADEPT); case note review or case-based discussion (CbD); multi-source feedback report (MSF); patient survey questionnaire (PSQ) and other documented evidence of progress of the individual against competencies within the curriculum for Dental Foundation Training.

The Educational Supervisor's Structured Reports should be used to provide a summary of the outcome of these for the RCP panels. This report must:

- Reflect the learning agreement and objectives developed between the FD and his/her Educational Supervisor.
- Be supported by evidence from the workplace-based assessments (ADEPTs, CbDs etc.) required in Dental Foundation Training.
- Take into account any remedial action taken during the training period for whatever reason.

Portfolios, assignments and audit reports also document experience and attainment of skills which FDs may need to demonstrate. They are not in and of themselves assessment tools but are a valid record of progress. This evidence should be retained in the specific Dental Foundation Training electronic portfolio which all FDs must keep in order to record their evidence and progress in their training. The portfolio will also form the basis of the educational and workplace-based appraisal process (subsection 5.2) and the planning process (subsection 5.2). Clinical assessment records presented at reviews should be anonymized to avoid patient identification.

FDs should familiarise themselves with the relevant Dental Foundation Training assessment and other documentation required for the assessment process (and the supporting appraisal and planning processes) at the start of the training programme.

The FD's Educational Supervisor must ensure that the FD:

- Is aware of his/her responsibility to initiate workplace-based assessments.
- Maintains an up-to-date e-portfolio.
- Assessments of knowledge and skills in a timely fashion based on the recommended timescale in <u>Guidance</u> 5 Supplement.

If genuine and reasonable attempts have been made by the FD to arrange for workplace-based assessments to be undertaken but there have been difficulties in

achieving this, the FD must raise this with their Educational Supervisor or TPD immediately.

The Educational Supervisor and TPD must facilitate appropriate assessment arrangements within the timescales required by the assessment process.

#### 5.5 Collecting the evidence

Structured reports should be prepared by the FD's Educational Supervisor and should reflect the evidence collected to reflect the learning agreement for the period of training under review. The purpose of the reports are to collate the results of the required in-work assessments (e.g., ADEPTs, CbDs) and further experiential activities required by the Dental Foundation Training programme (e.g., portfolios, assignments, audits).. It is essential that all FDs and Educational Supervisors familiarise themselves with the Dental Foundation Training curriculum and assessment programme.

The FD's Educational Supervisor will also be his/her clinical supervisor other than when the Educational Supervisor is not available.

Deaneries/HEE Local Offices will make local arrangements to receive the necessary documentation from FDs and Educational Supervisors and will give them at least two weeks' notice of the date by which it is required so that FDs and Educational Supervisors can collate and submit the required evidence and reports summarising the FD's progress. It is the responsibility of each FD and Educational Supervisor to provide the documentation by the required date and they should be aware that failure to do so will result in the panel being unable to consider their progress. It is anticipated that assessment panels will receive most of the evidence electronically.

It is the responsibility of FD and Educational Supervisor to ensure that the documentary evidence submitted, including e-Portfolio, is complete. All workplace-based assessment (WPBA) outcomes should be included in the evidence submitted to the Review of Competence Progression (RCP) Panel and be retained in the FD's portfolio so that they are available for discussion with Educational Supervisor during educational review discussions.

Where the documentary evidence submitted is incomplete or otherwise inadequate so that a panel cannot reach a judgement, no decision should be taken about the performance or progress of the FD. The failure to produce timely, adequate evidence for the panel will result in an incomplete outcome (Outcome 5) and will require the FD to explain to the panel and Deanery/HEE Local Office in writing the reasons for the deficiencies in the evidence. The fact that Outcome 5 has occurred will remain as a part of the FD's record but once the relevant evidence has been submitted then a new outcome will be added according to the evidence evaluated by the assessment panel.

It will be necessary for the TPD to provide a report detailing evidence that led to the recommendation of a negative assessment by the FD's Educational Supervisor. It is essential that the FD has been made aware of this and has seen the Educational Supervisor's report prior to its submission to the panel. It is not necessary hat the FD should agree the report's content but is intended to ensure that the FD is aware of what had been said.

The FD may submit, as part of their evidence to an RCP, a response to the Educational Supervisor's report or to any other element of the assessment

documentation for the panel to take into account when making their decision, as part of their reflections on the report in the portfolio.

In cases of, for example allegations of bullying, harassment or other inappropriate conduct on the part of an Educational Supervisor or other healthcare professional, all Deaneries/HEE Local Offices and employers of FDs will have policies on managing allegations of inappropriate learning and working environments. FDs are encouraged to follow these policies and training providers must make their policies on bullying and harassment known to FDs as part of their induction.

#### 5.6 Summary of RCP Timeline

	Action	Timing
Before the RCP	Date and venue communicated to RCP panel (including external representatives) and trainees	No less than 6 weeks in advance
	Timetable sent to RCP panel	2 weeks in advance
	ESs write trainee report(s)	3 weeks in advance
	Trainees complete submission of RCP documentation (ISCP/e-Portfolio/paper)	2 weeks in advance
	RCP documentation made available to panel	2 weeks in advance
At the RCP	Panel briefing by Admin staff / Associate Postgraduate Dental Dean / Lay rep. Roles and responsibilities agreed. Reviews concluded. Completion of GDC registrant's revalidation certificate for dual qualified trainees	On the day
After the RCP	Trainees to arrange feedback meetings with ESs, TPDs, Associate Postgraduate Dental Deans as required	ASAP and within 1 week
	TPDs to access relevant trainee e-portfolios if not done so at RCP Panel	Within 1 week
	Trainees sent RCP outcomes Following FRCP, local NHSE regional performer teams informed of outcomes and any extensions to training	Within 1 month
	Postgraduate Dental Dean to issue certificates of completion post FRCP	Within 1 month

### **5.7 RCP Outcomes in Dental Foundation Training**

Outcome and Descriptor	Detail	Applicable to Panel(s)
Outcome 1  Demonstrating progress and the development of competences and prescribed elements at the	Satisfactory progress is defined as demonstrating the competences within the approved Dental Foundation curriculum at the rate required and meeting.  the prescribed elements of the Deanery/HEE Local Office training programme.	Interim RCP
expected rate.  Outcome 2  Development of specific competences and/or prescribed elements required	The FD has not demonstrated the competencies and/or prescribed elements at an appropriate level at this stage.  The panel will specifically identify the further development(s) which is/are required. The documentation will be returned to the TPD, who will make clear to the	Interim RCP
	FD, the Educational Supervisor and the employer (where different) what must be done to achieve the required competences and the assessment strategy for these.	
Outcome 3 Inadequate progress by the FD - additional training time required.	The panel has identified that a formal additional period of training is required which will extend the duration of the training programme. The FD, Educational Supervisor and the employer will need to receive clear recommendations from the panel about what additional training is required and the circumstances under which it should be delivered (e.g., concerning the level of supervision). It will, however, be a matter for the Deanery/HEE Local Office to determine the details of the additional training within the context of the panel's recommendations, since this will depend on local circumstance and resources. Where such additional training is required because of concerns over progress, the overall duration of the extension to training is at the discretion of the Postgraduate Dental Dean, but with an absolute maximum of one-year additional training during the total duration of the training programme. The panel should consider the outcome of the remedial programme as soon as practicable after its completion.	
Outcome 4 Released from training programme with competencies demonstrated/not demonstrated identified	The panel will recommend that the FD is released from the training programme if there is insufficient and sustained lack of progress. The panel should ensure that any relevant competency areas which have been demonstrated by the FD are documented. The FD may wish to seek further advice from the Postgraduate Dental Dean about future career options.	Final RCP

Outcome 5 Incomplete evidence presented - additional evidence required	The panel can make no statement about progress or otherwise since the FD has supplied insufficient evidence to the panel. If this occurs the FD will have a maximum of ten working days to submit the evidence. Once the required evidence has been received, the panel should consider it and issue an outcome.	Interim RCP Final RCP
Outcome 6 Demonstrated all required competences and prescribed elements	The panel will confirm that the FD has completed the training programme And recommend them for award of a Certificate of Satisfactory Completion of Dental Foundation Training (CSCDFT) by the Postgraduate Dental Dean.	Final RCP

#### 5.8 Interim RCP Panels

#### 5.81 Purpose of Interim RCP Panel

- Assess FD progress
- · Ensure that identified concerns at ESR are being addressed
- Make an Outcome recommendation
- Priority areas are:
  - o Clinical safety
  - o Communication ability
  - o Engagement with programme

#### 5.82 Suggested evidence to be reviewed

- 1. Early stage review report
- 2. ES Report
- 3. ES Supplementary Report (if required)
- 4. TPD Report
- 5. MSF and PSQ summaries
- 6. Clinical activity summary
- 7. ADEPTs and CbD numbers
- 8. Professionalism, management and leadership domain competency log
- 9. Complaints and adverse incidents (if any)
- 10. Sickness absence days (if any)

Other information only needs to be reviewed if there are concerns

#### 5.83 Interim RCP Panel Composition

Interim RCP Panels should consist of the following panel members:

- Associate Dean or equivalent
- TPD or equivalent from another Scheme in the Deanery/HEE Local Office area

The TPD or equivalent from the FD's Scheme may be in attendance to provide information or clarification if requested by the Panel. The Scheme TPD should not be involved in setting the Panel's Outcome recommendation or in presenting the evidence to the Panel.

#### 5.84 Interim RCP Panel Report

Wherever possible it is recommended that the Report should be completed and signed electronically at the time of the Panel meeting.

The Interim RCP Panel report which will be available to the FD, ES(s), Scheme TPD as well as the Associate Dean and Postgraduate Dental Dean. The report will set out the following information:

- What evidence has been reviewed by the Panel
- The Panel's recommended Outcome
- Any recommendations for further development or support

#### 5.85 Additional Information

- An Outcome 1 recommendation may include guidance to the FD on specific topics of a minor nature and any guidance should be included in the Panel Report
- If Outcomes 2 or 5 are recommended the Chair must also complete the Supplementary Information form
- If an unsatisfactory Outcome (Outcome 2 development required in specific areas) is recommended the FD should receive feedback from the Panel Chair or their nominated deputy as soon as practicable after the Panel has reached its decision. The Panel Report will detail the reasons for the recommendation, any mitigating circumstances, and the competencies requiring further development. There will be a later meeting between the FD and their Scheme TPD to discuss the creation of a relevant action plan. A FD should not be present at the Panel discussion
- Any variations to the process should be noted by the Panel Chair and reported to the HEE Local Office/Deanery, together with the reasons for the variation.

#### 5.9 Final RCP Panels

#### 5.91 Purpose of Final RCP

- Confirm whether or not the FD has completed, or will complete within the training year, the necessary requirements for Satisfactory Completion
- Ensure that any items identified at Interim RCP have been followed through
- Recommend any additional activity to be completed before the end of the programme
- Make an Outcome recommendation
- Primary evidence: ES and TPD Final reports and Interim RCP report
- Priority areas: Clinical safety, Communication ability, Engagement with programme
- Is there evidence that the FD is able to practice independently?

#### **5.92 Suggested Review** Order

NB: Not all FDs will need to be reviewed in depth

#### Always review:

- 1. Early Stage Review report if a specific action plan has been generated
- 2. ES Final Report
- 3. ES Supplementary Final Report
- 4. TPD Final Report
- 5. Interim RCP Panel Report
- 6. Additional MSFs and/or PSQ summaries (if requested by Interim Panel)
- 7. ADEPTs and CbD numbers
- 8. Clinical activity record summary
- 9. Professionalism and Management & Leadership Domains assessment report

- 10. Complaints and Adverse Incidents (if any)
- 11. Sickness absence days (if any)

#### Other information only needs to be reviewed if there are concerns

#### 5.93 Final RCP Panel Composition

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

- Associate Dean
- Associate Dean from another Deanery/HEE Local Office
- TPD from another Programme in the Deanery/HEE Local Office area or in another area
- Lay representative

#### 5.94 Panel Report for Final RCP

- Wherever possible it is recommended that the Report should be completed and signed electronically at the time of the Panel meeting.
- The Final RCP Panel will produce a report which will be available to the FD, ES(s), Scheme TPD as well as the Associate Dean and Postgraduate Dental Dean
- The report will set out the following information:
  - What evidence has been reviewed by the Panel (including the Interim RCP Panel Report)
  - o The recommended Outcome
  - Any recommendations for further development and support

#### 5.95 Available Outcomes

- Outcome 3 (Inadequate progress by the FD additional training time required)
   will be made if the Panel decides that an extension of training is necessary
   before the FD can be considered ready for independent practice. or;
- Outcome 4 (Released from training programme) means that a Certificate of Satisfactory Completion will not be issued. Instead, a Certificate of Completion will be issued with competencies demonstrated/not demonstrated identified. or;
- Outcome 5 (Insufficient Evidence) will be made if necessary to allow an FD the opportunity to provide any missing evidence within a specified time period (normally 10 working days).
- Outcome 6 (Gained all required competencies) will be the 'trigger' for issue of a Satisfactory Completion of Dental Foundation Training Certificate by the end of the training year. This recommendation will need to take account of the fact that the assessment is taking place before the end of the programme.

In the event of a Final RCP Panel recommendation of Outcomes 3 or 4, the external ADD and lay representative should be present. The inclusion of a lay member is essential to ensure consistent, transparent and robust decision-making on behalf of both the public and FDs. Lay members will be appointed from a list compiled by the Deanery/HEE Local Office or, where this is not possible, a lay member may be an executive or non-executive member of a Deanery/HEE Local Office board or other senior non-dental member of management. Other external members may be included from an appropriate organisation.

Where it is likely or even possible that a FD could have an outcome indicating insufficient progress which will require an extension to training, the TPD should notify the Associate Dean or equivalent.

If a lay or other external member has concerns about the conduct of the panel, these will be raised with the Postgraduate Dental Dean for further consideration. The Postgraduate Dental Dean may decide to establish a different panel to decide trainee outcomes.

All members of Panels (including the lay representatives) must be appropriately trained, including in equality and diversity. This training should be kept-up-to date and should be refreshed every three years.

#### 5.96 Additional Information

- The Scheme TPD is *not* expected to be present at a Final RCP
- Neither the FD nor the FDs Educational Supervisor(s) should be present at the Final RCP Panel discussions. Educational Supervisors are not expected to attend afterwards to receive feedback
- The FD should have been informed in advance and advised of the possibility of an outcome 3 or 4. Any Outcome recommendation, should be fed back in a timely manner after the panel by the APD and scheme TPD, may include requirements for, and guidance to, the FD and any requirements or guidance should be included in the Panel Report
- The Final RCP Panel can recommend an extension to the period of training, if appropriate. Dental Foundation Training can only be extended for a maximum period of one year
- Any FD with a recommendation for Outcomes 3 or 4 will have the right to appeal the decision.
- Any variations to the process should be noted by the Panel Chair and reported to the HEE Local Office/Deanery, together with the reasons for the variation.
- The declaration in both the ES and TPD reports as to whether there is any
  reason why the named FD is not ready for Independent Practice should be
  regarded as the primary source of information as to whether or not an Outcome
  6 is recommended. All other evidence should be viewed in the context of those
  statements.

#### 5.97 When to award an Outcome 5

It is important to differentiate as to whether or not the only issue is the completeness of the evidence available and that there are no specific concerns with regard to the FD's ability to satisfactorily complete within the initial twelve-month period. If incomplete evidence is the only issue, then an Outcome 5 should be awarded.

#### 5.98 Final Decision

RCP panels make a recommendation to the Postgraduate Dental Dean and the final decision as to whether or not to award a Certificate of Satisfactory Completion is the responsibility of the Postgraduate Dental Dean, following any appeals process, where applicable.

#### 5.10 RCP Panels Meetings

Interim Review Panels will normally meet during the sixth month of Dental Foundation Training to assess the progress of each FD to date. Interim Review Panels will be locally (Deanery/HEE Local Office) based and can award Outcomes 1, 2 or 5 only. Final Review Panels will normally meet during the eleventh month of Dental Foundation Training and can award Outcomes 3, 4 and 6.

#### 5.11 The role of the Postgraduate Dental Dean in the RCP Process

The Postgraduate Dental Dean has responsibility for the management of the review process, the setting up of panels and the provisions for further review and appeals.

The Postgraduate Dental Dean should maintain a training record for each FD in which completed review outcome information is stored. For security purposes a photograph of the FD should be attached to this folder. The folder, previous outcome forms and supporting documentation must be available to the panel whenever the FD is reviewed.

The Postgraduate Dental Dean's staff will provide administrative support for the panel. This information may be stored electronically by the Deanery/HEE Local Office.

# 5.12 Review of competence progression for FDs in Less Than Full Time training (LTFT)

The review process for FDs in LTFT will take place at the equivalent time in the programme as for full-time FDs. The panel should take particular care to consider that progress has been appropriate. It is helpful to express the LTFT undertaken by a FD as a percentage of full-time training so that the calculation of the date for the end of training can be calculated based on the specific Dental Foundation requirements, as well as anticipated timelines for IRCP and FRCP.

#### 5.13 Review Planning following Outcomes 2 or 3

Once the outcome for a FD is known, FDs must meet with their Educational Supervisor and/or TPD to plan the next phase of their training. The plan for the FD's next phase of training should be set within the context of the objectives that must be met during the next phase of training and must reflect the requirements of the Dental Foundation Training curriculum. The purpose of this meeting is to plan the further action which is required to address issues of progress in relation to Outcome 2 or Outcome 3 and to make clear to the FD the competences with which a FD who has an Outcome 4 will leave the programme.

Once the plan for the FD's next phase of training has been agreed, this should be documented within the FD's learning portfolio

It should never come as a surprise to FDs that action through the annual review process is under consideration since any shortcomings should be identified and discussed with them as soon as it is apparent that they may have an effect on progress.

However, a FD has the right to request a review and, in some circumstances, an appeal if one of these outcomes is recommended by the Final review panel.

#### 5.14 Reviews and Appeals of RCP Outcomes

A **review** is a process where an individual or a group who originally made a decision return to it to reconsider whether it was appropriate. They must take into account the representations of the person asking for the review and any other relevant information, including additional relevant evidence, whether it formed part of the original considerations or has been freshly submitted.

An *appeal* is a procedure whereby the decision of one individual or a group is considered by another (different) individual or body. Again, an appeal can take into account both information available at the time the original decision was made, newly submitted information and the representations of the appellant. Those involved in an appeal must not have played a part in the original decision or the review.

An updated and approved Reviews and Appeal Process document (2021) can be found here.

#### 5.15 Review of Outcomes 2

Outcome 2 usually involves closer than normal monitoring, supervision and feedback on progress to ensure that the specific areas of competence which have been identified for further development are obtained but does not require that the indicative date for completion of the training programme will change. The Interim Review Panel will have recorded the evidential basis on which the decision was made, and it will have been documented on the outcome form and communicated to the FD by the Associate Dean or the TPD.

The FD will have the opportunity to discuss these outcomes with the Associate Dean or the TPD and to see all the documents on which the decision about the

outcome was based. If the FD disagrees with the decision, they have a right to ask for it to be reconsidered. Requests for such reconsideration (review) must be made in writing together with the reasons for requesting a review and any relevant documents to the Postgraduate Dental Dean within ten working days of being notified of the panel's decision. The Postgraduate Dental Dean will then arrange a review of the decision which should take place within fifteen working days of receipt of such a request from a FD. FDs may provide additional evidence at this stage (e.g., evidence of mitigating circumstances or other evidence relevant to the original panel's decision) and this must be received as part of the request for the review so that the panel is able to consider it in detail. The review may be undertaken virtually, and the Chair will endeavour to include as many panel members as possible. After the review, the panel will ensure the trainee receives its decision with reasons in writing. If the panel considers it appropriate, it may invite the trainee to meet with a senior representative to discuss the decision of the review.

The panel which is reviewing the Outcome 2 recommendation should have administrative support from the Deanery/HEE Local Office so that its proceedings can be documented. An account of the proceedings should be given to the FD and also retained by the Deanery/HEE Local Office. A decision of the panel following such a review is final and an appeal process is not applicable.

#### 5.16 Appealing the RCP outcome: Outcomes 3 and 4

FDs will have the right of appeal if they receive an outcome which results in a recommendation for:

- an extension of the indicative time to complete the training programme (Outcome 3) or
- the FD to leave the training programme with identified areas of competence that have been demonstrated, but without completion of the programme (Outcome 4)

Reference should be made to the 2021 COPDEND Reviews and Appeals document found in G11.

#### 5.17 Termination of a training contract

A FD dismissed from their contract of employment for misconduct will be suspended from training pending investigation / enquiry by the Postgraduate Dental Dean.

#### 5.18 Quality Management and Quality Assurance arrangements

Local externality within the Interim RCP process is provided by the inclusion of a TPD or equivalent from another Scheme on the Panel.

Externality within the Final RCP process is provided by the inclusion of a APD or equivalent from another Deanery/HEE Local Office on the Panel. As an interim quality assurance measure, two Postgraduate Dental Deans or Associate Deans from other and different Deaneries/HEE Local Offices should review at least 10%

of all local outcomes annually, together with any recommendations about concerns over progress.

## **5.19 Recommended Minimum Requirements to Demonstrate Satisfactory Completion**

Please note that these are recommended minimum requirements designed to ensure that the purpose of Foundation Training 'to provide a wide range of dental care and treatment and to attend such study days as that contract provides, with the aims and objectives of enhancing clinical and administrative competence and promoting high standards through relevant postgraduate training' is met. Individual Deaneries/ HEE Local Offices may make some or all requirements mandatory at their discretion.

Where a recommended minimum requirement has not been met, RCP Panels will take account of local HEE Local Office/Deanery guidance, extenuating circumstances and/or the overall performance of a FD in making an Outcome recommendation. An Outcome recommendation should not normally be based on whether or not an individual requirement has or has not been met unless this has a potential effect on patient safety.

It is accepted that delivery of the Clinical Activity recommendations may have to be influenced by local factors, including the GDS contract pertinent to a particular area. The overall clinical recommendations are designed to guide RCP Panel members, FDs, Educational Supervisors, TPDs and other HEE Local Office/Deanery staff in recognising what a broad range of clinical experience should represent with regard to more complex treatments.

#### 6. Being a FD and an employee

#### 6.1 Accountability issues for employers, Postgraduate Dental Deans and FDs

FDs are pursuing training programmes under the auspices of the Postgraduate Dental Dean (PGDD) and are employees of a lead employer provider organisation or an individual provider working in training practices. In fulfilling this role, they incur certain rights and responsibilities.

While the Postgraduate Dental Dean is responsible for managing the delivery of training of FDs, the relationship with employers must be considered. FDs therefore clearly have an employment relationship with their employer and are subject to employer's policies and procedures. It is the view of COPDEND that Postgraduate Dental Deans should be involved from the outset where performance issues arise relating to FDs.

It is important therefore that employers are fully aware of the performance and progress of all FDs in their employ. In addition, there must be an agreed approach to dealing with poorly performing FDs. In this context, the relationship between the employer and the postgraduate Dental Dean must be clearly defined.

#### 6.2 Roles and responsibilities of HEE Local Offices

The Postgraduate Dental Dean is responsible for the FD's training while in post. The Postgraduate Dental Dean does not employ FDs, but commissions training from the Educational Supervisor normally through an educational contract with the Educational Supervisor. Through this contract the Postgraduate Dental Dean has a legitimate interest in matters arising which relate to the education and training of FDs within the employing environment.

The Postgraduate Dental Dean is also responsible for setting requirements and standards for Educational Supervisors and practices to support the delivery of good quality education and training.

Deaneries/ HEE Local Offices are responsible for:

- organising training programmes/posts for FDs
- the Reviews of Competence Progression (RCP) process
- the management of the training requirements of FDs in difficulty
- the issuing of Dental Foundation Training Certificates on the authority of the PGDD.

Equally, employers have a legitimate interest in being clear about the performance of FDs as their employees. FDs are subject to employment law and have an employment relationship with their employer and are subject to the employer's policies and procedures which govern all aspects of their employment. Excellent communication between Postgraduate Dental Deans, Educational Supervisors and employers about the performance of FDs is therefore essential.

So, whilst Deaneries/HEE Local Offices are responsible for commissioning and managing good quality training and education, Educational Supervisors and employers must ensure that mechanisms are in place to support the training of FDs and to enable problems which may be identified to be addressed at an early stage in an open and supportive way.

At a minimum this should include:

- ensuring that any dentists acting as Clinical Supervisors are appropriately and contemporaneously trained for their role
- ensuring that clinical responsibility is tailored to a realistic assessment of the FDs' competence so that patient safety remains paramount and the FD is not put at risk by undertaking clinical work beyond his/her capability
- thorough induction to the training practice as set out in the DFT e-Portfolio. This should include, for example, introduction to key team members and their roles, a working understanding of the equipment which might be required (especially in an emergency situation), access to and requirements for the use of protocols and guidance documents, supervision arrangements, etc.
- clearly defined supervisory arrangements, including identified support when the Educational Supervisor is not present
- clearly defined and timely training arrangements for FDs, with objectives agreed early in their training placement with their Educational Supervisor
- regular opportunities to continue to plan, review and update these objectives
- regular assessment of competence based on the COPDEND approved assessment strategy for Dental Foundation Training, undertaken by trained assessors and handled in a transparent manner with substantiated and documented evidence of poor

- performance and conduct where and when this is necessary
- where necessary, the support to deliver defined and agreed additional remedial training
- access to pastoral support.

#### 6.3 Resignation

On those occasions where a FD chooses to resign of their own volition, the FD must inform his/her employer in writing, complying with the length of notice set out in the FD's employment contract. The resignation letter must be copied to the Postgraduate Dental Dean and the relevant Deanery/HEE Local Office administrator

#### 6.4 Poor performance and competence

In the first instance where there are issues around poor performance and professional competence, Educational Supervisors and employers should advise the postgraduate Dental Dean and TPD of any FD who is experiencing difficulties and the action being taken to support and remedy any deficiencies. The Postgraduate Dental Dean, TPD, educational Supervisor and employer must work closely together to identify the most effective means of helping/supporting the FD, whilst ensuring that patient safety is maintained at all times.

#### 6.5 Managing concerns over performance during training

In all professions it is recognised that sometimes individuals may encounter difficulties during their career. These may present in various ways, e.g., issue with conduct, competence, poor performance, ill health, or failure to engage with training.

If there are concerns about a FD's performance, based on the available evidence, the FD must be made aware of these. FDs are entitled to a transparent process in which they are assessed against agreed standards, given feedback on the outcome of assessments, and given the opportunity to address any shortcomings. FDs are responsible for taking the agreed action. The discussion and actions arising from the concerns should be documented. The Educational Supervisor and FD should each retain a copy of the documented discussion. If there are any concerns or issues regarding the FD's training placement it is the FD responsibility to raise these with their Educational Supervisor or TPD.

Where the report indicates that there may be a risk to patients arising from the FD's performance, this risk needs to be shared with the Postgraduate Dental Dean and, again, the FD needs to be made aware that this is the case. It is anticipated that serious risks will have been identified and managed at an early stage in the training programme and that the purpose of the report will be to record the situation through the RCP process.

The Postgraduate Dental Dean should be made aware, by employer organisation and Educational Supervisor, of any disciplinary action against a FD, at the earliest possible stage.

If the performance of a FD is a cause for concern the Postgraduate Dental Dean will need to consider whether it is appropriate to arrange an alternative training

placement and the arrangements of that placement. If it is not appropriate to arrange further placements because the findings preclude further training, removal from the training programme is the natural consequence.

Misconduct should be taken forward in accordance with the employer's agreed disciplinary procedures in line with local policies. Processes must be in accordance with those set out in employment law. The Postgraduate Dental Dean must be involved from the outset.

The Postgraduate Dental Dean will seek assurance from the Educational Supervisor and employer through the educational contract that FDs will be managed in accordance with best employment practice.

The Postgraduate Dental Dean (or other Deanery/HEE Local Office staff) must not be involved as a member of a disciplinary or appeal panel in any disciplinary procedures taken by an employer against a FD but may provide evidence to the panel and advise on training and education matters if required.

Termination of a FD's employment contract after due process will normally mean that Dental Foundation Training is discontinued. In such circumstances the Deanery/HEE Local Office will review the employer's reports detailing the reasons for the termination of the contract of employment and consequent dismissal, and hence determine whether the circumstances warrant a termination of Dental Foundation Training

The Postgraduate Dental Dean's responsibility to make the final decision as to whether training should be discontinued.

#### 6.6 Critical incidents

On occasion a FD might be involved in a critical incident. Such situations may lead to a formal investigation and the Postgraduate Dental Dean should be kept informed in writing at each stage. Pastoral support should be offered to the FD throughout the process.

#### 6.7 Poor performance and the GDC

FDs remain subject to regulatory action where necessary. On occasion, the performance of a FD may be poor enough to warrant referral to the GDC. Significant fitness to practise concerns might include serious misconduct, health concerns or sustained poor performance, any of which may threaten patient safety. Guidance on managing such situations is available from the GDC (Current Registrant/Reporting/unfitness to practise at <a href="https://www.gdc-uk.org">www.gdc-uk.org</a>).

#### 6.8 III health

When identified, matters relating to ill-health should be dealt with through occupational health processes and outside disciplinary procedures where possible. Professional Support Units or other arrangements relevant to local offices, can also support health and wellbeing of trainees.

If the FD is employed by a Lead Employer provider, they will have their own HR and Occupational Health service, which can also support and advise the FD. The Lead Employer provider will need to liaise closely with the Postgraduate

Dental Dean if fitness to practice is deemed impaired by ill health. When the FD's fitness to practise is impaired by a health condition, the GDC and the Postgraduate Dental Dean should be informed. The GDC should also be involved if the FD fails to comply with any measures that have been put in place locally to address health issues.

# **Guidance G3 Final Review of Competence Progression**

# **Guidance of Completion of Structured Reports**

# **Educational Supervisor**

Please complete all fields in the Educational Supervisor's Report with numbers and comments if appropriate. It can be difficult and time consuming for the Panel to go backwards and forwards to the dashboard on the e-Portfolio to check on numbers.

Comments should always be as objective as possible so as to avoid confusion and a risk of challenge.

Objective descriptors - e.g. 'communicates well with peers and ES' would be less open to challenge than subjective descriptors such as 'nice person'.

#### **ADEPTs**

- Please enter the number of ADEPTs completed and the major competencies reviewed by the date you sign the Report
- Comments are only required to identify any issues with the quality or quantity of the ADEPTs completed so far.

#### **CbDs**

- Please enter the number of CbDs completed and the major competencies reviewed by the date you sign the Report
- Comments are only required to identify any issues with the quality or quantity of the CbDs completed so far.

### **MSFs** (360-degree appraisal)

- This section only needs to be completed if an additional round of MSFs has been required by an Interim RCP Panel
- Please provide factual comments on any issues which have been identified as part
  of the MSF process and how these have been/are being addressed.

#### **PSQs**

- This section only needs to be completed if a second round of PSQs has been required by an Interim RCP Panel
- Please provide factual comments on any issues which have been identified as part
  of the PSQ process and how these have been/are being addressed.

### Level and range of clinical activity

 Please identify any areas where your FD would benefit from additional clinical experience and how these have been/are being addressed. This should include treatment types and any patient groups (e.g., bridges, children, etc.).

# e-Portfolio (PDP)

• Please provide factual comments where there have been issues with the timeliness and/or quality of completion of the e-Portfolio.

### **Audits/Assignments**

 Please provide factual comments where there have been issues with the timeliness and/or quality of completion of any audits etc.

#### **Presentations**

 Please provide factual comments where there have been issues with the completeness and/or quality of completion of any presentations provided by your FD.

# Reported adverse incidents

 Sufficient information should be given to allow a Panel to understand the nature and outcome of any adverse incidents involving your FD.

# **Complaints**

 Sufficient information should be given to allow a Panel to understand the nature and outcome of any complaints involving your FD.

# **Educational Supervisor's Summary and Comments**

- Please use this section to give an overall view of your FD's progress during the training period so far
- Objective comments e.g., 'communicates well with peers and ES' are much better than subjective descriptors such as 'nice person'.
- Where adverse comments are made, these should always be supported by evidence
- The purpose of this section is to provide information to a Panel to help them to identify which areas it may need to review before it makes an Outcome recommendation.

#### Confirmation

• The purpose of the confirmatory statement is to clarify the period of training which you are commenting on. This will normally be the period from the date of the FD joining your practice to the date of the latest entry in the e-Portfolio.

#### Declaration

In your opinion, is there any reason why the named FD is not ready for Independent Practice?

- For the majority of FDs, the response to the question will be 'No' as they will have engaged with the programme and demonstrated the necessary competencies to date
- The FD's training will, of course, continue for at least two months after you have completed your report, so some elements are unlikely to have been fully completed. You should take this into account and, if you are confident that your FD will be ready for independent practice at the completion of training, you should still respond 'No' to the question
- If you are not confident that your FD will be ready for independent practice at the end of training, you should answer 'Yes' to the question
- If you answer 'Yes, you should state your reasons and the supporting evidence in the box below
- A Panel will take into consideration your Report and Declaration as part of all the information and evidence available to it. The responsibility for deciding which Outcome to recommend will be made by a Panel taking account of the overall context of all the information provided.

# **FD's Comments**

- To ensure that the process is transparent and in line with the principle of 'no surprises' for your FD, you should share the comments you have made with your FD and give them the opportunity to make their own comments in the section provided
- This is in line with good practice as the information you supply will normally be available to your FD under the provisions of the Freedom of Information Act, if it is requested.

# **Supplementary Report**

- Where you have identified a concern, you must also complete the Supplementary Report so that the Panel has a more in-depth understanding of the background to those concerns
- You must also complete the Supplementary Information Report if it is automatically required by your HEE Local Office/Deanery

# **Guidance G4 Final Review of Competence Progression**

# **Guidance of Completion of Structured Reports**

#### **TPD**

Please complete all fields in the TPD's Report with numbers and comments if appropriate. It can be difficult and time consuming for the Panel to go backwards and forwards to the dashboard on the e-Portfolio to check on numbers.

Comments should always be as objective as possible so as to avoid confusion and a risk of challenge.

Objective descriptors - e.g., 'communicates well with peers and TPD' would be less open to challenge than subjective descriptors such as 'nice person'.

#### **ADEPTs**

- Please enter the number of ADEPTs completed and the major competencies reviewed by the date you sign the Report
- Comments are only required to identify any issues with the quality or quantity of the ADEPTs completed so far
- This information will be used to triangulate the information provided in the ES's Report.

#### **CbDs**

- Please enter the number of CbDs completed and the major competencies reviewed by the date you sign the Report
- Comments are only required to identify any issues with the quality or quantity of the CbDs completed so far
- This information will be used to triangulate the information provided in the ES's Report.

# **Project Work**

- Comments are only required if you have indicated that any required project work e.g., audits, assignments, presentations, etc. have not been submitted at this stage
- Comments should be factual and include the reasons for the issue e.g,. 'started but not completed' or 'completion of audit not required at time of submission of report'.

#### PML evidence and certificates

- Comments are only required if you have indicated that any required evidence identified in the Professionalism and/or Management & Leadership has not been submitted at this stage
- Comments should be factual and include the reasons for the issue e.g., 'started but not completed' or 'completion of documentation not required at time of submission of report'.

### **MSFs** (360-degree appraisal)

- This section only needs to be completed if an additional round of MSFs has been required by an Interim RCP Panel
- Please provide factual comments on any issues which have been identified as part
  of the MSF process and how these have been/are being addressed by the ES
  and/or yourself

 This information will be used to triangulate the information provided in the ES's Report.

#### **PSQs**

- This section only needs to be completed if a second round of PSQs has been required by an Interim RCP Panel
- Please provide factual comments on any issues which have been identified as part of the PSQ process and how these have been/are being addressed
- This information will be used to triangulate the information provided in the ES's Report.

# Level and range of clinical activity

- Please identify any areas where your FD would benefit from additional clinical experience and how these have been/are being addressed. This should include treatment types and any patient groups (e.g., bridges, children, etc.).
- You should refer to the evidence supplied by the FD on the e-Portfolio and the NHS BSA data supplied to your HEE Local Office/Deanery to support any comments

# **Engagement with Programme to this stage**

# **Study Days**

- Comments are only required if you have indicated that there have been issues with attendance, punctuality, engagement or completion of evaluations
- Comments should be factual and include the reasons for the issue e.g., 'failed to attend two Study Days and no reasons given'; 'thirty minutes late on three occasions'; 'frequently left sessions to answer mobile phone'.

#### **Tutorials**

 Comments are only required if you have indicated that there have been issues with engagement in tutorials, reflecting on tutorials, etc.

#### Other information

### e-Portfolio review summary

- Please provide an overview of how well the FD has made use of the e-Portfolio with particular reference to:
- Use of reflections
- Generation and completion of identified actions
- Timeliness of completion
- Completeness of information provided.
- Comments should be factual and include the reasons for any issue, where possible.

# Review of progress against actions required by Interim RCP Panel (where appropriate)

 Where an Interim RCP set out specific areas for the FD to address, an action plan should have been created. Use this section to comment on the progress made by the FD towards completing the required actions in a timely manner and identify any outstanding actions and the proposals to manage these within the specified training period.

# **TPD's Summary and Comments**

- Include an overall factual summary of the FD's achievements and difficulties during the training period so far.
- Objective comments e.g., 'communicates well with peers and ES' are much better than subjective descriptors such as 'nice person'.
- Where adverse comments are made, these should always be supported by evidence
- The purpose of this section is to provide information to a Panel to help them to identify which areas it may need to review before it makes an Outcome recommendation.

#### **Declaration**

In your opinion, is there any reason why the named FD is not ready for Independent Practice?

For the majority of FDs, the response to the question will be 'No' as they will have engaged with the programme and demonstrated the necessary competencies to date

- The FD's training will, of course, continue for at least two months after you have completed your report, so some elements are unlikely to have been fully completed. You should take this into account and, if you are confident that the FD will be ready for independent practice at the completion of training, you should still respond 'No' to the question
- If you are not confident that the FD will be ready for independent practice at the end of training, you should answer 'Yes' to the question
- If you answer 'Yes, you should state your reasons and the supporting evidence in the box below
- A Panel will take into consideration your Report and Declaration as part of all the information and evidence available to it. The responsibility for deciding which Outcome to recommend will be made by a Panel taking account of the overall context of all the information provided.

# **Guidance G5 Dental Foundation Training Satisfactory Completion Timeline**

Activities		Month	Reviews	Notes
DOPS ADEPTs & CbDs	Induction	1	Early Stage Review (ESR)	
DOPS ADEPTs & CbDs	MSF	2		
ADEPTS & CbDs	Record Card Audit	3	Completed by FD and reviewed by ES	
	PSQs and MSFs	4		
		5		
	Targeted ADEPTS and/or CbDs (where required)	6	Interim Review of Competence	Progression (Interim RCP)
		7	Additional PSQs and/or MSFs and/or Record Card Audit (if required)	
		8		
		9		
		10	Final Review of Competence P	rogression (Final RCP)
		11		
		12	Appeals	

# **Guidance G6 Guidance on reasons for Unsatisfactory Outcomes**

Or when a Review cannot be carried out. Please note these lists are not exclusive

Reason(s) for unsatisfactory outcome	Explanatory notes
Record Keeping and Evidence	FD failed to satisfactorily maintain their e-Portfolio including completing the recommended number of Work Placed Based Assessments; Audits; structured Education Supervisor's report; in accordance with the COPDEND and/or curriculum requirements.
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 FD was unable to satisfy the curriculum requirements for the year of training. (Evidenced by clinical activity log and BSA reports. Practice data can also be requested).  And/or trainee did not attend sufficient clinical sessions to gain experience. Evidenced by absence log.
Insufficient Engagement with Programme, Educational Supervisor and/or TPD	FD failed to engage with the assigned Educational Supervisor or the training opportunities to meet satisfactory completion requirements  Evidenced by attendance and engagement with tutorials, including reflective commentaries, ES Report etc.  Evidenced by Study Day attendance and reflections, TPD Report, etc.
FD requires HEE Local Office/Deanery Support	FD fails to make satisfactory progress and has issues related to clinical or other skills  E.g. –sustained poor quality of clinical work, behaviour / conduct / attitude / confidence / time keeping / communications skills etc. and requires the support of the Deanery/HEE Local Office Team.

Reason(s) review not carried out	Explanatory notes	
Sick Leave	FD on long term sickness. (A review must be carried out for absence of 10 days or more) or other health issues have impacted on ability to complete the year of training being reviewed.	
Maternity/Paternity Leave	FD cannot be reviewed whilst on maternity/paternity leave	
Missed Review	FD did not attend the Review when required to do so	
Contract Termination	FD left employment without demonstrating competencies to a satisfactory level.	
Regulatory Suspension	FD currently suspended from practice or training either as a result of GDC Suspension or other Regulatory activity	
Employer Suspension	FD suspended by employer for gross misconduct or other reasons	



# **Guidance G7 COPDEND Domains and Standards for Training**

# **Domain 1: Patient safety**

The duties, working hours and supervision of trainees must be consistent with the
delivery of high quality safe patient care. There must be clear procedures to address
immediately any concerns about patient safety arising from the training of dentists.

# **Domain 2: Quality Assurance, Review and Evaluation**

 Postgraduate training must be quality controlled locally by Deaneries/HEE Local Offices, working with others as appropriate

# **Domain 3: Equality, Diversity and Opportunity**

- Postgraduate training must be fair and based on principles of equality. This domain deals with equality and diversity matters pervading the whole of the training widening access and participation, fair recruitment, the provision of information, programme design and job adjustment.
- Responsibility: Postgraduate Deans and institutions providing training, trainers and trainees, other colleagues working with trainees and local faculties.
- Evidence: Surveys, outcome data, deanery quality control data and visits.

# **Mandatory requirements of Domain 3:**

- At all stages training programmes must comply with employment law, the Disability
  Discrimination Act, Race Relations (Amendment) Act, Sex Discrimination Act, Equal
  Pay Acts, the Human Rights Act and other equal opportunity legislation that may be
  enacted in the future and be working towards best practice. This will include
  compliance with any public duties to promote equality.
- Information about training programmes, their content and purpose must be publicly accessible either on or via links on deanery websites.
- Deaneries/HEE Local Offices must take all reasonable steps to ensure that
  programmes can be adjusted for trainees with well-founded individual reasons for
  being unable to work full- time to work flexibly. Deaneries/HEE Local Offices must
  take appropriate action to encourage training providers to accept their fair share of
  dentists training flexibly.
- Appropriate reasonable adjustment must be made for trainees with disabilities, special educational or other needs.

# Domain 4: Recruitment, selection and appointment

 Processes for recruitment, selection and appointment must be open, fair, and effective and those appointed must be inducted appropriately into training.

### Domain 5: Delivery of curriculum including assessment

• The requirements set out in the curriculum must be delivered.

# Domain 6: Support and development of trainees, trainers and local faculty

 Trainees must be supported to acquire the necessary skills and experience through induction, effective educational supervision, an appropriate workload and time to learn.



# **Domain 7: Management of Education and Training**

• Education and training must be planned and maintained through transparent processes which show who is responsible at each stage.

# Domain 8: Educational resources and capacity

 The educational facilities, infrastructure and leadership must be adequate to deliver the curriculum.

# **Domain 9: Outcomes**

The impact of the standards must be tracked against trainee outcomes and clear linkages should be reflected in developing standards



# **Guidance G8 COPDEND Standards for Dental Educators**

### **Core Values**

The dental educator is committed to:

- Enhancing the care of patients through dental education
- Modelling good professional behaviour and attitudes at all times
- Continuously seeking to improve his or her educational practice
- Learner-centred education, safeguarding learner wellbeing
- Enabling a culture of personal and professional development
- Actively contributing to and supporting the education of colleagues
- Equality and diversity
- GDC Standards promoting high quality, ethical, safe patient-centred care at all times, and seeking to maintain oral health, prevent oral disease and ensure patient dignity



# **Guidance G9 COPDEND standards for Deaneries/HEE Local Offices**

(see COPDEND website for further information)

# The Postgraduate HEE Local Office/Deanery:

- Must adhere to, and comply with, COPDEND's Standards and Requirements for Dental Educators (Standard 1)
- Will articulate clearly the rights and responsibilities of the trainees (Standard 2)
- Should have structures and processes that enable the COPDEND educational standards to be demonstrated for all foundation and specialty training and for the trainees, within the sphere of their responsibility (Standard 3)
- Must have a system for use of external advisers (Standard 4)
- Will work effectively with relevant stakeholders and employer organisations (Standard 5)



# **Guidance 10 – Assessments**

Assessment	Minimum Requirement	Notes	
Induction	Practice induction to be completed within first two weeks	<ul> <li>Induction checklist in e-portfolio to be used</li> <li>Record of pre-Foundation clinical activity to be completed</li> <li>Completion of simulation based exercises</li> </ul>	
Early Stage Review and Reports	FD and ES reports to be completed by end of Month 2 and TPD meetings held	Available to the Panel for information	
DOPSs	Normally six completed within ESR period plus molar endodontic and crown case by IRCP	<ul> <li>1.New patient examination (communication skills)</li> <li>2. Simple restoration (clinical skills)</li> <li>Plus a range of clinical treatments as advised by e-portfolio</li> <li>Concerns to be discussed with TPD</li> </ul>	
Patient Record Review	Completed in Month 3	10 records reviewed by FD  Minimum 2 records reviewed by FC	
ADEPTs	Eighteen completed by end of Month 9	<ul> <li>Minimum 3 records reviewed by ES</li> <li>All 11 major clinical competencies should be assessed at least once by the ES or another dentist</li> <li>ADEPTs with a score of less than 3 in an individual element or elements will highlight a learning need or needs. These should be recorded and addressed and there must be evidence to show that the needs have been met – this may include a further relevant ADEPT, if necessary</li> <li>At least 1 ADEPT should be carried out by an assessor (TPD or ES) other than the FD's ES(s)</li> <li>Minimum of 8 completed by Interim RCP Stage</li> <li>Minimum of 18 completed by Final RCP</li> </ul>	
Case-based Discussions (CbDs)	Ten completed by end of Month 9	<ul> <li>Minimum of 3 completed by Interim RCP Stage</li> <li>One CbD to be formally presented and assessed at a Study Day</li> </ul>	
Reflective Clinical Log	All Logs completed, action plans generated and identified learning needs addressed	<ul> <li>Minimum of eight to be completed by end of Month 2</li> <li>Minimum of one to be completed each month between Months 3 and 12</li> <li>Action plans should be created (and followed through) as part of each entry</li> <li>Additional entries (when appropriate) are to be encouraged to support reflective practise</li> </ul>	
Units of Dental Activity (UDAs)	In the region of 1875 recorded UDAs in a range of Bands during the first 12 months as an FD ( not NI or Wales)	<ul> <li>UDAs should be completed across the range of Bands as appropriate to demonstrate adequate preparation for NHS dental practice</li> <li>Level of UDA delivery should also take account of the depth and breadth of clinical experience demonstrated in the Clinical Activity Record</li> <li>Activity in NHS Contract Prototypes in England should demonstrate an equivalent level</li> </ul>	



Assessment	Minimum Requirement	Notes
Clinical Activity Record	Record completed and activity demonstrates experience of a broad range of treatments and patient types relevant to NHS General Dental Practice	<ul> <li>Record to be completed monthly. Each record will be locked 5 working days after end of each month</li> <li>Complex treatments – activity should include:</li> <li>Twelve indirect restorations (e.g. crowns, inlays, onlays and veneers). To include at least one of each type, if possible</li> <li>Two bridges. To include one conventional bridge, if possible</li> <li>Twelve acrylic prostheses</li> <li>Two Co-Cr prostheses</li> <li>Twelve endodontic cases – to include both single-rooted (incisors and/or canines) and multi-rooted endodontic cases (molars and/or premolars)</li> <li>Four extractions of special difficulty (which may involve bone removal and/or flaps): one undertaken as ADEPT with ES by the end of Month 4</li> </ul>
Clinical Audit	Completed by end of Month 9	<ul> <li>Two audit cycles to be completed</li> <li>Topic and timings to be set by individual Deaneries/ HEE Local Offices</li> </ul>
MSF(s)	Completed as part of ESR, plus Month 4 (and Months 8/9 if required)	<ul> <li>Minimum of 8 submitted forms required</li> <li>Must include ES(s), FD's Dental Nurse, Practice</li> <li>Receptionist plus additional contributors from others that have contact with FD e.g. dental technicians, TPD, practice manager, other dentists, buddy ES</li> <li>Repeated in Months 8 or 9 if required by Interim Panel</li> </ul>
PSQ(s)	Completed in Month 4 (and Months 8/9 if required)	<ul> <li>Minimum of 20 submitted forms required</li> <li>Repeated in Months 8 or 9 if required by Interim Panel</li> </ul>
Professionalism and Management & Leadership Domains	Evidence of training submitted by FD by end of Month 9	See <u>matrix</u> for assessment evidence options
Study Day attendance	All HEE Local Office/Deanery Study Days (or approved alternatives) attended, recorded and evaluated reflectively	<ul> <li>Normally 30 Study Days in 12 months period (may be local HEE Local Office/Deanery variations)</li> <li>Deanery/HEE Local Office Study Days held after Final RCP recommendation must be attended and evaluated for Certificate of Satisfactory Completion of DFT to be issued</li> </ul>
Educational Supervisor Tutorial Programme	All Tutorials required by HEE Local Office/Deanery completed, recorded and evaluated reflectively	<ul> <li>Normally 40 Tutorials in 12 months period (may be local HEE Local Office/Deanery variations)</li> <li>Tutorials scheduled after Final RCP recommendation must be attended and evaluated for Certificate of Satisfactory Completion of DFT to be issued</li> </ul>



Assessment	Minimum Requirement	Notes
Significant Events	Reporting required in e- portfolio and Ess' Structured Reports	Panels will take account of the evidence and its relevance to Satisfactory Completion in reaching their recommendations
Complaints	Reporting required in e- portfolio and Ess' Structured Reports	Panels will take account of the evidence and its relevance to Satisfactory Completion in reaching their recommendations
Sickness absence	Reporting required in e- portfolio and Ess' Structured Reports	Panels will take account of the evidence and its relevance to Satisfactory Completion in reaching their recommendations
Annual leave	Reporting required in e- portfolio and Ess' Structured Reports	Annual leave should be taken in accordance with the national FD Contract and any HEE Local Office/Deanery requirements
ES Structured Report	Completed at end of Months 5 and 9	<ul> <li>Separate reports required for Interim and Final RCP Panels</li> <li>Supplementary report also to be completed if concerns or if required by HEE Local Office/Deanery</li> </ul>
TPD Structured Report	Completed at end of Months 5 and 9	Separate reports required for Interim and Final RCP Panels
RCP Panel Report	Completed in Month 6 (Interim RCP) and Month 10 (Final RCP)	<ul> <li>Interim RCP Panel Report available for review by Final RCP Panel(s)</li> <li>Final RCP Outcome 6 required for a Certificate of Satisfactory Completion of DFT to be issued</li> <li>Modified Certificate identifying demonstrated competencies may be available in the event of an Outcome 4</li> </ul>
BSA Data	Uploaded monthly following receipt of first BSA report	FD to upload their BSA activity data into e-portfolio when received each month (Available from November 2015)
National FD Survey	Completed	<ul> <li>Survey may be compulsory or voluntary as decided by HEE Local Office/Deanery</li> <li>Final page uploaded into e-portfolio to confirm completion</li> </ul>
HEE Local Office/Deanery FD Survey	Completed (where applicable)	<ul> <li>Survey may be compulsory or voluntary as decided by HEE Local Office/Deanery</li> <li>Final page uploaded into e-portfolio to confirm completion</li> </ul>

The above requirements are recommendations only and Panels should take account of all elements submitted in reaching a decision on which Outcome to award. At the Final RCP stage consideration should be given to the purpose of Dental Foundation Training as set out in the NHS Performers List Regulations for England and Wales (or the equivalent in Northern Ireland) before deciding whether or not a FD can be said to be suitable to practice independently within NHS Primary Dental Care Services



# **Glossary**

**ABFTD - Advisory Board for Foundation Training in Dentistry**: A subcommittee of the Faculty of Dental Surgery which advises COPDEND on Dental Foundation Training matters.

**Associate Dean/Deputy Dean:** A dentist who is responsible to the Postgraduate Dental Dean for the overall organisation of Dental Foundation Training Schemes in a Deanery/HEE Local Office.

**RCP - Review of Competence Progression:** The process whereby FDs have the evidence of their progress reviewed by an appropriately convened panel so that a judgement about their progress can be made and transmitted to the TPD, the FD and the FD's Educational Supervisor and employer (where different).

**Clinical Supervisor:** A dentist who is available in the training practice to provide advice and support when the Educational Supervisor is not available. The Educational Supervisor is responsible for ensuring that any clinical supervision is provided by a suitably qualified and experienced practitioner.

**Competence:** The possession of requisite or adequate ability; having acquired the knowledge and skills necessary to perform those tasks which reflect the scope of professional practices. It may be different from performance, which denotes what someone is actually doing in a real-life situation.

**Competences:** The skills that FDs need based on the curriculum.

**Contract:** The formal nationally approved employment contract between a FD and their Educational Supervisor (and Employer where different).

**COPDEND:** UK Committee of Postgraduate Dental Deans and Directors.

**CCDFT - Certificate of Completion of Dental Foundation Training:** Awarded by the Postgraduate Dental Dean or Director of Postgraduate Dental Education after completion of a Dental Foundation Training programme without all the competencies or prescribed elements demonstrated.

**CSCDFT - Certificate of Satisfactory Completion of Dental Foundation Training:**Awarded by the Postgraduate Dental Dean or Director of Postgraduate Dental Education after satisfactory completion of a Dental Foundation Training programme.

**Curriculum:** A statement of the aims and intended learning outcomes of an educational

programme. It states the rationale, content, organisation, processes and methods of teaching, learning, assessment, supervision, and feedback. If appropriate, it will also stipulate the entry criteria and duration of the programme.

**Deanery:** In Wales and Northern Ireland, the organisation responsible for the local or regional management and delivery of Dental Foundation Training. (See 'HEE Local Office' in England).



**Dental Foundation Training:** The first year of postgraduate training in primary care for a dentist following graduation from dental school in the UK. **DFT employment contract** FDs are employed through a standard national contract between the ES, the FD and the practice owner (where applicable). The contract also has a side letter detailing specific items of importance for the ES, FD and employer.

**Domain:** The scope of knowledge, skills, competences and professional characteristics which can be combined for practical reasons into one cluster.

**Educational agreement:** A formal educational arrangement between the trainee and the Deanery/HEE Local Office or the trainer and the Deanery/HEE Local Office.

**Educational appraisal:** A positive process to provide feedback on the FD's performance, chart their continuing progress and identify their developmental needs. **Educational agreement** The Postgraduate Dental Dean does not employ FDs, but commissions training from the employer normally through an educational agreement with the practice providing postgraduate education. Through this agreement the Postgraduate Dental Dean has a legitimate interest in matters arising which relate to the education and training of postgraduate trainees within the employing environment.

**Educational Supervisor:** 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. The Educational Supervisor is responsible for the FD's educational agreement. In Dental Foundation Training the Educational Supervisor is also the Clinical Supervisor except when the Educational Supervisor is not available.

**Equality or Equal Opportunities:** The term used to describe 'policies and practices that tackle inequalities, aiming to ensure that all staff are treated fairly, and that service users do not experience discrimination.

**FD:** A dentist employed under the terms of a Dental Foundation Training or General Professional Training contract.

**GDC - General Dental Council:** The regulatory body with regard to registration of the dental team.

**JCPTD - Joint Committee for Postgraduate Training in Dentistry:** The body responsible for advising on postgraduate training in dentistry.

**JDFCT - Joint Dental Foundation Core Training:** A longitudinal programme combining the elements of Dental Foundation Training and Dental Core Training Year/Level 1. General professional Training normally runs for a period of two years.

**HEE Local Office - Local Education and Training Board:** In England, the organisation

responsible for the local or regional management and delivery of Dental Foundation Training. (See 'Deanery' in Wales and Northern Ireland).

**Professionalism:** Adherence to a set of values comprising statutory professional obligations formally agreed codes of conduct, and the informal expectations of



patients and colleagues. Key values include acting in the patients' best interest and maintaining the standards of competence and knowledge expected of members of highly trained professions. These standards will include ethical elements such as integrity, probity, accountability, duty and honour. In addition to dental knowledge and skills, dental professionals should present psychosocial and humanistic qualities such as caring, empathy, humility and compassion, social responsibility and sensitivity to people's culture and beliefs.

**Safe Beginner:** a rounded professional who, in addition to being a competent clinician, will have the range of professional skills required to begin working as part of a dental team and be well prepared for independent practice. They will be able to assess their own capabilities and limitations, act within these boundaries and will know when to request support and advice

**Scheme:** A managed educational experience. Schemes and their programmes are managed by a TPD or their equivalent. A programme in this context is not a personal programme undertaken by a particular trainee."

TPD: A dentist who is responsible for the organisation of an individual Dental Foundation Training Scheme in a Deanery/HEE Local Office. May be known as a Foundation Training Advisor in some areas.

**Workplace based appraisal:** The process whereby trainees are appraised by their educational supervisors using the assessments and other information which has been gathered in the workplace.

**WPBA - Workplace based assessments:** The assessment of working practices that FDs may actually do in the workplace and that are predominantly carried in the workplace.



# Protocol for making revisions to the Guide

- 1. The Dental Blue Guide will be reviewed regularly to ensure correction and clarification of paragraphs if necessary and to reflect policy decisions taken since the previous publication.
- 2. The reviews will be undertaken by the Postgraduate Dental Deans through the COPDEND Secretariat.
- 3. Individual stakeholders are invited to submit requests for changes/amendments to the Secretariat giving reasons why the changes are necessary.
- 4. The COPDEND Secretariat will consider requests and write the relevant changes, subject to testing of impact of any additions.
- 5. Revised Guides will be published electronically with a list of the latest amendments.

# **Revisions in this Version and Supplements**

Removal of Outcome 6R

Removal of Stage 2 FRCP panel and adoption of single stage FRCP panel Inclusion of distinct employer organisation to account for LEP as employer option Incorporation of separate guidance documents into main Blue Guide document

The guidance in this document is applicable UK wide, but there are important national variations in terminology and implementation. Text within blue boxes specifically relates to Dental Core Training and Dental Core Trainees