

Consultation

on the General Dental Council's Standards for Specialty Education

Welcome to the General Dental Council's (GDC's) consultation proposing changes to the standards used to quality assure providers of specialty training.

The Standards for Specialty Education outline what is expected of programme and examination providers delivering programmes and examinations leading to issue of a Certificate of Completion of Specialist Training (CCST) and individuals' inclusion upon one of the GDC's specialist lists.

The proposed changes include creating a different set of standards for programme providers and examination providers. The requirements listed in the Standards for Speciality Education will also be developed.

If approved, the standards for programme providers and examination providers will be:

Standards for programme providers

- Standard 1 - Protecting patients.
- Standard 2 - Quality evaluation and review of the programme.
- Standard 3 - Specialty trainee assessment.

Standards for examination providers

- Standard 1 - Quality evaluation and review of the examination.
- Standard 2 - Specialty trainee assessment.

We would like to hear your views on our proposals. The consultation runs for 12 weeks from 23 April 2018, closing on 16 July 2018.

You can complete the consultation online via our consultations page - gdc-uk.org/consultations

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Development of revised Standards for Specialty Education

In April 2015 the Council approved the document Standards for Specialty Education and a pilot implementation plan, with an understanding that it would be delivered by the quality assurance team and within the 2015 business plan and budget. The Council also determined not to extend further quality assurance activity to include specialist training unless a clear evidence base emerged that might justify:

- targeted and risk-based interventions where required
- inspections of all specialist providers based upon a regular inspection cycle.

Following publication of the standards, we maintained an active programme of engagement with the specialist training sector in 2015 and 2016. We used this programme to promote both the standards and our role in quality assuring specialty education of providers.

We collected and analysed evidence from volunteer providers from the last quarter of 2015 to spring 2016. The pilot process was based on moderated self-assessment and included:

- data sets profiling specialty trainees and scrutinising key data including information about the trainees' progression rate through programmes and exit examinations
- a self-assessment questionnaire against the standards giving providers the opportunity to indicate how they were met
- the opportunity to provide illustrative and supporting evidence to underpin self-assessment.

The pilot, in addition to testing processes, provided a useful opportunity to form a view about the embedding of the standards following publication.

In April 2016, we held a stakeholder engagement meeting with all of the programme and examination providers who contributed to the pilots, the chair of the UK Committee of Postgraduate Dental Deans and Directors (COPDEND) and a representative from the Health Education England (HEE) Quality team. This event helped to clarify revisions that could be made to refine the Standards for Specialty Education. It also informed the discussion about a proportionate, risk-based process for future quality assurance for specialty training and education.

We drew together feedback from the stakeholders to ascertain if:

- the level and wording of the standards and requirements in the Standards for Specialty Education were at the correct level, or in need of further refinement
- different standards and requirements would be needed for different education providers
- evidence could be supplied by providers, which would assure us of their quality management processes, being conscious of resource implications for ourselves and our stakeholders.

The volunteers fed back that the level of detail set out by us in the pilots to quality assure the process was necessary, proportionate and of the right level.

Specific feedback was given to all individual volunteers who took part in the pilots by the end of summer 2016, seeking their comments by the end of October 2016. Thereafter we reported to the Council in December 2016.

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Developments to Standards for Specialty Education

General

We have separated the standards and requirements for programme and examination providers and have made necessary housekeeping amendments to the language of the individual requirements.

In the first iteration of the standards, we repeatedly used the word 'appropriate' to indicate areas where providers have some discretion under the requirements. Throughout the pilot process, and particularly at the April 2016 workshop, we received feedback that the use of this word is non-specific and unhelpful.

We have amended each requirement where this word has previously been used and seek stakeholder engagement with the proposed changes.

New overarching requirement

The main learning point from the pilot exercise was the value of an evidence submission accompanying the completed self-assessment questionnaires.

We consider that placing an overarching requirement on programme and examination providers to supply such evidence in a future quality assurance process would mitigate the need to develop a further level of assurance activity.

Specific amendments to existing requirements

Standard 1 for programme providers, requirement 2

This relates to patients giving consent to be treated by specialty trainees. We have been persuaded by the response of our volunteers, as well as associated questions from other stakeholders, that this requirement has the potential to be administratively onerous. The requirement has been interpreted as requiring patients to sign dedicated consent forms when treated by specialty trainees. The point was made with clarity that such trainees are GDC registrants and that normal consent protocols can, and should, apply.

We propose amending and consulting on a revised requirement.

Standard 2 for programme providers, requirement 5

In the pilot, both programme and examination providers were asked to provide a self-assessment against this requirement. We have received the suggestion that this requirement should be withdrawn for examination providers on the basis that it is designed for work-based assessments and is more applicable to formative assessments than an examination or summative assessment.

We recognise the validity of this argument and are consulting with stakeholders on either withdrawing this requirement, or developing a revision to fit the examination assessment environment.

What we will do with the information we gather

We will analyse the responses and, taking into account the feedback received, will make further refinements to the Standards for Specialty Education. A final draft will be presented to Council in July 2018. If approved, they will take effect immediately and we will commence our quality assurance process in the 2018/9 academic year.

Thank you for your response. Your views are important to us in developing the Standards for Specialty Education.

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