1. Introduction

Background Information

1.1 The School was formed as the School of Dental Surgery and Dental Hospital of Glasgow in 1879. The students sat examinations set by the Faculty of Physicians and Surgeons of Glasgow. In 1947 the Dental School became affiliated to the University of Glasgow, which awards the Bachelor of Dental Surgery (BDS) degree.

1.2 The School of Dentistry at the University of Glasgow is one of nine divisions within the Faculty of Medicine. The School has retained its individual identity within the Faculty of Medicine and is the second largest Dental School in the UK.

1.3 The Dental School premises comprise two facilities which are physically joined; the purpose built Dental Hospital and School in Renfrew Street completed in 1931 and the Sauchiehall Street buildings completed in 1970. The Glasgow Dental Hospital and School’s physical resources include: William N Samuels Lecture Theatre (capacity of 127); Jubilee Lecture Theatre (capacity of 87);
NHS Education Scotland (NES) Postgraduate Lecture Theatre\(^1\) (capacity of 80); Seven seminar rooms (total capacity of 100); James Ireland Dental Branch Library (48 desk spaces and a computer cluster of 30 PCs); a stand-alone computer cluster (18 PCs) on Level 8; a biomedical science teaching class room (capacity of 50); an undergraduate student common room; a study area for taught postgraduate students (capacity of 20 and currently being refurbished to support a capacity of 30); a Pre-Clinical Skills Facility (capacity of 36 students and undergoing extension and refurbishment in Spring 2010 to provide a final capacity of 46 students with three tutor stations and IT interconnectivity between all three rooms in the Facility); Removable Prosthodontics Teaching Laboratory (capacity of 58); Fixed Prosthodontics Teaching Laboratory (capacity of 16); Orthodontics Teaching Laboratory (capacity of 14); a SimMan\(^\text{®}\) Clinical Simulation Facility (to teach life-support and resuscitation) and an instrument decontamination training suite (capacity of 10).

1.4 Clinical dental facilities within Glasgow Dental Hospital and School comprise 124 dental chairs distributed between the disciplines of Conservative Dentistry, Oral Medicine, Oral Surgery, Orthodontics, Paediatric Dentistry, Periodontology, Removable Prosthodontics, and Sedation. These are situated over five floors of the building. The School also has access to offsite facilities, known as Dental Outreach Teaching Facilities which currently comprise 47 dental chairs sited in community health centres, many of which have either been refurbished or newly built for the purpose, at various locations throughout Greater Glasgow and Clyde and contiguous health boards (Para 3.4.4). The centres have been developed and staffed in partnership with local health boards, made possible as a result of Scottish Government funding administered by NES.

1.5 The School has a major interface with NHS Greater Glasgow and Clyde in the delivery of teaching since a large volume of clinical work is undertaken by dental students in the BDS curriculum. Significant amounts of NHS funding through Additional Cost of Teaching (Dental) (ACT [D]) and Additional Cost of Teaching Medical (Dental) (ACT M[D]) monies support delivery of the BDS curriculum. In recent years the School has also benefitted from ACT [D] uplifts and slippage funds.\(^2\)

1.6 The School last underwent internal review of its programmes of teaching, learning and assessment in February 2004. The School’s Self Evaluation Report (SER) covered a period of substantial change during which a new curriculum featuring close integration between biomedical sciences and clinical training was introduced.

1.7 Since the School’s BDS programme is accredited by the General Dental Council (GDC) the School is also subject to a six yearly cycle of external review. The last review of the BDS programme and Final Examinations took place in October 2003 and over May and June 2004 respectively, with a re-visitation over April, May and June 2005. On the basis of the findings in 2005, the GDC found the BDS programme and Final Examination at the University of

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1 This Lecture Theatre is managed by NES, but may be booked by the University subject to availability.
2 Every year since 2000, slippage funds from within the NHS ACT (D) budget have enabled the Dental School to purchase materials for undergraduate teaching. This source of funding is unlikely to be available in future years as NHS budgets become subject to the currently prevailing financial pressures.
Glasgow to be ‘sufficient’ within the meaning of section 9(2) of the Dentists Act 1984.

1.8 The rating from the Research Assessment Exercise (RAE) 2008 showed a significant improvement on the previous rating in 2001. The 2008 profile indicated that 90% of the research activity had been recognised as international in quality, with 60% in the 3* and 4* categories of highest international quality. The RAE 2008 success resulted in the Scottish Funding Council (SFC) reinstating its funding allocation for dental research.

1.9 The Times Online Good University Guide 2010 has ranked the University of Glasgow Dental School as the best dental school in the UK, confirming the high quality of the student learning experience.

1.10 The SER was prepared by Professor Jeremy Bagg (Head of School), Dr Aileen Bell (Deputy Director of Dental Education), Dr Vince Bissell (Director of Dental Education), Mr Stuart Hutchinson (Administrative Officer), Mrs Martha Millard (Dental School Administrator) and Professor Richard Welbury (Director of Postgraduate Dental Education). Separate meetings incorporating small group workshops were held with staff members, at the Annual Teaching Day, and with current students, as part of the reflective preparation. The penultimate draft of the document was made available to all staff and students via the School web-site for final comments before submission, together with a full discussion at a School Meeting. The Review Panel was impressed by the consultation process adopted and **commends** the Department for its integrative approach to the review process.

1.11 The Review Panel considered the School’s SER to be an exemplary document which was well written, thorough and demonstrated an evaluative and reflective approach to the review whilst providing a comprehensive overview of the subject provision. The high standard of SER and supporting documentation that were produced for the review process reflected both their professional approach to the review, and their engagement with the process from an early stage. The Panel considered that the SER might be offered as a ‘good practice’ example to departments undergoing DPTLA review in future. The Review Panel **commends** the Dental School on this achievement.

1.12 The Review Panel met with the Dean of Medicine, Professor David Barlow; the Head of School, Professor Jeremy Bagg; the Director of Dental Education, Dr Vince Bissell; the Director of Postgraduate Dental Education, Professor Richard Welbury. The Panel also met with 32 members of staff, including 10 administrative staff; 4 Graduate Teaching Assistants; 5 postgraduate taught home students; 5 postgraduate taught overseas students and 14 undergraduate students representing all levels of the School’s provision.

1.13 The School has 54 academic members of staff out of a total of 81 members. The Dental School is organised into four sections; the Administrative section and three academic sections of Community Oral Health, Biological and Medical Sciences and Clinical Dentistry. Each academic section has responsibility for the delivery of a theme within the curriculum and each ‘houses’ one or more research groups. This reorganisation in 2009 was to encourage interaction between research and teaching in order to enhance learning in a research environment.

1.14 The School staffing difficulties in Restorative Dentistry have been highlighted over a period of time ranging from the last DPTLA review and GDC visits to
present. The Head of School reported that continuity of Senior Clinical Staff delivering teaching was not a staffing difficulty that was unique to the University of Glasgow. The Review Panel noted that the Dental School had made considerable efforts to replace staff and was aware of the difficulties the School experienced in the inability to reconfigure courses (in the event of staff shortages) due to the strict requirements for GDC accreditation.

1.15 It was noted that a significant amount of the clinical teaching was delivered by NHS staff, who are employed on a wide variety of types of contract, making delivery of the undergraduate course heavily dependent on the clinical support of NHS colleagues.

1.16 Staff and student numbers for 2009-10 were as follows:

<table>
<thead>
<tr>
<th>Staff</th>
<th>Headcount</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Staff</td>
<td>81</td>
<td>77.7</td>
</tr>
<tr>
<td>Academic staff</td>
<td>54</td>
<td>51.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Students</th>
<th>Headcount</th>
<th>FTE</th>
</tr>
</thead>
<tbody>
<tr>
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<td>92</td>
</tr>
<tr>
<td>BDS2</td>
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<td>95</td>
</tr>
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<td>BDS3</td>
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<td>94</td>
</tr>
<tr>
<td>BDS4</td>
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<td>86</td>
</tr>
<tr>
<td>BDS5</td>
<td>79</td>
<td>79</td>
</tr>
<tr>
<td><strong>Undergraduate Total</strong></td>
<td><strong>446</strong></td>
<td><strong>446</strong></td>
</tr>
<tr>
<td>Postgraduate Taught</td>
<td>47</td>
<td>30</td>
</tr>
<tr>
<td>Postgraduate Research*</td>
<td>20</td>
<td>14.5</td>
</tr>
</tbody>
</table>

*(for information only - research is not covered by the Review)*

1.17 The Staff: Student ratio for taught students in 2009-10 is 1:9.75

1.18 The Review Panel considered the following range of provision offered by the School.

At undergraduate level, the School offers:

- Bachelor of Dental Surgery (BDS) - current curriculum introduced in 2004

At postgraduate level, the School offers:

- MSc in Primary Dental Care;
- MSc in Oral & Maxillofacial Surgery;
- MSc in Fixed and Removable Prosthodontics;
- D Clin Dent in Orthodontics.

1.19 International Collaborations

The Review Panel noted from the SER that the School has set up two new postgraduate level programmes and offered:
• MSc in Fixed and Removable Prosthodontics with Dental Education;
• MSc in Oral & Maxillofacial Surgery with Dental Education.

The programmes satisfy a signed agreement between the Faculty of Medicine and the Al-Fateh Medical University in Tripoli, Libya. These new programmes were due to have their first intake in September 2009, however this has been deferred due to organisational and communication issues internally in Libya and difficulties of communication between Glasgow and Libya. The Dental School remains optimistic that the communication issues will be resolved to allow for intake in the near future. The SER noted that the courses will also be suitable for other countries with recently opened dental schools such as Malaysia.

2. Overall aims of the Department's provision and how it supports the University Strategic Plan

2.1 The SER set out the overall aims of the School’s provision and it was clear to the Review Panel that the core business of the School was the preparation of BDS students for careers as Dentists. It was also apparent, however, that such preparation was not limited to the achievement by students of accreditation for entry to the profession or furthering of professional qualifications through respective BDS and Postgraduate programmes of study. The Panel noted the statement of aims of both the BDS and postgraduate programmes which acknowledged ‘the need to produce competent, caring, ethical and reflective dental practitioners’. The Panel acknowledge this accurately reflected the intention on the part of the School to instill students with these abilities through the exceptional student learning experience that was provided.

2.2 The Review Panel was entirely satisfied that the School’s aims were aligned with both the University Strategic Plan and, more specifically, the Learning and Teaching Strategy. In particular, strong emphasis was placed upon excellence in teaching, whereby teaching and approaches to learning promote a learning environment which supported students to develop as motivated learners and independent and critical thinkers. The School has developed an excellent ethos of learning which promotes student confidence and awareness in their skills, knowledge and understanding. Furthermore the support the School provides for students to succeed, offered throughout the programmes, is targeted to take students through key transitional learning stages.

3. An Evaluation of the Student Learning Experience

3.1 Aims

The Dental School set out its BDS and postgraduate programmes’ aims in the respective programme specifications contained in the supporting documentation. These are a direct reflection of the professional nature of the degrees, and are therefore based on directives of the GDC but include the needs set out in Paragraph 2.1.
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3.2 Intended Learning Outcomes (ILOs)

3.2.1 As stated in the SER the Intended Learning Outcomes (ILOs) for undergraduate and postgraduate provision are outlined in the respective Programme Specifications and carried through into the Course Information Documents. They are also made available on the School’s website. The Review Panel found the quality of the ILOs for undergraduate and postgraduate programmes to be of consistently high quality.

Undergraduate Intended Learning Outcomes

3.2.2 The BDS programme ILOs were developed for the 2004 Curriculum using two sources, the second edition of ‘The First Five Years’ guidance document on the undergraduate dental curriculum produced by the GDC and the Quality Assurance Agency (QAA) Subject Benchmark statement for Dentistry, as well as the needs set out in paragraph 2.1 which address a number of key generic attributes.

3.2.3 The ILOs for the BDS programme have been subject to review and minor adjustment since their introduction in 2004. The School is holding off a major review of the alignment of its ILOs to teaching, since the GDC is likely to publish its own ILOs in 2010; the School would necessarily review their ILOs in light of the GDC’s recommendations at that point.

Postgraduate Intended Learning Outcomes

3.2.4 The ILOs for the individual taught programmes were developed taking into account either: the historical curricula for the MSc in Oral & Maxillofacial Surgery [MSc OMFS] and MSc in Fixed and Removable Prosthodontics [MSc FRP]); or specialist professional clinical training requirements of: the Orthodontics Specialist Advisory Committee (SAC) of the Royal Colleges of the UK (DClin Dent Orthodontics); or the outcomes of the working Group of NES that considered the requirements for Dental Practitioners with Special Interests (MSc in Primary Dental Care).

3.2.5 Intended Learning Outcomes for the postgraduate taught (PGT) programmes have been subject to review and minor adjustment as a result of student feedback after each academic year.

3.3 Assessment, Feedback and Achievement

Assessment

3.3.1 A very wide range of assessment methods in the BDS course are used and methods of summative and formative assessment applicable to each course are set out in Course Information Documents. It was stated in the SER that the written assignments and examinations are used to assess knowledge and understanding. Objective Structured Clinical Examinations (OSCE), in-course competence assessments and case presentations are used to assess clinical skills and that these methods of assessment are standard to clinical and professional programmes. The Review Panel noted that the rigorous assessment methods outlined in the SER, focusing on the attainment of clinical competence, were in step with the current and future requirements of the GDC.

3.3.2 As stated in the SER all assessment is blueprinted. An assessment blueprint is a matrix in which the ILOs are mapped against methods of assessment. Undergraduate students demonstrated well-developed awareness of ILOs and found the blueprinting method useful. The transparency of alignment between ILOs and assessment was so well defined and publicised that some students
conveyed that past papers were not necessarily required for study purposes, since ILOs could be used to support exam preparation. The Review Panel commend the Dental School on the good practice demonstrated by the transparency of its alignment of ILOs with teaching and assessment.

3.3.3 The e-portfolio is a tool by which University of Glasgow BDS students collate evidence of attainment in relation to ILOs. It was developed in collaboration with NHS Education for Scotland (NES) and was introduced in 2009/10 for BDS1 and BDS2 students with use for all subsequent years of entrants to the Dental School.

3.3.4 The Review Panel noted that there had been a move away from essay questions in undergraduate examinations since the 2004 curriculum had been introduced. External Examiners appeared to have no reservations about the assessment methods that are used and consistently highlighted the performance of candidates as “extremely impressive overall, comparing favourably with other schools” demonstrative of the high calibre of teaching at the Dental School.

Formative Assignment

3.3.5 It was noted that formative assignments on Moodle which are not assessed must be undertaken in order to complete the course. Students were set 6-10 formative assignments in each course, that frequently involved the need for some limited research and wider reading, and were designed to endorse the concepts of ‘life-long learning’ and ‘continual professional development’. The Review Panel learned that students were initially rather puzzled by the process but adapted quickly and realised that they were assessing themselves. The students clearly gained a lot from this type of reflective learning exercise. The Panel commend the Dental School on its use of formative assignments which encourage students to become independent and reflective learners.

Feedback

3.3.6 Undergraduate students who met with the Review Panel stated that overall they were happy with the quality and timing of feedback they received. It was noted that students receive class feedback sessions following mock examinations and some students suggested that a feedback session on the formal examination would be useful. The Panel learned through the meeting with key staff that BDS3 students had trialled a class feedback session on a summative assessment and this had been very well received by students. The Panel noted that PGT students make use of examples of good and top grade anonymised work as part of their feedback experience and suggests that this good practice be extended throughout the available courses.

3.3.7 Through the SER and meetings with the Head of School and key staff it was highlighted that students were not always aware when they had received feedback. There was a consensus amongst the key staff that students often had the misconception that feedback would be in a written form and that there would be a grade attached to it. The Head of School and Director of Dental Education reported that the matter would be dealt with differently in future to increase student awareness of what constituted feedback.

3.3.8 The Dental School had acknowledged that there was some dissatisfaction with the promptness of feedback on assessment and had taken steps to address this through an action plan. The strategy for improving feedback to students showed a determination to make gains in an area that is widely-recognised through findings of the National Student Survey as problematic across the
University. The Review Panel **commends** the Dental School on the approach to feedback on assessment. The Panel **recommends** that the implementation of actions derived from the ‘Dental School Strategy for improving Feedback to Students’ should be monitored one year post review.

3.4 **Curriculum Design, Development and Content**

Curriculum Design

3.4.1 The Review Panel noted from the SER that the first cohort of students from the new BDS curriculum (the ‘2004 curriculum’) graduated in July 2009. Curriculum changes were made in response to a critical review of the previous curriculum by the GDC in the mid 1990s. The new curriculum, as stated in the SER, was developed to include focus on: improved integration between the teaching of clinical subjects and their scientific basis; helping students to develop the skills of life-long learning (i.e. the ability to act upon learning needs identified through reflection); allowing earlier patient contact; increased emphasis on team dentistry; inclusion of a significant element of ‘Outreach’ teaching and increased emphasis on reflective learning and the development of key generic skills.

Undergraduate Curriculum

3.4.2 Undergraduate students were overwhelmingly positive about the 2004 curriculum. Final year undergraduate students who met with the Review Panel stated that they felt well prepared for their professional careers. The students made a suggestion that theory about dental materials might be better placed alongside the practical aspects of the course so that the relevancy is more obvious to students; this would be one way to better integrate the teaching of clinical subjects and their scientific basis. With regard to surgical extractions the BDS4 students reported that they would appreciate more experience in the technique. The Review Panel noted that the Head of School would address the matter through the staffing strategy that had been developed for 2009-2012.

3.4.3 The way in which the School moved undergraduate students from a school education system to independent learning through the BDS curriculum is particularly well managed. The final year undergraduate students who met with the Review Panel reflected that whilst good grades had been their primary concern in BDS1, good clinical skills, thinking ‘outside the box’ and well developed communications skills were their main focus in BDS5. The Panel **commends** the Dental School on the management of the undergraduate learning experience.

Outreach

3.4.4 The Review Panel noted from the SER that in BDS 5, half of clinical teaching, known as ‘Outreach’ teaching, is delivered in new dental outreach centres. The Dental Outreach Teaching Facilities are centres that have been developed and staffed in partnership with local health boards, made possible as a result of Scottish Government funding administered by NHS Education for Scotland (NES). Dental Outreach Teaching Facilities included:

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3 The centres at Greenock, Plean Street and Carronshore are contingency arrangements, pending completion of the construction and opening of new outreach centres in Paisley (at Royal Alexandra Hospital), Greenock (at Inverclyde Royal Hospital), Alexandria, Coatbridge and Campbeltown.
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- Dumfries (six chairs)
- Kilmarnock (four chairs)
- Forth Valley - Carronshore (four chairs) and Langlees (eight chairs)
- Greenock (four chairs)
- Plean Street, Yoker (eight chairs)
- Bridgeton (four chairs)
- Pollok (two chairs)
- Springburn (three chairs)
- Cambuslang (two chairs)

The Review Panel learned that undergraduate students particularly valued the outreach placements. The students commented that the placements tied everything that they had learned together; that they experienced a good case mix: improvements were noticed in their time management skills and their confidence had improved. The Panel noted that the School had been proactive in building the patient base by involving dental students in outreach activities with Schools to encourage primary children to attend the Dental Outreach Teaching Facilities and this had been successful. The outreach placements are considered extremely beneficial to students in consolidating their learning and the Panel commends the Dental School on this practice.

Electives

3.4.5 BDS students follow a very prescribed course due to the requirements of the GDC; they cannot practise as independent dentists until they have completed their degree and become GDC registered. The Dental School does offer opportunities for BDS students to have an international experience through elective study. This supports both the student mobility strand of the internationalisation agenda and the Learning and Teaching Strategy. All undergraduate students take an elective at the end of BDS4 and a written report is submitted as a requirement of the course. Students can choose an elective within this country or within the Dental School, however many students choose to travel abroad and some undertake an elective with a voluntary organisation.

3.4.6 The Review Panel noted that all dental procedures have been categorised as exposure prone procedures in terms of the risk of transmission of blood borne viruses. The Panel queried whether undergraduate students were able to carry out risk assessments in countries with high occurrences of blood borne viruses. The Head of School and Director of Dental Education reported that students between 4th and 5th year are, for the most part, capable of carrying out risk assessments. Risks are mitigated as far as possible; students are specifically informed of potential dangers before they leave and are assigned a supervisor in the host country. The Head of School confirmed that recent negotiations with the Occupational Health Service had led to the agreement to carry out risk assessments and screen students upon their return from abroad.

3.4.7 The Review Panel learned from the meeting with undergraduate students, that time spent away from the Dental Hospital was considered to be beneficial; and students found the electives very useful experiences with wide ranging
responsibilities attached to them; everything from organising and funding travel and accommodation to carrying out the work itself. There was a suggestion that more information on the initial choices of electives available to students would be welcomed.

3.4.8 The Review Panel learned that the Dental School was considering a review of electives undertaken in countries with a high prevalence of blood borne virus infections. The Panel recommends that the Dental School continue with its work on risk assessment of elective placements particularly in countries with high prevalence of blood borne viruses.

Postgraduate Taught (Home) Curriculum

3.4.9 The Dental School offers four postgraduate programmes; one aimed at home students considered to be Continuing Professional Development (MSc Primary Dental Care), two aimed at postgraduate overseas students (MSc OMFS and FRP) and one with both home and overseas students (DClinDent Orthodontics).

3.4.10 The MSc in Primary Dental Care is a three year part-time programme aimed at existing practitioners in the UK. Postgraduate taught students who met with the Review Panel reflected that they had found their first year quite academically challenging and that it had required ‘significant effort’ on their part, however the Dental School had given them clear and honest advice about academic expectation. Students felt academically supported throughout the course with ‘plenty of useful feedback sessions’ as well as individualised exam feedback at the end of each term.

Postgraduate Taught (Overseas) Curriculum

3.4.11 The MSc in Oral & Maxillofacial Surgery (OMFS), the MSc in Fixed and Removable Prosthodontics (FRP) and the DClinDent (Orthodontics) programmes were introduced in 2008 after a two year development and consultation phase. The MSc’s are two year full-time courses which have been developed in response to overseas demand. The DClinDent (Orthodontics) is a three year full-time programme that follows the specialist training programme in Orthodontics for the UK.

3.4.12 International postgraduate taught students expressed overall satisfaction with the way in which the course information was condensed and the excellent teaching and reading resources provided. There was particular appreciation of the excellent level of supervision received and of the academic standing of their supervisors; however there were concerns expressed about their programme content. They reflected that the first year of all of the taught postgraduate programmes was made up of a core course (60 credits, a third of the time in their first year) which they felt was not relevant to their programme and affected progress in their specialty course. Following review of the course documentation the Review Panel confirmed that course descriptors for the MSc in OMFS and the MSc in FRP were an accurate reflection of the courses, which specify that they are academic courses and not purely clinical training. However, the Panel suggest that more explicit language could be used in PGT (overseas) marketing in order to manage student expectation.

3.4.13 The Head of School confirmed to the Review Panel that all PGT students (Home and International) received the same amount of clinical experience but
that curriculum design of the PGT courses had been recently reconsidered. Since the core course comprises units covering Basic Sciences, Health Sciences and Research Sciences they are considered fundamental and dynamic areas of learning. In future, the existing core course for the MSc OMFS and the DClinDent Orthodontics would be revised to 40 credits and a 20 credit module would be developed in 3D imaging to be included in the core course to reflect specialised interest in these two programmes. The Panel heard that the Dental School would undertake a review of its postgraduate provision, and would not recruit to MSc in FRP for 2010-2011; recruitment would resume in 2011-2012 once staffing levels in Restorative Dentistry had been addressed through the School's staffing strategy.

3.4.14 The PGT (Overseas) students who met with the Review Panel reflected that the Prayer Room within the Dental School was only available over lunch time and was required at other parts of the day. The matter had already been drawn to the Head of School’s attention and he confirmed that despite the fundamental lack of available resource in the building for a full time prayer room, the School would, in future, endeavour to make arrangements at specific times of the year to accommodate religious observance. The Panel noted that the prayer facilities were apparently not an issue for UG students and suggested that the two groups might usefully liaise to consider pragmatics. The Panel recommends that the course documents for PGT programmes be reviewed to clearly state that although the University does provide central prayer facilities, the Dental School Prayer Room would only be available during the lunchtime period.

3.5 Student Recruitment

Undergraduate

3.5.1 The interest in studying dentistry at undergraduate level at the University of Glasgow is a reflection of its national and international reputation. In the academic year 2009-2010 the Dental School attracted more than six times as many student applications than it had places (560 applications for 87 funded places), therefore entry requirements were stringent and complex procedures were used to rank applications in order to select the most suitable candidates.

Admission System

3.5.2 The Review Panel noted from the SER that the Dental School ran its own complex admissions system for the BDS course which had been developed and continually assessed over recent years. The Panel formed the impression through the course of the review that it was important to maintain the current system in order that the most appropriate students continued to be selected. The Panel commends the Dental School on its robust, rigorous and transparent undergraduate admissions system.

Widening Access

3.5.3 The Dental School operated a pathway for entry to the BDS programme aimed at mature students who wish to retrain as dentists and do not have the appropriate entry qualifications. This was managed via a partnership with Stow College and the Scottish Widening Access Programme (SWAP); known as SWAPWest. This is in line with the Access and Opportunity strand of the University Learning and Teaching Strategy. Candidates for SWAPWest achieved the academic entry qualifications by completion of a course at Stow College; they were then guaranteed an interview, in effect entering the selection process at stage two. This is unusual compared to other Dental
Schools in the UK, since places for Dentistry could be filled five times over with highly qualified school leavers. The Panel commends the Dental School on its widening participation practice achieved through SWAPWest.

3.5.4 The Dental School also offered a top up School initiative known as Greater Opportunity of Access and Learning with Schools (GOALS) project which offered pupils in under-represented schools support in becoming a successful applicant. The Review Panel commends the Dental School on the GOALS widening participation practices achieved through links with under-represented Schools.

3.5.5 It was noted that the availability of places for international students on the undergraduate programme was determined annually by Scottish Funding Council (SFC) (intake for 2009-2010 was three students). International PG recruitment was also restricted since postgraduate capacity was limited by the available clinical space and staff resources. The Review Panel noted that very limited capacity to recruit international students to undergraduate or postgraduate programmes placed ever-greater reliance on the NHS for the financial sustainability of dental education.

Postgraduate

3.5.6 As stated in the SER, postgraduate intake had risen sharply over the last three years, following the introduction of the new taught postgraduate programmes. This year for some of the programmes the overseas intake had fallen below target.

3.5.7 Postgraduate programmes included major clinical components therefore a planned increase in postgraduate student numbers would have direct implications on the clinical space requirements in terms of number of dental nurses and dental chairs required. The Review Panel expressed concern that these additions could not be resourced and was pleased to note that a review of postgraduate provision was ongoing (Para 3.4.13).

3.6 Student Progression, Retention and Support

Support

3.6.1 The Dental School is physically located a 20 minute walk away from the main University Campus. The Review Panel were pleased to note numerous support mechanisms provided, which were unique to the Dental School and included: the admissions process; induction programmes; mentoring programme; distinctive Student Advisory System, continuous assessment and competency assessment and the Student Support Committee as well as the University requirements for attendance monitoring and Staff-Student Liaison Committees. There was also a focus on students’ social interaction from induction throughout the duration of students’ courses; the combination of support had developed a strong sense of community. The Review Panel commends the efforts made by all staff members to assist and support the student population.

3.6.2 The matter of University-wide changes to the advisory system was raised in the meeting with key staff. The current situation in the Dental School was that students could choose an adviser from a pool of four staff; a system which was reported to work well. The introduction of Campus Solutions would mean that
each student must have a named adviser. The Review Panel suggests that the Dental School take a flexible approach to the new advising system in order that their objectives are achieved in the context of the new system.

3.6.3 Postgraduate taught students were supported by advisors, supervisors and mentors. The Review Panel learned in the meeting with PGT (Overseas) students that they couldn’t clearly differentiate the roles of the advisor and the supervisor. The Panel suggest that the various roles of advisors, supervisors and mentors are made more explicit to PGT (Overseas) students. Whilst students were confident about whom to approach for assistance with practical issues such as visa applications and accommodation queries, they reflected that it wasn’t clear who dealt with matters such as child care. The Panel suggest that further signposting of international students towards Central Services such as the International Office or English as a Foreign Language Enquiry Centre would be beneficial to PGT (Overseas) students.

3.6.4 The Review Panel noted that PGT (Home) students felt ‘listened to’ by the Dental School. Students found staff in the School very approachable and were confident that their suggestions and comments about course related matters were given serious consideration by the Dental School.

Retention
3.6.5 Given the highly competitive nature of entry to the undergraduate degree programme and the requirement for experience of dental practice, it is perhaps unsurprising that retention and progression rates were high in the Dental School. Retention on the BDS programme was exceptionally high and this could be attributed to both the rigorous admissions system and care of students throughout the programme. Key staff confirmed that the student drop out rate was low and often related to personal circumstances. Dedicated secretarial staff existed for each year group and relocation and reorganisation of secretarial staff in to one office have resulted in very positive National Student Survey (NSS) results; they also provide a supportive pastoral role for students. The Review Panel commends the Dental School secretarial staff for support provided to students.

Student Committees
3.6.6 The Review Panel noted from the supporting documents that minutes of meetings held over recent years showed that a well-organised system existed for liaison with students at course and programme levels. The relay of information to the Dental Education Committee provided an effective mechanism for handling issues that related to taught courses and the topics that arose appeared to be dealt with promptly when feasible.

3.6.7 The Review Panel heard anecdotal evidence from BDS2 students that their feedback through the Student Staff Liaison Committee had directly benefited the next cohort. BDS1 students were enabled to shadow patient procedures a year in advance of their first ‘independent’ clinical experience and this earlier patient contact had increased student confidence. A further suggestion by BDS2 students to allow earlier introduction to clinical techniques had benefited the new cohort of BDS1 students in that they were introduced to operative practice (use of a dental handpiece) a year earlier in the curriculum.
3.7 **The Quality of Learning Opportunities**

3.7.1 All student participants expressed overwhelming satisfaction with the quality of the learning opportunities offered by the Dental School. This was in line with findings of the First Year Student Learning Experience Survey (FYSLES) and the NSS 2009 and the feedback from Annual Course Monitoring (2008-09) which found much enthusiasm about the quality of teaching.

3.7.2 All students who met with the Review Panel spoke favourably of the Dental School. They commented that staff were very approachable and helpful at all times and were accommodating and readily accessible. The Panel **commends** the Dental School on the strong professional relationship that exists between students and staff.

3.7.3 The Review Panel found much evidence of excellent educational practice in the SER and it was clear that the School had a dedicated teaching cadre who were committed to enhancing the quality of the student learning experience. Examples of good leadership and organisation were also evident. The Panel **commends** the Dental School on its impressive and effective leadership through a period of substantial change.

3.7.4 The Review Panel noted that all staff in the Dental School work together to deliver the student experience; this is achieved through recognition of each others strengths in teaching, research, scholarship and through a strong system of student support. The Panel **commends** the Dental School on the collegiality of its academic and administrative staff.

**Educational Scholarship**

3.7.5 The Review Panel noted from the SER that the Dental School actively encouraged scholarship amongst its University Teachers and had developed a dedicated Dental Education Research Group. Some recent awards from the Learning and Teaching Development Fund (LTDF) to undertake educational research projects were highlighted to the Panel during the review process. One of the awards in peer assisted learning had resulted in a pilot study whereby BDS5 students instructed BDS1 students in a simple clinical task; this study was being considered for introduction into the curriculum. The Panel learned from meeting with the undergraduate students that both BDS5 and BDS 1 students benefited from this type of learning and would welcome it within the curriculum.

3.7.6 The Peer Assisted Learning project and many other educationally focused activities including an annual Education Day (a School-wide training event) and strong links with the Learning and Teaching Centre demonstrated innovative teaching and learning. The Panel **commends** the Dental School on its innovative approach to learning and teaching.

3.8 **Resources for Learning and Teaching**

**Learning Resources; equipment**

3.8.1 The Review Panel noted that the clinical facilities for the undergraduate programme were reliant on the NHS for replacement and maintenance of equipment. Through meetings with students the Panel formed the impression that whilst this did impact on the student learning experience, the students perceived these were minor problems. The Panel acknowledged that the damage limitation was due to the Head of School’s role in facilitating the
interface between the Dental School and the NHS. The Panel **commends** the Head of School in the facilitation of interaction between the Dental School and the NHS.

3.8.2 During the course of the review the Head of School and the students had highlighted to the Review Panel the recent improvement in access to patients’ medical records. This matter had been raised through the Student-Staff Liaison Committees and the students reported that the issue had been successfully resolved. The Head of School noted that a Service Level Agreement with NHS Greater Glasgow and Clyde Trust would evolve for medical records, and it would be useful if Senior Management reviewed the effectiveness of the Service Level Agreements on an annual basis.

3.8.3 The Review Panel considered that the Service Level Agreements that currently existed between the Dental School and the NHS Greater Glasgow and Clyde were too informal. The Panel **recommends** that the University and NHS Greater Glasgow and Clyde work with the Chief Dental Officer to review the Service Level Agreements (including those funded by ACT money) on an annual basis.

**Accommodation/ Physical Resources**

3.8.4 The Review Panel was given a comprehensive and informative tour of some of the key areas in the Dental School. These included:

- An instrument decontamination training suite which had a modular construction to allow flexible teaching. Simulated conditions in the room allowed students to become confident in sterilisation techniques and these were completely independent of the Dental Hospital supply;
- A study area for PGT that had recently been refurbished by the University to allow for an increased capacity (of 30);
- A biomedical science teaching laboratory (K27) that the Dental School were keen to refurbish but for which funding had yet to be identified;
- A computer cluster (K28) that was available to all students and had recently been refurbished;
- The main Conservative Dentistry Clinic, which was one of the eight teaching clinics. Students were introduced to patients in BDS1 and by the end of BDS2 started treatment of patients in this type of supervised clinical environment;
- An undergraduate student common room that had been refurbished 3 years previously by the NHS;
- Clinical dental facilities opened in 2008 and mixed between Orthodontics and Paediatric Dentistry;
- The James Ireland Dental Branch Library with computer cluster that had windows and ceiling refurbished by the NHS;
- A Pre-Clinical Skills Facility that had recently undergone improvements funded by NES and included individual student work stations with screens linked to master teaching control centres;
- A SimMan® Clinical Simulation Facility that taught life-support and resuscitation to undergraduate students and provided ongoing training for PGT students and staff, to ensure their GDC accreditation was maintained.
Infrastructure

3.8.5 The Review Panel acknowledged that the state of the physical infrastructure at the Dental Hospital and School has caused serious concerns over the last decade. There have been major improvements to the quality of the teaching accommodation over the last five years funded through a variety of routes including the University (fund-raising via the Development and Alumni Office and Faculty Minor Works bids) and the NHS (ACT (D) slippage via NES, and NHS GGC capital funds).

3.8.6 The Review Panel noted the heavy reliance of the Dental School upon funding from the NHS for improvements to infrastructure (as well as staffing). The Panel expressed concern that potential changes to funding for the NHS in the future presented an area of great vulnerability and that negotiations between the University, the Dental School and the NHS on topics including resource allocation were complex. The Panel recommends that the Dental School work with the University/Estates and Buildings to provide clarity on funding streams.

3.8.7 The Review Panel as part of its tour viewed the biomedical teaching laboratory on Level 8. The room was not ideal for teaching and refurbishment and reorientation of this (non-clinical) facility for more flexible teaching had been discussed. The Head of School noted that monies received from Estates and Buildings may be match funded by the NHS since there was a requirement for the clinic below the teaching room to be vacated and refurbished in parallel, due to asbestos in the roof space. The Panel noted that funding for infrastructure maintenance had not been easily available from the University. The Panel recommends that Estates and Buildings is alerted to the poor condition of Level 8 Teaching Space in the Dental School to ensure that it is prioritised appropriately in the University’s refurbishment programme for learning and teaching spaces.

Library

3.8.8 The Review Panel noted that the Dental School library, the James Ireland Dental Branch Library, was open until 9pm Monday to Thursday during term time. However, since the Library was embedded within the Dental Hospital and School, access from outside the building for students out of hours was a problem. The Panel learned that the limited opening hours of the Dental School library presented considerable difficulty to both undergraduate and postgraduate students since only five student passes to regain entry to the building after 5pm could be issued by the librarian due to security issues. The Panel recommends that the Dental School discuss the perceived inadequacy of out of hours access to the library with NHS Greater Glasgow and Clyde, with a view to negotiating an improved access system for students.

3.8.9 Undergraduate students who met with the Review Panel stated that they were satisfied with the online journals, wireless access in the building and access to online resources such as Moodle. However, the timetabling of clinics on the BDS curriculum meant that various groups of students required access to computers at the same time and this was supported by findings of the FYSLES (2009) which contained many comments related to problems of access to PCs. The Panel acknowledged that the School was in the process of refurbishment of one of the computing clusters, though the total number of PCs available would not be increased by that project. The Panel recommends that the Dental School continue to monitor student demand for access to PCs.
3.8.10 The Review Panel learned from discussions with PGT (Overseas) students that they perceived library resources to be excellent and they routinely made use of online journals. However, PGT (Overseas) students raised concerns that they were not able to access the library at weekends. The Head of School reported that laptops were being considered for PGT (Overseas) students and that lockers for PGT (Overseas) students would soon be available in the level 9 PGT study area. The Panel recommends that provision of laptops for postgraduate taught students (Overseas) is considered as part of the review of postgraduate provision.

3.8.11 The Review Panel met with the Dean of Medicine who reported that he had no issue with Dental Students accessing the Wolfson Medical School Library (also known as the Walton Foundation Library and Resource Area). The Panel recommends that all Dental Students are permitted access to the Wolfson Medical School Library on a first come first served basis from the start of the academic session 2010-2011.

Staffing

3.8.12 Following discussions with the Head of School the Review Panel was concerned to learn of the difficulties the School had been experiencing in relation to staffing in Restorative Dentistry and was pleased to note that a Professor/Honorary Consultant post in Restorative Dentistry (Fixed and Removable Prosthodontics) was imminent. The Panel also noted from the SER that the School's approach to the problem involved continued collaboration with NHS GGC on joint staffing initiatives and a longer term strategy in the appointment of high calibre junior staff to academic and clinical training posts with a view to their eventual appointment to senior clinical academic posts.

University Teachers

3.8.13 The Review Panel noted from the SER that the Dental School had been very forthright about the major clinical teaching role of many of the academic staff and had appointed a significant number of Clinical University Teachers and Senior Clinical University Teachers. It was clear from the SER, discussion with the Head of School, staff and students that the School benefitted from an extremely strong and dedicated team of University Teachers. The staff confirmed that they felt teaching was valued as much as research in the Dental School. The Panel was pleased to note that staff felt the University was advanced in the UK in recognising and rewarding excellence in teaching (a strategic objective of the University Strategy).

3.8.14 The Review Panel noted that arrangements for progression opportunities for staff were satisfactory, however, staff raised the point that there was some clarity required about what constituted scholarship in the University and how scholarship could be measured. The Panel learned from the Head of School that there had not yet been any appointments from Senior Clinical Teacher to Chair. The Panel formed a view that the attainment that a University Teacher would have to achieve to merit promotion to Chair was considerable. The Head of School noted that to date no University Teacher in the School had been working at a Chair level, though application(s) may be forthcoming in the future. The Panel recommends that the Dental School initiates discussion with Human Resources and the Vice Principal (Learning and Teaching) to set out clear and attainable criteria for promotion from Senior Clinical Teacher to Chair.

3.8.15 The appointment of a Lecturer in Ethics in Relation to Dentistry by the Dental School was not discussed during the review. This was a unique post in a UK dental school and was highlighted by the Review Panel as good practice.
3.8.16 The Review Panel was conscious that although the Dental School was ‘work planned’ it had not yet introduced an approved template for a staff workload model. The Panel recommends that the Dental School should introduce greater transparency of staff workload allocation.

Graduate Teaching Assistants
3.8.17 The Graduate Teaching Assistants (GTAs) who met with the Review Panel were all research students whose teaching roles were limited to demonstration and invigilation duties. It was noted that the GTAs had a very light demonstrating load. The Panel was deeply concerned that GTAs had not attended statutory training provided by the Learning and Teaching Centre nor received any training by the School. The Panel acknowledged that whilst teaching opportunities for GTAs within the School were limited, the experience was invaluable in terms of the development of graduate attributes and the School should encourage and support teaching activities in other areas of the University. The Panel recommends that the Dental School liaises with the Learning and Teaching Centre to ensure that all Graduate Teaching Assistants receive appropriate training.

4. Maintaining the Standards of Awards
Benchmark Statement and Other Relevant External Reference Points
4.1 The Review Panel noted in the SER that the BDS undergraduate programme specification was prepared with reference to the General Dental Council’s First Five Years Document and the QAA Benchmark Statement for Dentistry.

External Examiners
4.2 External Examiners were very positive and complimentary about the standards maintained in the Dental School. The Review Panel formed the view that sustained improvement had been made since the introduction of the 2004 curriculum.

5. Assuring and Enhancing the Quality of the Students’ Learning Experience
Student Feedback Opportunities
5.1 The undergraduate and postgraduate students who met the Review Panel confirmed that there were opportunities to raise issues through class representatives and the Student-Staff Liaison Committees, although the PGT (Overseas) students were not clear that their issues had been resolved. Both undergraduates and postgraduates had seen an improvement in the availability of clinical notes, a problem which had been fed through class representatives and Student/Staff Liaison Committees.

5.2 The Review Panel noted the School’s impressive overall results in the NSS (overall response rate in 2009 was 91%), particularly in the area of Graduate Attributes. However on the matter of feedback the NSS 2009 results showed that only 62% of students completing the survey responded positively when asked if it was clear how students’ comments on the course had been acted on. The Panel noted from the SER that considerable efforts had been made by the School to ensure that students understood how student feedback was being translated to action.
5.3 The Review Panel noted the apparent success of the feedback system and the benefits which had been highlighted for undergraduates (Para 3.6.7) and formed the impression that gains were already being made in the area of student feedback.

5.4 The Review Panel noted from the SER that the Dental School had several safeguards in place to ensure the primacy of education provision over health service needs in the BDS outreach placements. Several quality assurance and enhancement mechanisms were in place to achieve dissemination of good practice for outreach teachers and the appointment of a dedicated Outreach Administrator further strengthened the activity.

6. Summary of Perceived Strengths and Areas for Improvement in Learning and Teaching

The implementation of the 2004 curriculum and the overall management of the change processes in the Dental School over the last five years have been coordinated exceptionally well. The Review Panel commends the Head of School and the Senior Management Team for their effective management ability, positive attitude and ethos of education.

The Review Panel was satisfied during the course of meeting students at the review that the aims of both the BDS and postgraduate programmes which acknowledge the need to ‘produce competent, caring, ethical and reflective dental practitioners’ were met. Most notably the students of all levels who met with the Review Panel were motivated and confident and clearly enjoyed their learning experience.

The Panel was impressed by the students’ attitude and articulation and the enthusiasm and dedication of staff and commends the School on the sense of community and camaraderie that was evident.

Key strengths

- Effective Management;
- Sense of community and camaraderie;
- Integrative approach to review process;
- Exemplary SER that was comprehensive, well written, evaluative and reflective;
- Transparency of its alignment of ILOs with teaching and assessment;
- Production of independent and reflective learners through use of formative assignments;
- Approach to feedback and assessment;
- Management of the undergraduate learning experience;
- Outreach placements consolidating student learning;
- Robust, rigorous and transparent admissions process;
- Widening participation practice achieved through SWAPWest and GOALS;
- Support provided to students by secretarial staff;
- Strong professional relationship that exists between students and staff;
- Impressive and effective leadership through a period of substantial change;
• Student support mechanisms;
• Collegiality of its academic and administrative staff.

**Areas to be improved or enhanced**

• Feedback;
• The need to encourage more opportunities for the Graduate Teaching Assistants;
• Transparency of workload allocation;
• Communication with the University (Estates and Buildings) regarding funding streams.

**Conclusions and Recommendations**

**Conclusions**

The Review Panel was impressed with the exemplary leadership provided by the Head of School; the commitment of Senior Management; the collegiate environment engendered by the close staff interactions in the School; the stringent selection and admissions system; the widening access programme SWAPWest and GOALS; the excellent student support system including, but not limited to, pastoral support – a system which extends from admission to graduation; the focus on personal development of students, in particular reflective learning as well as the core business of professional competency.

The Review Panel was impressed by the professional, honest and inclusive approach the Dental School had adopted during the internal review process, which had resulted in a well written and reflective SER. Many of the questions the Panel had were addressed in the "Evaluative Statement" subsections of the SER, which revealed an extraordinarily high level of critical evaluation.

The Dental School has undergone a period of significant change since the last internal review. The progress made has been substantial; resulting in a major achievement in the successful implementation of a completely revised, fully integrated BDS curriculum. Added to this, a range of new postgraduate programmes have been launched and the Dental School has been reorganised into four sections to support and encourage interaction between research and teaching, in order that learning in a research environment is enhanced. The current structure has taken five years to achieve and the change has had considerable impact in terms of the student experience and research environment, as evidenced by the gains made in the Times Online ranking and RAE 2008.

The Review Panel’s considered view, after reading the SER and supporting documentation, and spending time in the Dental School during the course of the review, was that the complex interface with the NHS (both at a local and regional level) would benefit from having greater visibility with the Head of College. The Panel **recommends** that once the College of Medical, Veterinary and Life Sciences has bedded down one year post restructure, that the Head of College reflects on whether the Head of the Dental School should have a seat on the College Management Group and/or whether the Dental School should become a formal School within the College.
The Dental School has demonstrated a number of strengths throughout the review process. The reflective approach to the review has also resulted in a well developed awareness and recognition of areas in which it could improve. The most substantial of these are reflected in the recommendations captured below.

Recommendations

The recommendations interspersed in the preceding report are summarised below. It is important to note that the majority of these recommendations refer to tasks or issues identified by the Department for action either prior to the Review or in the SER. Some of these actions are already in hand.

The recommendations have been cross-referenced to the paragraphs in the text of the report to which they refer and are not ranked in any particular order.

In light of the restructuring of the University, recommendations have been redirected to the appropriate designates. Please note that the text of the recommendations has not been updated.

Feedback

Recommendation 1
The Review Panel recommends that the implementation of actions derived from the ‘Dental School Strategy for improving Feedback to Students’ should be monitored one year post review [Paragraph 3.3.8].

For the attention of: Head of Subject and Dean (Learning and Teaching), College of Medical, Veterinary and Life Sciences

Elective Placements

Recommendation 2
The Panel recommends that the Dental School continue with its work on risk assessment of elective placements particularly in countries with high prevalence of blood borne viruses. [Paragraph 3.4.8].

For the attention of: Head of Subject

Prayer Facilities

Recommendation 3
The Review Panel recommends that the course documents for PGT programmes be reviewed to clearly state that although the University does provide central prayer facilities, the Dental School Prayer Room would only be available during the lunchtime period [Paragraph 3.4.14].

For the attention of: Head of Subject

Recommendations will be re-directed, as appropriate, once roles in new University structure have been finalised.
**NHS Service Level Agreement**

**Recommendation 4**

The Review Panel recommends that the University and NHS Greater Glasgow and Clyde work with the Chief Dental Officer to review the Service Level Agreements (including those funded by ACT money) on an annual basis [Paragraph 3.8.3].

For the attention of: **Head of Subject**

and **Head of College of Medical, Veterinary and Life Sciences**

**Funding Streams**

**Recommendation 5**

The Review Panel recommends that the Dental School work with the University/Estates and Buildings to provide clarity on funding streams [Paragraph 3.8.6].

For the attention of: **Head of Subject**

and **Vice Principal (Strategy and Resource)**

**Accommodation**

**Recommendation 6**

The Review Panel recommends that Estates and Buildings is alerted to the poor condition of the Level 8 teaching space in the Dental School to ensure that it is prioritised appropriately in the University’s refurbishment programme for learning and teaching spaces [Paragraph 3.8.7].

For the attention of: **Head of Subject**

and **Director, Estates and Buildings**

**Library Access**

**Recommendation 7**

The Review Panel **recommends** that the Dental School discuss the perceived inadequacy of out of hours access to the library with NHS Greater Glasgow and Clyde, with a view to negotiating an improved access system for students. [Paragraph 3.8.8].

For the attention of: **Head of Subject**
Access to PCs

Recommendation 8

The Review Panel recommends that the Dental School continue to monitor student demand for access to PCs. [Paragraph 3.8.9].

For the attention of: Head of Subject

Learning Resources

Recommendation 9

The Review Panel recommends that provision of laptops for postgraduate taught students (Overseas) is considered as part of the review of postgraduate provision [Paragraph 3.8.10].

For the attention of: Head of School of Medicine

Wolfson Medical School Library Access

Recommendation 10

The Panel recommends that all Dental Students are permitted access to the Wolfson Medical School Library on a first come first served basis from the start of the academic session 2010-2011 [Paragraph 3.8.11].

For the attention of: Head of College of Medical, Veterinary and Life Sciences

Promotion Criteria

Recommendation 11

The Review Panel recommends that the Dental School initiates discussion with Human Resources and the Vice Principal (Learning and Teaching) to set out clear and attainable criteria for promotion from Senior Clinical Teacher to Chair [Paragraph 3.8.14].

For the attention of: Head of Subject

and Director, Human Resources

and Vice Principal (Learning and Teaching)
Workload Allocation

Recommendation 12
The Review Panel recommends that the Dental School should introduce greater transparency of staff workload allocation [Paragraph 3.8.16].

For the attention of: Head of Subject
and Head of School of Medicine

Graduate Teaching Assistants

Recommendation 13
The Review Panel recommends that the Dental School liaises with the Learning and Teaching Centre to ensure that all Graduate Teaching Assistants receive appropriate training [Paragraph 3.8.17].

For the attention of: Head of School of Medicine
and Director, Learning and Teaching Centre

University Restructuring

Recommendation 14
The Panel recommends that once the College of Medical, Veterinary and Life Sciences has bedded down one year post restructure, that the Head of College reflects on whether the Head of the Dental School should have a seat on the College Management Group and/or whether the Dental School should become a formal School within the College. [Paragraph Conclusions].

For the attention of: Head of School of Medicine
and Head of College of Medical, Veterinary and Life Sciences