Overview

Since the last review, the Dental School has continued to deliver excellent provision in undergraduate dental education. It has been a period of significant challenge with the Covid-19 pandemic, which has had a particular impact on dental education, and also a change of leadership with new appointments to Head of School, Director of Dental Education and School Manager.

As well as its position in the University, the Dental School has close relationships with the Dental Regulator, (General Dental Council) and the NHS. These relationships are carefully managed and constructive.

The School continues to demonstrate its commitment to providing an excellent experience for its students. Effective use is made of student feedback and there is strong partnership working between students and staff. This is reflected in the consistently excellent NSS results achieved by the School.

At the Review, the Panel met with Professor Aileen Bell (Head of School), Dr Alison Cairns, (Director of Dental Education) and Mr Frank Bonner (School Manager). The Senior School staff were joined by Senior NHS colleagues, Mr Lee Savarrio (Director of Dentistry) and Mrs Lisa Johnston (General Manager, Oral Health Directorate) for the first meeting of the day. This meeting was followed by meetings with undergraduate (UG) students representing all levels of the BDS programme and with a range of academic, clinical and professional services staff and early career staff. In the final session, the Panel met with the Head of School, the School Manager, the Head of College and the Dean (Learning & Teaching). Due to administrative oversight, the Head of the School of Medicine, Dentistry and Nursing was not present at the final meeting. This was rectified by a further meeting, post review, between representatives of the School of MD&N, the Dental School and the Review Panel.

1. Context and Strategy

Context

1.1. The Dental School is one of the three Schools forming the School of Medicine, Dentistry & Nursing which is based in the College of Medical, Veterinary & Life Sciences.

1.2. The School offers one UG degree programme.
• Bachelor of Dental Surgery (BDS)

1.3. The School also offers three PGT programmes which were reviewed as part of the College of Medical, Veterinary & Life Sciences Graduate School in 2020 and were not included in this review.

1.4. At the time of writing the Reflective Analysis, the breakdown of staff by category was:

- 57 Clinical staff (including 6 Professors)
- 20 Research and Teaching
- 22 Professional Services, Technical and Operations

1.5. Student numbers for session 2020-21 were:

- 404 Undergraduates (split into 5 year groups)

1.6. The number of UG students has been steady over the period of the review. Target numbers are set in accordance with the Scottish Government’s estimated dental workforce requirements and the Dental School has been successful in meeting these numbers. In its Reflective Analysis, the School notes that there have been more female students than male for a number of years and that the gap is gradually widening. This pattern is reflected across the sector but is being monitored [see 2.3 below].

Covid mitigations

1.7. The Panel recognised the challenges of dealing with the pandemic over the past two years. As an academic unit, the Dental School has had particularly difficult issues to deal with (close quarters working, aerosol generating procedures, ventilation). The programme is practical and not suited to online delivery. It must also maintain its responsibility of producing graduates who have the skills required to practise safely.

1.8. The Panel commends the School on its sustained effort throughout the pandemic to maintain the sense of community in the School and to find positive opportunities for development, such as more collaborative and improved relationships with NHS and other bodies involved in Dental Education. The Panel agreed with the School that some of the necessary adaptations had brought benefits that could be retained for the future.

1.9. The NHS representatives who met with Panel were appreciative of the close working relationships with the School. They acknowledged that these had been instrumental in being able to maintain some teaching for students throughout the pandemic while some other Schools had closed completely.

General Dental Council

1.10. The General Dental Council (GDC) acts as regulator for all dental education and is responsible for the strong regulation of the curriculum and delivery for all Dental Schools. The School had received a very positive outcome following its last major review by the GDC but has experienced additional targeted inspections which were put in place during the pandemic to allow the GDC to assure itself that students were receiving adequate levels of teaching and practice. It was noted that the GDC judgements tended to be based on numbers of activities rather than consideration of competency and capability achieved by each student, which would be preferred by the School. The combined burden of review by the GDC and by the University was
considerable therefore the School’s Professional Services staff were actively seeking new and more efficient methods of collecting the documentary evidence required. The Panel endorsed the Head of School’s recognition of the high-quality support and much valued contribution of the Dental School Professional Services Team to the full range of the School’s activity.

1.11. The Panel noted that the management structure within the School was complex. The Head of School explained that it was necessary to support the close relationships with the NHS and other stakeholders, as well as to fulfil responsibilities to the University. There was general understanding amongst staff of the purpose of each committee and working group. Staff valued the input from NHS colleagues that was facilitated by the various committees. This input had established a strong foundation for the BDS programme and had enabled it to withstand disturbances such as the pandemic. The NHS representatives agreed with this view, noting that it was a mutually beneficial relationship. If the Dental School was operating at a high level, the Dental hospital followed suit, which helped the NHS and the School to attract the best staff.

Previous Review

1.12. The previous periodic subject review of the Dental School took place in March 2016. The conclusion of the review noted the dedication and enthusiasm of the committed, skilled staff who had a firm focus on excellence in teaching and support for students, and good awareness of areas for improvement. The student groups were enthusiastic and positive, and a credit to the School. Overall, the Panel expressed its view that the Dental School had been among the best units reviewed by Panel members in terms of their provision in areas including teaching, student rapport and feedback.

1.13. The Panel was satisfied that the School had addressed all the recommendations made in the previous report. It noted that several of the themes identified in this review were related to previous recommendations, e.g. succession planning, mentoring for students, teaching of life science topics. The Panel regarded this as an indication that the School had continued to give these matters attention in the period between reviews. Updated information on these themes was provided throughout the review and discussion is recorded in the relevant sections below.

Strategy

1.14. The Panel was very impressed with the rapid adjustments made by the Dental School in response to the pandemic. This included the introduction of single occupancy pods to address ventilation issues. The use of pods reduced the number of students that could be supervised by each staff member and thus required additional staff resources. To date, additional funding of £500k had been provided by the NHS/Scottish Government but this would come to an end in June 2022, however, the need to provide increased ventilation in clinics is expected to continue well into the future. The Head of School indicated that arrangements were in place to secure funding to maintain the number of teaching sessions for each student through the summer and part way into 2022-23 academic year. The Panel recognised that the ending of this additional funding would have a significant impact on the ability of the School to deliver its teaching commitments to the students. While the allocation of resources is outwith the remit of the Periodic Subject Review, the Panel recommends that the College and the School of Medicine, Dentistry & Nursing liaise with and support the Dental School to identify and agree on sustainable solutions that will address the need for additional supervisors for as long as is necessary. The agreed solutions should be communicated to staff as soon as is reasonably possible in order to reassure them that plans are in place.
1.15. The College of Medical, Veterinary & Life Sciences was currently engaged in restructuring. As noted above, the Dental School sits within the overarching School of Medicine, Dentistry & Nursing, which in turn sits within the College. The main focus of discussion was how leadership roles at each level would work. The Dental School had been fully involved in consultations and the Head of School was positive about the potential for advantageous collaborations in the new structure.

1.16. The Panel noted that the previous Periodic Subject Review Report had included recommendations on succession planning. Professor Bell had recently been appointed as the new Head of School, along with a number of other key appointments to Director of Dental Education and School Manager. A further number of senior staff would be retiring in the upcoming years therefore the challenge of replacing staff and ensuring continuity was still a challenge for the School. The Head of School informed the Panel that her predecessor had provided her and her colleagues opportunities to develop leadership skills and to take on key roles in the School. It was the intention of the current management team to continue this approach. The Panel also discussed with the School general difficulties in recruiting staff with experience of academic roles as well as finding clinical staff who are prepared to move to a new location. It was noted that recruitment was particularly difficult in some specialisms, e.g. restorative dentistry, and that discussions were underway with the NHS to find ways to manage this, e.g. retaining experienced individuals on consultancy basis after retirement. The key staff who met with the Panel expressed the view that the issues related to the small pool of experienced people rather than any issues with the location or the School itself. Staff commented that colleagues tended to be loyal to their home institutions and, more recently, have been wary about relocating because of the pandemic.

2. The Student Experience

Admission and Progression

2.1. Within the BDS programme, student numbers were strictly controlled by the Scottish Government based on their estimated workforce requirements. While the overall targets were outwith the School’s control, it should be noted that the School must still compete to attract the best students. This drives the School’s attention to maintaining its excellent reputation through the quality of graduates, NSS results and position in league tables. It was also noted from the student data provided to the Panel that the School’s continuation and progression rates were stable and very high.

2.2. International student numbers are also strictly controlled and have been limited to 11 since 2014. There is scope to recruit another 10 international students to the third year of the programme through arrangements with the International Medical University in Malaysia and the University of Brunei, Darussalam. The majority of students on the programme are Home/RUK (84%). The balance is thus heavily skewed to Home/RUK but it is stable and outwith the School’s control to adjust in any significant way.

2.3. The Scottish Government recruitment targets include a sub-target to recruit a proportion of students from SIMD20/40 postcodes (Scottish Index of Multiple Deprivation). The School is currently achieving 22%, which is an improvement on 12% in 2017 but not yet matching the College total of 30%. The Panel noted that this was a steadily improving trend and was satisfied that the School was addressing widening access through various initiatives such as the “Becoming a Dentist” MOOC and the use of Multiple Mini Interviews.
2.4. The Panel also **commends** the School on its “Becoming a Dentist” MOOC (Massive Open Online Course) which was developed to mitigate the impact of Covid on applicants who have had fewer opportunities to undertake work shadowing before applying. The MOOC was launched in 2021 and provides advice about admissions and useful information about the profession of Dentistry to aid understanding and expectations. The students who met with the Panel were aware of the MOOC and welcomed it though they had not had the opportunity to experience it themselves. Some of the students who met with the Panel had been involved in the development of the course and commented that the tips and advice on dealing with first patients would be particularly useful for new students as they remembered it being a daunting prospect. The MOOC was open to everyone and not restricted to University of Glasgow applicants.

**Equality and Diversity**

2.5. The School has introduced a number of measures to ensure that the admissions process is as equitable as possible. The Panel **commends** the introduction of Multiple Mini Interviews (MMIs) which have replaced traditional interviews. MMIs expose applicants to more than one interviewer thus minimising the effect of unintentional bias. Both applicants and interviewers are very positive about the process and give consistently good feedback\(^1\).

2.6. A notable trend in recent cohorts is gender balance. There have been more female students than male for a number of years and the gap has gradually increased over recent years (66% female in 2020 from 61% in 2017). This pattern is common in Dental Schools nationwide and reflects the gender balance of applications received. The School reported that the profession as a whole was concerned to increase the number of male students to balance the future workforce. It was also noted that similar patterns are seen in other subject areas and that gender balance is a common theme of discussion for the University and the sector.

### 3. Enhancement in Learning and Teaching

#### Curriculum design and content

3.1. The Panel noted that the GDC provided a detailed framework for Intended Learning Outcomes (ILOs) which the School was required to adhere to. There was some flexibility for the School on whether to map its own ILOs to the GDC framework or to use the GDC’s directly. The Dental School preferred to use their own ILOs which allowed them to align with University practice as well as with the GDC framework.

3.2. The students who met with the Panel commented positively on the BDS ILOs. They found them useful for understanding their personal progress, strengths and weaknesses. There were, however, some suggestions for improvement such as providing a simpler overview with the ability to drill down to specifics as they were needed and clarifying the scale of teaching involved in each section to enable planning and accurate expectations of the work involved.

3.3. The Panel heard that the GDC was in the process of revising its ILO framework with publication expected in November 2022. Publication had been delayed by the pandemic but the School had agreed to wait for the GDC requirements before beginning work on rewriting their own ILOs.

\(^1\) Following the review, the School clarified that the Admissions team had paused the use of MMIs in favour of online interviews while travel to interviews remained problematic for candidates. This would be reviewed in due course as part of pandemic recovery work.
The Panel supported this as the most efficient approach to ensuring that the new ILOs incorporated both the School and GDC requirements fully. The School was looking forward to the project as staff were conscious of the need to update the language used and to embed equality, diversity and inclusion. The School explained that ILOs were central to student engagement with the programme with each activity being matched to an ILO. ILOs were also central to monitoring student performance using the LIFTUPP² system.

3.4. The Panel found the current BDS ILOs to be comprehensive and detailed and well thought out if somewhat unwieldy. The Panel recommends that, as part of the forthcoming work on ILOs, the School, with assistance from Academic and Digital Development, reviews the language and methods of communicating ILOs to students to facilitate understanding and accessibility.

3.5. The Outreach programme is a central component of the BDS whereby teaching and clinical experience are delivered in community-based dentistry clinics. Paediatric clinics begin in BDS3 and continue through BDS4 and 5, and adult clinics take place throughout BDS5. The Panel heard from the students who they met that, while they were very appreciative of the experience gained through these clinics, there was some dissatisfaction due to the variability of experience arising from patient availability. The students were concerned that this could impact on their ability to meet course requirements at later stages. Through discussion it became apparent that the criticism was linked to Paediatric Outreach clinics in third year. The School explained that the aim of these clinics was to develop communication and history taking skills in preparation for future placements where clinical skills would be developed. It was suggested that students might have unrealistic expectations about the experience that could be delivered through Outreach at BDS3. The Panel recommends that the School review the information provided to students on the BDS3 Paediatric Outreach clinics to ensure that student experience matches their expectations.

3.6. The Panel discussed Special Study Modules with the students who they met. These modules were normally available in the final year but had been a lower priority for most students while they were catching up on clinical experience missed during the pandemic. The students agreed that the SSMs provided them with an important opportunity to focus on developing particular interests, e.g. aesthetics, technology, virtual and digital dentistry, that they might not have after graduation.

**L&T Delivery**

3.7. The sudden onset of the pandemic was extremely challenging for all parts of the University but there were particular issues to be addressed by the Dental School in relation to managing a programme requiring extensive teaching of practical skills. There were a number of innovative activities introduced by staff to provide some practical teaching when face-to-face opportunities were not possible or limited. For example, students were able to collect suturing packs from the School to take home. They then followed instructions provided in small group online teaching events and were able to practice at home. The feedback from students and staff was very good with comments showing appreciation of the chance to do some practical work and the chance to practice in their own environment without being watched. The Panel

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² Liftupp is a continuous longitudinal assessment and student development tool used in Dental Schools across the UK. It is used to record student clinical activity and performance throughout undergraduate dental training. Both staff and students have access to the data and can monitor achievements and topics requiring improvement.
commends the School on its efforts to maintain teaching of practical skills throughout the time when in-person interactions were restricted.

**Graduate Attributes and Employability**

3.8. The students who met with the Panel reported that the tone of the programme was set from the beginning of BDS1. The students perceived that staff viewed them as junior colleagues and they were very clear that they were expected to behave in a professional manner throughout their studies. They noted that staff regularly referred them to current professional guidelines used by Dentists in practice which added to the currency and realism of the taught experience. The Panel was impressed by the effect that the staff approach to students as junior colleagues appeared to have on the students in terms of their confidence and attitudes to their studies and considered it to be very good practice.

3.9. The students who met with the Panel had appreciated opportunities to meet with alumni of the Dental School including members of staff who were also graduates of the School. It was unfortunate that alumni events had been paused due to Covid and they hoped that these would return in the near future. There was also appreciation of opportunities to get to know senior students. The students recognised this, along with alumni connections, as the first steps in building their professional networks.

**Assessment and Feedback**

3.10. Student performance and engagement is actively monitored by the School using various methods. All students are reviewed by the Clinical Development And Performance Panel, which meets at least 3 times per year. The Panel identifies students who require extra support and this is monitored closely by the Panel, the Year Team and the Clinical Specialty Leads. Attendance, submission of assignments, academic performance and clinical development (via LIFTUPP) is tracked by the Year Team, with intervention, support and targeted training implemented as required. In addition, staff mentors track attendance at the mentorship programme events and submission of assignments that are related to the mentorship programme and Student Support Advisors are available for students to approach if they require any form of support (personal or academic). The Panel viewed the School’s attention to monitoring student progress and performance as good practice.

3.11. The Panel noted a theme in student feedback around consistency of marking in clinical assessments. The School’s responses were discussed in the Reflective Analysis. The Panel discussed clinical assessments in their meetings with students and key staff to refine their understanding of the issue. The students who met with the Panel commented that they had had different experiences with different clinicians, however, there was general agreement that there had been improvement in the last year which was attributed to the School’s interventions. The key staff were all aware of the feedback from students on this issue. They recognised the potential for variation between different markers which was being addressed by education, monitoring/calibration and regular reminders to staff. There was a suggestion that “student training” might also be useful to ensure understanding of the purpose of the assessments and to draw attention to the benefits of exposure to different assessors. It was noted that the issue had affected BDS3, in particular. Staff reported, anecdotally, that these students had felt that they had been marked harshly at the time but, as they progressed, they had come to understand their results and how these assessments contributed to the overall programme.
3.12. The Panel acknowledged that the Dental School had responded to the concerns raised by students and had put in place training and calibration measures. Ensuring consistency in marking is not a unique issue and the Panel were satisfied that the School was giving it proper attention. The Panel noticed a slight divergence between the staff and student perception of the assessments and expectations at each stage. The Panel recommends that the School review communications with students around clinical assessments to improve understanding of the purpose and expectations at each stage. This should incorporate guidance on LIFTUPP as a developmental tool providing feedback on skills to improve rather than a record of scores.

3.13. The Panel was impressed by the senior students input to the discussion on this topic and suggests that the School enlist their help in this work.

Supporting Staff

3.14. The Panel noted that there were several different categories of staff on different types of contract. Some were clinical staff funded by the NHS, others academic staff employed by the University. The School confirmed that all staff participated in development events and received the same information and support for their teaching roles regardless of contract type. The Panel was pleased to hear that the NHS also encouraged clinical staff to undertake academic development as part of their ongoing development. The Panel identified good practice in the School’s inclusive approach to staff development through all staff events and meetings to facilitate sharing of good practices.

3.15. There was some discussion of the use of workload models for staff. The School had attempted to engage with the University Workload model in the early stages of its development but it had not been possible to accommodate clinical teaching within it. Workloads within the School were managed by Sectional Leads using various tools such as timetables, job planning and Performance Development Review (PDR). Staff who met with the Panel appeared to be content that workload was distributed fairly and that both management and teaching roles were recognised.

3.16. The Panel noted that some members of staff had significant roles in student support. They explored the recognition of these roles and the support for staff to develop relevant skills during the meetings with the management team and the key staff. The six members of staff who make up the Student Adviser Team had volunteered for the role. Their work was supported by the Chief Adviser who was linked into the University’s Adviser of Studies network and had responsibility for monitoring the team’s workload and ensuring that the Student Advisers understood their remit and did not seek to offer advice that they were not qualified to give. The Chief Adviser acted as a lead for the School’s student wellbeing activity and allocated a portion of their scholarship time to developing their knowledge and skills in this area. Conscious of the potential single point of failure, they disseminate their learning to the other members of the Adviser Team regularly.

3.17. In support of staff wellbeing, the School includes all staff in circulations about wellbeing resources that are provided to students where the resources are not student specific. Clinical staff also have access to NHS resources on staff wellbeing.

3.18. The Panel was very impressed by the positivity expressed by the staff that they met. The Panel acknowledged that staff would be extremely tired from the sustained effort of adjusting to the consequences of the pandemic and that their capacity to adapt and cope with further change
was likely to be reduced. The Panel commends the School Staff for maintaining their enthusiasm throughout recent challenging times.

**Support for Early Career Staff**

3.19. The Panel asked the Early Career Staff who they met to comment on their experience of the Postgraduate Certificate in Academic Practice (PGCAP). There was agreement that the programme was enjoyable and useful although some had been skeptical in the early stages. It had been helpful in developing understanding of the role beyond lecturing to assessment, course design etc. The staff at the meeting confirmed that they had had workload recognition of their participation in the programme and also that it had also been possible to defer the programme when required.

3.20. The Early Career staff reported that they received good support from their line managers and from other staff. They were included in the full range of the School’s committees which were mostly useful and provided opportunities for sharing practice and discussing challenges. In particular, they found the Community in Dental Educational Research and Scholarship (CiDERS) events to be very productive.

3.21. The Panel was again impressed by the positive and refreshing attitude conveyed by the Early Career Staff who they met and by compelling examples of support provided to staff. The Panel commends the School on nurturing a strong, cohesive and supportive community amongst its various staff groups and for the resilience demonstrated by staff through recent challenges.

4. **Student Support** The Panel was very interested to hear about the Dental School student support systems. There were six Advisers of Studies, led by a Chief Adviser, who provided pastoral support and links to Student Services as required. The School’s advising system was complemented by a student mentorship programme whereby all members of staff were teamed with a small group of students to provide academic support and guidance. This was focused on academic development as there was no need for the traditional adviser role of assisting with enrolment etc. due to the prescribed nature of the curriculum. There was also a system of Peer mentors where senior students provided academic support to other students. Both types of student mentorship was very well received by the students. The Panel was impressed by the range of support provided but found it quite complicated in terms of understanding which systems students should access in which circumstances. While staff and students clearly understood the support systems that were in place, the Panel recommends that the School review the structures with a view to exploring opportunities to simplify. (The Panel recognised that the conclusion of this review might be to retain existing arrangements)

4.2. The Panel was aware that much attention had been given throughout the pandemic to the senior years and to the new entrants with many adjustments made for these groups. The Panel had been impressed by the acceptance and understanding of the students with whom they met of the unexpected changes to delivery of their programme, not least the requirement for an additional year of study. In discussion of Covid impacts, it was apparent that the BDS3 students had been exposed to a range of disruptions that were less immediate than those for other groups. One of the main issues seemed to be linked to their understanding of their place in the programme and their expectations of their learning progress, which seemed to have suffered from the lack of informal interactions with other students and staff, previously enabled by physical presence in the School building. The Panel recommends that the School considers how best to promote integration and a sense of community for the current BDS3 cohort prior to the
next academic session, including informal and enjoyable activities. Again, the senior students would be a valuable asset to assist in this.

4.3. The School was aware of the new Student Support Officer (SSO) roles being appointed across the University. There had been a suggestion that one of the SSOs would have a portion of their time dedicated to the Dental School to take some of the routine work of signposting to other services away from School’s Advisers. An allocation of one day per week was put in place but, as it became clear that staff and students were tending to access information via other routes, the post was re-allocated elsewhere in the College. There was a possibility this might be revisited as part of the restructuring of the College. Meantime, the Panel was reassured that the School’s current support systems would continue to ensure that students had the information they needed to access University Services.

5. The Student Voice

Responding to student feedback and closure of the feedback loop

5.1. The students who met with the Panel were satisfied that their opinions and feedback were well received and acted upon. They confirmed that they had been able to comment on the Reflective Analysis via the Learning & Teaching Committee. They gave a number of examples of their input leading to positive change such as requesting images of people of colour in course materials. These were now appearing in course materials and contributing to the “decolonising the curriculum” agenda. They also noted that there were opportunities to input into programme development and that they were able to bring forward ideas that would be actively considered, especially where they were able to demonstrate support and interest from fellow students. There was acceptance that the School was not able to take on board all suggestions because reasons were provided.

5.2. The students who met with the Panel agreed with the statements in the reflective Analysis around student partnership. They described an example of a paper on Equality, Diversity & Inclusion that had been presented to the School by students. The paper had led to a working group which took forward a project in partnership with equal contributions from students and staff. The students articulated how this approach had built confidence of those involved in the proposal through seeing their ideas taken forward and being involved in resolving the challenges of implementing change.

5.3. The Panel considers the School’s inclusive approach to student involvement in the management and development of the BDS programme to be good practice. Students are represented and take an active partnership role in most committees.

National Student Survey (NSS)

5.4. The Dental School receives consistently high scores in the NSS and rankings in league tables. The Reflective Analysis demonstrates throughout that scores for individual questions in the NSS are fully considered and acted upon.

5.5. The School did not participate in the 2021 NSS due to the course extension necessitated by the pandemic which meant that the BDS5 students did not complete their studies in that year. The results from the 2020 NSS show:

- 94.4% satisfaction with teaching
• 97.6% satisfaction for learning opportunities
• 92.6% satisfaction for assessment and feedback
• 98.6% overall satisfaction.

5.6. All these scores exceed institutional targets and sector averages by significant margins (overall satisfaction sector average is 85.1%). The lowest-scoring section for the Dental School is Organisation & Management which is still 20.9% over the sector average.

5.7. There is some concern over results for the next NSS and an expectation that scores will decrease because of the extreme impact of the pandemic on Dental education. The Panel agreed that this was to be expected but welcomed the School’s forward planning discussions about ‘building back better’ in partnership with students and was reassured by the positive attitude of the students that they met who expressed understanding of the circumstances and appreciation of the School’s efforts during challenging times.

6. **Collaborative Provision** The Panel was aware that the College of Medicine, Veterinary Medicine, & Life Sciences was in the process of restructuring. The restructuring had changed the arrangements for the Dental School to access essential teaching in the subject area of Life Sciences. Some Life Sciences specialist posts would now be located in a more integrated position in the School of Medicine, Dentistry & Nursing e.g. a post had recently been appointed to deliver microbiology teaching specifically for the Dental School and the School of Nursing. The School welcomed this development which was intended to offer more secure access to these staff.

6.2. The Panel noted a number of other teaching links between the Dental School and other institutions. The School had expressed a desire to see more development in interdisciplinary teaching in its Reflective Analysis and the Panel would encourage this. The Panel **recommends** that the Dental School take a strategic approach to exploring further opportunities for interdisciplinary teaching, both inward and outward. Recognising that some prioritisation will be necessary, consideration should be given to the relevant costs and benefits on both sides.

7. **Academic Standards**

7.1. The Panel confirmed there were no concerns regarding the academic standards of the Bachelor of Dental Surgery delivered by the Dental School and recommended the validation of the programme for a further six years.

7.2. The Panel confirmed the School had a transparent academic governance and quality assurance structure which aligned to the University regulatory framework while incorporating the School’s responsibilities to the NHS and GDC.

7.3. External Examiners play an important role in relation to academic standards and are consulted on course and programme design, assessments, including examinations, and any other significant changes in the School.

7.4. The School was inspected by the General Dental Council in 2019 which resulted in the successful outcome that “the BDS continues to be sufficient for the graduating cohort to register as a dentist”. The report commented that the programme team demonstrated strong leadership, with good and effective communication structures in place that were clear to managers, staff and students; Leaders demonstrated the existence of strong partnerships with
key parties; and students were well presented, engaging and confidently articulated a good level of understanding of the expectations over the five years of the course. It also highlighted the Outreach Programme, the mentoring programme and the use of LIFTUPP as key highlights.

8. Summary

8.1. The Dental School has continued to demonstrate a highly effective commitment to delivering an excellent, high quality programme and student experience to its students throughout the period since the last review. The School’s students are being supported to achieve excellent academic results and to engage fully with other aspects of their education that promote their development into articulate and able professionals who are a huge credit to the School. Feedback from NHS colleagues clearly shows that the School is highly valued amongst clinical colleagues and that the relationships between the NHS and the School are mutually supportive and working well. The School also has the confidence of its regulatory body, the GDC.

8.2. It is a credit to the School and its staff and students that this position has been maintained through the most difficult of times. The pandemic has been significantly more disruptive to Dental education than in other areas of the University but the Dental School has managed the disruption in an exemplary fashion. The positive outlook maintained by staff and students after a sustained period of stress was remarkable. The School is now beginning to emerge from restrictions with positivity and its sense of community intact. While the impacts of the pandemic will no doubt continue for some time, the Panel is confident that the School will build on the experience constructively.

8.3. In its Reflective Analysis, the School highlighted a number of areas where they wished to make improvements. The Panel encourages the School to move forward with these and has added a small number of recommendations intended to help the School make progress. It should be clear that these recommendations are small adjustments and none represent any major concerns.

9. Commendations

The Panel commends the School on the following

- The sustained effort throughout the pandemic to maintain the sense of community in the School and to find positive opportunities for development, such as more collaborative and improved relationships with NHS and other bodies involved in Dental Education. The Panel agreed with the School that some of the necessary adaptations had brought benefits that could be retained for the future. [Para 1.8 & 3.21]

- Nurturing a strong, cohesive and supportive community amongst its various staff groups and for the resilience demonstrated by staff through recent challenges. [Para 3.21]

- The individual positivity and enthusiasm expressed by the key staff and the early career staff that the Panel met, despite the effects of the sustained effort of adjusting to the consequences of the pandemic over a considerable time. [Para 3.18]

- The high-quality support and much valued contribution of the Dental School Professional Services Team to the full range of the School’s activity. [Para 1.10]
• The “Becoming a Dentist” MOOC (Massive Open Online Course) which was developed to mitigate the impact of Covid on applicants who have had fewer opportunities to undertake work shadowing before applying. [Para 2.4]

• The introduction of Multiple Mini Interviews (MMIs) which have replaced traditional interviews. MMIs expose applicants to more than one interviewer thus minimising the effect of unintentional bias. [Para 2.5]

• Maintaining teaching of practical skills throughout the time when in-person interactions were restricted using inventive new methods. [Para 3.7]

10. Good Practice

• The Panel was impressed by the effect that the staff approach to students as junior colleagues appeared to have on the students in terms of their confidence and attitudes to their studies and considered it to be very good practice. [Para 3.8]

• The Panel viewed the School’s attention to monitoring student progress and performance as good practice. [Para 3.10]

• The Panel identified good practice in the School’s inclusive approach to staff development through all staff events and meetings to facilitate sharing of good practices. [Para 3.14]

• The Panel considers the School’s inclusive approach to student involvement in the management and development of the BDS programme to be good practice. Students are represented and take an active partnership role in most committees. [Para 5.3]

11. Recommendations for Enhancement

The table of recommendations for enhancement is attached.
PERIODIC SUBJECT REVIEW OF THE DENTAL SCHOOL

RECOMMENDATIONS

These recommendations to the Dental School are made in the context of a very positive review. The Panel was very impressed by the School, the Leadership team, the staff and the students. The full report includes further commentary and commendations on many aspects of the School’s activities.

<table>
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<tr>
<th>Strategy for Development</th>
<th>Enhancement Benefits</th>
<th>For the attention of</th>
<th>For information</th>
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<tr>
<td>1. The Panel was very impressed with the rapid adjustments made by the Dental School in response to the pandemic. This included the introduction of single occupancy pods to address ventilation issues. The use of pods reduces the number of students that can be supervised by each staff member and thus requires additional staff resource. To date, additional funding of £500k has been provided by the NHS/Scottish Government but this will come to an end in June 2022. However, the need to provide increased ventilation remains and is expected to continue well into the future. The Head of School indicated that arrangements were in place to secure funding to maintain the number of teaching sessions through the summer and part way into 2022-23 academic year. The Panel recognised that the ending of this additional resource would have a significant impact on the ability of the School to deliver its teaching commitments to the students. While the allocation of resources is outwith the remit of the Periodic Subject Review, the Panel <strong>recommends</strong> that the College and the School of Medicine, Dentistry &amp; Nursing liaise with and support the Dental School to identify and agree on sustainable solutions that will address the need for additional supervisors for as long as is necessary. The agreed solutions should be communicated to staff as soon as is reasonably possible in order to reassure them that plans are in place.</td>
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<td>To ensure academic standards are maintained</td>
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<td>Head of College</td>
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<td>Head of Dental School</td>
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<td>Para 1.13</td>
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2. The Panel was aware that the College of Medicine, Veterinary Medicine & Life Sciences was in the process of restructuring the College. The restructuring had changed the arrangements for the Dental School to access essential teaching of life sciences, giving these staff to have a more integrated position in the School of Medicine, Dentistry & Nursing (including a recently appointed post to teach microbiology in the Dental School and the School of Nursing). The Panel also noted a number of other teaching links between the Dental School and other institutions. The School had expressed a desire to see more development in interdisciplinary teaching in its Reflective Analysis and the Panel would encourage this. The Panel **recommends** that the Dental School take a strategic approach to exploring further opportunities for interdisciplinary teaching, both inward and outward. Recognising that some prioritisation will be necessary, consideration should be given to the relevant costs and benefits on both sides.

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<th>Enhancement in Learning and Teaching</th>
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<th>For information</th>
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<tr>
<td>Improve the student learning experience by accessing expertise from across the University; Support the wider academic community and build relationships by offering expertise to other programmes</td>
<td>Head of College</td>
<td>Para 6.1</td>
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<td>Head of School of SMDN</td>
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3. The Panel acknowledged that the Dental School had responded to the concerns raised by students [regarding inconsistent marking] and had put in place training and calibration measures. Ensuring consistency in marking is not a unique issue and the Panel were satisfied that the School was giving it proper attention. The Panel noticed a slight divergence between the staff and student perception of the assessments and expectations at each stage. The Panel **recommends** that the School review communications with students around clinical assessments to improve understanding of the purpose and expectations at each stage. This should incorporate guidance on LIFTUPP as a developmental tool providing feedback on skills to improve rather than a record of scores.

The Panel was impressed by the senior students input to the discussion on this topic and suggests that the School enlist their help in this work.

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<th>Assessment and Feedback</th>
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<td>Improve clarity of assessment purpose and student engagement with, and understanding of, achieving ILOs</td>
<td>Head of School</td>
<td>Para 3.12</td>
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### Curriculum Design

4. The Panel noted that the School had delayed review of its ILOs to await new requirements from the General Dental Council. The new information was expected to be delivered in November 2022. The Panel supported the School’s approach as the GDC’s new requirements would need to be incorporated.

   On reviewing the School’s current ILOs, the Panel found them thorough and well thought out but somewhat unwieldy. The Panel **recommends** that, as part of the forthcoming work on ILOs, the School, with assistance from Academic & Digital Development, reviews the language and methods of communicating ILOs to students to facilitate understanding and accessibility.

   To enhance the student learning experience by improving student assessment literacy and success

   **Head of School**  
   Para 3.4

5. The Outreach programme is a central component of the BDS. Students are very appreciative of the experience they gain through it. The Panel heard from the students who they met that there was some dissatisfaction with the outreach clinics where the experience appeared to be very variably dependent on patient availability. The students were concerned that this would impact on their ability to meet requirements at later stages. Through discussion it became apparent that the criticism was focused on Paediatric Outreach clinics in third year. The School explained that the aim of these clinics was to develop communication and history taking skills in preparation for future placements where clinical skills were the focus and suggested that students might have unrealistic expectations about the experience that could be delivered through Outreach at BDS3. The Panel **recommends** that the School review the information provided to students on the Paediatric Outreach clinics to that experience matches expectations.

   To enhance the student learning experience by improving student and clarity of purpose

   **Head of School**  
   Para 3.5

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### Supporting Student Wellbeing

#### Enhancement Benefits

**Student Support**

6. The Panel was very interested to hear about the Dental School Student Support systems. There were six Advisers of Studies, led by a Chief Adviser, ensuring effective student support

   **Head of Dental School**  
   Para 4.1
who provided pastoral support and links to Student Services as required. The School’s advising system was complemented by a Student Mentorship programme whereby all members of staff were teemed with a small group of students to provide academic support and guidance. This was focused on academic development as there was no need for the traditional adviser role of assisting with enrolment etc. due to the proscribed nature of the curriculum. There was also a system of Peer mentors where senior students provided academic support to other students. Both types of student mentorship was very well received by the students. The Panel was impressed by the range of support provided but found it quite complicated in terms of understanding which systems students should access in which circumstances. While staff and students clearly understood the support systems that were in place, the Panel recommends that the School review the structures with a view to exploring opportunities to simplify. (The Panel recognised that the conclusion of this review might be to retain existing arrangements).

| 7. | The Panel was aware that much attention had been given throughout the pandemic to the senior years and to the new entrants with many adjustments made for each group. The Panel had been impressed by the acceptance and understanding of the students with whom they met of the unexpected changes to delivery of their programme, not least the requirement for an additional year of study. In discussion of Covid impacts, it was apparent that the BDS3 group of students had been exposed to a range of disruptions that were less immediate than those for other groups. One of the main issues seemed to be linked to their understanding of their place in the programme and their expectations of their learning progress, which seemed to have suffered from the lack of informal interactions with other students and staff, previously enabled by physical presence in the School building. The Panel recommends that the School considers how best to promote integration and a sense of community for the current BDS3 cohort prior to the next academic session, including informal and enjoyable activities. Again, the senior students would be a valuable asset to assist in this. |
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Ensuring effective student support  
Head of Dental School  
Para 4.2