University of Glasgow

Academic Standards Committee - Friday 24 March 2017

Responses to Recommendations Arising from Periodic Subject Review of the Dental School held on 17 March 2016

Mrs Lesley Fielding, Clerk to the Review Panel

Recommendations

The following recommendations have been made to support the Dental School in its reflection and to enhance provision in relation to teaching, learning and assessment. The recommendations have been cross-referenced to the paragraphs in the text of the report to which they refer and are **grouped together** by the areas for improvement/enhancement and are **ranked in order of priority within each section**.

Recommendation 1

In order to safeguard and secure the excellent work undertaken by the Dental School, the Review Panel **recommends** that discussions take place with the School of Medicine and College to clarify reporting structures in order to minimise overlap, to avoid issues in Dentistry being overlooked and to improve communication between committees in the Dental School and those in the College and School of Medicine [Paragraph 3.1.5]

The Panel **recommends** that the College and School of Medicine, in conjunction with the Dental School should, in reviewing new and current programmes, balance potential income against competing demands upon staff resources. [Paragraph 4.1.5]

For action: Head of College, Head of School of Medicine, Head of Dental School

Joint Response:

The Head of the Dental School is also Deputy Head of the School of Medicine, Dentistry & Nursing (SoMDN) and so receives papers for the College Management Group and from time to time attends the College Management Group.

Reporting upwards and downwards between the Dental Education Committee, SoMDN Education Committee and MVLS College Learning & Teaching Committee and the College Board of Studies is being reinforced to ensure more effective communication. Robert McKerlie (Dental School) represents the SoMDN on the College Board of Studies. The postgraduate convenor in the SoMDN (Alastair Gracie) works closely with Andrea Sherriff in the Dental School, speaking with her on a regular basis about postgraduate matters. Dr Gracie is extremely supportive, though there is no official route for formal feedback on matters such as policy changes.

The Graduate School has reviewed all PGT programmes as part of its move to Clusters to ascertain where courses can be shared within clusters to reduce duplication and ensure efficient use of resources. The College and Graduate School is very aware of competing pressures on staff and is committed to ensuring the most efficient use of this precious resource. The College also makes serious consideration of marketing advice from MaRIO and our own College marketing leads before considering introducing any new programme, to ensure that the business case is a sound one. There were no new Masters (MSc) programmes for 2015/16 or 2016/17 proposed from the Dental School. There were two business cases recently prepared; one for the MSc in Oral Sciences (in July 2016) and one for a 20 credit course associated with the Child Smile project (in June 2016).

Recommendation 2

The Review Panel **recommends** that the Dental School should engage in succession planning to ensure continuity of leadership. [Paragraph 3.1.6]

For action: Head of Dental School

For information: Head of School of Medicine

Response:

The Dental School is aware that a small number of senior academic and MPA staff of longstanding and who hold leadership roles in the School are likely to be retiring before the next PSR. There are, however, a number of candidates within the School who would be eligible to assume these roles, and who are already participating at a high level in strategic planning and complex operational roles. We are, therefore, confident that succession planning is in place.

Recommendation 3

The Review Panel **recommends** that the Dental School, where possible, explore existing links for potential to extend current provision and build a wider postgraduate portfolio. [Paragraph 4.1.9]

For action: Head of Dental School

Response:

A new MSc programme in Oral Sciences has been developed and approved for commencement in 2018/19, aiming to recruit a minimum of 6 international students. This MSc has been developed to integrate into the new cluster structure, using key interdisciplinary courses to maximise efficiency. It has also enabled us to develop new courses that caters for students allied to the discipline, but which may also have a wider appeal within the cluster. These courses directly map to our research strengths and will provide access to well-trained prospective PhD students.

Additionally, academic staff members within the Community Oral Health section are developing a MSc in Childsmile, starting with a 20 credit course in 2017/18 and building into a full PGT programme in the coming years. This is aimed at home and international students with an interest in the design, development, implementation and evaluation of Childsmile (the highly successful Scottish national oral health improvement programme). We have estimated a minimum of 5 students and a maximum of 20 in the first year, and we will also run a non-accredited version of the course.

Recommendation 4

The Review Panel **recommends** that the College, School of Medicine and the Dental School continue to engage with Student Lifecycle Support and Development to discuss the Dental School's current systems with a view to identifying, where possible, methods to improve compatibility and integration with the University systems. [Paragraph 5.2.5]

For action: Head of College, Director, Student Lifecycle Support & Development, Head of School of Medicine, Head of Dental School

Response – Head of College and Head of School of Medicine

There has been a meeting between Dental school representatives and colleagues from SLSD. The meeting focused on the perceived problems that the Dental School was experiencing with MyCampus and CMIS and what the Dental School requires. The meeting

was positive and the group are confident that it will be able to make clear recommendations regarding changes to structures on MyCampus to address the issues encountered to date within the timescale required by ASC.

Response – Head of Dental School

Over the past year or so, interactions with the Student Lifecycle Support & Development (SLSD) team had been taking place at College level as part of the *Revolve* development project. This project set out to create a bespoke IT solution to manage aspects of the UG programmes in the College of MVLS, not currently possible within MyCampus. The development focus was on support for clinical placements, principally in undergraduate Medicine, since the existing platform that has been used by the MBChB programme, VALE, is at end of life.

The Dental School Senior Administrator requested the opportunity to meet directly with the SLSD team to talk through the particular difficulties relating to the timetabling of a complex clinical programme like Dentistry. An initial meeting took place in late October 2016. There was a suggestion from the SLSD team, under new leadership, that the advice provided previously to the Dental School on how courses and timetabling should be set up, which had caused such significant difficulties and resulted in the creation of multiple "dummy" courses, had been wrong.

It was then suggested by the SLSD team that the way to manage some of the current difficulties was to undertake a complete revision of the integrated academic structure of the BDS programme, i.e. breaking down each integrated year of teaching into component parts, timetabled separately and examined separately. The School Administrator, under clear guidance from senior academic staff, rejected this suggestion since it was contrary to the concept of integrated professional education, advocated by dentistry's professional regulator, the General Dental Council (GDC) and which has been strictly implemented by the academic staff in designing the BDS curriculum, resulting in strong praise from the GDC at its most recent visitation in 2013.

Immediately following that meeting, the School Administrator provided detailed background and information to the SLSD team and it was agreed that a further meeting would take place to discuss a potential way forward which would be acceptable to the academic staff in charge of course content and would not result in yet further unrealistic and excessive workload for the administrative staff. This further meeting is awaited but there is now significant concern that progress will not be possible within the very tight deadlines necessary for timetabling (i.e. major changes to be entered into CMIS by the end of April 2017). In summary, the central University systems for curriculum management and room bookings do not satisfy the requirements of modern integrated teaching methods in professional healthcare courses such as dentistry.

Response – Director of Student Lifecycle Support & Development

There has been one meeting between the Dental School and SLSD representatives.

The group reviewed the issues experienced by the School and acknowledged the volume of time and resource required to set up their programmes. The group concluded that this set up was driven by requirements, which were perceived rather than actual, of MyCampus and CMIS rather than by the needs of the School. The group then looked at the actual requirements of the School and considered these in the light of new functionality now available within MyCampus.

Progress:

- The Dental School has shared details of the learning outcomes which the programme adheres to. SLSD is reviewing this to better understand the Dental programme set up.
- SLSD has shared further guidance on 'Plan Building' in MyCampus so that the Dental School can revise current requirements to ignore 'dummy courses'. The MyCampus/CMIS interface is being reviewed to understand the drivers behind the volume of sub groups.

Recommendation 5

The Panel noted, from the SER, that the School of Medicine and SoLS were working to address the shortfall in life sciences subject specialist staff through the University Planning and Budgeting round to bid for staffing resources. The Panel would hope that this issue will be resolved in the near future and **recommends** that an update report be submitted on the status of life sciences teaching within the Dental School. [Paragraph 5.3.1]

For action: Head of School of Medicine, Head of Dental School

Response – Head of School of Medicine

As set out below, a school-wide process to review provision of LS teaching across SoMDN is underway, with a view to alternative arrangements for tuition in basic sciences across the professional programmes.

Response – Dental School

The situation in relation to life sciences teaching within the Dental School remains precarious. With the exception of gross anatomy, which is adequately covered, there are continuing significant gaps in the teaching of other life sciences subjects such as physiology, histology and neurosciences. Interactions with the School of Life Sciences have not been fruitful and much of the teaching is still being delivered by dental clinicians who are not subject experts. Following discussions with the Head of the School of Medicine, Dentistry & Nursing, and in the knowledge that similar problems exist for the other professional healthcare courses, we are actively examining alternative mechanisms for provision of inhouse life sciences expertise. This work is being undertaken in parallel with a review of the significant funding that flows from the professional courses to the School of Life Sciences in support of this teaching.

Recommendation 6

Whilst the postgraduate students were generally appreciative of the feedback provided they commented on some inconsistencies particularly in relation to core courses and expressed a preference for written feedback instead of verbal feedback. The Panel **recommends** that the Dental School review the current method of providing feedback to postgraduate students. [Paragraph 5.1.5.3]

The Panel **recommends** that the Dental School undertake steps to ensure that the postgraduate students are made aware of the formal processes for student representation. [Paragraph 4.5.3]

For action: Head of Dental School

Response:

In the last year, we have linked to the MVLS College teaching clusters for core courses, where feedback mechanisms such as Moodle forums, feedback lectures and written

feedback on summative assignments are in place. Feedback on clinical courses within the programmes continues to be highly rated.

We have four Postgraduate Management Committee meetings per year involving Programme Directors, Administrative staff and a student representative. Feedback forms are completed by the student representative in advance of these meetings and items are discussed by the committee. All PGT students have been emailed by the Director of Postgraduate Student affairs to inform them of their current representative, and posters have been placed on noticeboards in PGT student areas of the Dental School.

Recommendation 7

The Panel **recommends** that the Dental School and School of Medicine review support mechanisms for the mentoring programme to ensure that the difficulties identified with regard to leadership and training are addressed. [Paragraph 4.3.4]

For action: Head of School of Medicine, Head of Dental School

Response – Head of School of Medicine

The review of student mentoring arrangements within the Dental School is underway. Once complete this review will help inform best practice within the other programmes.

Response – Dental School

Even before the PSR visit, the Dental School had commissioned the Learning & Teaching Centre to undertake an external review of its student mentoring programme, with particular reference to staff training. The review was undertaken by a nominated member of staff from the L&TC and we suggested the following questions for consideration:

- 1. How should mentors be inducted and trained, and by whom?
- 2. Should mentors receive refresher training? How? How often?
- 3. How can we ensure that the mentoring role is reflected in PDR, workload modelling, reward and recognition, promotion?
- 4. Should we evaluate the mentoring scheme? How? How often?
- 5. Is the envisaged role of the mentor still appropriate? Are there purely administrative aspects of the role that could be done by someone else?
- 6. Who can/should be a mentor?
- 7. Is the model for submission of written reflections and the structure of mentor meetings still appropriate?
- 8. How should BDS1 students be inducted and trained, and by whom?
- 9. Is refresher training for students required?
- 10. Is it appropriate for administration of the scheme to be devolved to course teams or is some form of central oversight required?

All of these aspects were considered and the following actions agreed:

 Vince Bissell (Deputy Head of Dental School), Aileen Bell (Director of Dental Education), Chris Nile (BDS 1 Course Coordinator) and Neil Nairn (Deputy BDS 1 Course Coordinator) would meet with Scott Ramsay to review and, if necessary, enhance the introduction to the mentoring programme and the concept of reflection that takes place at the beginning of BDS 1. Accordingly, Scott Ramsay delivered a relevant session to the new BDS 1 cohort in September 2016, a teaching activity that will now be timetabled every year.

- 2. Mentoring would be discussed in detail at a future meeting of the Course Coordinators and their Deputies. This action has now been completed.
- 3. Consideration would be given to the appointment of a Senior Mentor to oversee the programme. So far we have been unable to identify a suitable staff member who is not already over-committed to other teaching duties, but our intention to do so remains and we would aim to have a Senior Mentor in place for the 2017/2018 academic session.

A session at the Dental School Education Day on 1st November 2016 was devoted to mentoring and reflection and delivered by Vince Bissell and Scott Ramsay, to ensure that all staff received a refresher on the concept and the programme.

Recommendation 8

The Panel recommends that the Dental School should consult with College HR regarding whether it would appropriate to include the mentoring role in the relevant MPA job descriptions, in order for staff to continue in the role. The School should also clarify to students the non-clinical nature of mentoring, whether provided by MPA or academic staff. [Paragraph 4.3.3]

For action: Head of Dental School

Response:

The Dental School consulted with MVLS College HR over the issue of graduate-level senior MPA staff (Level 7 and above) participating in the Dental School student mentoring programme. We were advised that there is no problem from an HR perspective. Those MPA staff who participate have volunteered to do so and the senior academics involved in delivery of the BDS programme are fully supportive. The mentoring programme does not involve clinical or subject-specific teaching – it is about graduate attributes and life skills which we are confident are delivered highly competently by the three MPA staff involved on the programme.

As part of the review of mentoring (see response to Recommendation 7 above), the BDS 1 students receive augmented information on mentoring and its purpose, with emphasis on the importance of reflection in professional life. This is delivered by Dr Scott Ramsay from the Student Learning Service together with the BDS 1 Course Coordination Team and makes clear that the role of the mentor is not to deliver teaching.

Recommendation 9

The Panel noted the participation of the very active members on the College Technology Enhanced Learning and Teaching group. In order to provide additional support to enable further development and full utilisation of these innovations, the Review Panel **recommends** that the Dental School discuss how best to build on this good practice. [Paragraph 5.1.3.5]

For action: Head of Dental School, Head of TELT, College of MVLS

Response – Dental School

Subsequent to the PSR, six Dental School staff members won a College Teaching Excellence Award and subsequently a University Teaching Excellence Award, reflecting the innovative use of modern technologies in the delivery of dental education within the School.

The Dental School has now established a formal TELT Group under the leadership of Robert McKerlie who represents the School of Medicine Dentistry & Nursing on the MVLS College TELT Group. The group is a staff – student organisation and operates under the umbrella of

the Dental School Community of Educational Scholarship. Its activities include staff-student collaboration in both development and evaluation of digital learning materials and consideration of the utility of new digital learning and assessment technologies. The student participation, which includes representation from all five years of the course, is viewed as especially valuable. Student feedback on e-learning resources developed within the national Scottish Dental Education Online (SDEO) programme has already been provided through the TELT Group and it is also closely involved in a project to develop a Dental School app that is a joint project with Professor Jo-Anne Murray.

The Dental School TELT group will report back to the College TELT Group through Robert McKerlie, ensuring a two-way communication between the groups. The College TELT group will continue to support the use of technology in approaches to learning and teaching. Further dissemination of good practice and sharing of case studies will be facilitated through webinars and face to face workshops for staff. Information will be provided on the MVLS Digital Education website (www.gla.ac.uk/colleges/mvls/digitaleducation) as well as disseminated via the College's digital education blog: https://digitalmvls.wordpress.com/

Response – Associate Dean of Digital Education

The College TELT group will continue to support the use of technology in approaches to learning and teaching. Further dissemination of good practice and sharing of case studies will be facilitated through webinars and face to face workshops for staff, information will be provided on the MVLS Digital Education website (www.gla.ac.uk/colleges/mvls/digitaleducation) as well as disseminated via the College's digital education blog: https://digitalmvls.wordpress.com/

Recommendation 10

The Review Panel considered that the 3D model, if fully utilised, was a valuable teaching asset and **recommends** that the Dental School reflects on other methods of encouraging staff to fully engage with, and to utilise, this technology. [Paragraph 5.1.3.4]

For action: Head of Dental School

Response:

The TELT Group, described in the Response to Recommendation 9 above, is now fully engaged in identifying a range of ways to utilise the 3D digital head and neck model. In addition to encouraging use of the full 3D effect model with groups of up to 15 students (maximum capacity) in the multi-media facility, we have:

- 1. Installed versions of the software in the lecture theatres, selected seminar rooms and the pre-clinical skills facility to provide ready access for teaching staff. Whilst these facilities do not offer full 3D visualisation, they nevertheless provide all the remaining functionality of the software.
- 2. Worked closely with the Digital Design Studio at Glasgow School of Art to develop a mechanism that has allowed us to offer the software to our students directly on their laptop computers. Initial interactions with BDS 3 students, who receive their main block of head and neck anatomy teaching during that academic year, have resulted in multiple requests for the download. We hope that this initiative, alongside further teaching team sessions to demonstrate the capability of the system, will improve the utility of this valuable teaching asset.