Inspection Report Addendum: February 2024

| Programme provider: | University of Northampton |
|---|---------------------------|
| Education Quality Assurance (EQA) Lead: | Martin McElvanna |
| Education Associates (EAs) | Not applicable |
| Date of review: | 19 February 2024 |

Summary

Following the risk-based programme inspection of the Foundation Degree Dental Nursing (FdSc) programme in 2023, the University of Northampton was given Actions to address within a specified timeframe. Progress Monitoring has been undertaken by the EQA team to review what improvements have been made and to ensure that the Actions outlined in the report have been appropriately addressed.

In January 2024, the University of Northampton provided information regarding progress against the four Actions identified in the inspection report from 2023. The information was reviewed by the Education Quality Assurance team and it was determined that Education Associates were not required. Four Requirements have been addressed relating to four Requirements. All are now considered to be Met.

| Action Number | Require- | Progress | Requirement |
|---|----------|---|---|
| | ment | | status |
| 1) The Faculty should consider developing the placement audit process, with enhanced reporting clearly explaining how the specific criteria in the Educational Audit descriptors sheet is considered to be "met". This should include explicit reference to documentary evidence that was considered and records of | 3;11 | The provider has developed a new audit process which has been in place since September 2023. The new audit process has been enhanced with specific sections for supporting evidence and for describing how each of the criteria in the audit form has been met. There is also an additional area within the audit form to record verbal conversations. | Originally Partly Met and now considered to be Met. |

General Dental Council

| verbal conversations in support of any "met" outcome. | | The new audit process will be used during the new cycle of auditing practice partners The GDC encourages the programme team to continue to review the audit process through its internal quality systems. | |
|--|----|---|---|
| 2) The Faculty should consider formalising the use of patient feedback to inform programme development. | 11 | The provider indicated that patient feedback is now taken from an enhanced patient feedback form. This feeds into an annual evaluation project is undertaken by the programme team to identify any areas for programme development. | Originally Partly Met and now considered to be Met. |
| 3) The Faculty should enhance the use of patient feedback so that students are given feedback not only on their communication skills but on other aspects of their training, such as professionalism. | 17 | As mentioned above, the programme team now use an enhanced patient feedback form which is used to give feedback to students on areas of strength and areas for further development. It now includes aspects of student training such as professionalism. Progress against these areas is tracked on students' online portfolios. | Originally Partly Met and now considered to be Met. |
| 4) The Faculty should consider developing the standardisation process for Placement Assessors as follows: (i) consider a group standardisation exercise bringing together all Placement Assessors (ii) consider more frequent standardisation exercises (iii) consider the inclusion of dentists in the standardisation exercises. | 19 | (i) and (ii). The provider has indicated that since September 2023, formal bi-monthly meetings for practice assessors and supervisors have been implemented to ensure there are more frequent opportunities to complete standardisation exercises. The minutes from these meetings are recorded. To further support standardisation a supervisor and assessors online support platform has been developed to ensure consistency of information given. (iii) The meeting invites extend to all practice colleagues including dentists to allow for collaboration and consistency. | Originally Partly Met and now considered to be Met. |



| | ational audits now confirm that supervisors have attended the ardisation meetings. | |
|--|--|--|
| | | |