

**UNIVERSITY COLLEGE CORK**

**NATIONAL UNIVERSITY OF IRELAND, CORK**

**PERIODIC REVIEW**

**CORK DENTAL SCHOOL & HOSPITAL**

**ACADEMIC YEAR 2016**

**May 2016**

## Introduction

A periodic review of Cork Dental School and Hospital (CUDSH) was held on 21<sup>st</sup> and 22<sup>nd</sup> April 2016. The members of the panel were:

- |                             |  |                                   |
|-----------------------------|--|-----------------------------------|
| 1. Professor Donald Burden  | Professor of Orthodontics and Director of the Centre for Dentistry | Queen's University, Belfast       |
| 2. Mr. Ken Halpenny         | Director of Specialist Training                                    | Royal College of Surgeons Ireland |
| 3. Dr. Bettie Higgs (Chair) | Co-Director of UCC's Teaching & Learning Centre (Retired)          | University College Cork           |
| 4. Mr. Joe Kennedy          | Students' Union Education Officer                                  | University College Cork           |

The panel also received a) A list of the Unit's Recommendations from their self-assessment and b) The Interim Report from the Research Quality Review exercise 2014-15.

## General Observations

The Self-Assessment Report (SAR) from the Cork Dental School and Hospital (CUDSH) was well-written and comprehensive. The Peer Review Group (PRG) found the report very helpful as it provided insight into the structure and operation of the CUDSH.

During the site visit there was a very positive engagement with the review process by all levels of staff, as well as by undergraduate (UG) and postgraduate (PG) students. The PRG found the tour of the facilities to be very informative. In all encounters an excellent community spirit was evident despite the complex and challenging environment that inevitably exists in programmes which deliver undergraduate and postgraduate education and training in dentistry. Dental undergraduate programmes are unique among university undergraduate courses in that dental students provide continuing care for patients. In addition, many of the clinical procedures in which undergraduate dental students must gain competence are exposure prone procedures (EPPs). Universities that deliver dental undergraduate programmes have a statutory and ethical duty to safeguard the health and safety of dental students during their education and there is a parallel duty to prevent harm to patients. As such the governance framework in place for any undergraduate dental programme must extend beyond educational governance to include all aspects of student and patient safety as part of a robust clinical governance structure.

The PRG noted that the SAR could have given consideration to the College of Medicine and Health (CMH) Strategic Plan and the University College Cork (UCC) Strategic Plan. Demonstrating alignment with these strategic plans would be helpful to the School and other stakeholders.

The PRG acknowledge that this review has a limited scope due to the recent successful accreditation of the Dental School programmes by the Dental Council, and a recent review of research activity. The PRG was able to concentrate on a smaller number of more focused

issues - strategic planning and implementation, student experience, staff development and infrastructure - which are discussed under appropriate headings below.

The PRG are aware that the graduates from the CUDSH educational programmes have a very good reputation both nationally and internationally. The PRG are also well aware that, unlike other undergraduate degree health programmes, Dental School UG students must provide, under supervision, operative care for both children and adults as part of their clinical education and training. The graduate of Dentistry must be fit to practice independently as a safe beginner on graduation. For this reason the magnitude of risk associated with the UG and PG educational programmes is above that normally encountered in other UG and PG programmes, including other health care programmes such as medicine, where there is no requirement for medical students to provide operative treatment for their own patients.

Furthermore, the CUDSH has a unique remit within University College Cork (UCC) because it delivers undergraduate and postgraduate programmes within a UCC managed dental hospital which also provides primary and secondary care for the local population. For this reason the PRG has made particular recommendations in relation to clinical governance for high-level strategic planning and urgent implementation.

The teaching team fully understand their responsibilities in the area of patient safety, and recognise that at a national level the importance of clear and transparent clinical governance in dental UG and PG programmes is an urgent issue for resolution.

The PRG are also aware that this review was carried out in a context of the confirmation that UCC have made substantial progress in the building of a new dental school. The PRG recognise that the completion of this new build within the ambitious timeframe will present significant challenges. In the interim period, current patient throughput suggests there will be 300,000 patients treated in the present CUDSH facility during the next five years. A significant number of students will be studying within the current facilities during this period. For this reason, the PRG have made short-term and medium-term infrastructure recommendations.

The PRG were pleased to hear that progress has been made with recognition of the funding deficit and the discrepancy between Dublin Dental School and Cork Dental School and Hospital. The PRG share the dental hospital staff aspiration that this will have a positive impact on the student experience in the dental school.

## **Strategic planning and implementation**

### Governance

The PRG were impressed by the excellent leadership of the senior team in dentistry.

However, the PRG were concerned that current UCC structures accommodate educational governance across the institution, but not clinical governance which is required by a modern dental school and hospital which is solely managed and administered by the University.

The important strategic role and responsibility for clinical governance rests at the highest level in UCC. At present, the CUDSH senior team shoulder this responsibility on behalf of the University. In any similar institution in Ireland and the UK, there would be a clearer structure for reporting clinical governance issues (including clinical incident and serious adverse incident reports) to the highest level of the responsible stakeholder. At a national and international level it is normal for the host organisation (in this case UCC) to have a clear reporting process on clinical governance matters to the highest level. The PRG see an urgent need for, and would recommend that, a stronger linkage should exist in the form of a

high level stakeholder group, chaired by the President of UCC, who would meet on a regular basis in recognition of the unique patient safety and clinical governance responsibilities that rest with UCC in relation to CUDSH. The stakeholder group should comprise senior representatives from the CUDSH, the College of Medicine and Health (CMH), and appropriate external stakeholders. The PRG recommends the committee would also be responsible for the review of the School risk register, which encompasses all of the educational and clinical patient safety responsibilities of the dental school.

No criticism of the present leadership is implied by this recommendation, but rather the PRG believes that, as with similar dental schools and dental hospitals elsewhere in these islands, there needs to be a clear reporting line on matters related to clinical governance up through the organisation responsible for the management and administration of the CUDSH.

### Recruitment

The PRG were impressed by the hard work and commitment of all the dental staff across the programmes and the proactive approach and potential for inclusivity through committee structure. The PRG also recognise the critical role that the clinical academic consultants play in terms of clinical and educational leadership, patient safety and educational and clinical governance.

The PRG were concerned about the number of clinical academic consultants currently working in the CUDSH. The numbers of this critically important cadre of senior staff were lower than in similar institutions elsewhere. A critical mass of senior staff is needed to carry out clinical and academic leadership, patient safety and educational and clinical governance. The PRG recommend that a clear and agreed recruitment strategy is developed and proactively pursued in the immediate future to ensure that the numbers of clinical academic consultants increases to the levels found in other similar institutions.

The PRG recognises the specific challenges in recruiting senior dental academic consultants. At present the CUDSH has to compete with UCCs other schools for funds for recruitment. This operates at a considerable disadvantage to CUDSH as the availability of Dental Academic Staff is always in very short supply and vacancies need to be advertised and personnel recruited in advance of requirement. This recruitment strategy has to recognise that normal UCC recruitment policies may not always be suitable, and flexibility must be shown in this regard, in the light of the unique position of UCC operating a dental hospital. It was noted that 2 senior staff were effectively absent due to sabbatical and extended leave arrangements.

### **Academic standards**

#### CUDSH

In the light of the successful outcome of the recent thorough review of academic programmes and qualifications by the Dental Council of Ireland (the professional regulatory body) the PRG have accepted that these aspects of the review of the School have been completed. The rigorous process, including review of external examiner reports and implementation plans, and satisfactory outcomes were noted. The PRG took this as evidence of the quality and suitability of Learning Outcomes and Competencies of the programmes in terms of the National Qualifications Framework.

The PRG is aware that a recent review of research activity within the CUDSH has been undertaken and understand that the feedback process is almost complete. For this reason the PRG did not focus on this aspect of the CUDSH.

The PRG also notes the importance that CUDSH and UCC must place on ensuring that the current facilities in the CUDSH building are maintained and enhanced to meet academic standards and guarantee a high quality student experience. Although a new building is planned, in the interim period there will be a significant number of students completing these programmes and also a significant number of patients will be treated within the current CUDSH facilities. This point is returned to in the Infrastructure section.

## **Student Experience**

Generally the PRG found that UG and PG students were supportive and appreciative of the efforts made by the dental staff to provide a good quality student experience.

However, the PRG feel that by increasing the senior staff levels and thereby providing greater access to this level of staff during clinical teaching sessions, the student experience would be further enhanced. The importance of greater direct contact between the senior staff and students during clinical teaching sessions, and increased research-led teaching as an integral part of the student experience, was highlighted by the student representation.

It is good to see that initial steps have been taken to incorporate the student voice within committee structures. However, the PRG recommend a deepening of this engagement, for example through increased frequency of staff/student meetings and increased representation on the School committees. It is not sufficient to have only one staff member on staff/student committees and consideration should be given to including all departmental leads. There should be a clearer structure for reporting student concerns at the School management meetings, and a response mechanism to enable feedback to students in order to 'close the loop'. Consideration should be given as to how students can be involved in the design and planning of the new building. The School has a high reliance on international students for financial sustainability, and the PRG believe that the student experience is going to become an increasingly important determinant of student choice of study destination.

It was noted that planning for an approaching academic year required some additional attention in advance of the forthcoming academic year commencing. There is a need for a more detailed and up-to-date programme handbook to be available to students at the start of the academic year so that students can plan their academic studies effectively. A clear statement of the proposed assessment dates is needed at the beginning of the academic year. This is particularly important to international students who are required to plan their academic year at the outset, including booking flights home. Clarity and certainty about assessment dates would help to enhance the student experience. The PRG recommend that students are provided with more detailed information at the beginning of the academic year, including notable dates, and this will address the student concerns about planning their studies.

Any opportunities for involvement with the wider community, and gaining skills that enhance employability were valued by students. Assessment, and in particular the lack of formative and summative feedback, were concerns expressed by UG students and must be addressed. In addition, clear guidelines for staff and students on international grade equivalence, and in particular the implications for North American students at their home institution, should be made available.

Postgraduate students reported that on the whole they were happy with the level of supervision from academic researchers within the School.

Additional concerns relating to the student experience are detailed under Infrastructure.

## **Staff Development**

The PRG were impressed by the good team spirit and camaraderie that exists and the beneficial practice of having staff away days, twice a year. The impression gained was that staff were happy to work within UCC. The staff understand their responsibilities for patient safety, and recognise the increasing importance of having robust clinical governance structures in place for the CUDSH UG and PG programmes.

There was however, a perception that the opportunities for promotion and career advancement lacked clarity. This was particularly highlighted across clinical nursing, administrative and technical staff. The PRG formed the impression that several staff were carrying out duties on a regular basis that were above those normally expected for the level of their post, in order to meet a real need in the School. Among nursing and administrative staff the PRG recommend a review of the current structures and that consideration be given to developing a senior dental nurse grade and similar recognition of administrative staff. Succession planning should take place, for example to ensure continuity of technical skills appropriate for a modern dental school and hospital.

The PRG recognises that clinical appraisal, for those individuals who carry out clinical duties, should be part of any annual performance and development review (PDR). The current UCC appraisal process should be further developed to include clinical appraisal so that staff can be supported through a robust review and opportunities for appropriate staff development can be identified. A modified template for PDR should be developed appropriate to the needs of the CUDSH. This is of additional importance as it is likely that CPD will become mandatory in Ireland for dental practitioners, with new legislation expected within the next two to three years

## **Infrastructure**

Against a context of a medium-term plan to have a new Dental School it is imperative that the cohorts of students who will be taught, and the patients who will be treated, have appropriate facilities in the interim. Therefore all current facilities should not only be maintained at an appropriate level, but enhanced.

The PRG were very concerned at the quality and availability of study areas for students. The PRG were of the view that a library that closes at 2.45pm is not appropriate for clinical students who are normally only free to consult the library in the evening after their educational and clinical sessions.

The current facilities, such as the student Reading Room and the student Common Room are cramped, outdated and not fit for purpose. It is difficult for students to access learning resources that are housed in the library due to restricted opening hours. These facilities are of key importance to dental students who are isolated from the UCC Main Campus. The student cohort consists of 25% international students and the CUDSH has an aspiration of increasing this to 50% as part of the business case for the New Dental School. The facilities are not up to scratch for the international students from Canada as well as for Irish students, and diminish the attractiveness of the School. In addition, some clinical facilities are below the expected standard, such as in Oral Surgery, and should be refurbished and modernised at the earliest opportunity.

## **Collaborative partnerships** *(Details of collaborative/partnership arrangements and the quality assurance mechanisms employed in terms of monitoring of standards and quality)*

The PRG did not review this area of the school.

## Enhancement and Effectiveness of quality management processes within the unit

The School hold two 'away-days' per year with closure of the hospital so that all staff can attend. This gives the School a chance to step-back and reflect on what works and what needs improvement within the School. It also focuses on staff-wellbeing. The PRG is concerned that staffing levels, particularly at senior levels, are not sufficient to continue to maintain robust quality management processes.

## Conclusions on the way the unit enhances its provision and the experience of their students.

Committee structures are in place to carry-out decisions and recommendations. There are a high number of committees. The School might consider streamlining the number of committees with due regard to effectiveness of staff and student time. The School should formally involve students in their committee structures so that there is the opportunity for a strong student voice in the planning and organisation of the education programmes.

## Recommendations *Comment on actions taken since last review (monitoring of action plan through annual monitoring process)*

Since the last review considerable work has been done to ensure that there is greater transparency in the central government funding model for the CUDSH at UCC. The funding deficit has now been recognised, which when fully addressed and rectified, will ensure that CUDSH is placed on a much more sustainable financial footing.

The Head of School and his senior team should be congratulated in recognising the need to modernise the Dental School estate and to then successfully develop a business case for a new dental school building. The PRG were told that funding for a new dental school is now agreed.

In the last review the PRG commented on the unique clinical governance responsibility which rests with UCC. Elsewhere this responsibility is most often shouldered by a health service organisation. During this review the PRG heard from staff that they were fully supportive of UCC remaining the primary body managing and administering the dental hospital and school clinical services. The PRG found that the clinical governance aspects were well-catered for within the CUDSH but have recommended that a robust reporting mechanism in relation to clinical governance must be extended to a senior level in UCC.

## Comment on any recommendations made by the unit in its SAR

Table 1 Response of the PRG to Recommendations made by the CUDSH

CUDSH recommendations	PRG response
Cork Dental School should continue to be governed by University College Cork and should continue to incorporate the clinical facilities and services required for dental education	The PRG agrees with this recommendation. However due regard should be given to the recommendations of the PRG under Strategy and infrastructure.
The ring-fencing of dental education funding from the HEA by the Quigley report on funding Dental education should be implemented without further delay and should include capital costs.	The PRG believe that the recommendations they have made under Strategy will facilitate this requirement

All dental units more than 15 years old in the School should be replaced immediately in order to ensure satisfactory quality for teaching	The PRG support this recommendation, and note the additional requirements as set out in this report under the heading of Infrastructure.
The difficulties in succession planning should be recognised and further clinical fellow and lecturer posts should be created for dentistry at UCC, in order to ensure adequate staff/student ratios and to progress the research agenda.	The PRG supports this recommendation. However it places high importance on the recommendation in this report under the heading Strategy.
There should be further integration of the School and Oral Health Services Research Centre.	The PRG agree with this recommendation.

### Recommendations by the PRG for consideration and response.

Table 2. Summary of Recommendations of PRG

	Recommendation	Responsibility	Time-scale
1.	The CUDSH has a unique remit in University College Cork (UCC) because it is an UG programme within a UCC owned hospital which cares for patients. Responsibility for clinical governance rests at the highest level in UCC, and there needs to be a clear reporting line up through the University. The governance framework for the UG dental programmes must include all aspects of student and patient safety as part of a robust clinical governance structure. This very high level of governance and responsibility must be addressed urgently.	CUDSH, CMH, UCC Senior Management, President's Office	Short-term
2.	The PRG see an urgent need for, and would recommend that, a stronger linkage should exist in the form of a high level stakeholder group, chaired by the President of UCC, who would meet on a regular basis in recognition of the unique patient safety and clinical governance responsibilities that rest with UCC in relation to CUDSH. The stakeholder group should comprise senior representatives from the CUDSH, the CMH, and appropriate external stakeholders. The PRG recommends the committee would also be responsible for the review of the School risk register, which encompasses all of the educational and clinical patient safety responsibilities of the dental school.	CUDSH, CMH, UCC Senior Management, President's Office	Short-term
3.	The PRG recommend that a clear and agreed recruitment strategy for CUDSH is developed and proactively pursued in the immediate future. Flexibility must be shown in this regard, in the light of the unique position of UCC operating a hospital with patient safety strategies of prime importance.	CUDSH, CMH, HR	Short-term and Medium-term
4.	Greater direct contact between the senior staff and students, and increased research-led teaching as an integral part of the student experience, as highlighted by	CUDSH	Short-term

	the student representation. A critical mass of senior staff is needed to fulfil this role.		
5.	It is good to see that initial steps have been taken to incorporate the student voice within committee structures. However, there should be a deepening of this engagement, for example through increased frequency of staff/student meetings and increased representation on the School committees. There should be a clearer structure for reporting student concerns at the School management meetings, and a response mechanism to enable feedback to students in order to 'close the loop'.	CUDSH	Short-term
6.	Consideration should be given as to how students can be involved in the design and planning of the new building.	CUDSH	Short-term and medium-term
7.	There is a need for a more detailed programme handbook at the start of the academic year. Increased information, including notable dates would address the student concerns about planning their studies.	CUDSH	Short-term
8.	Assessment, and in particular the lack of formative and summative feedback, were concerns expressed by UG students and must be addressed. In addition, clear guidelines for staff and students on grade discrepancies, and in particular the implications for North American students should be made available.	CUDSH	Short-term
9.	Opportunities for further student involvement with the wider community, to gain skills that enhance employability, should be pursued.	CUDSH	Short-term and Medium-term
10.	Study facilities such as the library and the student reading room should be improved at the earliest opportunity. The library opening hours should be changed to suit students.	CUDSH; CMH	Short-term
11.	The student common room is not fit for purpose and should be upgraded.	CUDSH; CMH	Short-term
12.	Some clinical facilities, such as in Oral Surgery, are below the expected standard and should be refurbished and modernised at the earliest opportunity.	CUDSH; CMH	Short-term
13.	Among nursing and administrative staff there should be a review of the current structures and consideration given to developing a senior dental nurse grade and similar recognition of administrative staff.	CUDSH; CMH; HR	Short-term and medium-term
14.	Succession planning should take place, for example to ensure continuity of technical skills appropriate for a modern dental school and hospital.	CUDSH; CMH; HR	Medium-term
15.	A modified template for PDR should be developed appropriate to the needs of the CUDSH.	CUDSH, CMH, HR	Short-term
16.	The CUDSH strategic planning should give consideration to the College of Medicine and Health (CMH) Strategic	CUDSH	Short-term

	Plan and the University College Cork (UCC) Strategic Plan. Demonstrating alignment with these strategic plans will maximise buy-in at all levels.		
--	---	--	--

## Appendix 1

### UNIVERSITY DENTAL SCHOOL & HOSPITAL

#### PEER REVIEW GROUP SITE VISIT TIMETABLE

#### In Summary

- Thursday 21<sup>st</sup> April: The Peer Review Group (PRG) arrives at the River Lee Hotel for a briefing from the Director of the Quality Promotion Unit, followed by a meeting with the Heads of School and College. An informal dinner will be held with PRG and School staff that evening.
- Friday 22<sup>nd</sup> April: The PRG meets with school staff, students and relevant officers of UCC. A working private dinner is held that evening for the PRG in order to work on the report.
- Saturday 23<sup>rd</sup> April: External PRG members depart

<b>Thursday 21 April 2016</b>	
<b>Venue: Tower Room, 1<sup>st</sup> Floor, River Lee Hotel</b>	
12.00 – 13.30	Meeting of members of the Peer Review Group. Lunch and briefing by the Director of the Quality Promotion Unit. Group agrees final work schedule and assignment of tasks for the following day. Views are exchanged and areas to be clarified or explored are identified.
14.30 – 15.30	Meeting with Vice Dean, College of Medicine & Health
15.45 – 16.00	Private meeting of PRG for discussion.
16.00 – 16.30	Meeting with Head of Dental School & Hospital
16.30 – 17.00	Private meeting of PRG for discussion.
19.00	Dinner for members of the Peer Review Group & staff members of Dental School & Hospital  <b>Venue: The Weir Bistro, River Lee Hotel</b>

**Friday 22 April 2016**

**Venue: Oral Health Research Centre, Conference Room**  
*(adjacent to Cork Dental School & Hospital)*

08.30 – 09.00	Convening of Peer Review Group
09.00 – 10.00	Meeting with staff of Dental School & Hospital <b>Venue:</b> Dental Lecture Theatre
10.00 – 10.30	Tea/coffee and private meeting of PRG
10.30 – 11.30	<u>Representatives of Dental Hygiene &amp; Dental Nurse students</u> BDS, year 1 BDS, year 3 BDS, year 5 Diploma Dental Hygiene, year 1 Diploma Dental Hygiene, year 2 Diploma Dental Nursing
11.30 – 12.00	<u>Representatives of Postgraduate students</u> PhD – 2 x student representatives Doctorate in Clinical Dentistry, Orthodontics – 2 x student representatives
12.00 – 13.00	Lunch and private meeting of PRG
13.00 – 13.30	Meetings with Senior Officers: School & Hospital Manager Finance Officer
13.30 – 14.30	Preparation of first draft of final report
14.30 – 15.15	Meeting with Head of Dental School & Hospital
15.15 – 15.30	Tour of facilities
15.30 – 16.00	Exit presentation to all staff, to be made by the Chair of the Peer Review Group or other member of Peer Review Group as agreed, summarising the principal findings of the Peer Review Group. This presentation is <u>not</u> for discussion at this time. <b>Venue:</b> Dental Lecture Theatre
16.00 – 19.00	Further work on drafting of the final report.
19.00	Working private dinner for members of the Peer Review Group to complete drafting of report and finalisation of arrangements for completion and submission of final report.