

HEE Quality Interventions Review Report

University College London Hospitals NHS Foundation Trust Dental Learner Review



Review Overview

<p>Background to the Review:</p>	<p>HEE planned to undertake a trainee focus group for all Dental Specialty Trainees (DST) following the move to the Huntley Street site. In part, this is a follow-up to the quality visit to Orthodontics in 2019 due to some persistent issues around the culture in the workplace being reported in the November 2019 National Education and Training Survey.</p> <p>HEE does not have any concerns regarding the quality of the education and training on offer and it is noted that in Pan-London surveys conducted by HEE for both DST and Dental Core Training trainees that curriculum satisfaction and support for learners was generally good.</p>
<p>Training Programme/Learner Groups Reviewed:</p>	<p>Learners from all Dental specialties were invited to attend the learner review, however trainees in Oral Surgery, Dental Maxillo-Facial Radiology and Special Care Dentistry were unable to attend due to prior commitments:</p> <p>Session 1:</p> <ul style="list-style-type: none"> - Periodontics - Endodontics - Prosthodontics <p>Session 2:</p> <ul style="list-style-type: none"> - Oral Surgery - Restorative Dentistry - Oral and maxillofacial pathology <p>Session 3:</p> <ul style="list-style-type: none"> - Orthodontics - Paediatric Dentistry
<p>Who we met with:</p>	<p>The review team met with the following Dental Specialty Trainees (DSTs)</p> <ul style="list-style-type: none"> - twenty specialty training years one to three (ST1-3) trainees - six specialty training years four to five (ST4-5) trainees
<p>Evidence utilised:</p>	<p>The Trust provided the review team with the following documents in preparation for this learner review:</p> <ul style="list-style-type: none"> - Document 1 Local Faculty Group Meeting actions and summary July 2020 - Document 2 Local Faculty Group Dental Education Update - Document 3 Education Governance Committee Minutes 11.06.2020 - Redeployment submission

Review Panel

Role	Job Title / Role
Quality Review Lead	Peter Briggs, Regional Postgraduate Dental Dean, London and Kent, Surrey and Sussex
Associate Postgraduate Dental Dean	Nigel Fisher, Regional Associate Postgraduate Dental Dean for Dental Core and Specialty Training, London and Kent, Surrey and Sussex
External Specialty Expert	Andrew Dickenson, Regional Postgraduate Dean for Dental (Midlands and East)
Lay Representative	Sarah-Jane Pluckrose
HEE Quality Representative	Nicole Lallaway, Learning Environment Quality Coordinator
Supportive roles	Tarek Hussain, Quality, Patient Safety and Commissioning Officer
Shadowing	John Marshall, Deputy Quality, Patient Safety and Commissioning Manager
Shadowing	Chloe Snowdon, Learning Environment Quality Coordinator

Executive summary

The review team heard that overall, the quality of education and training at the Eastman Dental Hospital was generally good, with trainees complimentary toward the training opportunities offered. Whilst this was reported across all Dental subspecialties, the review team was concerned to hear that some of the issues raised by learners at the HEE Quality Review in 2019 into Orthodontic training remained and were also evident in paediatric dentistry. The review team heard that there were some incidences of bullying and undermining of trainees by some supervisors. There were also some issues raised around trainee knowledge of the Trust's internal reporting pathways, and a lack of trainee representation at Local Faculty Group (LFG) meetings.

The Trust have been fully engaged with this process and are aware of the issues and working collaboratively with HEE to make improvements.

Review Findings

Not all the Quality Framework standards have been included within the tables below. The standards included are where the quality interventions are expected to have a direct operational impact on the quality of the learning environment. The other standards are still expected to be reviewed for each organisation and will be undertaken through different tools than the Quality Interventions identified within Table 2.1

Identify the review findings for each of the relevant standards below and remove the standards where there is no comment to be made.

Domain 1 - Learning environment and culture		
<p>1.1. Learners are in an environment that delivers safe, effective, compassionate care that provides a positive experience for service users.</p> <p>1.2. The learning environment is one in which education and training is valued and learners are treated fairly, with dignity and respect, and are not subject to negative attitudes or behaviours.</p> <p>1.3. There are opportunities for learners to be involved in activities that facilitate quality improvement (QI), improving evidence-based practice (EBP) and research and innovation (R&I).</p> <p>1.4. There are opportunities to learn constructively from the experience and outcomes of service users, whether positive or negative.</p> <p>1.5. The learning environment provides suitable educational facilities for both learners and educators, including space, IT facilities and access to quality assured library and knowledge.</p> <p>1.6. The learning environment promotes interprofessional learning opportunities.</p>		
HEE Standard	HEE Quality Domain 1 - Learning Environment & Culture	Requirement Reference Number
1.2	<p>Bullying and undermining</p> <p>The review team heard that overall, trainees from all the specialties in attendance felt they were well respected by their colleagues, and by the people responsible for training them. Trainees in Oral Surgery, Restorative Dentistry and Oral and maxillofacial pathology felt that they were treated with respect by the multi-disciplinary teams (MDTs). Trainees noted that there was good collaborative working across the specialties, and this was particularly evident during the Covid-19 pandemic. Trainees from Oral Surgery, Restorative Dentistry and Oral and Maxillofacial Pathology also noted that they</p>	

	<p>meet as part of the MDT once a month, which provided the opportunity to discuss cases.</p> <p>The review team heard that trainees in Orthodontics and Paediatric Dentistry generally felt treated with respect by their colleagues and consultants. However, it was noted that there were incidences of trainees not feeling they were treated with the professional respect commensurate to their training grade. The review team heard of a culture where within these departments around the behaviour of a small number of consultants/trainers, which meant that some trainees felt reluctant to approach them. Trainees reported that in some instances involving these consultants, that the interactions could be uncomfortable. It was noted by the review team that trainees felt the need to 'psych up' ahead of such interactions.</p> <p>The review team also noted that some trainees did not feel empowered to raise concerns regarding the behaviour of the consultants in question, as they did not want to be perceived as 'difficult'. Trainees reported that advice from peers in such circumstances was often to accept and 'suck it up'.</p>	<p>Yes, please see D1.2a, D1.2b and D1.2c</p>
1.4	<p>Appropriate levels of Clinical Supervision</p> <p>The review team was pleased to hear that trainees felt educationally supported and did not feel required to undertake tasks beyond their competencies. Overall, trainees felt that clinical supervision at the Eastman Dental Hospital (EDH) was good. However, it was reported that trainees in Orthodontics and Paediatric Dentistry felt they were overly supervised to the extent that it had a negative impact on progression through their training. Some trainees reported that they felt they did not get enough independent experience, with distant supervision in place to ensure safety to work independently as a specialist.</p> <p>The impression that the review team were left with was that there was a culture of micromanagement where some trainees in Orthodontics did not feel able to develop their confidence to work independently. It was noted that trainees felt that their work was overly checked by some supervisors due to the cautiousness within the department. The review team heard that some trainees felt they had deskilled in terms of their clinical competencies since starting post at the EDH.</p>	<p>Yes, please see D1.4</p>

Domain 2 – Educational governance and leadership

- 2.1. The educational governance arrangements measure performance against the quality standards and actively respond when standards are not being met.
- 2.2. The educational leadership uses the educational governance arrangements to continuously improve the quality of education and training.
- 2.3. The educational governance structures promote team-working and a multi-professional approach to education and training where appropriate, through multi-professional educational leadership.
- 2.4. Education and training opportunities are based on principles of equality and diversity.
- 2.5. There are processes in place to inform the appropriate stakeholders when performance issues with learners are identified or learners are involved in patient safety incidents.

HEE Standard	HEE Quality Domain 2 – Educational Governance and Leadership	Requirement Reference Number
2.1	<p>Impact of service design on users</p> <p>The review team heard that the move to the Huntley Street site had impacted on how trainees from Periodontics, Endodontics and Prosthodontics were</p>	

	<p>able to meet their required learning outcomes. It was noted that surgical opportunities had significantly decreased among these trainee groups. Trainees reported that there was a dedicated surgical suite for all surgical procedures, which meant that all departments within EDH were competing for chairs within this facility. Prior to the move to Huntley Street, it was reported that procedures were conducted in open bays, allowing for more clinical capacity. This had led to trainees competing for available chairs and had significantly reduced the surgical activity among the Endodontics, Periodontics and Prosthodontics trainees. The review team found that the longer waiting time to book chairs for procedures impacted on completion of cases. It was acknowledged that the Covid-19 pandemic had also limited the surgical opportunities, but the trainees reported the issues pre-dated the Covid-19 disruption.</p> <p>Periodontics, Prosthodontics and Endodontics trainees reported that there was a large administrative workload around booking patient appointments, despite the introduction of the EPIC patient management system. This was reportedly due to appointments requiring approval from a centralised administrative team based off-site, meaning that there were delays to appointments, patients not being booked in on time; patients turning up for appointments at the wrong time, and, in some cases, requests not being actioned. The review team heard that these issues were exacerbated by inadequate communications between the EDH and the centralised administrative team.</p> <p>Whilst it was reported that there was an undue administrative burden on trainees, trainees also reported the benefits of EPIC since it had been introduced. Trainees reported that the new system streamlined some of the communications between colleagues and had taken away some of the administrative burden that had previously been an issue. While this new system was commended by trainees, the review team also disappointed to hear that some trainee had been accessing EPIC from home and were completing administrative tasks outside of contracted working hours.</p> <p>It was also noted among trainees in Periodontics, Endodontics and Prosthodontics that there was a lack of nursing support in clinics, due to a shortage of nursing staff. This particularly impacted on the self-funded trainees who reported instances of having to nurse for each other.</p> <p>The review team heard that since the move to an off-site laboratory that the time taken to get results back had increased and that the quality of work undertaken had dropped. It was reported that this had led to significant delays in delivering treatment, and trainees felt this had impacted on the quality of training provided at the EDH.</p>	<p>Yes, please see D2.1a</p> <p>Yes, please see D2.1b</p>
<p>2.2</p>	<p>Appropriate systems for raising concerns about education and training</p> <p>The review team queried what processes were in place for trainees at the EDH to raise concerns about education and training. The review team were pleased to hear that there was a mentorship programme in place for senior trainees to support their more junior colleagues. It was noted that the mentorship programme in Restorative Dentistry was trainee-led, with the initial meeting used to discuss where mentors could offer support to their junior colleagues. Peer mentors were noted to be an avenue where trainees could raise concerns, receive support with issues and assistance with escalating concerns. While the review team commended the support trainees received from colleagues, the review team was disappointed to hear that the</p>	

	<p>trainees did not know the Trust process for escalating concerns about education and training. The review team heard that concerns were escalated internally within the EDH, however it was reported that concerns were not raised further than that. The trainees also reported that they were not familiar with the role of the Guardian of Safe Working, nor did they know who this nominated person was within the Trust. This was reported across all trainee groups who attended the learner review.</p> <p>The review team was also disappointed to hear that the trainees did not know that a Local Faculty Group (LFG) for dental education was in place, or what purpose such a group would serve. Whilst the trainees did not know of any LFG, it was reported that there was a Junior Staff Committee (JSC) in place as a forum to discuss education and training. The JSC was described as a forum for trainees to discuss education and training issues as a peer group. The review team heard that the committee met every two months, and that it was attended by the Director and Associate Director of Dental Education. Trainees reported that they were able to input into the agenda for the JSC and received the minutes. Whilst this forum was in place for trainees to raise concerns, it was reported that the JSC was ineffective in escalating concerns from trainees.</p> <p>The review team was concerned that the presence of senior faculty members at JSC meetings undermined the committee as trainees could be dissuaded from raising an issue. Likewise, there were also concerns that the absence of trainee representation at LFG meetings meant that a vital link in educational governance was being missed.</p>	<p>Yes, please see D2.2a & D2.2b</p> <p>Yes, please see D2.2c</p> <p>Yes, please see D2.2d</p>
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Domain 3 – Supporting and empowering learners		
<p>3.1. Learners receive educational and pastoral support to be able to demonstrate what is expected in their curriculum or professional standards to achieve the learning outcomes required.</p> <p>3.2. Learners are supported to complete appropriate summative and formative assessments to evidence that they are meeting their curriculum, professional standards or learning outcomes.</p> <p>3.3. Learners feel they are valued members of the healthcare team within which they are placed.</p> <p>3.4. Learners receive an appropriate and timely induction into the learning environment.</p> <p>3.5. Learners understand their role and the context of their placement in relation to care pathways and patient journeys.</p>		
HEE Standard	HEE Quality Domain 3 – Supporting and empowering learners	Requirement Reference Number
3.1	<p>Access to resources to support learners' health and wellbeing and to educational and pastoral support</p> <p>The review team heard that there was no multi-faith room at the new Huntley Street site. The lack of a multi-faith room had negatively impacted on some trainees. It was acknowledged that this has been an ongoing issue and had been raised locally with the Trust, but issues around securing a multi-faith room remained due to structural barriers in identifying a space.</p> <p>Trainees reported that locker space was an issue at the Eastman Dental Hospital, with no allocated locker space for trainees in the Huntley Street site. Trainees reported that there were some 'hot' lockers available on a first-come first-served basis. The review team heard that there were some lockers in a separate building to store possessions but that this was inappropriate for trainees as they were often wearing scrubs and would be required to change</p>	<p>Yes, please see D3.1a</p> <p>Yes, please see 3.1b</p>

	clothes before moving between buildings. It was also noted that these lockers were too small. As a result, trainees reported carrying around their personal belongings and equipment for the duration of their shift. It was noted that this had been raised locally and the Trust were working to resolve this issue.	
3.4	<p>Induction (organisational and placement)</p> <p>The review team was pleased to hear that the trainees received a combined Trust and departmental induction. The trainees reported that the induction was comprehensive and adequately equipped them to work at the EDH. The review team was also pleased to hear that trainees had protected time to attend inductions.</p> <p>Trainees also reported that they also received an HEE induction. However, in some cases it was reported that trainees may have had their HEE induction many months after the start of their placement. It was noted that the HEE induction was a good opportunity to meet the regional Training Programme Director and Dental Deans.</p>	
3.3	<p>Access to study leave</p> <p>The review team heard that there were no concerns around access to study leave. Trainees reported that guidelines were developed in conjunction with the JSC to outline the process for study leave and claiming reimbursements. It was noted that while the guidance was shared with the EDH and trainees that there may not be awareness of the process across all trainee groups.</p> <p>It was reported by Restorative Dentistry trainees that the pan-London study days were a good opportunity for peer-learning and to meet trainees from across the region. Trainees in Oral Surgery also noted that the pan-London study days were a valuable educational opportunity. However, it was noted that the frequency of their pan-London training days was irregular and that when study days were scheduled that trainees did not receive suitable notice in advance to be able to book study leave.</p>	Yes, please see D3.3

Domain 4 – Supporting and empowering educators		
<p>4.1. Those undertaking formal education and training roles are appropriately trained as defined by the relevant regulator or professional body.</p> <p>4.2. Educators are familiar with the curricula of the learners they are educating.</p> <p>4.3. Educator performance is assessed through appraisals or other appropriate mechanisms, with constructive feedback and support provided for role development and progression.</p> <p>4.4. Formally recognised educators are appropriately supported to undertake their roles.</p>		
HEE Standard	HEE Quality Domain 4 – Supporting and empowering educators	Requirement Reference Number
	Not discussed at review	

Domain 5 – Delivering curricula and assessments		
<p>5.1. The planning and delivery of curricula, assessments and programmes enable learners to meet the learning outcomes required by their curriculum or required professional standards.</p> <p>5.2. Placement providers shape the delivery of curricula, assessments and programmes to ensure the content is responsive to changes in treatments, technologies and care delivery models.</p> <p>5.3. Providers proactively engage patients, service users and learners in the development and delivery of education and training to embed the ethos of patient partnership within the learning environment.</p>		
HEE Standard	HEE Quality Domain 5 – Developing and implementing curricula and assessments	Requirement Reference Number
	Not discussed at review	

Domain 6 – Developing a sustainable workforce		
<p>6.1. Placement providers work with other organisations to mitigate avoidable learner attrition from programmes.</p> <p>6.2. There are opportunities for learners to receive appropriate careers advice from colleagues within the learning environment, including understanding other roles and career pathway opportunities.</p> <p>6.3. The organisation engages in local workforce planning to ensure it supports the development of learners who have the skills, knowledge and behaviours to meet the changing needs of patients and service.</p> <p>6.4. Transition from a healthcare education programme to employment is underpinned by a clear process of support developed and delivered in partnership with the learner.</p>		
HEE Standard	HEE Quality Domain 6 – Developing a sustainable workforce	Requirement Reference Number
6.1	<p>Retention and attrition of learners</p> <p>The review team heard of an instance where the process of accepting the placement offer on Oriel, being transferred to HEE and then being transferred to the Eastman Dental hospital was not streamlined. This instance involved the trainee having to proactively contact various people within HEE due to delays in processing the application and not being clear on information around the placement and confirmation of employment. It was reported that some of the staff at the Eastman Dental Hospital did not know who the trainee was when they attended the placement on the first day. It was clear that there was a lack of communication with regards to the trainee’s placement, and prolonged delays of around 3 months to receive confirmation from HEE.</p> <p>All trainees that the review team met with stated that they would recommend the EDH and their training posts to their peers. Trainees also reported that they would be happy for friends and family to be treated at EDH.</p> <p>Trainees in Oral Surgery, Restorative Dentistry, Oral and Maxillofacial Pathology, Orthodontics and Paediatric Dentistry reported that they were redeployed during the Covid-19 pandemic. The review team heard that these trainees felt well supported during their redeployment, and felt it was a good experience overall.</p>	

Requirements (mandatory)

Any Immediate Mandatory Requirements (IMRs) identified should be identified separately in the appropriate table below. The requirement for any immediate actions will be undertaken prior to the draft Quality Review Report being created and forwarded to the placement provider. The report should identify how the IMR has been implemented in the short term and any longer termed plans. Any failure to meet these immediate requirements and the subsequent escalation of actions to be taken should also be recorded if there is a need to.

- All mandatory requirements should be detailed in this section. The requirement reference should work chronologically throughout the report and link with the right-hand column in the 'Review Findings' section
- Requirements identified should be succinct, SMART and not include the full narrative from the detailed report
- Any Requirements should clearly relate to improved achievement of HEE Domain & Standards by the placement provider

Immediate Mandatory Requirements		
Given the severity of an Immediate Mandatory Requirement, initial action must be undertaken as required within 5 days and will be monitored by HEE Quality Team. Completion of immediate requirements will be recorded below. Subsequent action to embed and sustain any changes may be required and should also be entered below with relevant timescales		
Requirement Reference number	Review Findings	Required Action, timeline, evidence (to be completed within 5 days following review)
	N/A	
Requirement Reference number	Progress on immediate actions	Required Action, timeline, evidence (to be completed within an agreed timeframe)
	N/A	

Mandatory Requirements		
The Quality Review Panel will consider which individual or collective findings from the intervention will be added to the Quality Reporting Register, determining the relevant risk score, ISF rating and reflecting the accepted QRR narrative conventions.		
Requirement Reference number	Review Findings	Required Action, timeline, evidence
D1.2a	The review team heard that majority of trainees attending the focus group enjoyed excellent professional relationships with their educational and clinical supervisors. However, a small number of trainees from Paediatric Dentistry and Orthodontics described some instances of feeling undermined by particular clinical supervisors. It was also reported that that some felt overly supervised, and that this contributed towards a loss of clinical confidence. It was noted by some trainees that they were given very limited opportunity to	The Trust is required to confirm that they have identified the trainers highlighted from comments made at the learner review and that processes have been put in place to support the identified individuals to develop a change in their behaviours, attitudes and respect towards trainees. This is to ensure that action D1.2b is proportionate and focused on the small number of relevant individuals. Please note that HEE has no wish to know the

	<p>work independently which was having a negative impact on their professional development to become a specialist. The Trust felt that highlighting the issue to the Paediatric Dentistry faculty would lead to improvement of the problem. At this stage they are unaware of such criticisms and both Medical and Clinical Directors predict a very positive response from them, describing the group as very reflective.</p>	<p>names of these individuals but seek assurance that the Trust are aware of the names. An update on this action is due on 01 March 2021.</p>
D1.2b	<p>The review team heard that majority of trainees attending the focus group enjoyed excellent professional relationships with their educational and clinical supervisors. However, a small number of trainees from Paediatric Dentistry and Orthodontics described some instances of feeling undermined by particular clinical supervisors. It was also reported that that some felt overly supervised, and that this contributed towards a loss of clinical confidence. It was noted by some trainees that they were given very limited opportunity to work independently which was having a negative impact on their professional development to become a specialist. The Trust felt that highlighting the issue to the Paediatric Dentistry faculty would lead to improvement of the problem. At this stage they are unaware of such criticisms and both Medical and Clinical Directors predict a very positive response from them, describing the group as very reflective.</p>	<p>The Trust is required to update HEE on the development plan(s) tailored to the needs of the individuals identified in action D1.2a that takes into account the need to improve the behaviours and attitudes towards trainees at the Trust to ensure that trainee/trainer relationships are professional and respectful. HEE would support this process to include facilitating visits by these individuals to other NHS units that deliver training in order to observe the working and training environments. Please update HEE with progress towards this action by 01 March 2021.</p>
D1.2c	<p>The review team heard that majority of trainees attending the focus group enjoyed excellent professional relationships with their educational and clinical supervisors. However, a small number of trainees from Paediatric Dentistry and Orthodontics described some instances of feeling undermined by particular clinical supervisors. It was also reported that that some felt overly supervised, and that this contributed towards a loss of clinical confidence. It was noted by some trainees that they were given very limited opportunity to work independently which was having a negative impact on their professional development to become a specialist. The Trust felt that highlighting the issue to the Paediatric Dentistry faculty would lead to improvement of the problem. At this stage they are unaware of such criticisms and both Medical and Clinical Directors predict a very positive response from them, describing the group as very reflective.</p>	<p>The Trust is required to seek 360 feedback (from trainees, other faculty members and management) that relates to the individuals identified in action D1.2a to include behaviour and attitudes to others within the working and training environment. Please send through anonymised results of 360 feedback to HEE on 01 June 2021.</p>
D1.4	<p>The review team heard that some trainees in Orthodontics felt overly supervised, and that this contributed towards a loss of clinical</p>	<p>The Trust is required to work with trainees to agree a framework, including a set number of cases for</p>

	confidence. It was noted by some trainees that they were given very limited opportunity to work independently which was having a negative impact on their professional development to become a specialist.	trainees to be assessed against before having their capabilities signed off for certain procedures, to negate the need for consultant oversight in appropriate cases. This should be commensurate with each specialty training year with increasing autonomy as trainees progress. Evidence in support of this action is due on 01 March 2021.
D2.1a	The review team heard that trainees in Periodontics, Prosthodontics and Endodontics had reduced surgical activity due to lower capacity at the new surgical suite and were competing for chair availability. It was noted that this could impact on trainees' ability to meet their required learning outcomes in relation to surgical procedures.	The Trust is required to ensure that trainee job plans are designed to include the requisite clinical opportunities (including access to chairs) needed to meet their curriculum criteria. Please provide HEE with an update on how the Trust plans to ensure that trainees have appropriate opportunities to meet their curriculum requirements. Evidence of how this is implemented will be required by 01 March 2021.
D2.1b	The review team heard that there was a large administrative workload for Prosthodontics, Periodontics and Endodontics trainees regarding the booking of patient appointments. It was reported that this was in part due to poor communication between the EDH and the centralised off-site administrative team.	The Trust is required to ensure that the process for booking patient appointments is streamlined so that the administrative workload for trainees is reduced. Please develop a standard operating procedure (SOP) for booking appointments and share a copy of the SOP with HEE by 01 March 2021.
D2.2a	The review team heard that trainees did not know what the role of the Guardian of Safe Working was, nor did they know who the nominated person was within the Trust.	The Trust is required to ensure that the Guardian of Safe Working and the Freedom to Speak Up Guardian attends the next available Junior Staff Committee (JSC) to introduce their roles, how to contact them, and to ensure that this is documented in the JSC meeting minutes. Please submit a copy of the minutes on 01 March 2021.
D2.2b	The review team heard that trainees did not know what the role of the Guardian of Safe Working was, nor did they know who the nominated person was within the Trust.	The Trust is required to ensure that the introduction of the Guardian of Safe Working and the Freedom to Speak Up Guardian is included at induction as standard. Please submit evidence on 01 March 2021.
D2.2c	The review team was concerned to hear that senior members of the faculty attended the JSC.	The Trust is required to revise the ToR of the JSC to ensure that the JSC is exclusively a confidential trainee forum to discuss issues among themselves. Please submit the ToR and JSC minutes as evidence by 01 March 2021.
D2.2d	The review team was concerned to hear that there was no trainee representation at the Local Faculty Group (LFG).	The Trust is required to revise the ToR of the LFG to ensure that the LFG has adequate trainee representation. Please submit ToR and LFG minutes as evidence by 01 March 2021.

D3.1b	The review team heard that trainees did not have dedicated locker space within the Huntley Street building.	The Trust is required to ensure that all trainees have access to personal lockers for the safe storage of personal belongings. If trainees do not have access to personal lockers, please include in the update of what the Trust is doing to address this by 01 March 2021.
D3.3	The review team heard that trainees did not know the processes in place to apply for study leave.	Please ensure that guidance on booking study leave is included on the next agenda for the JSC and that positive trainee feedback is recorded in the minutes. Please submit JSC minutes by 01 March 2021.

Recommendations

Recommendations are not mandatory, and they would not be expected to be included within any requirements for the placement provider in terms of action plans or timeframe. It may however be useful to raise them at any future reviews or conversations with the placement provider in terms of evaluating whether they have resulted in any beneficial outcome.

Recommendation	
Related Domain(s) & Standard(s)	Recommendation
D3.1a	It is recommended that the Trust explore the possibility of providing a multi-faith room at the Huntley Street site.

Good practice

Good practice is used as a phrase to incorporate educational or patient care initiatives that, in the view of the HEE Quality representatives, enable the standards within the Quality Framework to be more effectively delivered or help make a difference or improvement to the learning environment being reviewed. Examples of good practice may be worthy of wider dissemination

Learning environment / Prof. group / Dept. / Team	Good practice	Related Domain(s) & Standard(s)
N/A		

Report sign off

Outcome report completed by (name):	Nicole Lallaway, Learning Environment Quality Coordinator
Review Lead signature:	Peter Briggs, Regional Postgraduate Dental Dean, London and Kent, Surrey and Sussex
Date signed:	03/12/2020

HEE authorised signature:	Peter Briggs, Regional Postgraduate Dental Dean, London and Kent, Surrey and Sussex
Date signed:	03/12/2020

Date final report submitted to organisation:	03/12/2020
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What happens next:

Any requirements generated during this review will be recorded and monitored following the usual HEE Quality Assurance processes.

As part of our intention to develop a consistent approach to the management of quality across England, Quality Reports will increasingly be published and where that is the case, these can be found on [\(web link\)](#) Information from quality reports will be shared with other System Partners such as Regulators and Quality Surveillance Groups