

A Quality Assurance Framework for Dental CPD



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The Committee of Postgraduate Dental Deans & Directors (COPDEND) has a major role to play in education and training of the UK dental workforce, including training new graduates, specialty trainees and provision of Continuing Professional Development (CPD). Concerns regarding the Quality of CPD across the sector and the need for a robust system of quality assurance, have been expressed by stakeholders, including those leading the Dept CPD project (www.Dept CPD erg).

leading the *DentCPD* project (<u>www.DentCPD.org</u>).

Aim

Describe the evidence-base for, and content of, the "QA Framework for Dental CPD" and report how this important development is being promoted.

Materials & Methods

- 1. Results from a systematic review of the CPD quality literature and an audit of the QA processes in place from >50 CPD 'Providers' was used as an evidence-base to inform the development of a draft 'QA Framework' suitable for different types of CPD (including face-to-face, online, journal and conference CPD).
- 2. Draft 'QA Framework' was subjected to a national consultation exercise including review by the Life-Long Learning SIG at ADEE (Riga 2014), and revised accordingly.
- 3. Draft 'QA Framework' were extensively discussed by the Expert Advisory Group, led by the COPDEND Chair.

Results

The 'QA Framework' comprises a range of Quality Criteria within Four Sections;

1. Planning & Development

- i. Educational Aims & Learning Objectives
- i. Educational Design & Development

2. CPD Delivery

- i. Teachers & Trainers
- ii. Delivery Methods
- iii. Assessment of Participants' Learning
- 3. CPD Evaluation
- 4. Administration

Two Standards are described for each Quality Criterion: 'Expected Standard' 'Enhanced CPD'

A 'QA Framework' "App" has been developed.

Two levels of quality are described within the framework: "Expected standard" and "Enhanced provision".



Describes the minimum required quality criteria considered appropriate to ensure effectiveness in terms of educational impact.



Describes enhanced provision that encompasses processes that demonstrate improvements in the quality of provision beyond the 'expected standard'. Activities are developed and delivered using evidence based educational strategies. CPD activities within this category have been shown through evaluation to lead to high levels of satisfaction from participants, and have a demonstrable positive educational impact on participants' practice and / or patient outcomes.

1.1	EDUCATIONAL AIMS AND LEARNING OUTCOMES	Expected Standard	Enhanced Provision
1.1.1	Clear and concise educational aims, objectives and learning outcomes are available for the CPD activity.	V	V
1.1.2	Educational aims, objectives and learning outcomes are published in advance and are easily accessible by potential participants of the CPD activity, so that the content and relevance of the activity can be considered before registering.	~	~
1.1.3	Educational objectives and learning outcomes are specific, measurable, achievable relevant and time-bound (SMART).	V	~
1.1.4	Participants have an opportunity to provide feedback regarding whether the educational aims, objectives and learning outcomes for the CPD activity have been achieved. (see also section 3)	V	~
1.1.5	Educational aims, objectives and learning outcomes are documented, e.g. on certificates provided for the CPD activity.	V	~
1.1.6	Educational aims, objectives and learning outcomes are written by an appropriate individual with subject-matter expertise, and reviewed by a third party with appropriate expertise, to ensure they are appropriate and relevant for the target audience.	/	~
1.1.7	Educational aims, objectives and learning outcomes for the CPD activity address an identified training need for the individual.		~
1.1.8	Educational aims, objectives and learning outcomes are reviewed (and if appropriate, revised) following evaluation of the CPD activity (including participants' feedback on their relevance).	/	/
1.1.9	The review of educational aims, objectives and learning outcomes are integrated into the providers' formal quality assurance and improvement strategy.		V

Main messages

Patient care is improved through the maintenance of high professional standards.

High quality education and training relies upon robust and structured quality assurance.

'QA Framework for Dental CPD' supports 'Users' and 'Providers' to demonstrate evidence of good practice

		Expected Standard	Enhanced Provision
3.1	Structured feedback is obtained from individual participants following each CPD activity.	V	V
3.2	Participants are able to provide feedback anonymously.	V	~
3.3	Where questionnaires are used to obtain feedback from participants, the content and questions are directly relevant to the CPD activity being evaluated, with space available for detailed feedback and suggestions.	~	~
3.4	Feedback from participants is requested regarding their satisfaction with the CPD activity in terms of educational effectiveness, including (1) achieving the learning objectives and outcomes, (2) quality of educational design and delivery, (3) relevance, (4) ability to engage participants, (5) value for money, (6) absence of commercial bias or promotion.	~	~
3.5	Structured feedback from participants is requested regarding the perceived impact of the CPD activity, on future practice and / or patient care and outcomes.		V
3.6	Outcomes of CPD activities on the participant and / or their practice are investigated using appropriate evaluation methods, and the results (from previous evaluations of the activity) are made available for participants.		V
3.7	The longer term impact of CPD activities on the participant and / or patients is investigated through follow up evaluation at an appropriate time period after the event.		V
3.8	Feedback from participants is routinely analysed in a systematic manner, and reviewed by all those responsible for the development and delivery of the CPD activity.	~	V
3.9	Participant feedback data is recorded and stored appropriately.	V	V
3.10	Concerns raised by participants are considered by providers and addressed where appropriate in subsequent activities.	V	V
3.11	Participant feedback regarding CPD activities is embedded within a formal quality improvement process, with clear feedback loops to educational development.		V
3.12	Multiple sources of evidence are considered in the quality improvement process for CPD activities, including participant feedback, assessment results and needs analysis. Longitudinal data is considered for courses that are repeated periodically.		V
3.13	The Provider has a published policy about managing complaints or concerns that is made available to potential participants.	~	V

		Expected Standard	Enhan Provis
4.1	Details of the CPD activity are published in advance and available to participants, including details of the activities aims, learning objectives and anticipated outcomes, format, teacher / trainer (or developer for online or printed CPD), duration and cost.	~	V
4.2	Appropriate records are kept securely by the provider, including the number of verifiable CPD hours completed by participants, title, aims, objectives and learning outcomes of each CPD activity, and evaluation data.	~	V
4.3	Documentary evidence (e.g. CPD certificates) are provided to participants upon completion of the activity, where evidence of engagement with the CPD activity can be demonstrated. These include the title and learning outcomes for the activity, and the number of verifiable CPD hours.	~	V
4.4	Documentary evidence (e.g. CPD certificates) include a prompt for the CPD user to reflect on their learning and link this to their professional development plan.		V
4.5	The provider has a quality assurance policy for CPD activities, including transparent processes for quality improvement.	V	~
4.6	Internal quality reviews of provision are carried out at appropriate and regular intervals.		~
4.7	Quality assurance of CPD activities includes independent external review.		~
4.8	Continual improvements to CPD provision are documented.		~
4.9	All commercial interests or commercial support / promotion for the CPD activity are disclosed to participants in advance.	V	V
4.10	Educational content and commercial sponsorship, support or promotion are kept completely separate.	V	~
4.11	The provider has a formal system of quality management relevant to CPD provision.	V	V
4.12	The learning environment (and facilities) are appropriate, supporting participant engagement and learning.	V	V



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Conclusions

- This "QA Framework for Dental CPD" provides a suitable measure of what one should expect of activities enhancing the continuing education of the dental workforce.
- It can be utilised by 'CPD Users' to measure the value of a CPD activity and by 'CPD Providers' to strengthen their portfolio of CPD activities.
- In addition, the aspiration is that this will promote mobility of dental professionals with appropriately quality assured records of their continuing education and development.

Standards

better than

90/0, Silver