



Virtual COPDEND Dental Educators Conference 2021

New Conversations for Dental Educators Programme

This year the Educator's Conference is designed to inform participants and to facilitate discussion about developing training programmes in light of the pandemic.

COPDEND Dental Educators Conference 2021- same link/Meeting ID for all Sessions

<https://us02web.zoom.us/j/6373368250?pwd=SjBuZnBiakxldDFWZ3p1ekVzczB5QT09>

Meeting ID: 637 336 8250

Passcode: 9992021

Please download Slido prior to the event <https://www.sli.do/>

As we will be delivering this course via videoconferencing, please take a moment to read the following before the start of the conference sessions.

Software and connecting

- To display the presentations properly and to maximise interaction we suggest using a laptop or PC rather than a mobile phone.
- We recommend using Google Chrome or Edge as browsers. If you click the link and it opens in Internet Explorer, we suggest you copy the link and paste it into Google Chrome or Edge.
- Check you can join by following the link in the 30 minutes before the start of the first presentation, so you have time to overcome any IT issues.
- To monitor attendance you will have to wait in the 'Lobby' until you are let in, this will also be the case if you have to re-join for any reason.

Please note:

- Participants should join the session on time. Please note that being late or leaving early will affect the CPD time recorded on your certificate.
- Sessions will be conducted with the same levels of formality and respect as one would expect on a physical study day. Therefore try to avoid distractions for yourself and others.
- All participants will be muted whilst presentations are taking place.
- Please put questions in the 'Chat' area. This will be monitored by dedicated facilitators who will ask these questions on your behalf if time allows.
- Do not share personal or patient identifiable data in the 'Chat' as this will be visible to everyone. Direct messaging will be switched off.
- There will be various types of interaction during the sessions, including the use of breakout rooms for which participants will be randomly allocated.
- Please read the rest of this information pack as there are some further details relating to some of the sessions.

We hope that you enjoy the sessions, remember to fill in the online evaluation to get your certificate and to complete a reflection on the course content for your own CPD records.

Link to Evaluation: <https://forms.office.com/r/fdcr8rYPCf>

Virtual COPDEND Dental Educators Conference 2021

Tuesday 11th May **AFTERNOON SESSION** (14.00 – 17.00)

| | | |
|-------|--|--|
| 14.30 | Introduction and welcome to the online conference | <p>Dr David Felix Postgraduate Dental Dean and Director of Dentistry, NHS Education for Scotland</p> <p>Professor John Darby, Postgraduate Dental Dean Thames Valley and Wessex</p> |
| 14.35 | <p>Lessons learned from virtual teaching during Covid-19</p> <p>Aim: As the impact of COVID-19 on health care education & training continues to unfold, there is an increasing need to adapt training delivery at pace to enable effective upskilling of the workforce to continue.</p> <p>Objectives, the speaker will:</p> <ul style="list-style-type: none"> • Describe the impact the pandemic has had on the delivery of training. • Explain the strategies used to overcome barriers created by the pandemic. • Evaluate the strengths and weaknesses of various training modalities. <p>Learning Outcomes</p> <p>Following the session delegates will be able to:</p> <ul style="list-style-type: none"> • Identify the factors that have inhibited teaching during the pandemic. • Describe some of the strategies and tools used to facilitate teaching. • Recognise the teaching adaptations that will be most effective for their learners. <p>GDC Development Outcomes: B,C</p> | <p>Jason Stokes, Associate Postgraduate Dean for Dental Workforce HEE Midlands and East</p> <p>Prior to this role Jason was a longstanding DFT TPD and Dental Tutor. Jason is also a GDP and owns a small mixed practice in Norwich. Jason is the East of England elected representative for the BDA Principal Executive Committee. Jason has previously worked on the Fitness to Practice Panel of the GDC and has been a member of the GDC board.</p> |
| 15.05 | <p>Technology in dental education - What next?</p> <p>Aim: To explore a selection of novel technologies being used in Dental education and look forward to what else might be on the horizon</p> <p>Objectives:</p> <ul style="list-style-type: none"> • Learn about how Leeds University is currently using 3D printing technology • Discover the latest in scanning technology to aid practical teaching • Consider the future of VR technology in Dental education • Evaluate the application of wearable technology within Dental education • Assess the potential use of Haptic technology in postgraduate Dental education <p>GDC Development Outcomes: C</p> | <p>Fleur Kellett, Associate Dental Dean for Regional Trainee Support, HEE Midlands and East</p> <p>Fleur has a keen interest in the development and application of simulated technology within postgraduate training programmes. Fleur is a member HEE TEL Sim Reference Group and a Fellow of Faculty of Dental Trainers, Royal College of Surgeons, Edinburgh.</p> <p>Andrew Keeling, Clinical Associate Professor in Restorative Dentistry, Leeds University</p> <p>Andy initially studied Computer Science at Bristol in the early 1990s before completing his BDS in 1999. He then spent over 10 years in full time NHS and private practice. On relocating to Leeds he took a post at the Leeds School of Dentistry, completing a PhD in digital occlusion. Now a Clinical Associate Professor in Restorative Dentistry, he is mainly research-based, with a focus on applying novel digital techniques to solve clinical and educational problems in dentistry.</p> |

Virtual COPDEND Dental Educators Conference 2021

| | | |
|-------|--|---|
| | | <p>Anurag Srinivas - HEE Leadership Fellow Anurag graduated from Cardiff University with BDS in 2016. He then completed dental foundation training and 3 years of core training in various posts across the UK, gaining experience in Primary Care, Oral Surgery, Oral and Maxillofacial Surgery and Restorative Dentistry, across a variety of healthcare settings. Currently enrolled in a Leadership Fellowship with HEE, his work focuses on the use of technology in postgraduate education, mainly in the form of haptic feedback electronic simulation and wearable technology.</p> |
| 15.35 | Break with time for discussion, coffee and chat in randomly allocated breakout rooms | |
| 16.00 | <p>Having Difficult Conversations</p> <p>Aims and objectives:</p> <ul style="list-style-type: none"> • To understand the blocks and barriers to having difficult conversations. • Equip attendees with a model of how to prepare for and have a tricky conversation • To give everyone time to practice having a difficult conversation using the model of role plays • Give you time to feedback on the advantages and disadvantages of using the model <p>GDC Development Outcomes: A,C</p> | <p>Dr Richard Stevens, Associate Director, Professional Support and Wellbeing Service, HEE - Thames Valley Richard Stevens completed a degree in Psychology, Philosophy and Physiology at Oxford before studying Medicine. He was a GP in Oxford for thirty years and involved in education as a trainer, appraiser, and tutor. He has been working as a coach with the Professional Support and Wellness Service for over ten years and is the Associate Director.</p> <p>Fenella Trevillion from the Professional Support and Wellbeing Service, HEE - Thames Valley Fenella is an executive and career coach facilitator with 20 years leadership experience. She worked in leadership positions in large complex organisations, including Clinical Commissioning Groups, Health Care Trusts and in Local Authorities. She facilitates teams, supervises and coaches people in the public, private and independent sectors. Her knowledge base has been informed by an MSc in Public Services Management and more recently her MSc in Coaching and Behavioural Change, this has given her a strong theoretical basis for her team, individual coaching and supervision which is where her passion lies. She currently works on career choices, leadership and performance with clinicians, executives, care staff and managers at all organizational levels.</p> |
| 17.00 | Close | |

Virtual COPDEND Dental Educators Conference 2021

Wednesday 12th May **MORNING SESSION** (09.00 – 12.30)

| | | |
|-------|--|--|
| 9.30 | <p>Unconscious Bias Are we as fair as we think we are? How do biases impact decision-making, relationships and training? And what action can we take to make positive changes? The aim of this session is to develop your awareness of unconscious bias, the potential impact of bias in the educational environment, and strategies for identifying and mitigating bias. We will also consider the role of wider institutional and social factors in addressing inequality. Learning outcomes: You will:</p> <ul style="list-style-type: none"> • Develop your awareness of the impact of bias on education and working relationships. • Be able to identify examples of bias. • Be aware of strategies for identifying and mitigating bias. <p>GDC Development Outcomes: C,D</p> | <p>Dr Kristi Long Equality & Diversity Adviser, NHS Education for Scotland</p> <p>Kristi is the Equality and Diversity Adviser for NHS Education for Scotland. She has a Ph.D. in Anthropology and a PG. Cert. in Professional and Higher Education, and a particular interest in inclusive education and learning.</p> |
| 10.30 | <p>Break with time for discussion, coffee and chat in randomly allocated breakout rooms</p> | |
| 11.00 | <p>COVID Implications on Workforce Aim: The session will explore the impact of COVID-19 on the dental workforce and a workshop will enable participants to reflect on these. The overall aim is to facilitate dental educators to plan ways to support retention in the profession and provide career progression for dental team members in the future. Learning outcomes: Following the session delegates will be able to:</p> <ul style="list-style-type: none"> • Identify the key impacts that the pandemic has had on the dental workforce. • Describe some of the implications these may have on future workforce planning. • Recognise the role dental educators have in providing training and education that supports retention and career progression for all dental registrants. <p>GDC Development Outcomes: B,C</p> | <p>Sana Movahedi Regional Associate Postgraduate Dental Dean (Workforce & Dental Foundation), London, Kent, Surrey & Sussex Sam Bazargan DCP lead for London, Kent, Surrey & Sussex Susan Ellis Head of Dental Workforce Transformation and Quality Planning Katy Kerr Associate Postgraduate Dental Dean Workforce</p> <p>Sana, Sam, Sue and Katy are members of the Dental Workforce Development Advisory Group. They were tasked with looking at the impact Covid-19 has had on the dental workforce and will report on the data analysis and dedicated surveys undertaken for this purpose.</p> |
| 12.30 | <p>Close</p> | |

Virtual COPDEND Dental Educators Conference 2021

Wednesday 12th May **EVENING SESSION** (18.00 – 20.30)

| | | |
|-------|--|---|
| 18.00 | Introduction | |
| 18.00 | <p><i>Session for Specialty</i> - “Innovation and evolution in DST”.</p> <p><i>Session for Core</i> - “Innovative opportunities within the Core programme: Making training responsive to trainee and system requirements”.</p> <p>Aim: This interactive workshop will openly discuss the challenges facing delivery of dental programmes and innovative opportunities to address these emerging changes.</p> <p>Objectives: At the end of this interactive session delegates will have explored:</p> <ul style="list-style-type: none"> • The research behind the attitudes of the next generation of trainees • What the upcoming professionals want from their training • How we foster greater inclusivity and engagement with our future workforce • What innovations can be introduced to enhance core and specialty training. <p>GDC Development Outcomes: B,C</p> | <p>James Spencer Postgraduate Dental Dean for HEE Yorkshire and the Humber and is also lead dean for Dental Specialty Training.</p> <p>James qualified from the University of Bristol and undertook his orthodontic specialty training at the Eastman Dental Institute. He continued his senior registrar training at the Eastman Dental Institute and Kingston Hospital and was appointed consultant orthodontist at Pinderfields Hospital and Leeds Dental Institute in 1999. He has lectured widely both nationally and internationally.</p> <p>In the past he has been Chair of the Consultant Orthodontists Group and the British Orthodontic Conference.</p> <p>Andrew Dickenson Regional Postgraduate Dental Dean for HEE Midlands & East, COPDEND Vice Chair and Lead Dean for Dental Core Training.</p> <p>Andrew has a broad experience within postgraduate medical and dental education with particular interest in the quality assurance of educational programmes, widening participation, career development and integrating technology into education. He sits on the TEL simulation-based education group, immersive technology subgroup, Digital Education steering group and heavily involved with e-LFH. Currently leading a Midlands and East of England transformation programme for NHSE&I, but supports the activities emerging from the national Children’s Oral Health Improvement Programme Board, integrating digital education into the care for children and young people. Professionally he is an accredited Oral & Maxillofacial Surgeon and registered specialist in Oral Surgery.</p> |
| 20.30 | Close | |

Virtual COPDEND Dental Educators Conference 2021

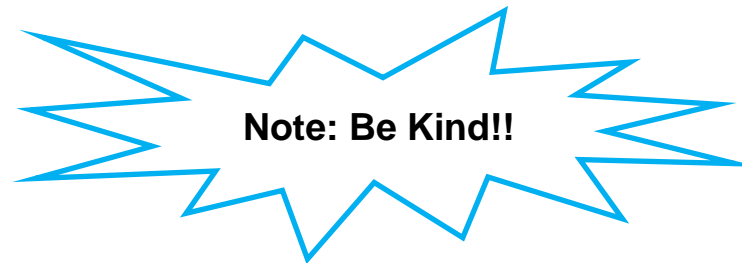
Handout for breakout rooms - Having a Difficult Conversation

Three in a room, the third person acts as the observer. Think of situations that may arise e.g. with a Educational Supervisor and trainee or real difficult conversations you may need to have.

Role play guidelines

The Role Play:

- Introduce yourselves, agree roles: the person asking for the conversation, the other and the observer. Emphasise confidentiality
- 7 mins each pair, 2 mins for feedback, rotate roles, de-role before each new pair starts and at the end.
- The Dentist having the conversation briefly describes the situation for the other to take on the role and follows the steps below (in a relaxed way as possible!)
- The conversation lasts for 7 minutes.
- Feedback for 2 minutes. The listener briefly says how they experienced it and the observer gives one useful comment. No criticism – if the observer is wanting to be critical, instead ask the person having the conversation how they thought they did... they will know if it did not go well, will know why and hopefully say so!



Conversation Guide.

- Say your statement. Remember to keep your tone low and soft, volume down, listen and relax!
- Notice if a possible battle of wills is beginning and step out. 'this is hard...let's find a way forward...'
- Get back to the shared goal. Find out what they want, there may be new information here.
- Don't be afraid to ask for time out. Maybe a loo break?
- You hear something you don't like, pause. Lean back, be curious and ask for more information 'tell me more..'
- Express your feelings without venting AND ask the person to do the same
- When you say something you believe in and to you, it's important, explore the other's response to it. (typically, we don't) allow their feelings to emerge, it enables common ground to materialise.
- The other person clams up, draw attention to it, express interest in their views. 'you have gone quiet, perhaps you can say where you are now?'
- At the end – check in about their feelings and possibly briefly summarise the changes you will both make.

Virtual COPDEND Dental Educators Conference 2021

Handout for Workshop - COVID Implications on Workforce

We will work in small groups with a facilitator to guide the discussion. The scenarios below will be explored and the facilitator will have further information that they will use to help develop the debate.

The main themes for discussion:

What have been the main impacts of Covid-19 on the workforce?

Which are new themes and which were already present but have been exacerbated by the pandemic?

Which are a priority for us to address?

Using the scenarios explore what we can offer:

- To help with wellbeing and offering wider support.
- For restoration and recovery – new models of working - transformational commissioning.
- To attract workers to the profession, (especially dental nurses) and an even distribution of the workforce.
- Retention, career progression for all - fulfilling ambitions of ADC.

How might we use:

- Training pathways and apprenticeships
- Course provision and E-learning
- Methods for communication with registrants

Please use the template on page 10 to record notes/ feedback for the scenario reviewed. It would be good to capture these at the end of the session, (one per group as a minimum) so that this information can be shared after the conference.

There will not be time to go over these in detail when we re-join the main session but we ask that at the end of the time in the breakout room, each delegate feeds back the answer to the question, '**What one thing will you change or implement as a result of reviewing this scenario?**' via Slido.

Slido can be downloaded at <https://www.sli.do/>

Virtual COPDEND Dental Educators Conference 2021



Scenario One Dental Hygienist

"I was self-employed and the practice terminated my contact. I went back to work for 1 day a week (previously 2.5 days) in October. My contract has not been re-negotiated yet. I got work as a contact trace worker.

I have to do hand scaling except for last appointment in the morning and at the end of the day - where I can do AGPs. I now have a nurse and my appointments have been extended to 30 minutes. Before Covid I thought I had a job for life, now I'm not so sure."

Story

Dental Hygienist – qualified 25 years ago

Was made redundant, received self-employment grant and became a contact trace worker.

Has a BSc.

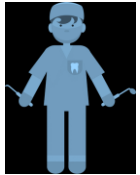
Same practice has now re-employed her but she hasn't received a new contract yet.

Now working 1.5 days a week.

Feels like bottom of the list for surgery time but has been given a nurse (previously worked alone).

No AGP appointments for 3 months as can only do them at beginning and end of the day unless dentist is not using a surgery.

Wants to stay at current practice as lives locally but needs to work 2.5 days.



Scenario Two Dentist

"Enormous stress, patients pressuring you, do not realize the impact measures have that you cannot offer appointments as quickly as before, particularly if AGP. Physically and mentally exhausting working in PPE . Continuous bombardment from commissioners about wanting this, that and the other by yesterday, but do not reply to any of our queries. Everything on back order.

FD practice and still no contract, difficult to get FD enough clinical experience. All the staff stressed."

Story

Foundation Educational Supervisor – same practice for 30 years

Stayed open throughout.

Patients have reacted badly as previous service was exemplary with same day appointments if experiencing issues.

One said, "I'm clapping for the NHS but not for dentists!"

Staff in tears, financial pressures.

Poor information from NHSE and expected to adapt and deliver services at short notice.

Comments on Foundation Training

FDs with little clinical experience.

Study days rearranged at last minute, trying to keep through-put in practice and need to plan surgeries in advance– would help to stick to timetable.

Unsure about next cohort as heard less graduates expected. Need to plan for use of surgeries. Better communication would help.

Virtual COPDEND Dental Educators Conference 2021



Scenario Three Dental Nurse

“Although on the whole Covid has been a negative experience for most, for me yes I have experienced things that have been difficult as part of my redeployed role, however I have had the opportunity to gain new skills and meet people whom I would never have had the pleasure of pre Covid 19.”

Story

Dental Nurse working for CDS in a Trust

Redeployed to IPC team and Community Swabbing team in Trust. Trained and undertook venepuncture/ phlebotomy. Worked in challenging care environments – secure units and swabbing at end of life for epidemiological purposes. Worked in care homes and had to raise safeguarding issues.



Scenario Four Dental Nurse

“I had to take 12 months off work as my son was shielding due to his medical condition. 6 months of this was unpaid which affected my family's income a great deal and our daily life. I am back in work now as my son no longer is required to shield, but he still falls into the 'clinically vulnerable' category. I feel a great anxiety that I will bring covid home.”

Story

Lead Dental Nurse working in general practice

Unable to work for long period and under considerable stress. Had support from GP, work, colleagues, and family. Increased workload and responsibility (e.g. cleaning after every patient, remote assessments).



Scenario Five Dental Therapist

“Have been re-deployed to two different roles for COVID so far and worked weekends with a day off in the week. Have done some dentistry end 2020/21.”

Story

Dental Therapist

Redeployed to Covid testing test team at start of Covid-19. Getting used to new way of working and provided opportunity to do some teaching with dental/ hygiene/ therapy students. Already backlog of people needing treatment. Lack of regular support for those in high risk groups – suggestion that a DCP could be used to answer questions and provide a regular follow-up.



Scenario Six Dental Technician

“Almost lost my business. Had to lay off most staff . Even now gone from delivering and collecting twice a day, every day of week to collecting only twice a week. This in turn has impacted as practices seek other labs as they want rapid turnaround.”

Story

Only working by himself now and his wife is helping with admin.

Virtual COPDEND Dental Educators Conference 2021

Notes/ feedback for Scenario Reviewed

What were the main impacts of Covid-19 on this person?

Which are new themes and which were already present but have been exacerbated by the pandemic?

What we can offer:

- To help with wellbeing and offering wider support.
- For restoration and recovery – new models of working - transformational commissioning.
- To attract workers to the profession, (especially dental nurses) and an even distribution of the workforce.
- Retention, career progression for all - fulfilling ambitions of ADC.

How might we use:

- Training pathways and apprenticeships
- Course provision and E-learning
- Methods for communication with registrants

What is the priority?

Slido question - What one thing will you change or implement as a result of reviewing this scenario?