

INSPECTION REPORT

John G Plummer & Associates

16 December 2002



ADULT LEARNING
INSPECTORATE

Grading

Inspectors use a seven-point scale to summarise their judgements about the quality of learning sessions. The descriptors for the seven grades are:

- *grade 1 - excellent*
- *grade 2 - very good*
- *grade 3 - good*
- *grade 4 - satisfactory*
- *grade 5 - unsatisfactory*
- *grade 6 - poor*
- *grade 7 - very poor.*

Inspectors use a five-point scale to summarise their judgements about the quality of provision in occupational/curriculum areas and Jobcentre Plus programmes. The same scale is used to describe the quality of leadership and management, which includes quality assurance and equality of opportunity. The descriptors for the five grades are:

- *grade 1 - outstanding*
- *grade 2 - good*
- *grade 3 - satisfactory*
- *grade 4 - unsatisfactory*
- *grade 5 - very weak.*

The two grading scales relate to each other as follows:

SEVEN-POINT SCALE	FIVE-POINT SCALE
grade 1	grade 1
grade 2	
grade 3	grade 2
grade 4	grade 3
grade 5	grade 4
grade 6	grade 5
grade 7	

Adult Learning Inspectorate

The Adult Learning Inspectorate (ALI) was established under the provisions of the *Learning and Skills Act 2000* to bring the inspection of all aspects of adult learning and work-based training within the remit of a single inspectorate. The ALI is responsible for inspecting a wide range of government-funded learning, including:

- work-based training for all people over 16
- provision in further education colleges for people aged 19 and over
- **learndirect** provision
- Adult and Community Learning
- training funded by Jobcentre Plus
- education and training in prisons, at the invitation of Her Majesty's Chief Inspector of Prisons.

Inspections are carried out in accordance with the *Common Inspection Framework* by teams of full-time inspectors and part-time associate inspectors who have knowledge of, and experience in, the work which they inspect. All providers are invited to nominate a senior member of their staff to participate in the inspection as a team member.

Overall judgement

In those cases where the overall judgement is that the provision is adequate, only those aspects of the provision which are less than satisfactory will be reinspected.

Provision will normally be deemed to be inadequate where:

- more than one third of published grades for occupational/curriculum areas, or
- leadership and management are judged to be less than satisfactory

This provision will be subject to a full reinspection.

The final decision as to whether the provision is inadequate rests with the Chief Inspector of Adult Learning. A statement as to whether the provision is adequate or not is included in the summary section of the inspection report.

SUMMARY

The provider

John G Plummer and Associates provides national health service dental treatment at 10 surgeries in Norfolk and north Suffolk. The company offers training for young people in the single occupational area of dental nursing. There are currently 36 learners training for a level 3 national vocational qualification (NVQ) in oral healthcare. All learners are employees of the company.

Overall judgement

The quality of the provision is adequate to meet the reasonable needs of those receiving it. Provision in dental nursing is outstanding. Leadership and management and equality of opportunity are outstanding. Arrangements for quality assurance are good.

GRADES

Leadership and management	1
Contributory grades:	
Equality of opportunity	1
Quality assurance	2

Health, social care & public services	1
Contributory grades:	
Work-based learning for young people	1

KEY STRENGTHS

- well-managed introduction of new learning programme
- good management of training
- high level of awareness and good application of equality and diversity issues
- excellent on-the-job training and support
- exceptionally good off-the-job learning

KEY WEAKNESSES

- no integration of self-assessment process with quality assurance system

THE INSPECTION

1. A team of three inspectors spent a total of 12 days at John G Plummer and Associates in December 2002. Inspectors made nine visits to dental practices, interviewed 16 learners, six work-based assessors, nine senior practice nurses, and seven dental surgeons. Five interviews were conducted with the course director and the practice tutor. One learning session and two assessment feedback sessions were observed. Inspectors examined a range of documents including learners' portfolios and records, review documents and assessment records, minutes of meetings, business plans, policies and procedures, and promotional literature. Inspectors studied the self-assessment report, which was first produced in October 2001 and was updated in August 2002. Further amendments to the report were provided at the time of the inspection.

Grades awarded to learning sessions

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Total
Health, social care & public services	0	1	0	0	0	0	0	1
Total	0	1	0	0	0	0	0	1

THE PROVIDER AS A WHOLE

Context

2. The 10 surgeries operated by John G Plummer and Associates are located in central and east Norfolk and north Suffolk. Five dental surgeons are partners of the company and a further 35 self-employed dentists are associates. The company employs 29 qualified dental nurses and 31 reception and administrative staff. The company has provided training in dental nursing for over 20 years. It was among the first providers to introduce the NVQ in oral healthcare at level 3 and became an accredited centre in March 2001. Prior to this, learners studied for the certificate in dental nursing offered by the National Examining Board for Dental Nurses (NEBDN). Learners are supervised in the workplace by a dental surgeon and senior nurse, who work together as a team. Teams work at three different dental practices which they visit on a rotational basis each week. A teaching centre is located at one of the company's dental practices. Learners attend the centre for one day a week in their first year for classes in background knowledge, and in their second year for further work on portfolio-building and preparation for the independent assessment. The assessment is conducted by the NEBDN. Learners are required to pass the assessment before becoming fully qualified and registered nurses. In 1998, the company became an approved practice for the vocational training of graduate dentists, providing opportunities for work experience in national health service treatment following completion of clinical training. The company is a registered firm for the ISO 9000 international quality assurance standard and has held the Investors in People Standard since 1997, which is a national standard for improving an organisation's performance through its people.

3. Work-based learning for young people is funded through a contract with Norfolk Learning and Skills Council (LSC). The population of Norfolk is widely distributed and some of the smaller communities are poorly served by public transport. The largest sector of employment is the service industry. In May 2002, the unemployment rate was 2.5 per cent, compared with a national average of 3 per cent. In 2000, 69 per cent of school leavers continued in full-time education. A further 7 per cent were involved in government-funded training and 3 per cent went into other part-time education. In 2001, the proportion of Norfolk school leavers achieving five or more general certificates of secondary education (GCSEs) at grade C or above was 50 per cent, compared with a national average of 47.9 per cent. Out of a total population of three quarters of a million, the proportion of minority ethnic groups in Norfolk was recorded as 0.9 per cent in the 1991 census.

Work-based learning for young people

4. The provision of training in dental nursing is outstanding. Arrangements for recruitment and induction of learners are thorough. Work placements are effectively organised to meet individual learner's needs. The on-the-job training and the support that learners receive are excellent. Assessment is well organised and meticulously recorded. Learners' work is of a high standard. The off-the-job learning is exceptionally good. Some learners, who were among the first to follow the new programme, have made slow progress.

LEADERSHIP AND MANAGEMENT

Grade 1

5. The company is managed by five partners, all of whom are practising dental surgeons. A sixth member of the management team has responsibility for finance and is also the course director of the dental nurse training. The strategic planning for the company and the budget for training are determined by the partners. The partners meet on a monthly basis. In addition, there are practice meetings, which are open to all dental surgeons, and these are held on a four to six-weekly basis. There is one full-time practice tutor who has operational responsibility for the training and supervision of learners. Three nurses have trained as assessors and four are currently in training. The practice tutor has responsibility for internal verification, and the course director has overall responsibility for quality assurance and equality of opportunity. There are monthly meetings of the course director, practice tutor and assessors. There is a committee of nursing and reception staff which meets monthly and includes elected representatives from the learners. There are comprehensive policies for quality assurance and for equal opportunities. Staff training and professional development are the responsibility of the course director. One of the partners has responsibility for health and safety and the practice tutor is the deputy health and safety officer for the company.

STRENGTHS

- well-managed introduction of new learning programme
- good management of training
- effective organisation of work placements to meet individual learner's needs
- good external links to promote learning
- high level of awareness and good application of equality and diversity issues
- good recruitment of under-represented groups
- effective and well-documented quality assurance system
- very thorough internal verification process

WEAKNESSES

- no integration of self-assessment process with quality assurance system

OTHER IMPROVEMENTS NEEDED

- more effective monitoring of learners' performance at the intake level
- better recording of equality issues at progress reviews

6. The introduction of the new NVQ has been well managed. Careful planning has taken place to effect a smooth transition from the previous programme, which prepared candidates for a final external assessment, to the competency-based approach of the

new award. Regular contact has been maintained with the awarding body and staff attend national training events to ensure they are fully informed of new developments. An initial briefing session was held for senior practice nurses and dental surgeons to explain the structure of the award and to outline the responsibilities of workplace supervisors. Staff have been given clear direction on the requirements for evidence collection. Staff are fully conversant with the processes to identify assessment opportunities and the arrangements for the observation of clinical procedures. The staff involved in supervising learners are enthusiastic and well informed about the new programme. They are effective in giving learners assistance with aspects of background knowledge and the acquisition of dental terminology. Their involvement ensures that the link between background knowledge sessions and practical work is strong. The unit specifications are made available in each surgery. As learners have progressed through their learning programmes, and the requirements for evidence collection have become more complex, staff have received further updates from the practice tutor on the evidence requirements for specific units. A strategy for the training of assessors has been implemented. The ratio of trained assessors to learners is good. Staff have been allocated time to carry out assessment tasks and their own studies to become qualified assessors. Trainee assessors are well supported by the more experienced team members.

7. The management of the training programme is good. There is a clear strategic and business plan which sets targets for recruitment of learners related to the expansion of employment opportunities in the business. Staff have a good understanding of their roles and responsibilities. Lines of accountability are clear, job descriptions are regularly reviewed and annual staff appraisals lead to the identification of staff development needs. The practice tutor has not received a formal appraisal in the past two years. However, she and all the other staff involved in the programme are well supported in their continuing professional development. In recent years, the company has supported the practice tutor in gaining a teaching qualification, and assessor and key skills awards. Learners are given six-monthly appraisals in addition to their course assessments and progress reviews.

8. The training programme is closely monitored. There are monthly, minuted meetings of the assessment team with the practice tutor and course director. Close consideration is given to the overall development of the programme, to the progress of individual learners, to assessment issues and the sharing of good practice. The management information system, although paper based rather than computer based, is adequate for the company's needs. Training is a standard agenda item at the monthly meetings of partners at which the course director provides a review and update. In addition, training is considered by a practice committee of secretarial and nursing staff which includes representatives for learners and is attended by the course director. Minutes of their meetings are made available at each surgery. Health and safety is thoroughly covered in the induction and features strongly throughout learners' programmes and as part of the daily working practice in the surgery. All learners are given training in cardio-pulmonary resuscitation.

9. There is a dedicated budget for training. The programme is well resourced. Visual aids have been purchased, for background knowledge sessions, with additional funds supplied by the LSC. Purchases include a torso model to demonstrate anatomy and physiology, models of teeth and gums, and charts illustrating circulatory, respiratory, digestive, and neurological systems. Learners' achievements are celebrated in the quarterly staff newsletter and at annual presentation evenings. Learners are encouraged to progress on to study for post-qualification awards in such areas as radiology and oral health education.

10. Following an assessment at the end of the induction period, careful consideration is given to each learner's level of confidence and individual vocational interests when allocating them to a clinical team. Good advantage is taken of the range of opportunities afforded by the size of the company. For example, the company's 10 dental practices are located in a range of different social contexts. There are some small practices in rural locations with a predominantly retired population and larger practices in seaside towns serving areas of social deprivation. Some practices have well-developed computer systems. Learners can take an optional unit in information technology (IT) which features applications commonly found in a clinical setting, such as those used for medical records and for clinical charting. Learners can also choose to work with dental surgeons who specialise in particular areas of clinical practice, such as orthodontics, intravenous sedation, minor oral surgery or restorative dentistry. Learners value highly the choice and variety open to them and the efforts made to match work placements to their individual interests.

11. There are good external links to promote learning. Learners work with the company's oral health educators in making presentations to a wide range of client groups, including groups of nursing mothers, local play groups, primary and secondary schools, or areas where there is a high incidence of dental decay in young children. Learners devise their own presentations on preventative dentistry and make visual aids such as wall charts, large-scale books, or they instigate practical projects such as decorating a toothbrush. Learners are given experience of working in situations where they are expected to deal with particular challenges in communication. Links with a local college have enabled learners to gain experience in addressing groups with learning difficulties. Learners also take part in the company's work in residential homes for the elderly and its domiciliary service. The company offers up to five places each year for newly qualified dentists to gain work experience. They serve as a valued resource in providing the practice tutor and learners with updates on the most recent developments in clinical practice and in lending further support to the importance given to training by this company.

12. Individual learner's progress is closely monitored and interim target-setting for individual learners has recently been introduced in quarterly progress reviews. However, overall monitoring of all learners' progress in completing units has not been carried out. An analysis of learners' performance at the intake level and the setting of targets for these intakes have not yet been carried out.

Equality of opportunity

Contributory grade 1

13. The company has an equal opportunities policy for staff and learners that is up to date and covers the current legislation. A senior manager is responsible for equality of opportunity within the company and the policy is reviewed regularly and updated when legislation changes or improvements are identified. There are also policies for dealing with grievance and disciplinary issues. All staff and learners are given relevant, detailed information on equal opportunities and copies of the company policies during their initial training induction. Promotional materials used at careers events and information on the company's website contain positive statements about its commitment to employing people from diverse backgrounds, and images used show men, women and the multicultural staff working for the company. Health and safety considerations and the busy, confined working environment in surgeries are not conducive to employing learners who may have a physical disability. However, any applications from people with a disability would be carefully considered and the risk assessed for the job.

14. Staff involved with recruitment have received recent updating by an external consultant in equal opportunities. Staff studying to become NVQ assessors are given awareness training in equality of opportunity. The training is effective in making staff more aware of cultural, gender, disability and religious issues. The dental practices within the company have a multicultural mix of employees that is very unusual for the area. Some of the dental surgeons, originally from other countries, have trained at the practices and subsequently stayed to work in them. There are 40 full-time dental surgeons, 15 of whom are from minority ethnic groups. Learners have the advantage of working in a more culturally diverse environment than is usually found in the local area. They have a good understanding of the cultural differences and respect and value these differences. This richness of experience also helps them when working with the broad range of patients who attend the surgeries for treatment. Learners have a good recollection of the equality and diversity training they received during their induction to the company and are well aware of their rights and responsibilities in these areas. The company has recruited some learners from rural areas and has arranged to collect them for off-the-job training or, where necessary, meet the costs of public transport to the training venue and back to their home. Learners' rights and privacy are respected. For example, notification of a learner's pregnancy and the restriction this places on involvement in some clinical procedures, is handled sensitively.

15. Data are collected on ethnicity, gender and disability for all applicants. The company has 33 female learners, three male learners and four learners are from minority ethnic groups. Two years ago, the company committed to increase the number of male dental nurses and minority ethnic learners as they had no learners in either of these categories. Active marketing, visiting schools and careers conventions to promote dental nursing, and directly targeting those who are under-represented have been successful strategies in helping them to achieve their aim. This work is still continuing. The local population of minority ethnic people is less than 1 per cent as a proportion of the community. The learners from minority ethnic groups in the company now total 11 per cent. The company has also recruited three male dental nurses. This is a positive result of attempts

to challenge stereotypes by recruiting more men to a profession which is predominately female.

16. Progress reviews focus on how learners are being treated by others at work and at the training centre. Discussion takes place about whether they receive fair and equal access to assessment and training opportunities. However, sometimes the outcomes of these discussions are not written on the progress review forms to reflect the learners' views.

Quality assurance

Contributory grade 2

17. The course director is responsible for quality assurance within the company and oversees the ISO 9000 accredited quality assurance system. Written work procedures are internally audited and reviewed to ensure compliance with the system and correct operation. The system is also externally audited to maintain the ISO 9000 accreditation. Learners are asked to complete questionnaires to comment on the quality of training provided after their initial induction and at the three-, 12- and 24-month stages of their training programmes. There are planned observations of teaching sessions to check that the content is up to date and to improve the quality of teaching and learning opportunities.

18. The quality assurance system is effective and well documented. This helps to provide learners with a consistently operated programme, and helps the company to maintain thorough recruitment and training processes. Staff are fully aware of the procedures and how to properly carry out their assessment and training duties in a consistent manner. Learners are asked to evaluate the training four times during their training programme. This takes the form of questionnaires they complete to comment on the effectiveness of their training and assessments and learners are invited to suggest improvements. This process has led to several improvements to the programme. For example, it was suggested that learners' initial induction should be extended from one to two weeks as it was felt the amount of information given was too much to absorb in one week. Further evaluations following this change show that learners consider the induction to be good. Dental surgeons have commented that learners are now better prepared for working in the surgeries. Other improvements have included the company providing textbooks and more practical experience given at an earlier stage in the programme. Training sessions are regularly checked by dental surgeons sitting in on lessons to observe the content and provide feedback to the tutor on possible future improvements. The dental surgeons provide written comments on the suitability and currency of the technical content of lessons.

19. The internal verification process is very thorough and is carried out on a regular basis. All the evidence is checked by the internal verifier in all of the learners' portfolios of evidence. Thorough written feedback is given to the assessors about the adequacy and suitability of the evidence and the work is not signed as being verified until any additional requirements have been met. Assessors are regularly observed carrying out assessments, and written feedback is given to them about their performance. Sampling plans are well designed and accurately completed. Regular meetings are held with assessors to discuss assessments, NVQ standards, performance criteria and awarding body requirements. The meetings are held every four to six weeks and have written minutes with agreed actions. However, there is no written procedure to describe the sequence and timings of the verification processes.

20. The self-assessment report was first compiled in October 2001. It was then updated in August 2002. The report describes the recruitment, initial assessment, and training and assessment processes and highlights strengths, weaknesses and improvements needed. It

was written by the practice tutor and the course director and has been shown to all the senior staff in the company. There are action plans to deal with the self-assessed weaknesses and to build on the identified strengths. However, the self-assessment process is not an integral part of the company's quality assurance system. The self-assessment report and action plan do not systematically feature in staff or management meetings to review changes and to update the action plan. The report is treated as an LSC requirement rather than an important method for assessing and improving the quality of training provided by the company. Consultation processes are incomplete. Not all staff were consulted. Of those who did read the report, they were not asked to comment on the content or suggest improvements or changes. The report does not feature the views of learners. Some of the strengths identified in the report are no more than normal practice and some of the identified weaknesses relate to external factors beyond the operational control of the company. Inspectors identified additional strengths and weaknesses and awarded higher grades than those in the report for the area of learning, for leadership and management and for equality of opportunity.

Good Practice

The internal verifier compiles a brief report before the external verifier's visit. The report covers recruitment, training and assessment details. Details are also given on the progress made by trainee assessors.

AREAS OF LEARNING

Health, social care & public services

Grade 1

Programmes inspected	Number of learners	Contributory grade
Work-based learning for young people	36	1

21. John G Plummer and Associates has 36 learners working towards an NVQ in oral healthcare at level 3. The company recruited its first learners on to the NVQ programme in September 2000. Potential learners are recruited through marketing activities, referrals from careers services or recommendations from company employees. Learners are interviewed to assess a range of practical skills as well as the attitude and motivation of the applicant. The provider is responsible for all training, assessment, verification and reviews. Learners attend off-the-job training for one day a week.

The following table shows the achievement and retention rates available up to the time of the inspection.

Work-based learning for young people																	
NVQ Training	2002-03		2001-02		2000-01												
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
	Number of starts	13		14		20											
Retained*	0		0	0	0	0											
Successfully completed	0		0	0	0	0											
Still in learning	12		14	100	10	50											

*retained learners are those who have stayed in learning for at least the planned duration of their training programmes, or have successfully completed their programme within the time allowed

STRENGTHS

- excellent on-the-job training and support
- exceptionally good off-the-job learning
- effective initiatives to improve retention
- good assessment practice
- thorough and effective induction

WEAKNESSES

- slow progress for some learners

OTHER IMPROVEMENTS NEEDED

- better availability of surfaces for writing at off-the-job training

22. The provision and support for on-the-job training is excellent. This strength was recognised in the self-assessment report. A great deal of effort is put into ensuring that learners are supported in an environment which aids and encourages their learning. All staff are appropriately qualified and experienced. Partners, associate dentists, post graduate trainee dentists and dental nurse colleagues provide training in the surgery and take an active interest in learners' progress. Learners are able to demonstrate increasing levels of knowledge and performance as they progress through their programme of learning. Some of the tasks they perform are complex and demand a high level of technical knowledge and understanding. The dentists provide information, demonstrate practical tasks and ask questions to test learners' knowledge. Dentists have a good understanding of the NVQ and they are active in providing witness testimony and items of evidence for portfolios. Some of the dentists have digital cameras to record details of treatments, and with patients' permission, these records are now being made available to learners as evidence of their performance. During discussions with their colleagues, and at formal meetings, dentists regularly discuss issues related to learners' progress and the ways in which their learning experience can be enhanced. Dentists give regular written feedback to learners and trainers detailing the strengths and weaknesses of learners' nursing abilities. Actions are agreed to deal with weaknesses and improve performance. Senior practice nurses provide a great deal of on-the-job training and practical advice and guidance. There are excellent relationships between all staff at the individual surgeries. The monthly review process is thorough and issues of concern, highlighted during reviews, are dealt with quickly and constructively. Personal issues which may be barriers to learning are dealt with on a confidential basis but staff ensure that wherever possible learning can continue.

23. The off-the-job training is exceptionally good. Training is planned in modules and is clearly linked to the learners' jobs, the requirements of the external assessment and the NVQ units. Learners show considerable enthusiasm for this aspect of their learning. Their work is of a very good standard. They are fully engaged in class activities. For example, lively discussions take place with learners exchanging experiences of clinical practice. Their learning is very effectively directed by the practice tutor. Learning activities are varied and well paced to maintain learners' interest. Technical terms are defined and clear explanations are given of complex procedures in language that is appropriate to the client group. The teaching room is well equipped. There is a television and video cassette recorder which are used extensively to illustrate nursing

techniques. A comprehensive range of videos, books and equipment is used by the tutor. These materials are available to learners for use at home. Handouts are of a good quality and written in a language which is clear. Suitable writing surfaces are not available to all learners, however, when they are required to make detailed written records of learning activities. The tutor uses a fully equipped surgery to further enhance teaching and aid the links between background knowledge and practice. Each module of learning is meticulously planned, but is flexible to allow time for difficult subjects to be fully explored and understood by learners. Learners who join the programme late are given additional training to allow them to catch up with the main group. A range of methods is used to check learners' understanding including verbal and written questions, discussions, projects and end-of-module tests. Supervisory staff receive copies of monthly reports on the learners. Specialist dental surgeons and senior practice nurses often attend the background knowledge sessions to talk to learners about particular treatments, procedures and other, more specialised aspects of dental work. Learners are well prepared to take the external assessments. They complete mock tests, are given feedback and are then able to assess their own readiness to be entered for the test. Learners are able to progress at their own pace. A group of learners, who were assessed as more advanced in their learning, were given the opportunity to complete the external assessment at the first opportunity. Of the seven who elected to take the assessment in May rather than wait until November 2002, all passed and two passed with merit. This maintains the standard that had been achieved by learners under the old scheme. Between 1998 and 2000, all of the 10 learners recruited were retained and all successfully passed the external examination within the agreed length of programme.

24. Although historically retention of learners on the dental nurse training programme had been good, managers recognised that with the introduction of the NVQ in 2000 there was a sharp decline in numbers remaining in training. Of the first intake of 20 learners, 10 left training. A strategy to improve retention was developed. Potential learners are now invited to spend a day at a surgery and work with a dentist to give them an overview of their role and duties. The surgeon provides a written assessment of their suitability. If they are then offered a training place they are given a month's trial to ensure that they are committed to the programme and that they have the potential to succeed. Learners attend a range of practices and gain a good understanding of the pace of work and the level of accuracy required. Of the 21 learners recruited since this strategy has been established, only one has left.

25. Assessment practice is good. Assessment is by demand and assessors are not limited in the amount of time they spend with learners. Assessors usually spend at least half a day each week with learners, and sometimes an entire day. Assessors spend time observing learners' performance in the dental surgeries, testing their knowledge, portfolio-building and planning new units. There is a high ratio of assessors to learners. One full-time assessor has 10 learners, and the six part-time assessors have a pro-rata allocation. Learners are able to contact assessors by telephone at any time to request assessment or to ask for advice and guidance. Dental surgeons, senior practice nurses and practice receptionists regularly contact assessors and learners to let them know if a particularly interesting or more rarely performed procedure is due to take place. This

allows the trainee dental nurse to assist the surgeon and be observed by the assessor as evidence for the NVQ. Observations are meticulously recorded and cross-referenced to a number of units. Learners are encouraged to take responsibility for cross-referencing evidence. Detailed planning enables learners to easily identify the evidence required. Portfolios are well presented and demonstrate a very good level of knowledge and understanding. Written and verbal feedback are always given and learners have a clear view of their progress. All learners have a good understanding of the appeals procedure. Assessors receive excellent support from their internal verifier. They attend regular monthly assessor meetings and there is a great deal of informal contact between assessors and the internal verifier. A high priority is given to interpreting standards, standardising practice and ensuring that progress towards completion is maintained. Assessors who are in training are involved in all assessor meetings and feedback on their performance is constructive.

26. The procedures for recruitment and induction of learners are thorough and effective. Learners gain a full understanding of the company, their job and the training. Learners' enthusiasm, manual dexterity, basic skills and general aptitude for a career in dental nursing are objectively assessed before the offer of employment training is made. Successful applicants are interviewed, using a point-scoring system. Unsuccessful applicants are given verbal feedback and offered advice and guidance to help them identify other options. The learners are asked to write a storyboard about their previous learning and experience as an aid to developing a personal learning plan. Induction was lengthened from one to two weeks in 2001 following feedback from previous learners. During the two-week induction, learners receive a thorough introduction to the work of a dental nurse, and a comprehensive overview of employment rights, the NVQ and other training opportunities available. All learners are provided with uniforms, personal health and safety wear, the most up-to-date textbooks, stationery and a welcome pack of information. Contracts of employment and other documents are discussed and learners are encouraged to show them to their next of kin before signing. During the induction, emphasis is placed on learners' personal development. Teamwork is encouraged together with improving communication skills and building confidence. There are daily discussions in which learners have to solve problems. A range of skills required in the surgeries is introduced, which includes radiology, aspiration and sterilisation. These sessions are led by dental nurse specialists. Learners who are recruited later than the main group are given a full induction. Learners complete a post-induction questionnaire which is evaluated by the tutor to assess if and where the induction process can be improved. The induction process was recognised as a strength in the self-assessment report.

27. The first learners on the newly introduced NVQ in oral healthcare were recruited in September 2000 and registered with the LSC during January and February 2001. For these learners progress has been slow, a fact recognised by the company but not included in the self-assessment report. Learners started off-the-job training immediately. The internal verifier, assessors and managers had no previous experience of the requirements of the new competence-based qualification. A misunderstanding of information provided by the awarding body resulted in learners not being registered for

the award until six months after their start date. Learners' progress was further hindered when the centre was instructed by the awarding body to change NVQ-recording paperwork it had previously approved. Both assessors and learners spent a considerable amount of time changing portfolios. Learners recruited since June 2001 have benefited from improved assessment and verification procedures and the training of additional assessors. The final completion of units for many learners has been further delayed by the late external verification requirement that they write reflective accounts to cover every performance criteria and range for all 14 units of the award. This requirement covers many units which had already been assessed and verified as complete.

Good Practice

A high priority is given to the health and safety of all learners. During induction, learners are issued with protective glasses, gloves, masks and personal radiation dosage meters.