



Australian Dental Council report of an evaluation of Charles Sturt University Bachelor of Dental Science program

April 2019

Amended August 2019, November 2019 and May 2020

Summary report

Program provider	Charles Sturt University
Program/qualification name	Bachelor of Dental Science
Program/qualification abbreviation	BDentSc
Program/qualification code	4409DS
Head office address, including State	School Of Dentistry & Health Sciences Charles Sturt University Po Box 883 Orange NSW 2800
Campuses	CSU Albury, CSU Bathurst, CSU Dubbo, CSU Orange, CSU Wagga Wagga
Program length	5 Years
Registration division	Dentist
Registration speciality	NA
Qualification type	HE
Australian Qualifications Framework level	Level 7
Accreditation standards version	Accreditation Standards for Dental Practitioner Programs (Approved Dec 2014)
Date of site evaluation	2 - 3 April 2019
Date of ADC decision	23 May 2019
Type of accreditation	Monitoring - Condition
Accreditation start date	1 January 2015
Accreditation end date	31 December 2021

Background

Charles Sturt University's (CSU's) Bachelor of Dental Science (BDentSc) program was last reviewed by the Australian Dental Council (ADC) in 2014. Following the 2014 review, the ADC accredited the BDentSc program for a period of seven years without conditions.

In May 2018, concerns were raised informally with the ADC regarding the program. These concerns were addressed with the School directly, as the ADC did not have sufficient justification at the time to warrant further action. Concerns were raised in August 2018 and the ADC was advised that an external review of the program had been instigated by the education provider in response to the concerns of a third party.

The ADC considered the concerns reported and the actions taken by the education provider to undertake an external review of the program. The ADC placed a monitoring requirement on the program requesting the University to provide the final report of the external review commissioned into the concerns raised about the program.

The final external review report was provided to the ADC in January 2019. Following consideration of the report's findings, the ADC determined that there were potentially serious concerns with the program's ability to continue to meet the accreditation standards. The ADC determined that as a condition of accreditation, a Site Evaluation Team (SET) be appointed to undertake a site visit to review the BDentSc program against all of the standards.

Overview of evaluation

An ADC SET conducted a site visit on 2-3 April 2019 to CSU's Orange campus. The SET reviewed CSU's 37 page submission against the Standards, attached appendices and additional information requested following the SET's teleconference of 25 March 2019.

During the visit, the SET interviewed a range of individuals, including:

- The Executive Dean
- Head of School
- Discipline Lead and Deputy Discipline Leads
- Course Director
- Acting Clinical Director
- Sub Dean Workplace Learning and Accreditation
- Workplace Learning Administrative Officer
- Academic staff
- Clinical supervisors

- Manager Student Wellbeing
- Current students and recent graduates
- Public and private sector employers
- Chair of the Teaching and Learning Committee

The SET toured the laboratory, simulation facilities and clinic at CSU's Orange campus.

During the visit, the SET was provided with additional information including:

- Course mapping as created from the University's CourseSpace system
- Student assessments across all five years of the program, including log books.

In the week following the visit, the SET undertook teleconferences with staff and students that had contacted the ADC directly to request an interview session with the SET.

Clarification was requested from the School following these teleconferences regarding matters raised. The clarification provided by CSU was considered by the SET during the report writing process.

Key findings

The SET has identified serious concerns regarding the program's ability to continue to meet the accreditation standards. Many of the issues identified are inter-related and affect the programs ability to meet multiple standards.

The pressure that staff and students are under was made clear repeatedly during interviews.

The SET heard evidence of intimidation and allegations of bullying across a broad range of interview sessions, which the School must address urgently. The staffing profile is stretched to deliver the program as documented. Stakeholders interviewed acknowledged the impact the staffing shortages are having on the provider's ability to continue to deliver the program. The staffing shortage adds pressures on the remaining staff and raises concerns about how students can be adequately supervised to deliver patient care. The concerns raised regarding bullying, combined with a staffing profile that is stretched raises serious concerns regarding the ability of the provider to continue to safely administer student clinics.

The SET heard evidence that staffing changes are impacting on the program's delivery and consistency of teaching, which is impacting on the students' abilities to achieve the stated learning outcomes. If this issue is not addressed, it raises concerns about students' underlying knowledge and skills to safely operate within the clinical environment as they progress through the program. The evidence gathered indicates that staff are not aware of the didactic and pre-clinical activities that current student cohorts have undertaken and so there is uncertainty as to preparedness to undertake treatments within the clinic. The School must put processes and policies in place to ensure students have the requisite knowledge and skills prior to being expected to deliver these treatments within the clinical environment.

The SET heard evidence of plans to recruit additional staff, particularly to assist in areas such as periodontics, endodontics and oral surgery. The School must consider interim measures to support student learning until these roles can be filled as detailed in the plans advised to the SET.

The evidence gathered indicates that external input into the program's design and management is lacking, with the External Advisory Committee (EAC) no longer functioning as intended. Improving the School's communication with the wider profession, particularly local practitioners, may assist and provide opportunities for external input into the program's design and delivery to ensure the program meets the accreditation standards.

Issues with communication between students and staff and between staff are contributing to an atmosphere of distrust that has developed within the program. Providing opportunities for students to be represented within deliberative decision making bodies/committees with oversight of the program will assist to address this issue and help to ensure the accreditation standards are met in full. The provider must establish ways in which changes made in response to feedback are communicated to the students that provide the feedback. Clarification of the roles and responsibilities of the various School and Faculty staff supporting the program will also help to address issues regarding communication, as will identifying opportunities to incorporate emerging trends in health professional education. The process as documented, while thorough must also enable changes to be made as opportunities for improvement are identified.

Not all professional competencies expected of a newly qualified dentist are taught and assessed within the program. A course review is planned with detailed mapping to ensure that all of the required professional competencies are taught and assessed. The mapping as outlined to the SET is commendable, but must ensure that the scaffolding required to develop a dentist that is safe and competent to practise is maintained. Areas such as health promotion, cultural safety as it relates to Aboriginal and Torres Strait Islander peoples, inter-professional practice, and research literacy are areas that could be improved within the deliberative teaching and assessment processes.

External validation of current students' readiness to practise will provide reassurance that the program is delivering on its stated objectives. It will also go some way to ensure that cheating that was reported to have occurred has not impacted on some students' readiness for practise.

The SET was reassured that despite the issues identified, all evidence indicates that previous cohorts have been able to develop the required professional competencies by the point of graduation to ensure they are safe to practise. There are indications that those in the final stages of the program will also be able to meet the requirements to enable them to practise safely. The SET has identified serious concerns, which if not addressed quickly, will impact on the program's ability to continue to deliver graduates that are prepared at the point of graduation. If not addressed, these issues will jeopardise the program's ongoing accreditation.

ADC accreditation decision

The ADC determined that Charles Sturt University's Bachelor of Dental Science program remains accredited **currently**, subject to the following conditions:

To ensure the program is appropriately staffed and that students are supervised by registered practitioners as required to meet standards 1 and 3:

1. CSU must provide quarterly updates of the staffing profile available to support the program and identify any changes. The reports are to be provided by **30 June 2019** and **30 September 2019** and include an update on the progress to fill staffing vacancies and how adjunct appointments are used to address gaps in the staffing profile previously identified. The report must detail staffing roles and responsibilities and advise how this is communicated to staff and students.

The ADC has determined that this condition has now been met in full.

2. CSU must ensure that clinics are adequately staffed at all times. A report detailing which dental practitioners are allocated to supervise students in semester 2 2019 for pre-clinical and clinical sessions is to be provided by **30 June 2019**.

The ADC has determined that this condition has now been met.

To meet standard 1 and ensure student clinics providing care to patients are safe:

3. A process of validating a student's readiness to provide a particular procedure or treatment must be implemented. CSU is to provide evidence that students only perform treatments or procedures once they have the pre-requisite knowledge and skills to provide these treatments safely. A report detailing the actions taken is to be provided by **30 June 2019**.

The ADC has determined that this condition has now been met.

4. CSU is to provide evidence that demonstrates staff and students follow the policies/procedures in the clinical environment to report incidents and near misses. This evidence is to be provided by **30 June 2019**.

The ADC has determined that this condition has now been met.

To ensure that allegations of bullying are addressed and ensure standard 1 and standard 4 are met:

5. CSU must take action to address the reported allegations of bullying and harassment. CSU must provide details of the plan in place to address the issue of bullying by **30 June 2019**.

The plan may include but is not limited to:

- an independent investigation of claims made;
- a review of the process that is followed when such matters are raised;
- how staff/students will be supported to raise concerns safely or respond to concerns raised about them in a safe manner;
- how CSU will communicate with stakeholders to make them aware that actions are being taken, considering the need to maintain individual confidentiality and show respect to all parties involved.

The ADC has determined that this condition has now been met.

To meet standards 2 and 4 by ensuring quality assurance processes are effective and that students are represented within deliberative and decision making processes:

6. CSU must provide a report to the ADC by **30 September 2019** detailing the governance arrangements in place to manage the program's design and delivery. The report must detail:
 - How feedback from staff and students is gathered and used to improve the program and how this is communicated to those providing suggestions for improvement.
 - The committee/decision making process to enable a change to program learning outcomes, course content/structure or assessments and how this is effective in ensuring contemporary developments in health professional education can be incorporated into the program.
 - The responsibilities of staff in managing this process to ensure it is effective.
 - The representation of students within these arrangements, including on committees or decision making bodies and the steps taken by CSU to ensure these positions are filled.
 - The steps taken to incorporate external input into the design and management of the program, for example a survey of employers of recent CSU graduates and/or an external advisory committee. The report should detail meetings held, which external input has been provided and how external input will be incorporated into the program review to be undertaken.

The ADC has determined that this condition has now been met.

To meet standards 3 and 5 to ensure students achieve the required professional competencies and that these are assessed:

7. By **30 September 2019**, CSU is to provide details of how external experts are used in the assessment process to determine that students are ready to practice by the point of graduation or of other ways in which external validation or assessment moderation provides assurance that assessments are fair, valid and reliable.

The ADC has determined that this condition has now been met.

8. CSU provides evidence **by 30 November 2019** that confirms external experts have been used to assess students and that the following is addressed for fourth and final year students:
 - a. The assessment process is fair and robust and there is an application of the progression criteria consistent with that advised in the course outline
 - b. The moderation and feedback processes are followed before and after the assessments are conducted.

The ADC has determined that this condition has now been met.

9. CSU is to provide a report by **31 March 2020** to advise how all of the professional competencies of a newly qualified dentist will be assessed. The report should detail how the program determines that students have developed the professional competencies by the point of graduation, including competencies relating to health promotion, research literacy, intra and inter-professional practice, and culturally safe practice as it relates to Aboriginal and Torres Strait Islander peoples.

The ADC has determined that this condition has now been met.

10. CSU is to provide evidence by **30 June 2019** that the processes in place to address cheating are effective and that only students demonstrating the required professional competencies can graduate from the program.

The ADC has determined that this condition has now been met.

As a condition of accreditation, a site visit is to be undertaken within six months to evaluate the Bachelor of Dental Science program's ongoing ability to meet the accreditation standards. The review will consider whether communication between all parties has improved which is impacting on the program's ability to meet all standards currently.

The ADC has determined that this condition has now been met. For further details of the outcomes of the site visit, refer to the September 2019 summary report.

The ADC reserves the right to schedule a further monitoring review as detailed in the *Accreditation Monitoring Framework* at any time. Any future monitoring review would be to verify information provided in response to the conditions outlined, or gather further evidence regarding the program's ongoing ability to meet the accreditation standards.

The ADC will provide notice as to the need and timing of any such review and the scope as it relates to the accreditation standards.

ADC Secretariat Note:

At the ADC/DC(NZ) Accreditation Committee on 9 August 2019, the ADC considered the condition report submitted by Charles Sturt University on 30 June 2019.

At the ADC/DC(NZ) Accreditation Committee on 8 November 2019, the ADC considered the condition report submitted by Charles Sturt University on 30 September 2019.

At the ADC/DC(NZ) Accreditation Committee on 1 May 2020, the ADC considered the condition report submitted by Charles Sturt University on 31 March 2020.

Conditions that the ADC has determined to have been met are indicated above.