Foreword

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Dentists today are increasingly expected to be involved in both quality and management issues. They are being asked to implement clinical governance, lifelong learning, clinical audit, peer review as well as all the health and safety issues and other requirements that are legally necessary. All these initiatives require practitioners to look at the systems that they have in their practices and through such tools as audit and risk management improve the quality of the service they offer to patients.

Part of good management, and part of ensuring everyone in the practice can keep up with all these requirements, is a sensible and effective training plan. In order to achieve this, practitioners must look at their training needs and those of their staff, as not only clinical governance but the GDC's lifelong learning strategy will need some degree of personal and practice development planning. Training needs, the areas of knowledge and skill that people feel could be improved in order for them to carry out their jobs, is an area that has long been recognised in business but is fairly new in healthcare where people have tended to follow the traditional path of assuming that the establishment knows the appropriate training for those who deliver healthcare.

Thus, it is becoming increasingly important not only in business but in the postgraduate education world that individual training needs are identified rather than following the perception of needs by the establishment.

So how does the GDP do that?

This series of articles explains simply and clearly how to identify training needs using a recognised business model (recognised by the Chartered Institute of Management and outlined

in their Standards). The foundation of the series, based on the models developed for the business world, is an emphasis on training to help people become more confident and competent at doing their jobs throughout the dental team. More than that, a training needs analysis links the training with objectives, and for practices with defined objectives about 'where they want to be and how they are going to get there' then training the whole team is essential.

Training needs assessment is part of personal and practice development planning and has some huge benefits to the dental team. Firstly, the training can be planned and cost effective, Individuals become more confident and competent, resulting in increased job satisfaction. As a result a well trained team is more efficient and potentially capable of increasing the practice profit.

In simple terms, training needs analysis gives a clearer idea of what everyone in the practice, including all staff, PCDs and dentists (whether partners or associates) is trying to do.

Perhaps some may doubt whether this is achievable. Yet life-long learning provides an opportunity to focus on training needs, and clinical governance requires 'an environment where clinical excellence can flourish'. Perhaps the question should not be 'Is this achievable' but 'How do I achieve it?' This series, of which the following article is only the introduction, give practitioners the tools to use to achieve their objectives. It is both simple to apply, and liberating in the effects it has on those who apply it as they begin to see how to train and develop people in a planned and cost-effective way to become more effective at achieving the objectives of the practice. Surely this is what we should all be doing?

Introduction by Mike Grace, Editor, British Dental Journal

This series of articles suggests that continuing professional development (CPD) and recertification can contain much more benefit and value for both individuals and organisations in dentistry than simply satisfying the need to demonstrate that professionals are maintaining their knowledge and skills in order to provide quality care for patients. The real key to the value in CPD is the outcome, what actually happens as a result of CPD.

We all know of CPD programmes where the participants simply turn up at the start to register their attendance and then quietly disappear a few minutes after the programme has started. We all know that some people attend a course because it is a requirement and sit throughout the programme with no attempt to listen or participate. Even those who attend a course because they want to and then return to their organisations will often disregard the information and continue acting as they have always done.

In other words, much postgraduate education can be a waste of resource because nothing changes as a result. This state of affairs seems to be fairly accepted, with attempts by course organisers and those with a responsibility to provide CPD programmes restricted

to finding out what people want (in terms of subject matter) rather than identifying genuine training needs in the audience.

This series examines the model of a training needs analysis that is a standard model in business for companies and organisations to ensure that training is appropriate for the individuals receiving it. This model, although widely used in the commercial environment, appears to be almost unknown in dental education, even though the requirement to identify training needs is recognised. Thus this model is a practical 'how to' that answers the question 'How can we make sure the training people receive results in some form of positive outcome?'

The model may not be new, but its application in dental organisations definitely is. For this reason I have avoided complex theoretical concepts and focused on the simple processes involved, encouraging activity rather than debate. After all, if we can ensure that CPD produces genuine benefits for those participating in it, we must surely stimulate a desire to embrace the concept rather than resist it.