## GDC visitations - on their way out?

he General Dental Council (GDC) has recently published its report on the visitations to the Undergraduate Dental Degree Programmes and Final Examinations in the United Kingdom.1 All the dental schools have breathed a collective sigh of relief as the current round has come to an end after each has been visited to assess the quality of its education, a process which the GDC has performed since its inception 50 years ago. The organisation for such a visitation involves a great deal of work on both sides. The school has to provide documentation, paper trails of its quality assurance procedures and be prepared for questions and interviews on the day. The visitors are asked to provide an indepth written assessment of the course and the final examination which will eventually be published in the public domain. Sometimes it is necessary that the visitors have to revisit to see that standards are upheld, since there are only two gradings: sufficient or insufficient. It is to the credit of the UK schools that they were all graded sufficient, although this may not please the popular press who thrive on competition and league tables!

Whilst these visits have been taking place, the GDC had increased its role in the practice of dentistry. One of the areas where there has been major expansion is in the region of fitness to practice. At the same time the Council is expanding its register with the introduction of full registration of Dental Care Professionals and it could be argued that the Council will become stretched as it strives to maintain its position in these multiple areas of activity. The visitation process may well become difficult to service in the way that it has been done in the past. For instance the visitors who are involved with the visitations are likely to find it increas-

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ingly difficult to take time off from either academic institutions or busy practices, thus reducing the present pool of experienced practitioners. Similarly, institutions are moving on, reducing administration and aiming to provide a more sensible audit trial. The Quality Assurance Agency (QAA) visitation process was a demanding and rigorous exercise, following on from which universities have introduced institutional audit and undergone benchmarking procedures. This is seen as more cost effective than the old style QAA exercise and involves different departments reviewing each other with external verification. The present GDC visit to a dental course takes three days, followed by visit to the final examinations. A streamlined approach to the audit process over a longer time period may well be both preferable and more sensible to all concerned.

The world is changing at a relentless pace and the GDC will need to be ready for such changes, although the tasks are already becoming daunting. For instance *The First Five Years*<sup>2</sup> is a useful document but requires reviewing in light of new developments. Its last update was in August 2002.

There is also Europe to consider and the challenge of the Bologna process.<sup>3</sup> This involves a two-cycle process to the attainment of a medical or dental qualification where the Bachelor is an academic award that leads onto the Masters degree. The latter level of qualification will be required for the practise of dentistry. It is argued that this process will provide added value and relevance to our educational process and produce better integration. Europe is beginning to take the lead and the efforts of the Association for Dental Education in Europe (ADEE), with the three cycles of the DentEd projects moving

dentistry a long way towards harmonisation and agreement of standards within European dental education. The document *Profiles and competencies for European dentists* has been published<sup>4</sup> and a paper on the use of the European Credit Transfer System (ECTS) allowing potential movement between universities has also been made available.<sup>5</sup>

In the light of these changes, is the GDC visitation still of value? Or will it become an extra tier of quality control that will already be undertaken by university institutional audit or the involvement of European legislation? If so, it may well add burden to already hard pressed dental schools. It is a debate that should be opened up as the GDC may not be able to pursue all its objectives and the future cost and organisation of the dental visitation process may well become prohibitive when added to the Council's other expanding responsibilities.

## Professor A. Damien Walmsley, Professor of Restorative Dentistry, University of Birmingham.

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