

*Institute of Dentistry*  
**422<sup>nd</sup> meeting of (Dental) SSLC held on 2<sup>nd</sup> December 2020**  
**Microsoft teams**  
**Student Staff Liaison Committee**

**Minutes**

**(Chair)** Dr D Hurst

**(Secretary):** Ms Mariam Khan

**Staff members present:**

Dr A Crutchley (AC)  
Dr A Ranauta (AR)  
Ms R Hunter (RH)  
Dr S Rawlinson (SR)  
Ms L Spicer (LS)  
Ms J Treadgold (JT)  
Dr S Younas (SY)  
Dr Pratik Sharma (PS)  
Mr B Audsley (BA)

**Student members present:**

Mr Milton Justinsuthakaran (MJ)  
Mr Mat Robathan (MR)  
Ms Mariam Khan (MK)  
Ms Amina Arshad (AA)  
Ms Shona Sawhney (SS)  
Ms Helya Moghaddam (HM)  
Ms Zaynah Fariduddin (ZF)  
Ms Areej Mehdi (AM)  
Ms Sabaa Nawaz (SN)  
Mr Rawand Shado (RS)

**Apologies for absence:**

Mr M Newberry (MN)  
Dr J Berry (JB)  
Prof M Patel (MP)  
Dr M Payne (MaP)  
Ms Catherine Mclean (CM)  
Dr S Butcher  
Ms S Murray (SM)  
Ms Gurleen Muker (GM)  
Ms Roya Hashemi (RoH)  
Ms Emma Grimshaw (EG)

**Unaccounted absences:**

N/A

## Part 1: Preliminary items

### Minutes of the previous meeting

57:20      **CONFIRMED**

### Matters arising from the last minutes

	Action	Progress	Responsibility
49:20	BA to produce a guide on how to download subtitles on pre-recorded lectures or how to display them on live lectures for BDS1	Ongoing	BA
49:20	SR to email first years reading list from the handbook	Completed	SR
49:20	AR to send an email to all teaching staff to remind them to upload PowerPoints prior to lectures and seminars taking place, also containing a link to DH's video	Completed	AR
49:20	SN to let all BSC1 students know that all assessment information is in their handbook which is available on QMplus	Completed	SN
49:20	SY to email BDS3 regarding Liftupp scores and what level students should be at currently	Completed	SY
49:20	BA to send a link to the Liftupp online training suite to BDS3	Completed	BA
49:20	DH to find out more information about Flu vaccinations for students from Barts trust	Completed	DH
49:20	AC to get in touch with Dr Cotton about adapting BDS4 oral pathology lectures to contain more writing	Ongoing	AC
49:20	LS and JT to get in touch with BA regarding on a more accessible way for students to receive timetable changes	Ongoing	LS, JT, BA
49:20	JT to finish google calendar with students timetable	Ongoing	JT

49:20	SS and AA to meet with Dr Vijay to discuss an additional SJT session	Completed	SS, AA
49:20	AA and SS are to let students who have oral surgery in two weeks time know to email Dr Jones, Dr Sidu, Dr Ranauta and Dr Berry and they will try and prioritise these students for fit testing	Completed	SS, AA
49:20	LS to email BSC2 students on group splitting	Completed	LS
49:20	RH to email JT regarding which BDS3 lectures BSC2 need to attend	Completed	RH

## Part 2: Programme delivery and other matters

### 58:20 Learning, teaching and assessment

#### NOTED BDS1 Matters –

- Students were wondering if they could have some more clarification on their upcoming ICA. SR is hoping to run the exam within a 4 hour window in a 24 hour period where students can leave and re-enter the exam if they had technical difficulties. DH has said for summative exams students should be given 24 hours rather than 4 hours. AC has said that the 24 hour approach is most likely to be taken as this is the QM policy for exams in the first semester.
- Students wanted an update on the google calendar. AC has said that QM have offered a piece of software to replace the current timetable that will work with different inputs from different places. This software will be more reliable than the google calendar and less complex than the excel timetable. AC has said that they are hoping that they will be able to use this software and will have meetings about it in due course.
- Students have requested if all their tasks could be found under one tab on QMPlus. DH, SR, CM and BA will have a meeting regarding this.
- MR was wondering what the approach to blended learning was for BDS1. AC has said BDS1 were advised that everything would be online initially however a series of enrichment on communication was created where students came in and had face-to-face teaching. Next term BDS1 have been told that the online learning would be continuing however in addition to this their practical classes will be starting along with some other face-to-face sessions. SR has said that the Q&A sessions will also be face-to-face in the second term. BA has said that they have been using the communication skills

workshops and AR's lectures as a test for both Q-review live where students are live in person in the session and live online as well at the same time. Blackboard collaborate has also been used for this with a camera in the actual session. They are also looking at getting a camera in each of the seminar rooms so that tutors will be able to livestream from seminar rooms too.

NOTED BDS2 Matters

- Students favourite form of learning was having a pre-recorded lecture followed by a Q&A session so were wondering if the lectures next term could be in this format. AC has agreed that this has been a successful approach and will talk to Dr Payne about the BDS2 lecture schedule next term to see if this could be factored in.
- Students wanted to know if they were going to have lectures next term or if they have completed all of them. AC has said Dr Payne has said that it will be largely skills based as the first term was going to be where BDS2 students had most of their lectures. If there are lectures, there will only be a few and supporting Q&A sessions will also be scheduled.
- Students were wondering if they could arrange Q&A sessions for modules that they found more challenging. AC has said this can be explored once the assessment dates and nature have been finalised.
- Students were wondering if there was a rough guide for how many days a week they will be expected to be in next term so that they can make a more informed decision on whether they should live out or commute. DH and AR have said to use as a guide that 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> years are coming in 1-2 days a week so BDS2 should use this as a broad estimate. Another risk assessment will be happening in the clinical skills lab to see if more students will be able to come in at the same time. MR has said that students should be told if there are other face-to-face activities other than clinics that students can attend as this will also influence whether students decide to commute or not. The policy from QM is encouraging blended learning and having 2-3 days a week of in person activities for each course. MR has said that students need to have as much information possible so that they are more equipped to make big decisions such as paying rent. AR has said that communication skills seminars are also being planned which are not clinic based. However, even then there may be some times where students have 3/4 days one week then only one day the next week. It is more likely that it will work out to be 2/3 days a week if you were to average it out, rather than it being consistently 2/3 days every week. MR has said that this should be made clear to students so that they can make a more informed decision.
- Students would like to know whether all their clinics will be in Whitechapel next term. AC has said that BDS2 will not be going to Southend but may have to go to Barkantine, Guttman and Newham.

NOTED BSC1 Matters

- Students have been feeling left out during joint seminars and lectures with BDS2. This is in terms of not having some of the same background knowledge that BDS2 would have received last year. BA has said that BSC1 have been given access to current BDS1 content

but not last years content as this would have to be done through the archive which poses problems as they were not here last year. AC has said that the information BSC1 will need is in the current BDS1 section, just in a slightly different structure, however all the content is there. AC has said however, they don't have access to all of the BDS1 content as it is not all currently being displayed, and new lectures are added as BDS1 receive them. A way to work around this will be found. SR has also said that BDS1 are asking for access to last years lectures on Q-review which are on this years webpages however students cannot access them. **BA has said that he will solve this problem.** AC has said that if these can also be made available for BSC1 then the first problem will also be solved as BSC1 will then be able to view last years BDS1 lectures. Students were also feeling left out in the sense that PowerPoints mainly show examples addressing dentists rather than BSC1 students. AC has said that Dr Payne has been in touch with tutors regarding this. AC will remind lectures about this again.

- Students have requested sessions that help students know what they need to understand in order to keep up with the BDS2 teaching. AC has said that last year there were some sessions and has asked **SN to email Ms Murray to follow up on this.**

NOTED BDS3 Matters

- Students were wondering if they could have more communication from staff regarding assessments. Students would ideally like reminders via email that also include more details than what they have received so far this year which has been minimal. DH will raise with SY
- Students were wondering if they could be emailed when the timetable changes. JT has said that this is difficult as there have been a large number of changes to the timetable this term. AC has said that if the new software works this will not be an issue as it updates itself every 15 minutes.
- Students would like to know when term dates will be. AC has said the Christmas holiday is definitely from the 18<sup>th</sup> of December – 4<sup>th</sup> of January. Due to the COVID testing changes, the last week may be online. The first week back may be self directed learning. The other term dates have not changed from the provisional term dates that were sent in September.
- Students were wondering if they could have a rough idea of when exams will be. AC has said that the exams will be in the summer. The gateway exams will take place at the end of the gateway teaching for each module.
- Students have requested videos to be made for each clinical tasks. AC has said that CM and BA are currently doing this but it will take some time.

NOTED BDS4 Matters

- Students have had concerns about lecturers not attending lectures and not posting the slides. AC has said that they need to look at who is not attending and resolve this. AC has asked HM to email him who is not attending. There is also going to be a performance review in the new year.
- Students wanted to know when they are going to start orthodontic, oral surgery and oral medicine clinics. The aim is to have the full timetable sent out by December 17<sup>th</sup>. Patient treatment will start from the 18<sup>th</sup> of January at outreach.
- Students are worried when they start to see patients that it is going to be screening for the first two months and all the time on phantom head is going to be lost for screening. Students wanted to know if more clinical time could be scheduled. AR has said there have been several conversations since students were told that they were only going to screen for two months and they are not looking to do two months of screening anymore as this would not make sense as patients would need treatment before that. There will be an intermittent period of screening in a non-AGP environment and an intermittent period of AGP so that students can deliver care to the patients that they are screening and creating treatment plans for. Two months of screening will not be happening.
- Students were wondering if there was a set time for when they are going to be fit tested. JT has said that this will take place in two weeks in early January. JT is currently liaising with the trust on how she is going to book BDS4 in for appointments.
- Students wanted to know if there was an update on exams and OSCE's. AR has said that there is most likely going to be a blended approach to assessments. MR has said that the QM policy is that all exams have to be online except practical exams such as OSCE's. The SMD are looking at getting exemptions so that some exams can happen in person. AC has said that OSCE's cannot be done except socially distanced and live. Other exams can potentially be done online but then this poses the challenge of timings and keeping the validity of the exams. AC's goal for the next few weeks is to get a schedule for each of the year groups about the time, nature and dates for the exams.
- Students have been told that there was nowhere for donning and doffing in Southend so were wondering how this was going to work for AGP'S. AC has said that a way around will be found.

NOTED BDS5 Matters-

- Students were wondering if clinical huddles could be done consistently to help identify which procedures students need to do and allocate patients accordingly. Dr Rogers has sent an email out to let the nurses know which students are low on dentures so that they can be prioritised for denture patients which students have found helpful. Students would like to know whether they are on this list as they are unaware and feel this will be beneficial. AR has asked SS to email Dr Rogers directly so she



can inform those students that are low. An alternative is to ask BDS5 students who feel that they are low to email Dr Rogers themselves. PS agrees that the huddles are a good idea and has asked the students to remind the tutors to do this on the day in case they forget. PS will also email tutors to remind them to do the huddles.

- Students were wondering if students that are low on restorative work would be able to excavate the caries and place GIC's. AR has said that it is hard to know until the patient comes in. With the AGP sessions, it may be a different situation.
- Students have noticed some discrepancies with regards to what students can do on clinics. For example, some tutors have allowed students to do GIC fillings whereas others have not. Students do not want to be disadvantaged by not being able to do certain procedures when other students have been allowed. AR has said that in the early weeks there were some reservations as if students were to excavate and place a restoration that was too high on the bite, by using the hand-piece to correct this then the procedure would turn into an AGP. In the earlier week's students were not ready to do that. This has transitioned now with students being more competent in their clinical skills in placing temporary restorations.
- Students were wondering if there could be a standardised marking procedure for Liftupp. Students were mainly concerned about the paediatric teeth. A lot of students in the paediatric teaching got 3's in many procedures that they felt they should be getting 4's. AR has said that she has had input from the staff teaching paediatrics and that they were taken aback by students asking for 4's when they had not used separators to simulate separating teeth for placement of stainless steel crowns. When the tutor highlighted this to students, students explained that it wasn't a real tooth. However, in simulated sessions, students are expected to practice as if it were a real mouth and therefore students should use separators. AR has suggested for SS to follow this up with paediatric leads to get some clarity on this and confirm that using separators is the normal protocol for placing stainless steel crowns. AR can ask Dr Humuctar to reinforce what he expects in the simulated sessions in an email format.
- Students were concerned about not being able to meet the targets set in the simulation book. AR has said the simulated targets are being reviewed. The reason that the simulated targets were set higher this year than in the past was because the view was to have students still doing things in the simulated environment rather than relying on just patients where there was uncertainty. This was also the reason behind offering the Saturday sessions- to give students an opportunity to expand on the simulated numbers. The simulated numbers can be adjusted if it is felt that they are not achievable in the sessions provided. If patient numbers go up then the simulated numbers can also go down. AR has said that students should not worry about the numbers and know that staff are aware that they are high. AR

has suggested reviewing these at a monthly basis to see how students are feeling.

- Students were concerned that if they were low on denture numbers and crowns then they would not be able to follow up on each stage of treatment as they see different patients when they come in. Students were therefore wondering if there was any way for them to have that continuity of care so they will be able to carry out the different stages of dentures and the different stages of crown prep. AR has said that continuity of care is the one thing that they cannot give students as they don't know whether patients will or will not turn up. There is a list that has been generated by Dr Rogers of the removable prosthodontics patients and their requirements and therefore that list will also give an indication of the work that has been found in the lab and stores. It has taken a lot of work to categorise the removable prosthodontics patients, the work that has been identified and then also the students that need to have done enough of all the different stages. The only way to be fair to everyone is not only prioritising students that need to have clinical experience in prosthodontics as urgent but also giving clinical experience to everyone. To ensure this the only way is to keep patients coming through and for students to have experience in all aspects in different patients. If patients were limited to one student will be challenging to get the patient booked in on the same day as that one particular student due to the complex timetable. PS has agreed that this is the best way going forward to ensure all students get the experience they need.
- Students were wondering whether meetings with Dr Berry and Dr Ranuata regarding LiftUpp numbers were still going to go ahead. AR has said that one of the reasons the academic advisors were bought in was to enable one to one meetings for all final year students. The group that AR had met had looked at their LiftUpp data and screenshotted it into their PDP. AR has said that this was very useful to discuss their needs in both the patient and simulated environment. Students were then signposted to discipline leads and then it was possible to work out which extra sessions students needed in the labs. AR and JB are not planning to meet students this term themselves but will be planning another academic advisor meeting towards the end of the term where students will be meeting their academic advisors to collate how things have gone through the term. AR can email the discipline leads to ask them to contact students that were low on numbers if they have not done so already. AR has asked SS to encourage students who feel their low on numbers to email the discipline leads to check. Students found the email received from paediatrics which explained what was expected from the students and have asked to have a similar email from the other discipline leads. AR will share the email with the other discipline leads.
- Students wanted to know if it was possible to have a few weeks notice for Saturday labs so that they can inform their jobs. AR has



said the Saturday timetable has been constructed and a final meeting will be happening next week so students will have the timetable soon. PS would like to know from SS and AA which students will find it difficult to attend Saturday sessions and of those, which dates certain students cannot attend and they will use the information in the construction of the timetable.

- Students had concerns over having clinics up until the 18<sup>th</sup> and therefore not being able to isolate if they needed to before going home for Christmas. AC has said for healthcare courses the expectation was to be on campus until the 18<sup>th</sup>. The impact of the testing dates have changed this and so this issue is being addressed currently to minimise the impact on clinics but to still allow students to go home appropriately.

NOTED BSC2 –

- Students had concerns regarding their oral surgery gateway where they will have to extract paediatric teeth however they have not practiced this. DH has asked ZF to email Dr Jones and Dr Lewis regarding this.

59:20 **Learning Resources**

NOTED Library facilities/ resources: Students are able to book into library facilities now.  
E-learning/QMplus: Nothing to report

60:20 **Academic support**

NOTED PASS: Nothing to report  
Mentoring: Nothing to report  
Other: Nothing to report

61:20 **Pastoral support**

NOTED Nothing to report

62:20 **DQAC & DEC Report**

NOTED Nothing to report

63:20 **EDSA& BDA Report**

NOTED Nothing to report

64:20 **Events**

NOTED Nothing to report

65:20 **Elective report**

NOTED Nothing to report

66:20 **Date of next Meeting**

NOTED January

### Action Sheet: Student-Staff Liaison Committee

	Action	Progress	Responsibility
49:20	BA to produce a guide on how to download subtitles on pre-recorded lectures or how to display them on live lectures for BDS1	Ongoing	BA
49:20	AC to get in touch with Dr Cotton about adapting BDS4 oral pathology lectures to contain more writing	Ongoing	AC
49:20	LS and JT to get in touch with BA regarding on a more accessible way for students to receive timetable changes	Ongoing	LS, JT, BA
49:20	JT to finish google calendar with students timetable	Ongoing	JT
58:20	DH, SR, BA, CM to have a meeting to find a way to put all BDS1 tasks under one tab	Ongoing	DH, SR, BA, CM
58:20	BA to give BDS1 and BSC1 access to last years BDS1 Q-review recordings	Ongoing	BA
58:20	SN to email Ms Murray regarding having extra sessions so BSC1 have the required background knowledge that BDS2 would have received last year	Ongoing	SN
58:20	SY to request module leads to give BDS3 more information and clarity regarding assesments	Ongoing	SY
58:20	HM to email AC a list of lecturers that have not been attending their lectures	Ongoing	HM
58:20	SS to email Dr Rogers and ask her to email students that are on the low denture list so that they are aware	Ongoing	SS
58:20	PS to email tutors to remind them to do clinical huddles	Ongoing	PS
58:20	AR to ask Dr Humectar to explain to BDS5 students what he expects in the simulated sessions in an email format	Ongoing	AR
58:20	AR and BDS5 to review LiftUpp numbers on a monthly basis to see how students are feeling about them	Ongoing	AR
58:20	AR to email discipline leads asking them to contact BDS5 students that are low on numbers	Ongoing	AR
58:20	AR to share email BDS5 received from paediatrics regarding what was expected from them with other discipline leads to let them	Ongoing	AR

	know that students found it useful to have an email like this		
58:20	SS and AA to email PS with a list of students that have Saturday jobs and which days those particular students are not free so that this information can be incorporated into the Saturday timetable	Ongoing	SS, AA
58:20	ZF to email Dr Jones/Dr Lewis regarding the BSC2 oral surgery paediatric gateway	Completed	ZF