Guidance for Qualification Approval and EQA Reviews

NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing

QRN: 601/2251/1

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Summary of Changes

This section summarises the changes to this Guidance for Qualification Approval and EQA Reviews document.

Version	Publication date	Summary of amendments
V11.3	December 2020	Removal of references to Apprenticeship Standards in England as this qualification is no longer suitable for the apprenticeship in England.

About this document

This document will support Centres who are seeking to gain Qualification Approval to deliver and assess the Level 3 Diploma in the Principles and Practice of Dental Nursing qualification.

Please contact your External Quality Assurer for further information on how to become and approved Centre.

This document contains useful guidance about how to meet dental requirements and exemplars that can be used by Centres. Alternatively Centres may devise their own in line with these exemplars. Once approved, Centres will have access to further materials on our secure site to support the delivery, supervision and assessment of the qualification. This includes the following:

- Qualification Specification containing guidance on delivery requirements, qualification details, useful templates and policies, information on the external assessment tests, internal and external quality assurance processes.
- Unit and Task Specification containing unit details and optional assessment tasks for all units, useful personal development log/diary templates for learners.
- Assessment Specification containing details of how to assess the qualification, assessment methods, descriptors and marking guidelines for the optional assessment tasks.

Note: this document contains references to appendices that have been extracted from the Qualification Specification.

Qualification summary

Title	NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing				
Qualification number	601/2251/1				
Purpose	This qualification focuses on direct chair side work and support during a range of dental treatments. It also encompasses the underpinning ethics, professionalism, teamwork and communication required to work as a Dental Nurse. It is based on and meets the General Dental Councils (GDC) "Standards for the Dental Team". • It covers all the GDC Learning Outcomes and Skills for Health National Occupational Standards (NOS).				
	regi	on completion, it will enalistration with the GDC*.		,	
		ın also be taken as part renticeship in Health (D			
	It is not suitable for the Apprenticeship Standard in England. Learners wishing to take the qualification as part of the Apprenticeship Standard in England should select the Level 3 Diploma in the Principles and Practice of Dental Nursing (Integrated Apprenticeship). *The GDC has confirmed approval of this qualification. https://www.gdc-uk.org/professionals/education/recent-inspections/inspections-dental-nursing				
Purpose code Ofqual code and description (where	D. Conf	irm occupational compe	tence an	d/or 'licence to	
applicable)		nfirm competence in an ods required.	occupatio	onal role to the	
Total Qualification Time (hours)	490				
Guided learning hours	Min 366 Max 366				
Credit value	49	Minimum credits at / above Level 48			
Minimum age of learner	16				

Age ranges covered by the qualification	N/A
Real work environment (RWE) requirement / recommendation	Learners will need to be working or on practical placement to be able to show competence in both knowledge and skills. It is recommended that a minimum of 16 hours* per week be spent in a Real Work Environment. * Please refer to Section 2 of this document for learners in specialist practices e.g. orthodontics.
Rules of combination	Learners must achieve 49 credits from the 17 mandatory units. All observations must be fully achieved and learners must achieve a *pass, merit or distinction in the two external assessment tests (part 1 and part 2) covering the underpinning knowledge across units DN 12-16. There is no compensation between units, or between observations and unit tasks within a unit. * Learners are permitted to re-sit each MCQ assessment test twice more either because they failed or to improve their grade.
Units	The GDC Learning Outcomes have been mapped to every unit within this qualification and can be used to measure progression towards completion of meeting these outcomes. The units have also been mapped to the SfH NOS. Details of the mapping to both the GDC Learning Outcomes and SfH NOS can be found at the end of each unit within the Qualification Specification.
Range	All elements of each unit must be met, including all range, which can be assessed holistically. Where possible cross referencing can be used to meet the range, especially those ranges that span across a number of units in the qualification e.g. range for individuals. Where possible it is recommended that performance evidence is cross-referenced to cover range e.g. direct observation or reflective account. However, it is recognised that due to the nature of some range, some will be better met through knowledge evidence. Centres have an obligation to support learners in being exposed to a wide practice of dental nursing in order to meet all unit learning outcomes, assessment criteria and range. Where learners do not have access to all elements (for example, not all practices will have extra-oral x-machines), learners can attend additional placements in dental nursing outside their day-to-day practice. It is not envisaged that the learner will always undertake the task at the alternative practice placement but

shadow another dental nurse. An occasion such as this would provide the learner with the opportunity to observe wider practice that they do not routinely see, providing the chance to also gather evidence for unit DN3 Reflect and develop own practice as a dental nurse. It is acknowledged that not all learners will get such an opportunity to visit an alternative practice placement. Therefore, assessors can also use the accompanying direct questioning to help their assessment of a learners' knowledge.

Observations/skills

For units which require observations to be undertaken, learners must have exposure to an appropriate breadth of procedures and patients (e.g. adults, children and young people, older people and those with special needs e.g. hearing and visual impairments, learning disabilities, mobility issues etc.) Learners should undertake each activity relating to patient care on sufficient occasions to enable them to develop the skills and the level of competency required to achieve the relevant skills learning outcomes/assessment criteria. Partially competent and not competent indicate that more experience or training is required.

It is the **Centre's/Assessor's responsibility** to ensure that learners are **only signed off as competent** when they can be assured that the learner has **fully** met each of the relevant skills. All skills criteria within the qualification must be achieved.

Frequency of observations in practice by Assessors

Learners must be assessed in practice throughout the duration of the qualification which is usually 2 years or less depending on experience and the mode of delivery. Ideally Assessors should ensure they observe learners in practice throughout the lifespan of the qualification, to include the beginning, middle and end of the qualification to ensure learners demonstrate consistency and so that support can be provided in a timely manner. In addition, it is recommended that multiple methods of meeting skills criteria are recorded e.g. via reflective accounts/logs, professional discussions etc. to demonstrate consistency and competency.

Grading system

This qualification is graded pass, merit or distinction* across two external assessment tests. The tests are externally set and externally marked. The assessments will be online and on-demand.

* Learners are permitted to re-sit each MCQ assessment test twice more either because they failed or to improve their grade.

MCQ Part 1: 50 marks (covering units DN 12, 13 and 14)

MCQ Part 2: 50 marks (covering units DN 15 and 16)

Grade	In <u>each</u> MCQ test (nominal marks)	Points allocation
Pass	30 - 37 marks	1
Merit	38 - 44 marks	3
Distinction	45 - 50 marks	5

Qualification grade

	Pass	Merit	Distinction	
Points	2	4-6	8-10	

Recommended assessment methods

Units DN 1 – DN 11 and unit UFAE are internally assessed, and units DN 12- DN 16 are both internally and externally assessed.

A recommended range of assessment methods has been identified for the units in the Level 3 Diploma in the Principles and Practice of Dental Nursing qualification. This gives the opportunity for different learning styles and individual needs of learners to be taken into account.

Methods include:

- *Direct observation (by a qualified Assessor who is a GDC registrant and meets our assessment principles)
- Professional discussion
- *Reflective accounts (Learner log or reflective diary)
- Written and pictorial information
- Optional Task set by us for knowledge learning outcomes/underpinning knowledge for skills learning outcomes)
- Oral questions and answers
- Expert witness evidence (Units DN5, 9 and 10)

*Mandatory assessment method

For the full list of assessment methods and descriptors for Assessors, please see Section 2 of the Assessment Specification.

Additional

All units must be assessed in line with our Assessment

assessment requirements	Principles.
	Unit UFAE must be assessed in line with Skills for Health document Skills for Health First Aid Assessment Principles.
	Please refer to the following specifications for documents to be used when assessing the learner, these include:
	Level 3 Diploma in the Principles and Practice of Dental Nursing Qualification Specification:
	Mandatory documents: Clinical Experience Weekly Record (Appendix I) Clinical Experience Monthly Record (Appendix J) Sign up for External Assessment Tests (Appendix M)
	Level 3 Diploma in the Principles and Practice of Dental Nursing Unit and Task Specification :
	Optional assessment tasks
	Level 3 Diploma in the Principles and Practice of Dental Nursing Assessment Specification:
	Optional task marking guidelines
	Observation marking templates
	Expert witness templates (where applicable).
External examinations	For information on examination conditions, please see the Instructions for Conducting Examinations document on the Joint Council for Qualifications' (JCQ) website: www.jcq.org.uk .
	For information on reasonable adjustments and special considerations, please refer to our website.
Entry requirements / recommendations	Learners should be at least 16 years old. We do not set any other entry requirements, but Centres may have their own guidelines.
How long will it take to complete?	Learners can usually complete this qualification in two years or less.

Progression including Job Roles (where applicable)

On completion of this qualification, learners may progress into employment as a Dental Nurse or to other career pathways (with additional entry qualifications), including:

- Dental Hygienist
- Dental Therapist
- Orthodontic Therapist
- Laboratory Technician
- Dentist
- Senior Nurse
- Practice Manager
- Tutor
- Teacher and Assessor of student dental nurses.

On completion of this qualification learners may progress to further qualifications in the following areas:

- dental sedation
- dental radiography
- dental technology
- oral health education
- special care dental nursing
- orthodontic nursing
- dental practice management.

Unit achievement log

(Please refer to the Level 3 Diploma in the Principles and Practice of Dental Nursing Unit and Task and Assessment Specifications for further details).

Unit ref.	Unit no.	Unit title	Unit type	Level	Credit	GLH	Notes
F/505/8337	DN 1	Contribute to health and safety in the dental environment	Knowledge / Skills	3	2	14	
J/505/8338	DN 2	Work within regulatory requirements in relation to the role of a dental nurse	Skills	3	1	10	
L/505/8339	DN 3	Reflect on and develop own practice as a dental nurse	Skills	3	2	13	
J/505/8341	DN 4	Prepare and maintain environments, instruments and equipment for clinical dental procedures	Knowledge / Skills	3	3	22	
F/505/8340	DN 5	Promote oral health for individuals	Knowledge / Skills	3	3	21	
L/505/8342	DN 6	Provide support during the assessment of individuals' oral health	Skills	3	2	18	
R/505/8343	DN 7	Contribute to the production of dental images	Skills	3	2	16	
Y/505/8344	DN 8	Provide support during the prevention and control of periodontal disease, caries and the restoration of cavities	Knowledge / Skills	3	3	22	

Unit ref.	Unit no.	Unit title	Unit type	Level	Credit	GLH	Notes
D/505/8345	DN 9	Provide support during the provision of fixed and removable prosthesis	Skills	3	5	35	
H/505/8346	DN 10	Provide support during non-surgical endodontic treatment	Skills	3	2	12	
K/505/8347	DN 11	Provide support during the extraction of teeth and minor oral surgery procedures	Skills	3	3	19	
M/505/8348	DN 12	Principles of infection control in the dental environment	Knowledge	3	4	29	
K/505/8350	DN 13	Dental anatomy and assessment of oral health	Knowledge	3	4	29	
M/505/8351	DN 14	Principles and techniques of dental radiography	Knowledge	3	4	31	
T/505/8352	DN 15	Principles of managing oral disease and dental procedures	Knowledge	3	6	50	
A/505/8353	DN 16	Understand ethics and professionalism in dental nursing.	Knowledge	3	2	15	
D/504/6101	UFAE	First Aid Essentials	Knowledge / Skills	2	1	10	

Mandatory requirements/evidence for Dental Nursing qualification approval and EQA visits

The table below sets out the mandatory requirements/evidence that is required to gain qualification approval to deliver and assess the **Level 3 Diploma in the Principles and Practice of Dental Nursing** qualification. All evidence, upon request will need to be uploaded on our secure site prior to an approval visit taking place. Should any criteria not be met, an action plan will be put in place with your allocated **External Quality Assurer (EQA)** until approval status is achieved. These requirements will also be subject to EQA visits conducted by us. Please note, in addition to the requirements set below, there may be additional requirements/evidence that your EQA may request during your visit.

		ence on our secure site, please use the rocedure name and relevant page num			
Ref	Required at approval and/or EQA visits	Mandatory requirements/evidence for qualification approval/audits	Where is the evidence in my Centre? (please signpost)*	EQA <u>pre-approval</u> comments	Actions/recommendations/ comments at approval visit
Section	1 – Learner fitness to p	practise			
1.1	Evidence required for qualification approval.	Learner Fitness to practise Policy & Procedure.			
1.2	Evidence required for qualification approval.	Procedure for checking and retaining copies of learner vaccination records.			
1.3	Evidence required for qualification approval.	Admissions/Enrolment Procedure (Appendix D: Learner contract).			
1.4	Evidence required for qualification approval.	Equal Opportunities and Diversity Policy and Procedure.			
1.5	Evidence required for qualification I approval.	Learner Support Policy/Protocol.			

*When uploading evidence on our secure site, please use the following naming convention:	
1.1 [insert your Centre's procedure name and relevant page number/s]	

Ref	Required at approval and/or EQA visits	Mandatory requirements/evidence for qualification approval/audits	Where is the evidence in my Centre? (please signpost)*	EQA <u>pre-approval</u> comments	Actions/recommendations/ comments at approval visit
Section 2	2 – Employer liaison				
2.1	Evidence required for qualification approval.	Schedule of learner progress reports. Completed reports required for subsequent Centre EQA visits.	tim		
2.2	Evidence of planned use of Appendix A for qualification approval.	Work-based supervising registrant list for each learner – (Appendix A) Completed lists required for subsequent Centre EQA visits.			
2.3	Evidence required for qualification approval.	Work-based placement procedure (including quality assurance of placements) and additional placement procedures (where applicable).			
Section :	3 – Learner workplace i	induction			
3.1	Evidence of planned use of Appendix B for qualification approval.	Employer declaration of work-place induction (Appendix B). Signed copy for each learner required for subsequent Centre EQA visits.			
3.2	Evidence of planned use of Appendix F and G for qualification approval and audits.	Contracts setting out specific roles and responsibilities that Centres/Employers must agree sign and comply with Appendix F/G throughout the course of the qualification.			
3.3	Evidence required at qualification approval and EQA visits.	Process in place to check the workplace/placement is registered with the CQC (England) or Healthcare Inspectorate Wales (Wales). Evidence of this being carried out will be required for subsequent EQA visits.			

	*When uploading evidence on our secure site, please use the following naming convention: 1.1 [insert your Centre's procedure name and relevant page number/s]					
Ref	Required at approval and/or EQA visits	Mandatory requirements/evidence for qualification approval/audits	Where is the evidence in my Centre? (please signpost)*	EQA <u>pre-approval</u> comments	Actions/recommendations/ comments at approval visit	
Section 4	1 – Safety in the workp	lace				
4.1	Evidence of planned use of Appendix C for qualification approval and EQA visits.	Initial safety check and monitoring of learners' workplace (Appendix C: Initial safety check and workplace monitoring). Completed check list required for subsequent Centre EQA visits. See also 2.3. above.				
4.2	Evidence required for qualification approval and EQA visits.	Raising Concerns in the Workplace Policy & Procedure. See also 3.2 above. Covered in Appendix G: Centre/Learner Learning Contract				
4.3	Evidence of planned use of Appendix O and O1 for qual approval and EQA visits	Process in place to check the workplace is informing patients and gaining their consent regarding a trainee dental nurse being involved in their dental treatment.				
4.4	Evidence of planned use of Appendix R	Process in place to check the supervisor/ work-based mentor is keeping records of mentorship.				

4.5	Evidence of planned use of Appendix S and Appendix T for qual approval and EQA visits.	Process in place to support Raising Concerns in the workplace (incident reporting).				
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		dence on our secure site, please use t re's procedure name and relevant page				
Ref	Required at approval and/or EQA visits	Mandatory requirements/evidence for qualification approval/audits	Where is the evidence in my Centre? (please signpost)*	EQA <u>pre-approval</u> comments	Actions/recommendations/ comments at approval visit	
Section	Section 5 – Staff/Centre records (Staff records- documents must be provided for each member of the qualification delivery and assessment team)					
5.1	Evidence required for qualification approval.	Centre Organogram – setting out the staffing structure for the delivery of the qualification.				
5.2	Evidence required for qualification approval.	Proof of GDC registration number for those listed in Centre organogram.				
5.3	To be discussed at approval for implementation and management. Evidence required at EQA visits	Current CV's, CPD records, copies of vocational qualification certificate, education/training qualification. CPD records. Details of current DBS check, Job description: i.e. Department Supervisor/Tutor(s)/Assessor(s)/IQAs.				
5.4	Evidence required for qualification approval. Evidence required at EQA visits	Centre's Professional Misconduct Panel membership. Centre's Appeal Policy.				

		dence on our secure site, please use the			
Ref	Required at approval and/or EQA visits	Mandatory requirements/evidence for qualification approval/audits	Where is the evidence in my Centre? (please signpost)*	EQA <u>pre-approval</u> comments	Actions/recommendations/ comments at approval visit
Section	6 – Qualification delive	ry			
6.1	To be discussed at approval for implementation and management. Evidence required at EQA visits.	Course programme/Scheme of work setting out schedule of delivery that meets qualification delivery requirements – (Evidence required at subsequent EQA visits once approved).			
6.2	Evidence required for qualification approval and EQA visits.	Internal quality assurance strategy and process. A quality assurance framework is provided in Appendix K and Appendix L which can aid the development of internal quality assurance mechanisms utilised by Centres.			

Actions – What, when and by whom? (Refer to tables above if already recorded.)

Section 1: Learner fitness to practise

1.1 Learner Fitness to Practise policy and procedure:

Centres must have a learner Fitness to practise policy and procedure. The following points are given as initial guidance. Centres must ensure that when drafting their policy, they refer to the GDC's Learner Fitness to Practise guidance document which can be found at www.gdc-uk.org

The policy should be concerned with a learner's fitness to be in a clinical, professional environment, and their ability to be part of provision of direct patient care. It should conform to professional standards and codes of practice and be consistent with the behaviour expected by the profession and the employer. The Centre process should include both informal and formal proceedings, plus a robust investigatory mechanism. Each Centre is expected to establish a Professional Misconduct Panel. In addition, an appeals process must be in place and records of any proceedings and appeals must be available for external quality assurance scrutiny.

The GDC and CACHE expect Tutors and Supervisors of trainees who undertake work-based training, to be aware of the GDC guidance, and apply the principles of professionalism and appropriate behaviour in the workplace setting.

Centres should inform learners, as part of their admissions and/or enrolment procedures, that unprofessional behaviour or serious health problems during their training may result in fitness to practise proceedings, which could affect their ability to complete the course and their ability to register with the GDC.

1.2. Learner vaccination records

Centres must have a procedure in place for liaising with Employers to obtain documented evidence of learners' vaccination records. Records/copies must be retained and held in each learner's file by the Centre.

The Employer must check that the learner/trainee dental nurse has had the appropriate vaccinations required to practise, before undertaking exposure prone procedures.

1.3. Admission/enrolment procedure

As part of the admissions/enrolment procedure, initial assessment of each learner should be undertaken by Centres to evaluate the learner's suitability for the qualification and role of a dental nurse.

Within this initial assessment, and before the commencement of the qualification, the following should be identified:

- The learners' knowledge, skills and experience.
- Any prior credit or units that may have been accumulated and that are relevant to the qualification.
- Any specific training needs.

Learners will be required to sign and comply with a Learner contract (example **Appendix D** below). This details the expected responsibilities and behaviours that learners must comply with if Centres are to maintain qualification approval and for external quality assurance visits.

Appendix D: Learner contract

Learner:	Name: Learner Number: Address:	
	Contact Number:	
	Email Contact:	
Workplace:	Name: Address:	
	Contact Number:	
	Email Contact:	
Centre/Provider:	Name: Centre Number: Address:	
	Contact Number:	
	Email Contact:	
LEARNER LEARN	ING CONTRACT	
		✓

I () AGREE TO: (Learner name)	
Learner signature:	
Read and comply with the requirements of the General Dental Council (GDC) in respect of the following documents (where they are applicable to trainee / student Dental Nurses):	
Standards for the Dental TeamLearner Fitness to practise	
These documents can be found at www.gdc-uk.org	
LEARNER LEARNING CONTRACT	
I () AGREE TO: (Learner name)	✓
Learner signature:	
Comply with and complete workplace and/or Centre induction procedures, as required.	
Comply with all relevant workplace and/or Centre policies and procedures, such as, but not limited to, Health and Safety, Equality and Diversity etc.	
Have the appropriate vaccinations required to practice, before undertaking exposure prone procedures, and keep a copy of my vaccination status.	
Identify myself as a learner in the workplace (e.g. by wearing a name badge).	
Protect patients by undertaking only those duties in which I am trained, confident and competent.	
Raise concerns if I identify any risks to patients, including concerns about my own, or others', performance.	
Behave in a professional manner, commensurate with the attitudes expected of a dental professional in education and/or training.	
Work only under the supervision of my mentor / Supervisor or other suitably qualified and named individual.	
Attend all mandatory teaching / training / assessment sessions as required.	
Report any absence as follows: a) (insert Workplace Named Person) b) (insert Centre Named Person)	
Maintain regular and appropriate contact with myMentor / Supervisor / Assessor as required.	

Submit all work, documentation, forms etc. in a timely fashion and within agreed timeframes.	
Not copy, or allow my work, to be copied and ensure that all submitted work is my own.	
Complete all course evaluations and learner feedback as required for quality monitoring by the course provider or other stakeholder.	
Agree, implement and evaluate a Personal Development Plan (PDP), which incorporates reflection based on self-evaluation, informal and formal feedback from peers, colleagues, mentors, Supervisors, Assessor etc., in order to develop and improve my knowledge and skills.	

1.4. Equal opportunities and Diversity policy and procedure

Centres must have an Equal opportunities and Diversity policy and procedure in relation to dental nursing.

The General Dental Council Standard 1.6 requires 'dental professionals to treat patients fairly, as individuals and without discrimination, being aware of and adhering to all responsibilities as set out in relevant equalities legislation'.

We require all Centres, learners and stakeholders to comply with current legislation, regulatory guidance and best practice guidance relating to equality and diversity.

The Centre's Equal Opportunities and Diversity policy and procedure should include a Centre inclusion statement detailing how learners with specific needs will be initially assessed and supported to achieve.

1.5. Learner support policy/procedure

Centres must have a learner support policy/procedure in place. Centres must also carry out an initial assessment to ensure the learner is capable of undertaking the course. Any special educational needs of the learner should be addressed and managed according to the Centre's learner support policy and protocol.

The Centre's Equal Opportunities and Diversity policy and procedure should include a Centre inclusion statement detailing how learners with specific needs will be initially assessed and supported to achieve.

Within the learner support policy/procedure there must be a process in place for supporting learners who are not meeting agreed targets as well as a process for recording concerns and how these are actioned. Evidence will be requested upon external quality assurance.

Section 2: Employer liaison 2.1. Schedule of learner progress reports

Centres must provide a schedule for learner progress reports throughout the duration of the qualification. This must include progress reports from all those involved in the teaching, supervision and assessment of the learner.

Centres must also make contact with the learner's employers, establishing a working relationship. The GDC require employers to identify a supervising GDC registrant to carry out the necessary supervision for the trainee Dental Nurse, they must take full responsibility for providing direct supervision of the learner. The Centre must keep a record of the named Supervisor.

2.2. Work-based supervising registrant list

The GDC require employers to identify a supervising GDC registrant to carry out the necessary supervision for the trainee Dental Nurse. They must take full responsibility for providing direct supervision of the learner. The Centre must keep a record of the named Supervisor.

The work-based Assessor may also be the work-based Supervisor/mentor. However, it is recommended that the Supervisor and Assessor roles are undertaken by different people. Learners, who are assessed by a peripatetic Assessor, must also have a named Supervisor/mentor in the workplace. Supervision may be delegated to other GDC registrants. However, in line with the GDC requirements, the named workbased supervising registrant/mentor will continue to be accountable overall for the learner.

Centres must complete a *supervising registrants list* (example Appendix A, page 26) for each learner. Proof of GDC registration for each named Supervisor/mentor and confirmation that all those supervising have current Disclosure and Barring Service (DBS) certificates must be evidenced. These will be kept on record by the Centre, as part of the quality assurance process. Centres will be expected to update this list annually, to ensure registration has been maintained.

Appendix A: GDC supervising registrant list

Learner Name	 		

Any GDC registrant involved in the supervision and assessment of a learner's work must be entered below. They must sign and provide a copy of their GDC registration number as supporting evidence. In addition, all those supervising must also have current Disclosure and Barring Service (DBS) certificates (copies of certificates can only be retained with the applicant's consent).

Name and email address	GDC No:	Current DBS certificate held & date	Qualification & date	Role*	Signature & date

^{*}Role e.g. Clinical Supervisor, Assessor, IQA, Tutor**, Practice Manager, Senior Dental Nurse.

^{**}If tutors are assessing learners, in line with GDC requirements, they must be registered with the GDC. This will be an exception where some tutors, who depending on the topic they are teaching, would be subject specialists but not necessarily dental registrants e.g. infection control.

2.3 Work based placement procedure and 4.1 Initial safety check and monitoring of learners' workplace

Centres must have work-based placement procedures in place. The placement procedure must contain details of study, workplace based assessments, support required for the learner in the workplace and quality assurance of placements (including additional placement procedures, where applicable).

The work based placement procedure must also include a process for the Centre requesting evidence from the workplace that demonstrates the provision of a safe and appropriate clinical environment/workplace, and which supports the completion of 'Initial safety check and workplace monitoring' documentation. Centres may wish to use the 'Initial safety check and workplace monitoring' form provided by us as part of their procedures (Appendix C, page 28).

To confirm suitability of placements, Centres must ensure that placements are quality assured by **dental registrants.**

Additional work-based placement procedure

Some learners may work in a specialist dental practice as a trainee. This may result in them not being able to access the range of chairside procedures covered in the qualification. The Centre must have a procedure in place that facilitates swift liaison with the employer, to identify an additional work-based placement, providing the learner with exposure to an appropriate breadth of patients and procedures. We recommend that those learners who work in a specialist practice, e.g. orthodontics, should have access to a minimum of 40 per cent of their working week in a dental practice that provides routine dental treatment over the duration of the qualification.

Policy 6: Workplace suitability policy & procedure

This document (page 31) supports Centres when a workplace is no longer deemed suitable. It contains contingency plans for both trainees in Centre allocated work placements and those in employment.

Appendix C: Initial safety check and workplace monitoring

This form is to be used as part of the learner's workplace induction. The learner's Assessor will need to ensure each criterion is met, and may also, as part of the inspection, request evidence from the list below to confirm compliance.

Name of p	erson undertaking	check:	Date:

Ref.	Evidence of workplace safety and maintenance.	Yes	No	Evidence requested and checked
A	Employers Liability Insurance displayed?			
В	Public Liability Insurance to cover the workplace?			
С	Health & Safety at Work Act 1974 poster displayed?			
D	Health & Safety Policy accessible to all staff?			
E	Adequate facilities and arrangement for staff welfare?			
F	Risk assessment carried out to identify hazards?			
G	Specific risk assessment carried out for young persons and expectant mothers?			
Н	COSHH assessment on all substances hazardous to health?			
I	COSHH folder accessible to all staff?			
J	Adequate firefighting equipment in the workplace?			
К	Staff trained to use the firefighting equipment?			
L	Adequately signposted and accessible fire exits?			
М	Fire extinguishers regularly inspected and serviced?			
N	Staff trained on emergency evacuation procedure?			
0	Adequate First Aid provision?			
Р	Appointed First Aider or emergency appointed person?			
Q	Accident report book accessible and maintained?			

Ref.	Evidence of workplace safety and maintenance.	Yes	No	Evidence requested and checked
R	Agreed system for reporting relevant incidents to the HSE?			
S	Waste is segregated, appropriately stored and safely disposed of?			
Т	Mercury Spillage Kit accessible to staff?			
U	Staff trained to deal with a mercury spillage?			
V	Appropriate storage and disposal of mercury and amalgam?			
W	Autoclave inspection certificate?			
Х	Autoclave maintained and serviced in line with HTM01-05?			
Y	Compressor(s) inspection certificate?			
Z	Gas cylinders stored properly, regularly serviced and service records maintained?			
A.1	Regular visual inspection is carried out of all portable electrical appliances?			
B.1	Three to five year inspections by a competent person of all electrical portable equipment and the fixed supply?			
C.1	Records for maintenance of electrical appliances and the fixed supply?			
D.1	Registered with the Information Commissioner?			
E.1	Compliance with the Health and Safety Display Screen Equipment Regulations?			
F.1	Computer workstation assessments carried out?			
G.1	Employees using Display Screen Equipment (DSE) offered eyesight tests?			
H.1	Health and Safety Executive (HSE) informed of x-ray machines?			
1.1	Appointed radiation protection advisor?			
J.1	Local rules displayed next to every x-ray machine?			
K.1	All staff adequately trained who use x-ray equipment and records kept?			

Ref.	Evidence of workplace safety and maintenance.	Yes	No	Evidence requested and checked
L.1	A quality assurance procedure is in place and continually used to assess the quality of radiographs?			
M.1	Are all staff trained in infection control?			
N.1	Infection Control Policy accessible to all staff?			
O.1	All policies and procedures within the overarching Infection Control Policy meet the HTM01-05 "essential" requirements?			
P.1	Are records kept of all staff's vaccination status and immunised appropriately?			
Q.1	Hepatitis B status available for all staff that undertake exposure prone procedures?			
R.1	Personal Protective Equipment is provided and used by all staff?			
S.1	Emergency drugs as recommended for dentists by the British Resuscitation Council?			
T.1	Records kept of purchasing and dispensing of drugs?			
U.1	All drugs stored in line with manufacturer's instructions?			
V.1	Adequate equipment is available to manage a medical emergency on the premises?			
W.1	All staff trained regularly in resuscitation?			
X.1	The practice is registered with the Care Quality Commission/Healthcare Inspectorate Wales? Date of most recent inspection?			
A.2	Are all staff trained on equality and diversity and is the policy accessible?			
B.2	All staff have current DBS certificates?			
C.2	Policies and procedures around safeguarding vulnerable adults and children are accessible for all staff			
D.2	All staff trained regularly in safeguarding vulnerable adults and children			

Employer name:	
----------------	--

GDC NO:

Employer signature: (I confirm all documents relating to the above can be produced if requested.)

Assessor signature: Evidence requested and checked by:

Policy 6: Workplace suitability policy and procedure

While a robust process is in place to confirm the suitability of a workplace through the Employer declaration of induction (Appendix B) and the Initial safety check and workplace monitoring (Appendix C). Occasionally that suitability can change. This can be due to various reasons; these may only become apparent as the learner progresses through the qualification.

We require all approved Centres to ensure that if a tutor, assessor or IQA becomes aware of a workplace becoming unsuitable, that action is taken through a process that includes the application of a contingency plan.

Unsuitability

Unsuitability must be raised by the Centre with the work placement instantly. Every opportunity should be provided to permit the workplace to review and improve on the reasons for unsuitability. Support and guidance can be offered by the Centre, or the workplace may seek guidance from their local NHS Area Team or Clinical Dental Advisor.

1.1 Unsuitability due to Patient Safety Concerns

Unsuitability of a workplace may be due to a patient safety concern including:

- a) inappropriate and dangerous actions during the provision of treatment
- b) poor infection control
- c) poorly maintained equipment and buildings
- d) poor recording in patient records
- e) poor communication with the patient by members of the Practice Team
- f) health conditions of a member of the Practice Team
- g) no professional indemnity
- h) fraud
- i) concerns about the possible abuse or neglect of children or vulnerable adults.
- j) Trainee/student dental nurses working outside their Scope of Practice

Some concerns are so serious** that a learner will be withdrawn from the work placement immediately with no period of notice given, concerns will be raised with the GDC and CQC. An alternative work placement will be sought for the learner.

Immediate withdrawal of the trainee/learner from the placement

If the learner is in employment, immediate action should be taken by the Centre to raise the concern with both the employer, the GDC and if appropriate the CQC. The learner should be advised by the Centre on their options that would enable them to continue with their studies.

**

- a) sexual assault or abuse of patients or members of staff
- b) violent behaviour
- c) failures in the safeguarding of children or vulnerable adults
- d) being under the influence of alcohol or drugs
- e) a health condition which puts patients at risk of harm
- f) serious cross-infection control issues

- a) fraud or theft
- h) not having professional indemnity insurance.

1.2 Unsuitability due to non-compliance of course related requirements

Workplace non-compliance with course policies and procedures will impact on the quality assurance processes of the Centre. As a result, approved Centres can be sanctioned by CACHE which inevitably results in the delayed completion of the qualification by learners.

Unsuitability of a workplace may be due to the following, but this is not exhaustive:

- a) Repeated failure (> 3) to complete and return Centre/qualification documents
- b) Repeated failure (> 3) to grant access to the Trainee/Learner's assessor to undertake workplace observations
- c) Denying the Trainee/Learner protected time with their work based mentor during working hours
- d) Repeated failure (> 3) to allow a workplace representative to attend Centre meetings/ updates/training events.
- e) Trainee/Learner unable to undertake the full breadth of dental procedures to support completion of the qualification. This may be due to a limited range of dental procedures being undertaken at the Practice, or the work rota allocated to the Trainee/Learner.

2. Contingency plans

Where unsuitability has been identified the following contingency plans should be applied:

2.1 Contingency plan for Trainee/Learners allocated to a work placement by the Centre

- a) Where the unsuitability is linked to a serious concern as listed in section 1.1, the Trainee/Learner will be withdrawn from the workplace and an alternative workplace allocation will be sought. The Trainee/Learner will be supported in continuing with the theory/underpinning knowledge aspects of their studies until the competency based assessments can recommence.
- b) Where unsuitability is of a less serious nature, although compromising to the Trainee/Learner in the long term, a workplace representative will liaise with a Centre Manager or their representative to agree a SMART action plan. The workplace will be given an agreed period of time to demonstrate compliance (CACHE recommend no more than 4 weeks). During this time the Trainee/Learner will remain in the work placement.
 - i. Should a SMART action plan not be agreed between the workplace and the Centre, the Trainee/Learner will be removed from the placement and supported as identified in 2.1a
 - ii. Should the work placement be unable to offer the full breadth of dental procedures, the Centre will determine agreement on behalf of the learner to carry on in the placement until an alternative work placement can be allocated.

2.2 Contingency plan for Trainee/Learners who are employed

- a) Where the unsuitability is linked to a serious concern as listed in section 1.1, the Centre will have no option but to temporarily suspend the competency based assessments of the Trainee/Learner. The Trainee/Learner will be supported in continuing with the theory/underpinning knowledge aspects of their studies until the competency based assessments can recommence. (An agreed period of time will determined by the Centre with the guidance of the EQA. Thus ensuring CACHE approved Centre requirements are not breached)
 - i. A Centre representative will advise the Trainee/Learner of the options available to them that allows continuation of their studies.
 - ii. Should the Trainee/Learner be required to seek alternative employment, the Centre will allocate a timescale with the intention of not compromising the Trainee/Learner's opportunity to continue. This timescale will not only be determined by CACHE requirements, but also the Centre requirements.
- b) Where unsuitability is of a less serious nature, although compromising to the Trainee/Learner in the long term, a workplace representative will liaise with a Centre Manager or their representative to agree a SMART action plan. The workplace will be given an agreed period of time to demonstrate compliance (CACHE recommend no more than 4 weeks). During this time the Trainee/Learner will remain in the work placement.
 - i. Should a SMART action plan not be agreed between the workplace and the Centre, the Trainee/Learner will be removed from the work placement, action will be taken as identified in 22.2(a)ii
 - ii. Should the work placement be unable to offer the full breadth of dental procedures, The Centre will determine agreement on behalf of the Trainee/Learner to carry on in the work placement until an alternative placement can be allocated.

Section 3: Learner workplace induction/Section 4: Safety in the workplace (4.2)

3.1. Employer declaration work place induction

Centres must ensure that they have a process in place that ensures the workplace has completed and submitted a *Declaration of Induction* (example **Appendix B**, **page 35)** to confirm that the learner is competent in (at least) the following areas prior to contact with patients:

- Patient safety, consent and confidentiality.
- · Health and safety.
- Infection control.
- Safeguarding of vulnerable children and adults.
- Dealing with medical emergencies.
- Professionalism and ethics.
- GDC Standards Guidance.

Appendix B1: Workplace Mentor/Learner, page 39

Declaration of reading and discussing centre policies and procedures Declaration confirming that the named GDC Supervising Registrant/workplace mentor has read policies and procedures listed and provided copies for the Learner (where appropriate) and their Practice Manager to read. Also that the content was discussed and clarified with the Learner and their manager.

Centres must provide the workplace with a *Declaration of Induction* to complete and submit, which outlines the induction areas required to meet the General Dental Council (GDC) requirements.

Employers must carry out a workplace induction for all learners that not only meet the Health and Safety at Work Act 1974, but also the GDC requirements. Centres must provide signed employer declarations as evidence that this has been carried out, demonstrating that the learner is fully prepared to work safely and ethically in the dental practice. If the learner is already employed, the employer must also sign and confirm that the learner has been assessed as being safe to practise before entering the clinical area. The Centre must see evidence of this before the learner is accepted onto the programme.

This will be subject to internal and external quality assurance.

The Centre must also check that the learner has had the appropriate vaccinations required to practise, before undertaking exposure prone procedures. The Centre should keep copies of learners' vaccination statuses.

Appendix B: Employer declaration of induction

Employer name:	
Employer GDC No:	
Learner name:	
Employment start date:	

As the employer of the named learner, I can confirm that a "formal structured" workplace induction has been carried out. This meets the GDC requirements regarding the employment of a learner/trainee Dental Nurse, which included, but was not exclusive to the following:

	✓ Date
Patient safety	
Consent	
Confidentiality	
Health and safety	
Infection control	
The protection of vulnerable children and adults	
How to deal with medical emergencies	
Fire procedures	
Radiation protection	
Professionalism and ethics	
Equality and diversity	
GDC Standards Guidance.	
Other	

Employer declaration in support of Trainee's clinical experience

As the employer of the named learner, I understand it is my responsibility to ensure the learner has access to undertake chairside support across **all** patient groups, covering a wide range of dental activities and interventions. Thus, ensuring Requirement 13 of the GDC Standards for Education is met:

'Learners must have exposure to an appropriate breadth of patients and procedures and should undertake each activity relating to patient care on sufficient occasions to enable them to develop the skills and the level of competency to achieve the relevant learning outcomes' (GDC 2015).

To support the identified learner in meeting the target totals of a clinical experience record (refer to appendices I and J), I declare that the annual average number of patients expected to be treated in the practice are as noted in the table below.

Patient Group	Annual average number
Pre-school child	
School child	
Adult	
Older adult (65+)	
Special needs - child	
Special needs - adult	

Any procedures the learner will **NOT** be exposed to in this workplace are identified below:

Procedure/Intervention	Procedure/Intervention
Intra oral radiographs	Post crown
*Orthopantogram	*Bridge – adhesive
Charting – tooth	Bridge – fixed
Charting – soft tissue	Extraction – non-surgical
Charting – Basic Periodontal examination (BPE)	*Extraction Surgical
*Charting – Index of orthodontic treatment needs	*Orthodontics
Fillings	Vitality Testing – hot/cold or electric
Complete dentures	Oral hygiene instruction
Partial denture	*Smoking Cessation Advice
Impressions	Diet Advice
Endodontics	Fluoride application
*Veneers/Inlay	Fissure sealant
Jacket Crown	*Implant

Procedures identified in the table above MUST be discussed with the learner's assessor. The assessor, in agreement with the employer/workplace mentor will set an appropriate action plan for the learner in relation to the procedure/interventions identified. Where the learner is not exposed to certain procedures the assessor may arrange an additional placement. As these procedures and interventions are mainly specialised it is recommended that the learner/trainee gathers the evidence through observing others' clinical practice and reflecting on what they have learnt through this. This could be used towards evidence in other units e.g. unit DN3. NB *denotes procedures/interventions that may be difficult for some learners to achieve.

If the learner is already employed:			
☐ I declare that this learner/trainee Dental Nurse has been assessed as being safe to practise (employer to provide/attach evidence of this) and can enter the clinical area to support the treatment and care of patients.			
The named G	rising registrant/Workpl GDC supervising registrar of this learner in the workp	nt (workplace mentor) wh	o will undertake direct
Supervising	g registrant/ Workplace	mentor:	
GDC No: The above named workplace mentor will take full responsibility for providing direct supervision of the learner. This supervision may be delegated to other GDC registrants, however; the named registrant will continue to be accountable overall for the learner.			
Please note declaration.	your GDC registration ma	ay be at risk if you knowir	ngly make a false
Role	Employer	Workplace mentor	Assessor
Name			
Signature			
Date			
Date of learner induction completed:			
Comments:			

Appendix B1: Workplace Mentor/Learner declaration of reading and discussing centre policies and procedures

GDC Supervising Registrant/Mentor Name:	Mentor GDC Number:
Learner Name:	Practice Manager Name:

As the named GDC Supervising Registrant/workplace mentor I can confirm that I have read the following policies and procedures, provided copies (where appropriate) for the learner and their Practice Manager to read. The content was discussed and clarified with the learner and their manager.

(Should a mentor be responsible for more than one learner, a group session can be utilised to disseminate this information – this declaration must be completed and signed for each individual learner)

Policies and Procedures	Date Read
Fitness to practise Policy	
2. Equality and Diversity Policy	
3. Learner Support Policy	
4. Raising Concerns in the Workplace	
5. Centre Organogram	
6. Assessment Appeals Policy and Procedure	
7. Plagiarism Policy and Procedure	
8. Complaints Policy and Procedure	
9. Health & Safety Policy	

Please provide the name and GDC number of any further registrants who will be delegated to undertake a mentorship role with this learner.

Name and GDC No:	Name and GDC No:
Name and GDC No.	Name and GDC No.

GDC Supervising Registrant/Workplace Mentor: Signature:

Date:

The named supervising registrant is responsible for notifying the Centre of any additional delegated mentors during the duration of the training.

3.2. Workplace/placement learner contracts and Centre learner learning contracts/4.2 Raising concerns in the workplace policy and procedure

Centres must have in place contracts setting out specific roles and responsibilities that Centres/Employers must agree, sign and comply with throughout the course of the qualification and also in relation to the learner. This must also include reference to policies and procedures outlining 'Raising Concerns in the Workplace'.

These agreements **MUST** be completed and signed as a requirement for learners' acceptance onto the qualification.

Examples of each contract have been provided at:

Appendix F: Workplace/Placement Learner Learning Contract, page 41

Appendix G: Centre/Learner Learning Contract, page 45

Note: Contracts produced by Centres must include the minimum outlined in our exemplars.

These requirements will also be subject to external quality assurance procedures conducted by us.

Appendix F: Workplace/placement learner learning contract

Learner:	Name: Learner number: Address:		
	Contact number:		
	Email contact:		
Workplace/ placement:	Name: Address:		
	Contact number:		
	Email contact:		
Centre/ provider:	Name: Centre number: Address:		
	Contact number:		
	Email contact:		
LEARNER LEARNING CONTRACT			
(Name of employe	er) AGREE TO:	✓	
Read and comply with the requirements of the General Dental Council (GDC) in respect of the following documents (where they are applicable to trainee / student Dental Nurses in the workplace):			
Standards for the Dental Team			
• Learn	ner Fitness to practise		
These documents	can be found at www.gdc-uk.org		

Provide a complete workplace induction which includes, but is not limited to:

- patient safety
- confidentiality
- consent
- health and safety
- infection control
- protection of vulnerable children and adults
- · dealing with medical emergencies
- professionalism and ethics
- GDC Standards Guidance.

Complete and submit a *Declaration of Induction* to confirm that the learner is competent prior to treating patients.

Ensure that the learner complies with all relevant workplace policies and procedures, such as, but not limited to, Health and Safety, COSHH, Equality and Diversity, etc.

Check that the learner has had the appropriate vaccinations required to practice, before undertaking exposure prone procedures, and keep copies of the learner's vaccination statuses.

Ensure that the learner identifies him or herself as a learner/trainee in the workplace (e.g. by wearing a name badge).

Provide a safe and appropriate clinical environment/workplace and comply with the requirement to provide evidence that supports this/the completion of Appendix C 'Initial Safety Check and Workplace Monitoring' documentation.

Establish and maintain a working relationship with the Centre, which includes, but is not limited to the following:

- Provide/respond to progress reports in line with the Centre schedule.
- Identify a supervising General Dental Council (GDC) registrant to carry out the necessary supervision.
- Ensure that the supervising GDC registrant takes full responsibility for providing direct supervision.
- Ensure that where supervision is delegated to another GDC registrant, the named supervising registrant remains accountable for the learner.
- Ensure that the supervising registrant is available for the learner to refer to for ongoing feedback and support.
- Ensure that Centre or CACHE Assessors are able to access the workplace in order to undertake observations / assessments and other monitoring.
- Ensure that the learner has exposure to the breadth of patients/procedures necessary, and the ability to undertake each activity for the development of the skills and competency relevant to achieving the GDC learning outcomes.
- Allow the gathering of appropriate patient/peer/customer feedback which contributes to the assessment process.
- Provide evidence of CPD records for all supervising registrants, in relation, but not limited, to Equality and Diversity training, if required.

Protect patients by ensuring that the learner undertakes only those duties in which s/he is trained, confident and competent.

Raise concerns where issues around patient safety arise.

Ensure that all Supervisors/Mentors or others involved in the work-based training are aware of the GDC's Learner Fitness to practise guidance.

Ensure that the learner behaves in a professional manner, commensurate with the attitudes expected of a dental professional in education and/or training.

Ensure that the learner works only under the supervision of a Mentor/Supervisor or other suitably qualified and named GDC registered individual.

Ensure that the name of the senior registrant responsible for signing off the learner as fit to practise is provided to the Centre.

Attend all regular mandatory Centre or NCFE/CACHE events if/when required.
Report any learner absence to the Centre named person.
Complete all required evaluations and requests for feedback as required for quality monitoring by the course provider or other stakeholder.
Assist the learner to agree, implement and evaluate a Personal Development Plan (PDP), which incorporates reflection based on self-evaluation, informal and formal feedback from peers, colleagues, Mentors, Supervisors, Assessors etc. in order to develop and improve his/her knowledge and skills.
I have read and agree to all of the above:
Employer Signature:
GDC Registration Number:
Date:
Workplace Supervisor Signature:
GDC Registration Number:
Date:
I have discussed the contents of this document with the employer/workplace Supervisor.
Centre/Provider Representative:
GDC Registration Number (if applicable):
Date:

Appendix G: Centre learner learning contract

Name: Centre umber: Address:				
Contact Number:				
Email Contact:				
Name: Address:				
Contact Number:				
Email Contact:				
Learner: Name: Learner Number: Address:				
Contact Number:				
Email Contact:				
CENTRE LEARNING CONTRACT				
I (name of Centre Representative) AGREE TO: ✓				
Quality Assurance and Safety				
Maintain records of all staff responsible for the delivery of the qualification including Tutors, Assessors and Internal Quality Assessors (IQA).				
Records held by the Centre should include copies of:				
 current CV job description proof of GDC registration details of Disclosure and Barring Service checks (copies to be held only with consent) vocational qualifications (primary and post-registration) education qualifications CPD undertaken with reflective statements 				
	Centre umber: Address: Contact Number: Email Contact: Name: Address: Contact Number: Email Contact: Name: Learner Number: Address: Contact Number: Email Contact: **ELEARNING CONTRACT** **Example Contact: **ELEARNING CONTRACT** **Example Contact: **ELEARNING CONTRACT** **Example Contact: **Example			

 any further evidence to indicate that personnel are appropriate to the role being undertaken, and have the skills, experience and training required – particularly in relation to assessment. 	
Provide evidence of the availability of sufficient competent and qualified staff, resources and systems to support assessment of units.	
An annual yearly review of the internal quality assurance process which aims to ensure the quality of the programme delivery.	
Provide a nominated contact person who will be the contact point for CACHE external quality assurance.	
Provide evidence of the Centre's internal quality assurance <i>strategy</i> to cover all aspects of the programme and work placements.	
Address any identified quality issues within a CACHE specified timeframe.	
Respond to any changes required by us or the GDC, to ensure that the qualification remains up to date and fit for purpose.	
To comply with the specified assessment methods and subject them to the Centre's internal quality assurance strategy as well as the CACHE Centre EQA visits.	
Ensure that all Assessors are both occupationally competent and knowledgeable in line with our guidance <i>Delivering CACHE Qualifications – Assessment and Internal Quality Assurance Guidance.</i>	
Attend all regular and mandatory NCFE/CACHE events to support standardisation of work, good practice, raising concerns and calibration of Assessors as/when required.	
Be subject to all our EQA visits and Quality Assurance procedures and to respond in a timely fashion according to any specified timeframe.	
Complete all required evaluations and requests for feedback as required for quality monitoring by us or other stakeholders.	
Have policies/protocols including, but not limited to, the following:	
 Patient and Learner Safety in the Workplace. Raising Concerns. Learner Fitness to practise. 	
•	

- Learner Support (which includes how those with specific needs will be assessed and supported).
- Equal Opportunities and Diversity (which includes an inclusion statement for those with specific needs).
- Complaints.
- Learner Appeals.
- Malpractice and Plagiarism.
- Quality Assurance Strategy.

Standardised sample policies are available at Section 6 and also on our website.

Work placements

Provide the workplace with a *Declaration of Induction* to complete and submit, which outlines the induction areas required to meet the General Dental Council (GDC) requirements.

Ensure that the workplace has completed and submitted a *Declaration of Induction* to confirm that the learner is competent in (at least) the following areas prior to contact with patients:

- Patient safety and confidentiality.
- Consent.
- · Health and safety.
- Infection control.
- Safeguarding of vulnerable children and adults.
- Dealing with medical emergencies.
- Professionalism and ethics.
- GDC Standards Guidance.

Request evidence from the workplace that demonstrates the provision of a safe and appropriate clinical environment/workplace, and which supports the completion of 'Initial safety check and workplace monitoring' documentation.

Establish and maintain a working relationship with the employer, which includes, but is not limited to, the following:

- Provide/respond to progress reports in line with the Centre schedule.
- Complete a Supervising Registrants list which names those GDC registrants involved in supporting the learner in the workplace.
- Maintain records of the Supervising Registrants list with proof of GDC registration for each named person.

Ensure that a supervising registrant is available in the workplace to provide ongoing feedback and support to the learner. Ensure that Centre Assessors are able to access the workplace in order to undertake observations/assessments and other monitoring. Ensure that the learner works only under the supervision of a Mentor/Supervisor, or other suitably qualified and named GDC registered individual. Identify, in liaison with the primary employer, an additional work placement, where the learner is primarily based in a specialist practice, in order to facilitate learner exposure to an appropriate breadth of patients and procedures. Should the workplace become unsuitable the contingency plan will be applied as stated in Policy 6 Workplace Suitability Policy & Procedure (see page 32) Learner Check that the learner has had the appropriate vaccinations required to practice, before undertaking exposure prone procedures, and keep copies of the learner's vaccination status. Ensure that the delivery of units follows the mandatory requirement to teach underpinning knowledge in the pre-clinical environment to ensure safe practice. Ensure that the learner identifies him or herself as a learner/trainee in the workplace (e.g. by wearing a name badge). Protect patients by ensuring that the learner undertakes only those duties in which s/he is trained, confident and competent. Raise concerns where issues around patient safety arise. Inform and ensure learner that they must behave in a professional manner, commensurate with the attitudes expected of a dental professional in education and/or training. Inform learners on admission that unprofessional conduct or serious health issues may affect their ability to register with the GDC. Assist the learner to agree, implement and evaluate a work placement Personal Development Plan (PDP) which incorporates reflection based on self-evaluation, informal and formal feedback from peers, colleagues, Mentors, Supervisors, Assessors, etc. in

order to develop and improve his/her knowledge and skills.	
I have read and agree to all of the above, and acknowledge that this Learner Learning Contract document forms part of, and is complete, to, the CACHE Centre Agreement.	
Centre / Provider Representative:	
GDC Registration Number (if applicable):	
Date:	
I have discussed the contents of this document with the Centre representative.	
CACHE Representative:	
GDC Registration Number (if applicable):	
Date:	

3.3. Placements/Workplaces - Registration with UK health regulators

http://www.cqc.org.uk/

By law, all dental practices in England must make sure that the care and treatment they provide meets national standards of quality and safety.

CQC registers dental practices if they can show that they are meeting national standards.

If dental practices are not registered with CQC, they will not be able to provide services.

CQC inspects dental practices to make sure they are meeting the national standards. They can inspect a dental practice at any time if there are concerns about the care it provides.

If a dental practice isn't meeting the standards, action will be taken followed by reinspection.

Similar arrangements exist in Wales. Please see:

Healthcare Inspectorate Wales: www.hiw.org.uk

Learners will need to be working or on practical placement to be able to show competence in both knowledge and skills. Centres must ensure that they have a process/procedure in place to check that all learner placements and workplaces are registered with the CQC. Upon EQA visits, Centres will be required to provide evidence of this taking place.

Centres may wish to add this to their Workplace Placement Procedure and use **Appendix C** *Initial safety check and workplace monitoring* (page 28) which contains checking the practice is registered with the CQC as well as requesting the date of the last inspection.

Centres must also ensure that any additional placements are also quality checked for registration with the CQC.

Should Centres have any concerns about the practice and the care it provides, it is the Centres responsibility to find a suitable placement for the learner and notify the CQC.

Section 4: Safety in the workplace

4.1: Initial safety check and monitoring of learners' workplace – refer to Section 2, 2.3 (page 27).

4.2 Raising Concerns in the Workplace Policy & Procedure- refer to Section 3, 3.2 Workplace/placement learner contracts and Centre learner learning contracts (page 40)

4.3 Process in place to check the workplace is informing patients and gaining their consent regarding a trainee dental nurse being involved in their dental treatment.

Identification of learners in the workplace/consent

Centres must ensure that workplaces/placements comply with the requirement that all Trainee Dental Nurses should be easily identifiable from registered Dental Nurses in the work setting. This is required so that a patient is aware that a trainee Dental Nurse may be working with one of the clinicians (Dentists, Hygienists or Dental Therapists). For example, learners should wear name badges in the workplace with the title on the badge reading 'learner/trainee Dental Nurse'. A poster may also be on display with this information (Appendix O: Example of a poster for the waiting room, page 54). Only those registered with the GDC are able to use the legally protected title Dental Nurse. Patients must also be made aware if a learner is assisting in their treatment, the possible implications of this and give consent. Consent must also be recorded prior to treatment commencing.

Appendix O1: Patient Consent Form, page 55 this must be signed by all necessary parties, a copy should be given to the patient. To support data protection and maintain patient confidentiality completed consent forms must be kept in the patient's notes, not in the learner's portfolio. Assessors can review the completed forms at observation visits and signpost them in their reports. Learners should simply explain how and why it was used and signpost where it is kept.

The patient consent process is to ensure compliance with the GDC Standards for Education (2015) Standard 1 Protecting Patients, requirement 3

'Providers must have a system in place to inform patients that they may be treated by a learner (dental nurse) and the possible implications of this. Patient agreement to treatment by a learner must be obtained and recorded prior to treatment commencing' (GDC 2015)

Safety

Centres must gather evidence that demonstrates the clinical environment/workplace is safe and appropriate. Through the workplace Assessor, they must request evidence from the employer that supports this, <u>Appendix</u> C: Initial safety check and workplace monitoring, page 28, can be used as a checklist by the Assessor. To confirm suitability of placements, Centres must ensure that placements are quality assured by **dental registrants.**

Centres must provide evidence of a Raising Concerns policy and procedure (refer to Policy 1: Raising patient safety concerns, page 60). This would support Centres and learners in their obligation to raising concerns should they identify any risks to patient safety. This should be included in the learner induction carried out by the Assessor.

Appendix O: Example of a poster for the practice waiting room

This is a training practice for Dental Nurses and we pride ourselves in making sure that our trainee Dental Nurses work to the best standards.

You will recognise them as they will be wearing a badge indicating that they are a trainee.

Our trainee Dental Nurses are expected to undertake the full clinical role of a Dental Nurse after initial induction and a period of supervised practice, and have continued mentorship throughout their training. Once they have qualified as a Dental Nurse (which takes about 2 years) they will be registered with the General Dental Council. Their Supervisor within the practice is also registered with the General Dental Council.

The trainee Dental Nurse may be working with one of our Clinicians (Dentists, Hygienists or Dental Therapists) during your treatment. A member of staff will ask you to make sure you are happy with this and will explain any possible implications before your treatment starts. You just need to let us know that you are happy with this or if you wish to have a qualified Dental Nurse in the surgery. Consent will be recorded prior to treatment. If you wish to decline, this will not affect the treatment you receive at the practice.

The trainee Dental Nurse needs to have their practical clinical skills assessed to make sure that they are meeting the correct standard of work. On some occasions your treatment may be observed by an Assessor as part of the trainee's qualification. You will be advised when the session will be observed and will be given the choice of taking part in the assessment of the trainee Dental Nurse.

We may also ask you to give us some feedback on the trainee, which will help them to improve their skills and play a part in the overall assessment by the Examiners.

If you have any comments or need any further information please ask one of the practice staff.

Appendix O1: Patient consent form

Patient Details					
Name: Address:					
Learner Details	Clinical Supervisor/mentor	Assessor			
Name:	Name:	Name:			
Learner Number:	General Dental Council (GDC) Registration Number:	General Dental Council (GDC) Registration Number:			
As the patient identified above undertaking the NCFE CACHE Nursing qualification. All traine Nurse. For the duration of their supervision/mentorship of a GI	E Level 3 Diploma in the Princip ees as expected to undertake the training, they remain under the	oles and Practice of Dental he full clincial role of a Dental			
I consent to the <i>trainee dental</i> treatment. I understand that I c that I can also make the reque	an decline or withdraw my con	sent at anytime. I am aware			
I also consent to the possible presence of an assessor, who would observe the trainee during my dental treatment. I am aware that the assessor will be GDC registrant and understands the required standards of patient care and confidentiality. I have been advised that should a treatment session be observed, I will be given the choice of taking part in the assessment of the trainee Dental Nurse. If requested, I will provide feedback on the trainee to support them in improving their skills, I am aware this will play a part in their overall assessment.					
My consent is only in repsect of the trainee dental nurse and the assessor named above (where applicable) being present. I have been given a copy of this consent form.					
This document will be retained	by the dental surgey and not w	within the learner's portfolio.			
Patient Signature:	low 16 years)	Date: Date: Date: Date:			

4.4 Process in place to check the supervisor/ work-based mentor is keeping records of mentorship.

Supervision/mentorship of a trainee dental nurse in the workplace is a GDC requirement. Mentors are encouraged to use this document (Appendix R below) to record and formalise the supervision/mentorship undertaken.

Appendix R: Supervision/ Mentor learner contact record

The mentor should: • record the topics discussed and guidance given to	Signature of mentor and learner
the learner/trainee dental nurse and	
note action plan to support learning	
Copies of the contact record MUST be kept by the mentor	
and the learner	
Topics Discussed and advice given:	Mentor:
	GDC No:
	obo no.
Action Plan:	Learner:
	Date:
Duration of contact time: (e.g. ½hour)	
Topics Discussed and advice given:	Mentor:
	GDC No:
	ODO NO.
Astion Diam.	Learner:
Action Plan:	
	Date:
Douglas of control floor	
Duration of contact time:	Mentor:
Topics Discussed and advice given:	wientor.
	GDC No:
Action Plan:	Lograph
ACIION FIAN.	Learner:
Describes of contract times.	Date:
Duration of contact time:	

4.5 Process in place to support Raising Concerns in the workplace (incident reporting).

Centres must provide evidence of a Raising Concerns policy and procedure. This would support Centres and learners in their obligation to raising concerns should they identify any risks to patient safety. This should be included in the learner induction carried out by the Employer/Workplace Assessor.

Policy 1, page 60, can be used as a guideline of what should be included in a policy/procedure; this covers what a patient safety concern is and how they can be dealt with.

Appendix S: Incident reporting form, page 63 and Appendix T: Incident Reports Record, page 66, are provided to support Centres and work placements/employers in the process of reporting an incident and keeping auditable records for QA purposes.

See also section 3.2, Appendix G: Centre/Learner Learning Contract, page 45, where raising concerns must also be covered.

Policy 1: Raising patient safety concerns (Incident reporting)

Introduction

Patient safety is a clear priority for everyone involved in Dental Nurse training. Any concerns raised will be managed effectively and efficiently in accordance with the procedure outlined below

What is a patient safety concern?

For the purpose of this procedure, a patient safety concern is defined as a concern about the health, performance or behaviour of the trainee Dental Nurse, a colleague or their employer, the environment where treatment is provided, or practice policies which may put the patient at risk of suffering physical, psychological or financial harm. A patient safety concern may also arise where there are concerns about the welfare of vulnerable patients.

The harm may arise for a variety of reasons including:

- inappropriate and dangerous actions during the provision of treatment
- poor infection control
- poorly maintained equipment and buildings
- poor recording in patient records
- poor communication with the patient by the trainee Dental Nurse or any other member of the Practice Team
- · health conditions
- no professional indemnity
- fraud
- concerns about the possible abuse or neglect of children or vulnerable adults.

Trainee Dental Nurse or Employer or Tutor at a Centre

We require all approved Centres, to ensure that employers of trainee Dental Nurses have a documented procedure for raising patient safety concerns. In the first instance, if they arise from a patient complaint concerning the trainee Dental Nurse, the concern should be raised with the trainee Dental Nurse's employer/work placement, and the Dental Nurse's Centre should be informed. If this has been done and the outcome is not satisfactory, the Centre, liaising with the employer/work placement, is expected to fully investigate the concern and should they be unable to resolve the matter, a formal referral to the Area Team (NHS England) should be made. In Wales, refer to the Local Health Board (NHS Wales). The concern and outcome should be fully documented by the Centre and we should be informed.

In the event that a Centre Tutor, Assessor or Internal Assessor becomes aware of a patient safety concern at the trainee Dental Nurse's place of employment, if it involves the trainee Dental Nurse, they should raise the concern with the employer, as detailed above.

If it relates to the employer, they should raise the concern with the Area Team (NHS England). In Wales, refer to the Local Health Board (NHS Wales).

If the concern is about the possible abuse or neglect of children or vulnerable adults, in addition to following the guidance above, all parties must know who to contact for advice in accordance with internal policies and procedures.

Appendix S; Incident Reporting Form and Appendix T; Incidents Reports Record are provided to support Centres and work placements/employers in the process of reporting an incident and keeping auditable records for QA purposes.

Contacting the GDC

The GDC states that, in most cases, it is appropriate to raise concerns locally. Under some circumstances, all parties may be required to refer straight to the GDC.

The GDC website https://www.gdc-uk.org/professionals/education states that contact must be made if:

- raising a concern at a local or intermediate level is not possible
- action taken at a local level has failed
- an individual genuinely fears victimisation or a cover up.

Furthermore, some issues are so serious that they should be reported to the GDC, even if they are raised locally as well. These include:

- sexual assault or abuse
- violent behaviour
- · failures in the safeguarding of children or vulnerable adults
- · being under the influence of alcohol or drugs
- a health condition which puts patients at risk of harm
- · serious cross-infection control issues
- fraud or theft
- not having professional indemnity insurance.

The GDC provide a succinct document *Advice for Dental Professionals on Raising Concerns*, which is available via the GDC website (link above).

- It is designed to provide advice on:
- GDC registrants responsibilities regarding raising concerns
- · When a concern should be raised
- How a concern can be raised
- Sources of advice and help available.

The advice also includes specific advice for managers and employers regarding the duty to:

 Encourage and support a workplace culture where staff can raise concerns openly and without fear of reprisal.

Procedure

To report the patient safety concern to **CACHE** please:

Telephone: Customer Support – 0345 347 2123

Or E-mail: info@cache.org.uk

Or Write to: Customer Support, Q6 Quorum Business Park, Benton Lane, Newcastle,

NE12 8BT

To enable us to process the concern as quickly as possible, please provide us with:

your name and address

- your employer's name and address, or the Centre name and Centre number
- a telephone number and e-mail address
- the relevant qualification and Qualification Reference Number (QRN)
- · a clear description of your concern.

Once your concern is received by us:

- we will acknowledge your concern within two working days of receipt
- we will undertake a full investigation, and aim to provide a full response within ten
 working days. Sometimes it may take longer. If this is the case, we will inform you
 of when we expect to respond, and keep you updated as to the progress.

To bring the patient safety concern to the **GDC**:

Telephone: 0207 167 6000

Or **Email**: <u>information@gdc-uk.org</u>

Or Website: www.gdc-uk.org

Or Write to: General Dental Council, 37 Wimpole Street, London, W1G 8DQ.

If you are not satisfied with the outcome

Contact CACHE via any of the communication methods stated.

The matter will be reviewed by one of our Senior Management Team.

CACHE will always aim to deal with your concern. However; if you are not satisfied with our final response, you can refer your complaint to the General Dental Council, 37 Wimpole Street, London, W1G 8DQ. Telephone 0207 167 6000.

Appendix S: Incident reporting form

Name: Trainee Dental Nurs	Name: Practice Manager				
Name: GDC Supervising Registrant/Mentor:		Name: Assessor			
Mentor GDC Number:					
Issue Raised by:					
The Centre	The Centre				
Name of person raising/red	-				
GDC Number (if applicable	e):				
Date raised:					
Nature of Incident:					
Health & Safety/Infection Control (H&S)					
Patient safety (clinical treatment undertaken) (CLIN)					
Patient safety (financial irregularity) (FIN)					
Patient safety (Data Protection/confidentiality) (DATAP)					
Equality & Diversity (E&Q)					
Direct complaint raised aga	ainst trainee denta	l nurse/learne	(DCOMP)		
Plagiarism (PLAG)					
Professional behaviour/misuse of social media (PB)					
Does the issue being raise (SFtP)	d link to the Learn	er Fitness to P	Practise Policy?		

Please provide details of the issue being raised and refer to the appropriate Centre and workplace policies it is linked to: (please provide specific incidents and dates and the support offered to the trainee dental nurse/learner)
Date of incident: Incident raised with:
Action Taken by Centre Representative
Name of Centre representative: Date: Action Taken:

Outcome	
Date:	
Please complete this form electronically, print and sign. A copy of this reporting form MUST be submitted to the Lead IQA raised/identified incident in line with GDC requirements.	, who will record the
Issue raised by Signature:	Date:
Centre Representative:	Date:

Appendix T: Incident reports record

Learner Name	Assessor Name	Nature of Incident (refer to key* below)	Date of Incident	Incident raised by	Action Taken by Centre representative	Outcome

*Key: H&S – Health & Safety/infection control; CLIN – Patient safety (clinical treatment); FIN - Patient safety (financial irregularity)

DATAP – Patient Safety (Data Protection/confidentiality); E&Q – Equality & Diversity; DCOMP – Direct complaint raised against learner

PLAG – Plagiarism; PB - Professional Behaviour/misuse of social media; SFtP – links to Learner Fitness to practise Policy

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Section 5: Staff/Centre records

5.1, 5.2 and 5.3 Proof of staff records and Centre Organogram for the delivery of the qualification

Centres must have records of the staff that will be responsible for the delivery of the qualification including Tutors, Assessors and Internal Quality Assurers (IQAs).

Centres must also have an **organogram** setting out the staffing structure for the delivery of the qualification. This must include those staff that deliver, supervise or assess parts of the qualification, details of their involvement and role, and whether they are based centrally or on placements. Any unfilled posts must be included too.

All members of the Centre team involved in the *supervision and assessment* of the learner must be registered with the GDC. This is in line with the GDC 'Standards for Education' requirements. It is also desirable that Internal Quality Assurers are registered with the GDC. For IQAs who are not GDC registrants, CPD relevant to dental nursing i.e. ethics and professionalism must be undertaken and evidence of current records must be provided and maintained.

The records of individuals must include the following:

- Current Curriculum Vitae.
- Job description.
- Copy of current GDC registration.
- Details of current Disclosure and Barring Service (DBS) checks (copies of certificates can only be retained with the applicant's consent).
- Copies of vocational qualifications:
 - Registerable qualifications, e.g. National Certificate in Dental Nursing.
 - Post certificate qualifications e.g. Certificate in Dental Radiography.
- Copies of educational qualifications:
 - Assessors qualification, e.g. Level 3 Certificate in Assessing Vocational Achievement.
 - Internal quality assurance qualification.
 - Teaching Certificate, e.g. Cert Ed.
- Continuing Professional Development (CPD) record this must include CPD that is relevant to both dental nursing and the educational role(s) undertaken by the individual. A reflective statement should support each CPD event attended.

For further information regarding requirements for Assessors, please refer to the 'Delivering CACHE Qualifications – Assessment and Internal Quality Assurance Guidance' on our website, at www.cache.org.uk.

Roles and Responsibilities - Tutors, Assessors, Internal Quality Assurers, Supervisors/Mentors and Employers

Centres must keep records of the staff responsible for the delivery and assessment of the qualification including Tutors, Assessors and Internal Quality Assurers. All those involved in the supervision and assessment of learners must be registered with the General Dental Council.

Role	Primary responsibility	Can assess knowledge	Can assess competence	Mentors and supports learners	Occupationally knowledgeable	Occupationally competent	Registered with the GDC
*Tutor	Responsible for the delivery of the underpinning knowledge and understanding in line with the qualification requirements.	1	*X	1	1	√	* 🗸
Assessor	Responsible for assessing knowledge and practical skills/competence through observation using a range of specified assessment methods to ensure learners are meeting the requisite standards to be able to practice as a Dental Nurse. The Assessor will support the learner throughout their journey by: • planning how the learner will generate their evidence to meet the requirements of the qualification • making assessment judgements using the evidence produced by the learner to ensure that the evidence is sufficient to meet the requirements of the qualification • providing on-going feedback to the learner so that they understand how they are performing throughout their qualification journey at all times	✓	*	✓	✓	•	•

Role	Primary responsibility	Can assess knowledge	Can assess competence	Mentors and supports learners	Occupationally knowledgeable	Occupationally competent	Registered with the GDC
Internal Quality Assurer	Responsible for ensuring that the procedure for the quality of assessment is robust and applied equitably and consistently across the qualification by each assessor.	√ (of assessors)	(of assessors)	X	√	√	√ **desirable
Supervisor / Workplace Mentor	Responsible for providing direct supervision of the learner/trainee Dental Nurse. This supervision may be delegated to other GDC registrants however, the named registrant will continue to be accountable overall for the learner throughout their qualification journey.	X	X	~	✓	✓	~
Employer	Providing an occupationally competent and knowledgeable Supervisor/Mentor who is accountable for the learner providing a clinical environment/workplace that is safe and appropriate ensuring that the learner has exposure to the breadth of patients/ procedures necessary, and the ability to undertake each activity for the development of the skills and competency relevant to achieving the requirements of the GDC Learning Outcomes.	X	X	✓	✓	✓	~

^{*} If tutors are assessing the learner, in line with GDC requirements they must be registered with the GDC. This will be an exception where some tutors who depending on the topic they are teaching, would be subject specialists but not necessarily dental registrants e.g. infection control. In addition, some Tutors may assess competence of the learner; it is the Centre's responsibility to ensure that the Tutor is qualified to undertake this role.

^{**} For IQAs who are not GDC registrants, a vocational dental qualification must be held and CPD relevant to dental nursing i.e. ethics and professionalism must be undertaken and maintained. Evidence of current CPD records must be available upon qualification approval and subsequent external quality assurance visits.

5.4. Centre's Professional Misconduct Panel

Centre process should include both informal and formal proceedings plus a robust investigatory mechanism. Each Centre is expected to establish a Professional Misconduct Panel. In addition an appeals process must be in place and records of any proceedings and appeals must be available for external quality assurance scrutiny.

The Public Interest Disclosure Act 1998 amends the Employment Rights Act 1996, to give protection from victimisation and dismissal to individuals who make certain disclosures in the public interest.

One of the principles underlying the Act is that those who are accountable for misconduct or malpractice within the workplace should have the opportunity to investigate and deal with it. As a consequence, the Act actively encourages organisations to establish formal internal procedures for dealing with reports of malpractice.

The Public Interest Disclosure Act 1998 applies to all employed dental professionals working within the NHS or the private sector, and to self-employed dental professionals contracted to provide NHS services.

The GDC's Learner Fitness to practise guidance, Centre Fitness to practise policy and Learner Contract (**Appendix D**, **page 22**), requires learners to raise concerns regarding their colleagues, including other learners, with the appropriate person, if patients are at risk, following GDC guidance in 'Principles of raising concerns'.

Section 6: Qualification delivery

6.1 Course programme/Scheme of work setting

Once approved and as part of external quality assurance visits conducted by us, Centres must have in place a course programme/scheme of work setting out a schedule of delivery that meets our delivery requirements. (Please refer to the Dental Nursing Qualification Specification once you have gained approval.)

6.2. Internal quality assurance strategy and process.

Centres must have an internal quality assurance strategy and process in place. A quality assurance framework is provided in **Appendix K (page 72)**: Quality assurance framework and **Appendix L (page 75)**: Training programme framework, which can aid the development of internal quality assurance mechanisms utilised by the Centre. Centres are required to ensure their procedures and records for the following are part of their quality assurance processes.

- Staff training /qualifications with evidence of relevant continuing professional development.
- Complaints management.
- Standard assessment.
- Learner sign up for the external assessment tests.
- Programme delivery.
- Knowledge delivery.

Appendix K: Quality assurance framework

Quality Assurance Process	Role	To be reviewed	Time scale
Ensure all CACHE policies are in place.	Internal quality assurance.	 Learner Fitness to practise Policy & Procedure Admissions/Enrolment procedure Equal Opportunities and Diversity Policy and Procedure 	Before the programme commences.
Review Centre compliance with all CACHE requirements.	External Quality Assurer (EQA). Each Centre must also check these documents are in place before beginning the qualification.	 Learner Support Policy/Protocol Raising Concerns in the Workplace Policy & Procedure Health and safety, risk assessment of the surgery Suitability of work placements, provision of patient types and workplace monitoring. Workplace/Placement Learner Learning Contract (Appendix F: Workplace/placement learner learning contract) Centre/Learner Learning Contract (Appendix G: Centre learner learning contract) Learner Contract (Appendix D) 'Initial safety check and workplace monitoring' documentation. (Appendix C: Initial safety check and workplace monitoring) 	Initial external assessment.
Ensure all Centre staff documentation is in place.	Internal quality assurance. External Quality Assurer (EQA). Each Centre must also check these documents are in place before starting Internal quality assurance.	 Proof of GDC registration Details of current DBS check Job description, i.e. department Supervisor/Tutor(s)/ Assessor(s)/Internal Quality Moderator(s) Current Curriculum Vitae Copies of vocational qualification certificates Copies of education/training qualification CPD records 	Before the programme commences. Initial external assessment.

Quality Assurance Process	Role	To be reviewed	Time scale
Learners' application and associated documents.	Initially checked by Centre and then by the External Quality Assurer (EQA). Internal quality assurance.	 A random sample of the learner's application forms GDC numbers for the supervising dentist/staff Proof of learner's vaccination status Employer's declaration of induction learner contract Initial safety check and workplace monitoring (Appendix C) 	Once at the start of the programme and initial external assessment.
Learner progress.	Internal quality assurance. External Quality Assurer (EQA).	 Centre should arrange a minimum of 2 visits during the programme Tutor's delivery in line with the scheme of work (SoW) Schedule of learner progress reports Sample of learner's reflective diary and portfolio of evidence Assessor's/Mentor's comments on the learner's development Mentor's training Patient's feedback 	2 per year during the programme.
Learner support.	Internal quality assurance External Quality Assurer (EQA).	 Evidence for supporting learners who are not meeting agreed targets Evidence of concerns being recorded and actioned where appropriate 	Visit and desk based.
Teaching observations.	Internal quality assurance. External Quality Assurer (EQA).	 Lesson plans and SoW to ensure that they are on target Tutors ongoing CPD 	Visit and desk based.
End of course evaluation.	Internal quality assurance. External Quality Assurer (EQA).	 Pass rates Progress of the other learners who have not passed Learner's feedback, employer feedback 	Following completion of the course.

Appendix L: Training programme framework for Centres

This framework has been designed for Centres to guide them when providing training programmes for those involved in the training and assessment of trainee Dental Nurses. This will include Tutors, Assessors, Internal Quality Assurers and Supervisors. The framework will underpin the quality assurance of training delivery by providing a standard format of topics to be covered, the rationale for their inclusion and an indication of how the training could be delivered. The detail of the programme is for the Centre to decide. Audit of training programmes will be part of the independent external assessment of Centres undertaken by us. We will also look for evidence of standardisation meetings.

Relevant to	Topics	Rationale	Training
Supervisors, Assessors, Tutors	Equality and diversity	To ensure clarity on equality and diversity requirements.	Mode: could use on-line packages that Centres may have available. Face to face work shop. Annual including review of policy.
Supervisors, Assessors, Tutors	Assessment	To gain an understanding of the process of assessment prior to learner registration in relation to: • completion of learner handbook • assessment of knowledge and assessment of skills • planning and feedback • standardisation including identification of malpractice • methods of assessment • progress records. To gain a better understanding of the needs of the learners who undertake the qualifications. To develop consistency and standardisation between Assessors and methods to ensure individual learners are assessed to the same standard. Supervisors need to be aware of how the assessments are carried out in order to deal with concerns.	While it is important to do the training on assessment prior to carrying it out, it is equally important to have some ongoing training on this topic. Mode: Standardisation meetings with Assessors and IQAs held regularly throughout the year. NCFE/CACHE training days in relation to the assessment process.

Relevant to	Topics	Rationale	Training
		To develop clarity of what needs to be observed and what needs to be assessed from knowledge based tasks. To clarify the standard expected of learners in each area of assessment To develop consistency and standardisation between Assessors. To develop understanding of the documentation and processes that Assessors, Supervisors and Tutors need to undertake to ensure a standard approach is maintained. To support internal and outcomed a standard approach and approach is maintained.	
Supervisors, Assessors, Tutors	Supporting Learners	external quality assurance. How to monitor and support learners so that their learning needs are met. How to appropriately discuss and record the learners' progression throughout the programme. Providing constructive feedback and identifying areas of development. Raising concerns about a learners' progress, the actions that need to be taken and how to progress these concerns when necessary. Learner Fitness to practise protocol and procedures. To develop consistency between Supervisors, Assessors and Tutors. All staff need to follow the same protocol and give the same weight to similar concerns. There needs to be standardisation across learners and workplaces. Monitoring of progress reports.	Ongoing: at least twice per year. Mode: Standardisation meetings with Assessors and IQAs held regularly throughout the year. NCFE/CACHE training days in relation to the assessment process.

Relevant to	Topics	Rationale	Training
		Clarity for all staff on how learner fitness to practise is addressed and their role.	
Supervisors, Assessors, Tutors	Raising Concerns Regarding Patient Safety	Identifying and escalating patient's safety concerns. A clear and consistent approach for all staff members is required.	Mode: In line with GDC requirements Regular face to face meetings. Standardisation activities in relation to quality assurance.
Supervisors, Assessors, Tutors	Induction Training Programme	Equality and diversity and how this applies. CACHE Statement of Values. Data Protection. Malpractice and Maladministration. Complaints Procedure. Appeals Process. Raising Patient Safety concerns. Complaints – managing complaints and appeals. Learner Fitness to practise process. All staff need to be aware of the relevant legislation and how to deal with any issues that may arise. Base line knowledge and understanding established. Consistency of approach.	Mode: Ongoing review of induction process for learners.
Supervisors, Assessors, Tutors	Staff Development / Core CPD Medical Emergencies Disinfection and Decontaminatio n Radiography and Radiation Protection Complaints Oral Cancer	To anonymise data from complaints and incidents and use these to improve training. Promoting and sharing good practice among colleagues. To maintain standards in assessment and teaching. To standardise what is being taught and the assessment process. To ensure that all staff is up-to-date. To foster a continuous	Annual rolling programme Mode: In line with organisational and GDC CPD requirements to meet the 5 year GDC cycle.

Relevant to	Topics	Rationale	Training
		learning culture. To gain from the experience of colleagues and learners.	
Supervisors, Centre management	Monitoring the overarching programme	To ensure sufficient competent and qualified staff, resources and systems are in place to support assessment of units. To ensure all requirements are met by Assessors, knowledge Tutors and External Assessors. Supervisors and Assessors need to monitor if all the necessary procedures and guidelines are being followed. This needs to be discussed and areas of improvement identified referring to the relevant policies. Issues identified can be used to develop policies and procedures. Quality assurance of the programme. Meeting our External Quality Assurance requirements. Meeting GDC requirements.	Ongoing. To include: standardisation minutes quality assurance preparation external quality assurance preparation.