

Appendices, Policies and Statements

NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing QN: 601/2251/1

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Section 1 Introduction

Summary table: Appendices

There are a number of appendices to support the delivery and assessment of the Level 3 Diploma in the Principles and Practice of Dental Nursing qualification. These are listed below. Centres should be aware that many of these documents are mandatory to ensure continued approval to deliver the dental nursing qualification and that they will be subject to external quality assurance processes. Centres can use these supporting documents in their current form or produce their own in line with the appendices provided. For further guidance, please refer to the Qualification Specification found on QualHub.

Appendices	Description	To be completed/ used by
Appendix A: GDC supervising registrant list	Any General Dental Council (GDC) registrant involved in the supervision, teaching and assessing of a learner's work must be named. Centres must complete a supervising registrant list for each learner. Centres will be expected to update this list annually to ensure registration has been maintained. This template can be used to record the names.	Centres Employers/placements Supervisors Assessors
Appendix B: Employer declaration of induction	Employers/workplaces/placements must ensure that learners have been formally inducted into the workplace. This template lists a number of topics that must be covered to evidence that the learner is fully prepared to work safely and ethically in the dental practice.	Centres Employers/placements
Appendix B1: Workplace mentor/supervisor/learner declaration of reading and discussing centre policies and procedures	Declaration confirming that the named workplace mentor/supervisor has read policies and procedures listed and provided copies for the learner (where appropriate) and their practice manager to read, and also that the content was discussed and clarified with the learner and their manager.	Workplace mentor/supervisor Employer Centre
Appendix C: Initial safety check and workplace monitoring	Centres must gather evidence that demonstrates that the clinical environment/workplace is safe and appropriate. Through the workplace Assessor, they must request evidence from the employer. This checklist can be used to check the safety of the workplace. The learner's Assessor will need to ensure each listed criterion is met.	Employers/placements

Appendices	Description	To be completed/ used by
Appendix D: Learner contract	Learners will be required to sign and comply with a learner contract. This contract details the expected behaviours that learners must comply with in line with NCFE and GDC requirements.	Centres Employers/placements Learners
Appendix E: Feedback mechanisms for key stakeholders	 Feedback mechanisms should be available to promote a two-way communication process that aims to improve the outcomes of the programme for all key stakeholders. This appendix contains a number of templates, including: monitoring strategy for delivery, dissemination, action-planning and review of feedback template feedback documents (Appendices E1–E12). 	Centres Employers/placements Learners Patients
Appendix F: Workplace/placement learner learning contract Appendix G: Centre/learner learning contract	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. Note: Contracts produced by centres must include the minimum outlined in our exemplars.	Centres Employers/placements Learners
Appendix H: Learner portfolio	The learner must keep a portfolio of the training they receive in the workplace and a record of their clinical experience. This template outlines a suggested guide to help learners focus their thoughts regarding their professional development and to keep track of their learning. The primary focus of the portfolio is to provide the learner (and their employers, supervisors and Assessors) with feedback on their performance and progress throughout training, and to triangulate this information with their own reflections on practice.	Learners

Appendices	Appendices Description		
Appendix I: Clinical experience weekly record	This mandatory template has been produced to help support the learner to record the procedures and types of patients they have assisted with. The employer and supervising GDC registrant will 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. The log must be signed by the learner and countersigned by the supervising GDC registrant and must comply with the minimum specified requirements.	Learners Employers Supervisors	
Appendix K: Quality assurance framework Appendix L: Training programme framework for centres	 Centres must have an internal quality assurance strategy and process in place. A quality assurance framework is provided in Appendix K and a training programme framework in Appendix L, which can aid the development of internal quality assurance mechanisms utilised by the centre. Centres are required to ensure that their procedures and records for the following are part of their quality assurance processes: staff training/qualifications with evidence of relevant continuing professional development (CPD) complaints management standardised assessment programme delivery knowledge delivery. 	Tutors Supervisors Employers/placements Assessors Internal Quality Assurers (IQA)	
Appendix M: Learner sign up for external assessment tests	This form should be used to show evidence that all the requisite learning (within units DN 12-16) has taken place and is evidenced before entering the learner for the two external assessment tests.	Tutors and Assessors	

Appendices	Description	To be completed/ used by
Appendix N: Test guidance (paper-based and onscreen)	This document sets out guidance that applies to all of our tests, whether taken as a paper- based or onscreen format. Please be advised that it is expected that all our centres adhere to this guidance in order that test procedures carried out are fair and just, for the benefit of us, our centres and our learners. If a situation arises which is not mentioned in this guidance, please contact us for further advice	Tutors and Assessors
Appendix O: Example of a poster for the practice waiting room	Centres must ensure that workplaces comply with the requirement that all trainee Dental Nurses should be easily identifiable from registered Dental Nurses in the work setting (eg by learners wearing name badges). Patients must also be made aware if a trainee Dental Nurse is assisting in their treatment, the possible implications and give consent. Consent must also be recorded prior to treatment commencing. If patients wish to decline, this will not affect their treatment they receive at the practice. Workplaces may wish to use this poster which informs patients of the above requirements.	Centres Employers/placements
Appendix O1: Patient consent form	ient consent form A patient consent form is available to gain informed written consent and help meet the GDC requirements in this regard. Completed consent forms must be kept in the patient's notes, not in the learner's portfolio. Assessors can review these at observation visits and signpost them in their reports. Learners should simply signpost.	
Appendix P: Continuing professional development reflective diary and log templates	Reflective practice is a mandatory assessment method and should be used throughout the qualification, lending itself to the future requirements of ongoing reflective practice as a GDC registrant.	Learners
Appendix Q: A guide to writing a reflective account	Learners are encouraged to keep a reflective diary or log of their daily work and learning environment. These templates have been provided to support this.	

Appendices	Description	To be completed/ used by
Appendix R: Workplace mentor/supervisor/trainee Dental Nurse contact record	Supervision/mentorship of a trainee Dental Nurse in the workplace is a GDC requirement. Workplace mentors/supervisors are encouraged to use this document to record and formalise the supervision/mentorship undertaken.	Workplace mentors/supervisors
Appendix S: Incident reporting form	Centres must ensure that they have a formal process in place to monitor and record patient safety incidents, and to communicate these with work placements/employers. Work placements/employers have a responsibility to report such incidents back to the centre. An incident reporting form that can be used by both the centre and the work placement/employer is provided to support this process.	Learners Centres Assessors Tutors IQAs Supervisors Employers/placements
Appendix T: Incident reports record	Centres must record all incidents that are reported to ensure they can be reviewed at audit visits. Work placement/employers are encouraged to also use this recording document.	Centres Employer/placements

Section 2 Appendices

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 registration no.	Current DBS certificate held and date	Qualification and date	Role*	Signature and date

* Role eg clinical supervisor, Assessor, IQA, Tutor**, Practice Manager and 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 eg infection control.

Appendix B: Employer declaration of induction

Employer name:

Employer GDC registration 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 trainee Dental Nurse, which included but was not exclusive to the following:

	✓ Date completed
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 that Requirement 15 of the GDC's Standards for Education is met:

"Students 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		Orthodontics*		
needs*				
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/supervisor, 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 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, eg unit DN3.

* denotes procedures/interventions that may be difficult for some learners to achieve.

If the learner is already employed:

□ I declare that this 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.

Workplace mentor/supervisor:

The named workplace mentor/supervisor who will undertake direct supervision of this learner in the workplace is:

Workplace mentor/supervisor:

GDC registration no:

The above-named workplace mentor/supervisor 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 your GDC	c registration may	v be at risk if	you knowingly make a	false declaration.

Role	Employer	Workplace mentor/supervisor	Assessor	
Name				
Signature				
Date				
Date of learner induction completed:				

Comments:		

Appendix B1: Workplace mentor/supervisor/learner declaration of reading and discussing centre policies and procedures

Workplace mentor/supervisor name:	Mentor/supervisor GDC registration no:
Learner name:	Practice Manager name:

As the named workplace mentor/supervisor I can confirm that I have read the following policies and procedures, and 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/supervisor 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
1. Fitness to Practise Policy	
2. Equality and Diversity Policy	
3. Student Support Policy	
4. Raising Concerns in the Workplace	
5. Centre Organogram	
6. Assessment Appeals Policy and Procedure	

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7. Plagiarism Policy and Procedure	
8. Complaints Policy and Procedure	
9. Health and Safety Policy	

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

Name and GDC registration no:	Name and GDC registration no:

Workplace mentor/supervisor:

Signature:

Date:

The named mentor/supervisor is responsible for notifying the centre of any additional delegated mentors/supervisors during the duration of the training.

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 that each criterion is met, and may also, as part of the inspection, request evidence from the list below to confirm compliance.

Name of person 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 and Safety at Work etc Act 1974 poster displayed?			
D	Health and 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	Control of Substances Hazardous to Health (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?			

Ref.	Evidence of workplace safety and maintenance	Yes	No	Evidence requested and checked
Q	Accident report book accessible and maintained?			
R	Agreed system for reporting relevant incidents to the Health and Safety Executive (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	HSE informed of X-ray machines?			
I.1	Appointed radiation protection advisor?			

Ref.	Evidence of workplace safety and maintenance		No	Evidence requested and checked
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?			
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 all staff immunised appropriately and records kept of all staff's vaccination status?			
Q.1	Hepatitis B status available for all staff that undertake exposure prone procedures?			
R.1	Personal Protective Equipment (PPE) 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 (CQC)? 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 Disclosure and Barring Service (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 registration no:

Employer signature:

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

Assessor signature: Evidence requested and checked by:

Appendix D: Learner contract

Learner learning 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 learning contract			
l (arner name)	\checkmark		
Learner signature:				
	he requirements of the General Dental Council (GDC) in respect of s (where they are applicable to learners):			
Standards for the Dental Team				
Student Professionalism and Fitness to Practise. These documents can be found at <u>www.gdc-uk.org</u> .				

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 practise before undertaking exposure prone procedures, and keep a copy of my vaccination status.	
Identify myself as a learner in the workplace (eg 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 workplace 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 my workplace mentor/supervisor/Assessor as	
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, workplace mentors/supervisors, Assessors etc, in order to develop and improve my knowledge and skills.	

Appendix E: Feedback mechanisms for key stakeholders

Overview

Feedback mechanisms should be available to promote a two-way communication process that aims to improve the outcomes of the programme for all key stakeholders.

The methods should be planned, designed, piloted and standardised to allow for coherent and uniform gathering of data.

Feedback mechanisms should aim to gather data that is both quantitative and qualitative, where appropriate.

Key *professional* stakeholders should be willing to provide and receive feedback according to a specific and timed schedule.

Key *lay* stakeholders (patients) will not be expected to receive feedback, but should be willing to provide feedback as a development tool for the learner.

Feedback mechanisms **must** lead to action-planning and review within an agreed timeframe.

Timeframes should not be onerous, but should occur regularly, to monitor the programme and promote quality/development.

The following documents are included:

- monitoring strategy for delivery, dissemination, action-planning and review of feedback
- template feedback documents (Appendices E1–E12).

Stakeholder groups	Feedback purpose	Suggested methods	Suggested timeframes	Outcome/reporting
Patients	Patient feedback will provide an alternative and valuable lay perspective in relation to the level of impact or effect that the individual learner had on their patient experience. It may also highlight any specific concerns that this stakeholder group might have around patient priorities associated with being treated by learners in general. This would enable centres/workplaces to provide appropriate reassurances and highlight individual learner, or broader engagement, issues that may be addressed at induction (placement/centre) or early delivery (centre).	Anonymised paper or email questionnaires (Appendices E1–E2). Scheduled face-to-face or telephone meetings with workplace supervisors/external Assessors/appropriate centre staff (Appendix E2). Focus groups (involving several patients) (Appendix E3).	 Timeframes for gathering data will be dependent on the number of contacts that a learner will have with any one patient (depending on which hours/days they work), but may be: at the end of a course of treatment after each appointment (may be useful in highlighting ongoing learner progression or stasis). Timeframes for disseminating data and response which includes an action plan should be specified. 	 Patient feedback should be anonymised and disseminated to other key stakeholders: patients learners placement supervisor centre/Tutors Assessors NCFE. Each stakeholder group would be expected to respond with an appropriate plan of action to address any issues or concerns highlighted. The action plan should be shared with appropriate other key stakeholders and have a review date.

Stakeholder groups	Feedback purpose	Suggested methods	Suggested timeframes	Outcome/reporting
Learners	Learners are entitled to receive teaching which is both proficient and compatible with unit learning outcomes. Learner feedback will provide valuable information relating to the quality of unit content and the taught	Anonymous learner unit evaluation following each period of unit delivery (which incorporates both qualitative and quantitative data) (Appendix E4). Nomination of a learner representative(s).	At the end of each unit delivery. At course induction.	Learner unit evaluation and the minutes of learner staff meetings should be anonymised and disseminated to other key stakeholders: learners centre/Tutors Assessors NCFE. The centre would be expected to respond with an
	delivery by the centre, and the quality of the support and	Regular learner		appropriate plan of action to address any issues or concerns highlighted. The action plan should be
	guidance available in the workplace.	representative(s) and centre staff meetings which are minuted and where	Termly (or 3 per year).	shared with appropriate other key stakeholders and have a review date.
	It may highlight any specific concerns around the schedule of delivery and would contribute to our Annual Monitoring Processes.	learner representative(s) are encouraged to raise any issues highlighted by their peers or themselves.		Learner placement evaluation should be shared only with the centre (and with CACHE if appropriate). The centre should instigate an appropriate liaison with the workplace to discuss any issues that have arisen as a result of the learner placement evaluation/reflection. The centre
	This would enable the placement, centre and NCFE to address any quality issues	Regular learner reports/reflective accounts of placement experience (Appendix E5).	4 per year.	should work with the placement to create an appropriate plan of action to address the issues or concerns highlighted.
	that would enhance/improve the learner learning	(+ +		The action plan should be shared with appropriate other key stakeholders and have a review date.
	experience and/or address any specific individual learner needs.		Timeframes for disseminating data and response which includes an action plan should be specified.	Where the evaluation highlights serious and/or unsafe practices, the centre should take immediate action.

Placement	Feedback from the placement will provide valuable information relating to the standards achieved by the learner and the relationship with the centre and its representatives/Assessors. Such feedback will relate to the quality of the taught delivery by the centre, interaction with Assessors and the support and guidance available to the workplace. It may highlight any specific workplace concerns around learner performance, the timing and quality of delivery, issues with the centre and/or Assessors, and would contribute to our Annual Monitoring Processes. This feedback would enable the placement, centre and NCFE to address any quality issues that would enhance/improve the learner learning experience, and/or potentially address any specific individual learner needs.	Placement evaluation of the learner and the programme following each period of unit delivery (which incorporates both qualitative and quantitative data) (Appendix 6). Scheduled face-to-face or telephone meetings with Assessors/appropriate centre staff (Appendix 7). Regular written reports from the placement/ workplace supervisor (Appendix 8).	At the end of each unit delivery. Termly (or 3 per year). 4 per year. Timeframes for disseminating data and response which includes an action plan should be specified.	 Placement evaluation should be anonymised and disseminated to other key stakeholders: centre/Tutors Assessors NCFE. The centre would be expected to respond with an appropriate plan of action to address any quality issues or concerns highlighted. The action plan should be shared with appropriate other key stakeholders and have a review date. Placement evaluation should be shared only with the centre/centre staff (and NCFE if appropriate). The centre should seek to discuss any issues that have arisen regarding learner performance with the individual learner concerned and should work with the learner to create an appropriate plan of action to address the issues or concerns highlighted. The learner's action plan should be shared with appropriate other key stakeholders (if the learner agrees) and have a review date.
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Tutors	Feedback in relation to learner performance/	Written reports (Appendix E9)	Termly (or 4 per year)	Tutor evaluation of learner performance should be shared with the learner. The Tutor should
	achievement is an essential part of any learning experience, and should be	Learner Achievement Log (NCFE Document).	After each unit.	support the learner in creating an appropriate and targeted individual learning plan (ILP) to address any issues or concerns and/or maintain or improve
	used to motivate the learner towards improving sustained	Individual learning planning sessions (Appendix E10).	After each unit delivery.	performance. The ILP may be shared with others, if the learner agrees, but must have a review date.
	and/or incremental development and progress.	Tutorials/discussion – formal/informal (Appendix		Any feedback regarding the placement is not first-hand and as such, should be shared only with
	It may be formative and/or summative.	E11).	Formal – planned 4 per year. Informal – as appropriate.	the centre/centre staff (and NCFE if appropriate). The centre should seek to review the workplace
	Ideally, those providing feedback on learner performance/achievement will be calibrated to a standardised assessment and feedback protocol.			and work with them to address the issues or concerns highlighted.
	This feedback may highlight any specific concerns around the learner's learning and/or identify and address any specific individual learner needs.	Written reports (Appendix E9).	Termly (or 4 per year)	
	This would enable centres/Tutors/Assessors (and possibly workplaces) to provide proactive support to enhance the learner's performance.	Learner Achievement Log (NCFE Document).	After each unit.	
		Individual learning planning sessions (Appendix E10).	After each unit delivery.	

Stakeholder groups	Feedback purpose	Suggested methods	Suggested timeframes	Outcome/reporting
Tutors (continued)	Tutor feedback that is gathered in relation to the apparent quality of the support and guidance available in the workplace would enable the placement, centre and NCFE to address any quality issues that would enhance/improve the learner learning experience and/or address any specific individual learner needs. Tutor feedback in relation to the programme, its design and delivery would enable the centre and CACHE to address any quality issues that would enhance/improve the learner learning experience.	Tutorials/discussion – formal/informal (Appendix E11). Tutor unit evaluation (Appendix E12).	Formal – planned 4 per year. Informal – as appropriate. After each unit delivery. Timeframes for disseminating data and response which includes an action plan should be specified.	 Tutor's evaluation of the programme, its design and delivery should be disseminated to key stakeholders: centre/Assessors NCFE. Each stakeholder group would be expected to respond with an appropriate plan of action to address any issues or concerns highlighted. The action plan should be shared with appropriate other key stakeholders and have a review date.

Stakeholder groups	Feedback purpose	Suggested methods	Suggested timeframes	Outcome/reporting
Assessors	Feedback in relation to learner performance/ achievement is an essential part of any learning experience, and should be used to motivate the learner towards improving sustained and/or incremental development and progress. It may be formative and/or summative. Ideally, those providing feedback on learner performance/achievement will be calibrated to a standardised assessment and feedback protocol. This feedback may highlight any specific concerns around the learner's learning and/or identify and address any specific individual learner needs.	Written reports (Appendix E9) Learner Achievement Log (Document). Individual learning planning sessions (Appendix E10). Tutorials/Discussion – Formal/informal (Appendix E11).	Termly (or x 4 per year) After each unit. After each unit delivery. Formal – planned x 4 per year. Informal – as appropriate.	Assessor evaluation of learner performance should be shared with the learner. The Assessor should support the learner in creating an appropriate and targeted individual learning plan (ILP), to address any issues or concerns and/or maintain or improve performance. The ILP may be shared with others, if the learner agrees, but must have a review date.

Stakeholder groups	Feedback purpose	Suggested methods	Suggested timeframes	Outcome/reporting
Assessor (continued)	This would enable centres/Tutors/Assessors (and possibly workplaces) to provide proactive support to enhance the learner's performance.			
	Assessor feedback in relation to the observed quality of the support and	Written reports (Appendix 9).	Termly (or x 4 per year)	Any feedback regarding the placement should be shared only with the centre/centre staff (and NCFE if appropriate).
	guidance available in the workplace would enable the placement, centre and NCFE to address any quality issues	Learner Achievement Log (NCFE document). Individual learning planning	After each unit.	The centre should seek to review the workplace, and work with them to address the issues or concerns highlighted.
	that would enhance/improve the learner learning experience, and/or address any specific individual	sessions (Appendix 10). Tutorials/Discussion – Formal/informal	After each unit delivery.	Assessor's evaluation of the programme, its design and delivery should be disseminated to key stakeholders:
	learner needs.	(Appendix 11).	Formal – planned 4 per year. Informal – as appropriate.	centre/TutorsNCFE.
	Assessor feedback in relation to the programme, its design and delivery, would enable the Tutors, the	Assessor unit evaluation (<u>Appendix</u> 12).	After each unit delivery.	Each stakeholder group would be expected to respond with an appropriate plan of action to address any issues or concerns highlighted.
	centre and NCFE to address any quality issues that would enhance/improve the learner learning experience.		Timeframes for disseminating data and response which includes an action plan should be specified.	The action plan should be shared with other appropriate key stakeholders and have a review date.

Appendix E1: Patient feedback questionnaire

(Feedback mechanisms for key stakeholders)

The General Dental Council (GDC) sets out standards that must be met by the GDC registered members of the dental team that are involved in your care. The trainee Dental Nurse (insert name) that was involved in your care is expected to work towards achieving the same. Your evaluation of (insert name) will contribute towards their further development and compliance with the guidance. This form remains anonymous, but the responses may be shared with the learner/Tutors/learning centre.

Please complete the form and return it to:

The trainee Dental Nurse was	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
Easily identified					
Professional					
Courteous					
Confident					
Informative					
Respectful					
Knowledgeable					
Kind					
Argumentative					
Untidy in appearance					
Impolite					
A good member of the team					

Would you be happy for this trainee Dental Nurse to be involved in your care in the future	?
(please answer yes/no and give your reasons)	
Yes/No – Because	

Were you confident having a trainee Dental Nurse involved in your care? (please answer yes/no
and give your reasons)
Yes/No – Because

Could the trainee Dental Nurse have done anything to improve your experience? (please answer yes/no and give examples) Yes/No – Examples

Please add any further information regarding the trainee Dental Nurse that you wish to.

Thank you for taking the time to complete this valuable evaluation.

Please return it to:

Appendix E2: Patient feedback meeting (face to face/telephone)

(Feedback mechanisms for key stakeholders)

[The following should be read to the patient by the interviewer.]

The General Dental Council (GDC) sets out standards that must be met by the GDC registered members of the dental team that are involved in your care. The trainee Dental Nurse (insert name) that was involved in your care is expected to work towards achieving the same. Your evaluation of (insert name) will contribute towards their further development and compliance with the guidance. Any notes recorded during this meeting remain anonymous, but your responses may be shared with the learner/Tutors/learning centre.

[The interviewer should ask the following questions and record the patient's responses accurately using their own words.]

Was the trainee Dental Nurse	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
Easily identified					
Professional					
Courteous					
Confident					
Informative					
Respectful					
Knowledgeable					
Kind					
Argumentative					
Untidy in appearance					
Impolite					
A good member of the team					

Would you be happy for this trainee Dental Nurse to be involved in your care in the future?
(please answer yes/no and give your reasons)
Yes/No – Because
Were you confident having a trainee Dental Nurse involved in your care? (please answer yes/no
and give your reasons)
Yes/No – Because
Could the trainee Dental Nurse have done anything to improve your experience?
(please answer yes/no and give examples)
Yes/No – Examples
Do you have anything to add regarding the trainee Dental Nurse?
bo you have anything to add regarding the trainee bental Nurse:
Thenk you for taking the time to complete this valuable avaluation. Your responses will be
Thank you for taking the time to complete this valuable evaluation. Your responses will be
shared with the colleagues that are involved in the training.
Interviewer, please return this form to:
by(date)

Appendix E3: Patient focus group moderator guide

(Feedback mechanisms for key stakeholders)

The moderator should cover the following points at the outset:

- Welcome and thank you for your time.
- This meeting will last no more than minutes.
- Does anyone mind if we record this? Recordings will not be shared with others, but will help to extract the important points that you all make. Those important points will then be written down and may be shared with the learner and their Tutors to assist their development.
- The evaluation is formative and qualitative. This means that we wish to gather information that helps the learner and the Tutors identify any areas that need to be improved. The information we are collecting is by design descriptive rather than numeric, so we want just your words and your impressions.
- All information we collect is confidential as to who provided it. For example, we will not disclose who actually participated in this focus group, nor will our final report make any attributions for quotes. We hope this encourages you to speak freely.
- Our evaluation will result in a written report by (give date). This report will be delivered to the relevant parties and lead to a development action plan.
- Are there any questions before we start?

The moderator should then explain the context in relation to the General Dental Council's (GDC) expectations of learners in training, and the standards that govern all dental professionals.

Questions:

- 1. What was your general impression of (insert name)?
- 2. Was your experience with (insert name) different from your usual experience at the dentist? If so, why?
- 3. What could (insert name) have done differently that would have been better?
- 4. Are you usually happy to have learners involved in your care?
- 5. Dentistry is about teamwork in what ways do you think (insert name) showed that they were part of the team?
- 6. (If time allows) Do you have anything to add that (insert name) might find useful?

Appendix E4: Anonymous learner unit evaluation

(Feedback mechanisms for key stakeholders)

(To be completed for each unit)

Jnit number:
Jnit title:
Centre:
earning outcomes:

	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
Unit content was well explained					
Unit learning outcomes were fully met					
Unit teaching will assist me in practice					
Unit teaching assists/ supports my learning					
There were adequate resources					
Resources were of good quality					
My progress is being monitored					
I am making good progress					

What was the most useful aspect of the teaching for	r this unit?
---	--------------

What was the least useful aspect of the teaching for this unit?

What could be done to improve your experience?

Do you have anything further to add regarding any aspect of this unit?

Thank you for taking the time to complete this valuable evaluation. Your ANONYMISED responses will be used to make improvements.

Please return this form to:

Appendix E5: Learner placement report/reflective account

(Feedback mechanisms for key stakeholders)

Learners should be encouraged to write regular reflective reports about their placement using an appropriate reflective model. The intention should be to encourage the learner to recognise whether any negative aspects of their experience may be related to their own attitudes/behaviour and/or identify any potential issues with the placement.

The centre should use the reflective accounts to encourage the learner to develop and respond to a greater awareness of the impact of their own behaviour on colleagues and/or to instigate an appropriate liaison with the workplace to discuss any issues that have arisen as a result of the learner placement evaluation/reflection.

The following model, which has been adapted from Gibbs' Reflective Cycle, may be useful:

Description	Describe a role, an incident or event that you have decided to reflect upon. Think about the context and who else was involved. Note: it does not have to be a negative event; perhaps a patient or colleague complemented you on your professionalism or performance.
Feelings	Describe how the incident/event made you feel. Try not to use reflection to blame others – only consider your behaviour/actions/attitude.
Other	If you can, ask others for their thoughts and views. This could be colleagues – both senior and junior.
Evaluation	What was good or bad about the experience? Sometimes bad incidents have good bits and vice versa. Try to pick out the good and the bad.
Analysis	What sense can you make of the situation – what does it mean? Explore the details more closely and try to think about what challenged you and why you did what you did.
Conclusion	What have you learnt as a result of the incident/event or thing? What else could you have done to achieve a different outcome?
Action plan	What will you do next? How will you work towards avoiding repeating something bad or building on something good? Will you need help to do this? Note: This action plan could form part of your PDP and become a development goal.
Review	What was the outcome of your action? Did your action plan work; if not, why not? Could you have done more to aid achievement? Did you lose interest – why?
Now what	 Keep this record of reflection in the appropriate section in your PDP. This is clear evidence of you thinking and developing as a professional. What is your next plan of action or project?

Appendix E6: Learner/centre evaluation by placement

(Feedback mechanisms for key stakeholders)

Learner name:					
Placement:					
Workplace superviso	r:				
Unit number:					
Unit title:					
Centre:					
Learning outcomes:					
	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
The learner appeared knowledgeable about the unit content					
Practical skills appear to be supported by unit teaching					
The learner is achieving the standards I would expect					
Centre staff assist me in supporting the learner					
Centre guidance documents assist me in supporting the learner					
All interactions with Assessors are positive					
The learner is making good progress					

What did the learner gain most from this unit?

As the employer/supervisor, what in your opinion would improve this unit?

What could the centre do to improve your relationship with them?

Do you have anything further to add regarding any aspect of this unit?

Thank you for taking the time to complete this valuable evaluation. Your responses will be used to make improvements.

Please return this form to:

Appendix E7: Learner/centre evaluation by placement (face to face/telephone)

(Feedback mechanisms for key stakeholders)

Placement:					
Workplace supervisor:					
Unit number:					
Unit title:					
Centre:					
Learning outcomes:					
3					
[The interviewer should ask the follo	wing question	ns and record	the responses	accurately]	
[The interviewer should ask the follo	wing questior Strongly agree	ns and record Agree	the responses Unsure	accurately] Disagree	Strongly disagree
[The interviewer should ask the follo The learner appeared knowledgeable about the unit content	Strongly				
The learner appeared knowledgeable	Strongly				
The learner appeared knowledgeable about the unit content Practical skills appear to be	Strongly				
The learner appeared knowledgeable about the unit content Practical skills appear to be supported by unit teaching The learner is achieving the	Strongly				
The learner appeared knowledgeable about the unit content Practical skills appear to be supported by unit teaching The learner is achieving the standards I would expect Centre staff assist me in supporting	Strongly				
The learner appeared knowledgeable about the unit content Practical skills appear to be supported by unit teaching The learner is achieving the standards I would expect Centre staff assist me in supporting the learner Centre guidance documents assist	Strongly				

What did the learner gain most from this unit?

As the employer/supervisor, what in your opinion would improve this unit?

What could the centre do to improve your relationship with them?

Do you have anything further to add regarding any aspect of this unit?

Thank you for taking the time to complete this valuable evaluation. Your responses will be used to make improvements.

Please return this form to:

.....by......by......

Appendix E8: Placement report

(Feedback mechanisms for key stakeholders)

Placements should complete regular reports to review the programme from the workplace perspective.

It would be useful to provide a structured framework by asking the placement to evaluate the following:

- engagement with the centre
- engagement with the Assessors
- management of the course
- the support available
- the accessibility of information relating to the course
- the structure/design/delivery of the programme
- the impact on the practice
- the impact on the learner
- learner outcomes in relation to the course
- resources/materials.

Appendix E9: Tutor/Assessor report

(Feedback mechanisms for key stakeholders)

Tutors/Assessors should complete regular reports to review the learner. This may lead to areas of concern regarding the placement; such concerns should be noted and shared with the centre **ONLY**.

It would be useful to provide a structured framework by asking the Tutor/Assessor to evaluate the following:

- overall learner performance to date
- progress in current unit
- progress overall
- demonstrable knowledge
- attendance
- punctuality
- appearance
- attitude
- professionalism
- development-planning
- reflective practice
- commitment
- practical experience
- team work
- interactions with peers.

Appendix E10: Individual learning plan

(Feedback mechanisms for key stakeholders)

Learner signature:

Tutor/Assessor signature:

Date:

Learner name:

Date:

Comment on the following in relation to your current learning:		
What are your current strengths?		
What are your current weaker areas?		
What opportunities do you have to make changes?		
What threatens any change that you would like to make?		
What <u>could</u> you do to improve?		
What <u>will</u> you do to improve?		
When will you do this?		

Learner signature:

Tutor/Assessor signature:

Date:

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Appendix E11: Tutor/Assessor planned discussion

(Feedback mechanisms for key stakeholders)

Tutors/Assessors should undertake regular tutorials/discussions with the learner. These may be formal or informal but should be learner-focused and aim to help the learner take charge of their own development, thereby releasing their potential and improving their outcomes.

It would be useful to provide a structured framework based on a mentoring relationship, for example:

- What would you like to discuss today?
- Do you think there are other ways of looking at that?
- What would help you to deal with it?
- Ideally, what do you need to happen?
- What would be a realistic goal for you?
- Is that achievable?
- What strategies would work for you?
- Which of those strategies makes the most sense to you?
- So what is your action plan now?
- What would be a realistic timeframe to achieve your plan?

Appendix E12: Tutor/Assessor unit/programme evaluation

(Feedback mechanisms for key stakeholders)

Programme:					
Unit number:					
Unit title:					
Centre:					
Learning outcomes:					
	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
The unit/programme content is relevant					
Practical skills are supported by the unit/programme					
The unit/programme supports learner Fitness to Practise guidance					
Learners achieve the standards I would expect					
Course documentation/materials are appropriate					
The learning environment is good					
Programme management is good					
Placements are supportive and easy to work with					

What are the best aspects of the unit/programme?

What in your opinion would improve this unit/programme?

How does this unit/programme impact on learners in the workplace?

Do you have anything further to add regarding any aspect of this unit/programme?

Thank you for taking the time to complete this valuable evaluation. Your responses will be used to make improvements.

Please return this form to:

.....by......by......

Appendix F: Workplace/placement learner learning contract

	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:

Workplace/placement learner learning contract	
(Name of employer) AGREE TO:	\checkmark
Read and comply with the requirements of the General Dental Council (GDC) in respect of the following documents (where they are applicable to trainee Dental Nurses in the workplace):	
Standards for the Dental TeamStudent Professionalism and Fitness to Practise.	
These documents can be found at www.gdc-uk.org.	

T

Workplace/placement learner learning contract		
(Name of employer) AGREE TO:	✓	
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 trainee Dental Nurse 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 trainee Dental Nurse has had the appropriate vaccinations required to practice, before undertaking exposure prone procedures, and keep copies of their vaccination status.		
Ensure that the trainee Dental Nurse is identified as a trainee in the workplace (eg 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.		

Workplace/placement learner learning contract	
(Name of employer) AGREE TO:	~
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 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 NCFE 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 continuing professional development (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 they are trained, confident and competent.	
Raise concerns where issues around patient safety arise.	
Ensure that all workplace mentors/supervisors or others involved in the work-based training are aware of the GDC's Student 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 workplace 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 events if/when required.	
Report any learner absence to the centre-named person.	

Workplace/placement learner learning contract

(Name of employer) AGREE TO:

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, workplace mentors/supervisors, Assessors, etc in order to develop and improve their knowledge and skills.

I have read and agree to all of the above:

Employer signature:

GDC registration no:

Date:

Workplace mentor/supervisor signature:

GDC registration no:

Date:

I have discussed the contents of this document with the employer/workplace mentor/supervisor.

Centre/provider representative:

GDC registration no: (if applicable):

Date:

 \checkmark

Appendix G: Centre/learner learning contract

Centre/learner learning contract		
Centre/provider:	Name: Centre number: Address: Contact number: Email contact:	
Workplace/ placement:	Name: Address: Contact number: Email contact:	
Learner:	Name: Learner number: Address: Contact number: Email contact:	

Centre/learner learning contract	
I (name of centre representative) AGREE TO:	~
Quality assurance and safety	

Centre/learner learning contract								
I (name of centre representative) AGREE TO:								
Maintain records of all staff responsible for the delivery of the qualification including Tutors, Assessors and Internal Quality Assurers (IQA).								
Records held by the centre should include copies of:								
 current CV job description proof of General Dental Council (GDC) registration details of Disclosure and Barring Service (DBS) checks (copies to be held only with consent) vocational qualifications (primary and post-registration) education qualifications continuing professional development (CPD) undertaken with reflective statements 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 NCFE external quality assurance.								
Provide evidence of the centre's internal quality assurance strategy to cover all aspects of the programme and work placements.								
Address any identified quality issues within a NCFE specified timeframe.								
Respond to any changes required by NCFE 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.								
Ensure that all Assessors are both occupationally competent and knowledgeable.								
Attend all regular and mandatory NCFE events to support standardisation of work, good practice, raising concerns and calibration of Assessors as/when required.								
Be subject to all our EQA visit and Quality Assurance procedures and to respond in a timely fashion according to any specified timeframe.								

Centre/learner learning contract	
I (name of centre representative) AGREE TO:	~
Complete all required evaluations and requests for feedback as required for quality monitoring by NCFE 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 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 GDC requirements.	
Ensure that the workplace has completed and submitted an Employer declaration of induction (Appendix B) 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 (Appendix C).	

Centre/learner learning contract	
I (name of centre representative) AGREE TO:	\checkmark
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 trainee 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 workplace 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 and Procedure.	
Learner	
Check that the learner has had the appropriate vaccinations required to practise, 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 is identified as a trainee in the workplace (eg by wearing a name badge).	
Protect patients by ensuring that the learner undertakes only those duties in which they are trained, confident and competent.	
Raise concerns where issues around patient safety arise.	
Inform the learner that they must behave in a professional manner commensurate with the attitudes expected of a dental professional in education and/or training, and ensure that they do so.	

Centre/learner learning contract							
I (name of centre representative) AGREE TO:	\checkmark						
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, workplace mentors/supervisors, Assessors, etc in order to develop and improve their knowledge and skills.							

I have read and agree to all of the above, and acknowledge that this Centre/Learner Learning
Contract forms part of, and is complementary to, the NCFE Centre Agreement.

Centre representative:

GDC registration no (if applicable):

Date:

I have discussed the contents of this document with the centre representative.

NCFE representative:

GDC registration no: (if applicable):

Date:

Appendix H: Learner portfolio

The learner must keep a portfolio of the training they receive in the workplace and a record of their clinical experience. The primary focus of the portfolio is to provide the learner (and their employers, supervisors and Assessors) with feedback on their performance and progress throughout training, and to triangulate this information with their own reflections on practice.

Trainee Dental Nurses will progress towards achieving the competencies for Dental Nurse training and will be monitored to ensure that they receive full and appropriate educational support at all times. Centre internal quality assurance and NCFE external quality assurance mechanisms will include sampling learner portfolios.

This portfolio is a guide to help trainees focus their thoughts regarding their professional development, keep track of their attendance or participation in educational events and highlight what they have learnt.

Dental nurse training learning portfolio

Rationale and educational principles

Each learner will maintain a standard core learning portfolio. This learning portfolio mirrors the Dental Foundation Trainee Learning Portfolio which has been designed following consideration of the latest published evidence in educational research and extensive consultation with stakeholders.

Educational Portfolios and Personal Development Plans

Each learner must complete a NCFE approved learning and development portfolio to provide evidence of educational and training activity, and submit this to the training provider (centre) or NCFE on request, and for approval as part of the sign off process.

This may be either paper or electronic format, as provided by the centre or NCFE.

Each learner must:

- determine, record and address personal learning needs with the support of their Assessor and supervisor(s) and the trainee Dental Nurse learning portfolio(assessments and reflection)
- maintain an up-to-date learning portfolio, including timely completion of the educational activities described therein, and discuss the outcomes regularly with their supervisor and Assessor
- complete the weekly clinical experience record, monthly clinical experience collation record, assessment log, CPD and education log and personal development plan (PDP) regularly each month as appropriate, and share this information with their supervisor and Assessor
- reflect on their own practice throughout their training, including the completion of a written reflection form for their learning portfolio at least once each month or at a frequency determined by NCFE or the training provider. This will be weekly during the first 2 months of the training programme.

Supervisors and Assessors must:

 monitor and assess the learner's progress and professional development using the learning portfolio, including the completion of assessments, tasks and monitoring forms, and provision of feedback as required.

It has been mapped to the Dental Nurse Training curriculum at the major competency level.

How to use the learning portfolio

A suggested overview of how the portfolio is constructed is provided below.

This portfolio should be kept throughout the trainee Dental Nurse's training, as they progress through the 2-year training programme.

There are 5 principle sections within the portfolio that should work in harmony to ensure that your educational needs are met and your Tutors, supervisors and Assessors can support your learning:

SECTION 1 Introduction – your professional development portfolio	 learner details supervisor details curriculum outline aims of Dental Nurse training learner learning contract how to use the portfolio activities schedule/timetable
SECTION 2 Monitoring progress and achievements	 Clinical experience weekly record Clinical experience monthly collation sheet Assessment log Personal Development Plan (PDP) Continuing professional development (CPD) and education log
SECTION 3 Reflection	 reflections on progress, CPD, coursework, critical incidents and interesting/difficult cases. Include work activities that went well
SECTION 4 Assessment of performance and appraisal statements	 assessment forms patient feedback multi-source feedback appraisal statements
SECTION 5 Other educational activities	 projects reflections on practice meetings presentations any other CPD attended, including e-learning

Section 1: Introduction

How it works (overview)

This section provides an introduction to the learning portfolio, and contains personal information of the learner and their Assessor and supervisor(s).

It is really important that you use your portfolio on an ongoing basis and keep up to date with your clinical experience logs and reflections to be sure of successfully qualifying as a Dental Nurse. The skills of reflection used in completing your portfolio will be helpful to you for your future lifelong learning required for continuing registration with the General Dental Council (GDC).

Section 2: Monitoring

The monitoring section should provide learners, and their supervisors and Assessors, with a current summary of their clinical experience, the range of assessments completed and a PDP. This section should be kept up to date at all times by the learner, so that Assessors and supervisors can look at progress at any time in order to plan training appropriately.

Supervisors and Assessors are also required to look at (and sign off) this section at least every 3 months.

There are 4 logs within the monitoring section as follows:

- 1. Record of Clinical Experience log
- 2. Assessment log
- 3. PDP
- 4. CPD and education log

Information from assessments, reflection and other educational activities carried out during training will be used to complete these forms.

The forms are explained below. In addition, working examples of each form can be found on our website.

Section 3: Reflection on practice

This section will contain the documented reflections of the learner. Using published evidence from educational research and psychology theory as a basis, a reflection form has been designed to capture the range of reflections that the learner might make during the training programme.

These will include:

- reflections of progress made during a certain time (eg week/month)
- reflections on interesting or difficult cases encountered
- reflections on significant events (significant event analysis)
- reflections of what went well and why
- reflections on progress towards achieving specific learning objectives.

The minimum requirements for the completion of the reflection forms are one per week for the first 8 weeks of training, followed by one per month thereafter for the duration of training. Learners are expected to choose topics for reflection that are relevant to them, and any learning objectives identified

as a result of reflection should be noted on their personal development plan in the monitoring section of the learning portfolio.

All completed reflection forms should be reviewed by the Assessor or supervisor, who may add feedback for the learner if they wish.

Section 4: Assessment of performance

The assessment of performance section should provide learners, and their supervisors and Assessors, with a record of their performance and progress towards achieving the learning outcomes for Dental Nurse training. Learners are assessed against the standards expected upon completion of this training, and so the evidence from different assessments, and the feedback on these forms, will indicate how the learner is progressing during the training, allowing training to be planned according to their individual learning needs.

The assessment system has been designed to give learners and supervisors as much flexibility as possible. Rather than specifying the exact day or week that assessment should take place, the minimum requirements for assessment per month are specified.

The learner should keep all completed assessment forms within their learning portfolio at all times, so that supervisors and Assessors can look at progress at any time in order to plan future training events/structure appropriately.

Any learning needs identified through assessment (ie 'needs improvement' scores), and the details thereof, should be written into the PDP in the monitoring section of the portfolio and the assessment log completed appropriately.

Supervisors/Assessors are required to look at (and sign off) these monitoring forms at least every 3 months, so it is important that these are kept up to date. Any areas identified as needing improvement should be addressed before the end of the training programme and reassessed to provide evidence that progress has been made and competence achieved.

Section 5: Additional educational activities

Whilst sections 1–4 of the learning portfolio include educational activities core to Dental Nurse training, we recognise that individual centres may have other educational materials or exercises that they find to be beneficial. In light of this, section 5 has been added to the learning portfolio so that such activities or other information can be included here (in addition to the mandatory log of clinical activity).

Educational activities which can be added to this section would include:

- logs of clinical experience (weekly and monthly) (mandatory)
- audit project
- reflection on practice meeting
- project presentation
- any other CPD attended, including e-learning.

Assessment of portfolios

Assessors will regularly assess learners against the tasks and observations for the units. Copies of the assessments should be retained within the learner portfolio, in addition to those copies retained at the centre. These form an ongoing and building assessment of the learner's progress throughout the qualification. Both the centre internal quality assurance and NCFE external quality assurance mechanisms will sample learner portfolios.

Appendix I: Clinical experience weekly record

The following log is a mechanism to track the learner's progress towards full exposure to Dental Nursing practices during your time in the workplace. The log allows providers to meet the following GDC requirements:

14. The provider must have in place effective management systems to plan, monitor and centrally record the assessment of students, including the monitoring of clinical and/or technical experience, throughout the programme against each of the learning outcomes.

15. Students 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.

This log should be used to support preparations and help build discussions and reflections for progress review meetings with managers and on-programme tutors/Assessors.

If the learner does not use this log they will need to evidence to their EQA how they are monitoring clinical and technical experience within the same parameters.

The log can provide support not only in reflections of exposure during each review period but also in helping to plan the following 8-12 weeks on-programme to ensure the learner gains experience in the full breadth and depth of a Dental Nursing role.

Some treatments may be difficult to gain exposure to in different settings. Any procedure listed below that is not evidenced during at least 3 review periods must be accompanied by **a statement of knowledge** to show the learner possesses the occupational knowledge to support and complete these procedures.

Please note that the target number of experiences are **a guide only** and numbers of clinical or technical experiences are likely to differ depending on the setting.

During reflections, the learner should make note of different patient groups they have worked with during that period to ensure they have experience of working with:

- pre-school children
- school children
- adults
- older adults (65+)
- children with additional needs
- adults with additional needs.

Prior to completion of the qualification, both the learner and the employer must sign the experience log in order to authenticate both the level of experience they have received during their training as well as their competence in each area.

	Intra-oral radiographs	Orthopantogram	Charting – tooth	Charting – soft tissue	Charting – basic periodental examination (BPE)	Charting – index of orthodontic treatment need (IOTN)	Vitality testing - hot/cold or electronic pulp tester	Filings	Fluoride application	Fissure sealant	Endodontics	Complete denture	Partial denture	Impressions	Veneer/inlay	Jacket crown	Post crown	Bridge – adhesive	Bridge – fixed	Orthodonic	Implant	Extraction – non-surgical	Extraction – surgical	Oral hygiene instruction	Smoking cessation advice	Diet advice
Monthly targets	20	10	30	30	30	1	1	20	15	2	3	1	3	4	1	2	1	1	1	1	1	4	1	1	1	1
Month 1																										
Month 2																										
Month 3																										
Month 4																										
Month 5																										
Month 6																										
Month 7																										

Month 8													
Month 9													
Month 10													
Month 11													
Month 12													
Month 13													
Month 14													
Month 15													
Month 16													
Month 17													
Month 18													

Employer signature of agreement______ Trainee dental nurse signature of agreement______

Date

Appendix K: Quality assurance framework

Quality assurance process	Role	To be reviewed	Time scale
Ensure all NCFE policies are in place. Review centre compliance with all NCFE requirements	Internal quality assurance. External Quality Assurer (EQA). Each centre must also check these documents are in place before beginning the qualification.	 Student Fitness to Practise policy and procedure Admissions/enrolment procedure Equal opportunities and diversity policy and procedure Learner support policy/protocol Raising concerns in the workplace policy and 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) Centre/learner learning contract (Appendix G) Learner contract (Appendix D) Initial safety check and workplace monitoring (Appendix C) 	Before the programme commences. Initial external assessment.
Ensure all centre staff documentation is in place.	Internal quality assurance. 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, ie department supervisor/Tutor(s)/Assessor(s)/Internal Quality Assurer(s) (IQA) Current CV Copies of vocational qualification certificates Copies of education/training qualification CPD records 	Before the programme commences. Initial external assessment.
Learners' application and associated documents.	Initially checked by centre and then by the EQA. Internal quality assurance.	 A random sample of the learner's application forms GDC registration numbers for the supervising Dentist/staff Proof of learner's vaccination status Employer's declaration of induction Learner contract (Appendix D) Initial safety check and workplace monitoring (Appendix C) 	Once at the start of the programme and initial external assessment.

Quality assurance process	Role	To be reviewed	Time scale
Learner progress.	Internal quality assurance. 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/workplace mentor's/supervisor's comments on the learner's development Workplace mentor's/supervisor's training Patient feedback 	2 per year during the programme.
Learner support.	Internal quality assurance. 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. EQA.	 Lesson plans and SoW to ensure that they are on target Tutor's ongoing CPD 	Visit and desk based.
End-of-course evaluation.	Internal quality assurance. 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 to guide centres when providing training programmes for those involved in the training and assessment of trainee Dental Nurses. This will include Tutors, Assessors, Internal Quality Assurers (IQAs) 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.

(Appendix L continues on the next page.)

Relevant to	Topics	Rationale	Training
Supervisors Assessors Tutors	Equality and diversity	To ensure clarity on equality and diversity requirements	Mode: could use online packages that centres may have available. Face-to-face workshop. 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. 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. 	 Whilst 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 training days in relation to the assessment process.

Relevant to	Topics	Rationale	Training
		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 external quality assurance.	
Supervisors Assessors	Supporting learners	How to monitor and support learners so that their learning needs are met.	Ongoing: at least twice per year.
Tutors		How to appropriately discuss and record learners' progression throughout the programme. Providing constructive feedback and identifying areas of development.	Mode: Standardisation meetings with assessors and IQAs held regularly throughout the year.
		Raising concerns about a learner's progress, the actions that need to be taken and how to progress these concerns when necessary.	NCFE training days in relation to the assessment process.
		Student 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	
		Clarity for all staff on how student Fitness to Practise is addressed and their role.	
Supervisors Assessors	Raising concerns regarding patient safety	Identifying and escalating patients' safety concerns.	Mode: In line with GDC requirements:
Tutors		A clear and consistent approach for all staff members is required.	 regular face-to-face meetings standardisation activities in relation to quality assurance.

Relevant to	Topics	Rationale	Training
Supervisors Assessors Tutors	Induction training programme	 Equality and diversity and how this applies. NCFE statement of values Data protection Malpractice and maladministration Complaints procedure Appeals process Raising patient safety concerns Complaints – managing complaints and appeals. Student Fitness to Practise process. All staff need to be aware of the relevant legislation and how to deal with any issues that may arise. Baseline 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 decontamination 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 are up to date. To foster a continuous learning culture. To gain from the experience of colleagues and learners.	Annual rolling programme. Mode: In line with organisational and GDC CPD requirements to meet the 5- year GDC cycle.

Relevant to	Topics	Rationale	Training
Supervisors	Monitoring the	To ensure sufficient competent and qualified staff, resources and systems are in	Ongoing.
Centre management	overarching programme	place to support assessment of units. To ensure all requirements are met by Assessors, knowledge Tutors and external Assessors.	 To include: standardisation minutes quality assurance preparation external quality assurance preparation.
		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 NCFE external quality assurance requirements.	
		Meeting GDC requirements.	

Appendix M: Learner sign up for external assessment tests

Learners can be entered in for the two external multiple choice question (MCQ) tests once they have demonstrated achievement of **all** the learning outcomes and assessment criteria across units DN 12–16. These assessments can be sat in the centre or via remote invigilation.

The responsibility will remain with the tutor to prepare learners and only enter them for the two MCQ tests when learners have the requisite knowledge. There are two resit opportunities per MCQ making a total of three attempts on each paper.

Sign up documentation must be available for both internal quality assurance and external quality assurance.

Name of learner:....

Unit	Tasks mark	Comments/Feedback	Achieved
DN 12			
DN 13			
DN 14			
DN 15			
DN 16			

Not achieved – Plan for re-submission

Unit/Work to be completed	Task	Comments/Feedback

Achieved – sign off for external assessment tests

I confirm thathas successfully achieved and completed the tasks as noted above and may now progress to complete the two external assessment tests.

Date:....

Name of Assessor:.....

Signature of Assessor:

Achieved – sign off for external assessment tests

I confirm thathas achieved an attendance level of 80% for knowledge delivery, and may now progress to complete the two external assessment tests.

Date:....

Name of Tutor:....

Signature of Tutor:....

Information and guidance covering scheduling and delivering remote invigilated tests is provided on our website.

Appendix N: Test guidance (paper-based and onscreen)

Please refer to the Regulations for the Conduct of External Assessment; www.qualhub.co.uk/media/1081/regulations-for-conduct-of-external-assessments.pdf

Remote invigilation

Remote invigilation is permitted for the two MCQs in this qualification.

Remote invigilation, also referred to as online invigilation or remote proctoring, is where a learner is observed through audio and visual links whilst undertaking their onscreen external assessment. The use of secure platforms and internet ensures the learner is able to undertake their onscreen external assessment in locations within their home securely.

The remote invigilation platform and supporting devices must be set up in accordance with these instructions.

Centres are not required to carry out the actions of invigilation for onscreen assessments which have been booked for remote invigilation.

Remote invigilation will be provided through the BTL platform. Remote invigilation will use Record and Review which will allow BTL Invigilators to watch recordings of the learners' onscreen external assessment and identify any suspicious activity. Any suspicious activity will be reviewed by NCFE to ensure the integrity of the assessment and the Regulations for the Conduct of External Assessment haven't been breached.

For further information on remote invigilation and how to apply for approval please visit www.qualhub.co.uk/delivery-and-learner-support/remoteinvigilation/#:~:text=Also%20referred%20to%20as%20remote,external%20assessment%20and%20the %20learner.

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 (GDC). Their supervisor within the practice is also registered with the GDC.

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 if you are happy with this and will explain any possible implications before your treatment starts. You just need to let NCFE know that you are happy with this or if you wish to have a qualified 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 NCFE 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	Workplace mentor/supervisor	Assessor
Name:	Name:	Name:
Learner number:	GDC registration no:	GDC registration no:

As the patient identified above, I understand that the named *trainee Dental Nurse* is undertaking the *Level 3 Diploma in the Principles and Practice of Dental Nursing* qualification. All trainees are expected to undertake the full clinical role of a Dental Nurse. For the duration of their training, they remain under the continued supervision/mentorship of a GDC registrant.

I consent to the *trainee Dental Nurse* undertaking the clinical role during my dental treatment. I understand that I can decline or withdraw my consent at anytime. I am aware that I can also make the request to have a qualified Dental Nurse in the surgery.

I also consent to the possible presence of an Assesssor, who would observe the trainee during my dental treatment. I am aware that the Assessor will be a 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 that this will play a part in their overall assessment.

My consent is only in respect 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 within the learner's portfolio.

Patient signature:	Date:
Trainee signature:	Date:
Workplace mentor/supervisor signature:	Date:
Assessor (if applicable) signature	Date:

Appendix P: Continuing professional development reflective diary and log templates

Learners are encouraged to keep a reflective diary or log of their daily work and learning environment. These templates have been provided to support this.

Reflective diary

Date:	Outline of work activity:			
Make notes on:				
How successful was the activity – did it achieve what you intended?				
Why was that? Would you do the second s	he same thing again? If not, why not?			
If it did not go as you had plan	ned/hoped, why do you think that was the case?			
What would you do differently,	and why?			
What impact would different wa	ays of doing it have on the outcome?			
Do you need to change your be	ehaviours, and if so, why?			

Date:	Outline of work activity:
Make notes on:	
How might a change in your be the workplace?	haviours impact on your work activities and your colleagues in
What have you learnt from refle	ecting on this activity?
How will that inform your future	e activity?
How can you use this reflection	n to help others to learn and develop?

Learner name.....

Learner signature.....

Please be aware that in the complex environment of health and social care, the same actions rarely produce the exact same results because of the variety of circumstances and people involved. Therefore it is good practice to reflect, even if the outcome of your behaviours and activities was positive and successful.

Keep your notes safely in your portfolio.

Personal development log: Guidance notes

A personal development log (PDL) helps you to identify key areas of learning and development activity that will enable you to either acquire new or develop existing skills and behavioural attributes for the following purposes:

- enhance performance in your current role
- address anticipated changes in your current role
- address career aspirations towards a future role.

Prior to completing the PDL, you should:

- complete a skills analysis activity such as skill scan to determine your learning and development targets (may be indicated on your PDP)
- undertake a strengths, weaknesses, opportunities and threats (SWOT) analysis to identify development objectives to meet those targets (may be indicated on your PDP)
- set specific, measurable, achievable, realistic and timebound (SMART) objectives for achieving those targets
- reflect on the learning process.

The personal development planning process should be undertaken initially by you, followed by discussion and agreement with your Assessor/Tutor.

It is recommended that this process should be an ongoing exercise throughout the qualification and ideally should form part of the development review (appraisal) and tutorial/review process. However, it can be equally valuable when undertaken as a standalone activity.

Ideally, the personal development planning process should begin at the point at which you are new to the role and undertaking your induction. The process can then continue at the workplace and with your training provider.

Target and **actual dates** state when it is intended to achieve the development objectives followed by the date it was actually achieved. Data in these columns is particularly useful when reviewing the PDL as they will enable identification of any factors that may have prevented you from achieving the development objectives on the target date and build in contingencies to prevent this from occurring in the future.

Review date states when the progress will be reviewed in the PDL. It is recommended that the PDL is reviewed every month, thereby enabling you to:

- assess the progress
- reflect on the learning
- identify whether the development objectives need to be amended
- identify factors that may have prevented you from achieving the development objectives
- build in contingencies to enable you (where possible) to meet the agreed target date in the future.

The following log could be used.

SMART stands for:

- **Specific**: clearly state what is to be achieved, eg learning muscles of mastication
- Measurable: how will you know that you have achieved your need, the desired outcome, eg testing by Tutor or peers
- Agreed/achievable: you have discussed this with Tutor/workplace mentor/supervisor and agreed an aim
- Realistic: the target is possible given the resources available
- **Timed**: the target will be met by eg 15/12/22

What are my training needs? (S)	How I identified my training needs. How will I know I have achieved my needs? (M)	What type of training is needed? (A)	Timescale – set target for completion (R)	Review date	Actual date achieved (T)	Reflection on completion. What have you achieved? What benefits/practice has changed?

Appendix Q: A guide to writing a reflective account

Learners should be encouraged to write regular reflective reports about their placement using an appropriate reflective model. The intention should be to encourage the learner to recognise whether any negative aspects of their experience may be related to their own attitudes/behaviour and/or to identify any potential issues with the placement.

The centre should use the reflective accounts to encourage the learner to develop and respond to a greater awareness of the impact of their own behaviour on colleagues and/or to instigate an appropriate liaison with the workplace to discuss any issues that have arisen as a result of the learner placement evaluation/reflection.

Description	Describe a role, an incident or an event that you have decided to reflect upon. Think about the context and who else was involved. Note – it does not have to be a negative event; perhaps a patient or colleague complemented you on your professionalism or performance.
Feelings	Describe how the incident/event made you feel. Try not to use reflection to blame others – only consider your behaviour/actions/attitude.
Other	If you can, ask others for their thoughts and views. This could be colleagues – both senior and junior.
Evaluation	What was good or bad about the experience? Sometimes bad incidents have good bits and vice versa. Try to pick out the good and the bad.
Analysis	What sense can you make of the situation – what does it mean? Explore the details more closely and try to think about what challenged you and why you did what you did.
Conclusion	What have you learnt as a result of the incident/event or thing? What else could you have done to achieve a different outcome?
Action plan	What will you do next? How will you work towards avoiding repeating something bad or building on something good? Will you need help to do this? Note: This action plan could form part of your PDP and become a development goal.
Review	What was the outcome of your action? Did your action plan work; if not, why not? Could you have done more to aid achievement? Did you lose interest – why?
Now what	 Keep this record of reflection in the appropriate section in your PDP. This is clear evidence of you thinking and developing as a professional. What is your next plan of action or project?

Appendix R: Workplace mentor/supervisor/trainee Dental Nurse contact record

The workplace mentor/supervisor should:	Signature of workplace mentor/supervisor and
 record the topics discussed and guidance given to the trainee Dental Nurse 	trainee Dental Nurse
 create an action plan to support learning. 	
Copies of the contact record MUST be kept by the workplace mentor/supervisor and the trainee Dental Nurse.	
Topics discussed and advice given:	Workplace mentor/supervisor:
	GDC registration no:
Action plan:	Trainee Dental Nurse:
	Date:
Duration of contact time (eg 30 minutes):	
Topics discussed and advice given:	Workplace mentor/supervisor:
	GDC registration no:
Action plan:	Trainee Dental Nurse:
	Date:
Duration of contact time:	
Topics discussed and advice given:	Workplace mentor/supervisor:
	GDC registration no:
Action plan:	Trainee Dental Nurse:
	Date:
Duration of contact time:	

Appendix S: Incident reporting form

Name: Trainee Dental Nurse	Name: Practice manager
Name: Workplace mentor/supervisor:	Name: Assessor
Workplace mentor/supervisor GDC registration no:	

Issue raised by:				
Centre	Workplace	Trainee Dental Nurse		
Name of person raising/recording the issue: Title: GDC registration no (if applicable):				
Date raised:				

Nature of incident:	🖾 Yes
Health and safety/infection control (H&S)	
Patient safety (clinical treatment undertaken) (CLIN)	
Patient safety (financial irregularity) (FIN)	
Patient safety (data protection/confidentiality) (DATAP)	
Equality and diversity (E&D)	
Direct complaint raised against trainee Dental Nurse (DCOMP)	
Plagiarism (PLAG)	
Professional behaviour/misuse of social media (PB)	
Does the issue being raised link to the Student Fitness to Practise Policy (SFtP)?	

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)

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, who will record the raised/identified incident in line with GDC requirements.

Issue raised by (name and signature):	Date:
---------------------------------------	-------

Centre representative (name and signature):

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 and safety/infection control

CLIN – Patient safety (clinical treatment)

FIN – Patient safety (financial irregularity)

DATAP – Patient safety (data protection/confidentiality)

E&Q – Equality and diversity

DCOMP – Direct complaint raised against trainee Dental Nurse
 PLAG – Plagiarism
 PB – Professional behaviour/misuse of social media
 SFtP – Links to Student Fitness to Practise policy

Section 3 Policies and statements

Policy 1: Raising fitness to practise and 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 members of the practice team
- health conditions of a member of the practice team
- no professional indemnity
- fraud
- concerns about the possible abuse or neglect of children or vulnerable adults
- trainee Dental Nurses working outside their Scope of Practice.

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 a concern arises from a patient complaint concerning the trainee Dental Nurse, it should be raised with the trainee Dental Nurse's employer/work placement, and the trainee 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, and 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).

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 quality assurance purposes.

Contacting the GDC

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

The GDC website 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 of patients or members of staff
- 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.

Procedure

All Fitness to Practise concerns must be reported to NCFE within one week of being identified.

Serious issues must be reported to NCFE within 36 hours of being identified.

A serious issue is defined as an incident having occurred which has had an impact on a registrant's Fitness to Practise.

To report the concern to **NCFE**, please notify your External Quality Assurer.

Once your concern is received by us:

- we will acknowledge your concern within 2 working days of receipt
- we will undertake a full investigation, and aim to provide a full response within 10 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 report the patient safety concern to the GDC:

Telephone: 0207 167 6000

Or

Email: information@gdc-uk.org

Or

Website: www.gdc-uk.org

Or

Write to:

General Dental Council 37 Wimpole Street London W1G 8DQ

Policy 3: Dignity at work

This policy covers bullying and harassment. Bullying and harassment of any kind must not be tolerated. All allegations of bullying and harassment must be investigated and, if appropriate, disciplinary action should be taken.

Unacceptable behaviour

Harassment and bullying are particular behaviours by someone that you reasonably find unacceptable or unwelcome. What might be fine for one person might not be for someone else. We have provided a definition of bullying and harassment below:

Bullying is offensive, intimidating, malicious or insulting behaviour, and/or an abuse or misuse of power that is meant to undermine, humiliate or injure the person on the receiving end.

Harassment is unwanted conduct related to relevant protected characteristics, which are sex, gender reassignment, race (which includes colour, nationality and ethnic or national origins), disability, sexual orientation, religion or belief and age that:

- has the purpose of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person; or
- is reasonably considered by that person to have the effect of violating his/her dignity or of creating an intimidating, hostile, degrading, humiliating or offensive environment for him/her, even if this effect was not intended by the person responsible for the conduct.

There are a number of forms of harassment, which are outlined below:

- **Perceived harassment** this may occur where an individual engages in unwanted conduct towards another because he/she perceives that the recipient has a protected characteristic (for example, a perception that he/she is gay or disabled), when the recipient does not, in fact, have that protected characteristic. For example, it would be harassment for an individual to tease repeatedly an individual because of an incorrect belief that the recipient is deaf.
- Associated harassment this may occur where an individual is bullied or harassed because of another person with whom the individual is connected or associated, for example if his/her child is disabled, wife is pregnant or friend is a devout Christian.
- **Third-party harassment** this may occur where an individual is subjected to unwanted conduct from a third party, such as a customer, supplier or contractor. For example, it might be that a client makes a series of sexist remarks to a female employee.

If you're subjected to third-party harassment, you should raise this issue with your supervisor.

Bullying or harassment could be by written communications, visual images (eg pictures of a sexual nature or embarrassing photographs of colleagues), email or telephone. It may be one incident or a series of incidents.

The key point is that actions or comments are viewed as unacceptable by you. Unacceptable behaviour could be (non-exhaustive list):

- spreading malicious rumours or insulting someone
- comments or behaviour which patronises, causes discomfort, intimidates or offends (this could be

by remarks, looks, attitude, jokes, displaying offensive material, using offensive language or personal comments about appearance)

- copying memos that are critical about someone to others who don't need to know
- ridiculing or demeaning someone: picking on them or setting someone up to fail
- exclusion or victimisation
- unfair treatment
- overbearing supervision or other misuse of power or position
- unwelcome sexual advances
- displaying pornographic, semi-pornographic or 'suggestive' material
- stirring up religious hatred
- making threats or comments about job security without foundation
- deliberately undermining a competent worker by overloading or constant criticism
- preventing individuals progressing by intentionally blocking promotion or training opportunities
- excluding an individual because he/she is associated or connected with someone with a protected characteristic, eg his/her child is gay, spouse is black or parent is disabled
- ignoring an individual because he/she is perceived to have a protected characteristic when he/she does not, in fact, have the protected characteristic, eg an employee is thought to be Jewish, or is perceived to be gay.

What to do if you are being bullied

Where bullying occurs, it often goes on behind closed doors. Therefore, if you believe you are being bullied, or subjected to harassment, speak to your Assessor, Tutor, supervisor or line manager. It is important that you do not try to cope on your own. Informing someone that you believe you are being bullied or subjected to harassment will enable them to provide support, investigate your concerns and take any action considered appropriate based on the circumstances of the case.

If you inform your Assessor, Tutor, supervisor or line manager of your concerns, they will be able to help you think through your options and you can then decide what you want to happen next.

Where possible, it is advisable to tell the person that you find their behaviour unacceptable and ask them to stop. This is sometimes all that is needed.

If appropriate, 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.

Policy 4: Learner confidentiality disclosure code

Please refer to our Whistleblowing Policy which can be found on Qualhub.

Policy 5: Confidentiality and data protection

Confidentiality and data protection are particularly important considerations within health and social care and this is reflected within the qualifications framework. There are a number of pieces of legislation that pertain to confidentiality and data protection which include:

- General Data Protection Regulation
- Data Protection Act 2018
- Access to Medical Reports Act 1988
- Access to Health Records Act 1990
- Freedom of Information Act 2000
- the common law of confidentiality.

There are several enforceable principles that underpin data protection, which include:

- information about a person must be obtained lawfully and fairly
- the information must only be used for a specified purpose
- information must be relevant, adequate and not excessive
- information must be accurate and kept up to date
- information must be kept no longer than necessary and for the purpose specified
- organisations must have measures in place to ensure personal information is not unlawfully processed, lost or destroyed
- organisations must be able to demonstrate accountability in connection with their data processing activities.

It is important to remember that evidence and assessment records are confidential information, and portfolios and Assessor and internal quality assurance records must be stored securely to prevent unauthorised access to them. Storage of evidence, confidentiality and data protection policies are discussed and documented by the learner and Assessor during completion of the pre-assessment checklist. Internal Quality Assurers (IQA) check to ensure that these policies have been discussed and understood by checking for signatures and interviewing learners. If the portfolio is kept at the place of work, ideally it should be stored under lock and key.

Confidential records used as evidence

Learners may quite appropriately cite patients' confidential records as evidence in their qualification, as long as the patient, or their advocate, has given informed consent for records to be used for this purpose.

Confidential records or data should never be included in learners' portfolios of evidence and should instead be examined in situ by the Assessor. Assessors/learners should describe and record what evidence such documents provide, and where the evidence is located.

External consultants may wish to discuss such evidence with the centre as part of the verification process but would not normally require sight of service user's confidential records.

However, should the external consultant have concerns about the quality of such evidence, they will, after discussion with the internal verifier, notify the centre management of their concerns, and seek consent to access such records from the organisation which has responsibility for their safekeeping.

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Data protection

Centres will create and maintain electronic and paper-based records on learners, Assessors, employers and IQAs, both during the course and following its completion. These records will be processed in order to maintain the relevant centre's records and will be stored in compliance with prevailing data protection principles.

These records may be used for reports both internally within the centre and for external bodies working with the centre in connection with the administration of learners and associated financial matters. A learner, Assessor, employer or IQA has the right to ask to see details of any of their personal information. A request need not be made in writing.

Policy 6: Workplace suitability

Procedure

Whilst 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:

- 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 members of the practice team
- health conditions of a member of the practice team
- no professional indemnity
- fraud
- concerns about the possible abuse or neglect of children or vulnerable adults
- trainee 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, and concerns will be raised with the GDC and Care Quality Commission (CQC). An alternative work placement will be sought for the learner.

Immediate withdrawal of the trainee 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 and 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.

**serious concerns:

- · sexual assault or abuse of patients or members of staff
- 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.

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 NCFE, 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:

- repeated failure (> 3) to complete and return centre/qualification documents
- repeated failure (> 3) to grant access to the learner's Assessor to undertake workplace observations
- denying the trainee protected time with their workplace mentor/supervisor during working hours
- repeated failure (> 3) to allow a workplace representative to attend centre meetings/updates/training events
- trainee 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.

2. Contingency plans

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

- 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. The trainee 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 be determined by the centre with the guidance of the EQA, thus ensuring NCFE approved centre requirements are not breached.)
 - i. A centre representative will advise the trainee of the options available to them that allow continuation of their studies.
 - ii. Should the trainee be required to seek alternative employment, the centre will allocate a timescale with the intention of not compromising the trainee's opportunity to continue. This timescale will not only be determined by NCFE requirements, but also the centre's requirements.
- b) Where unsuitability is of a less serious nature, although compromising to the trainee 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 (NCFE recommends no more than 4 weeks). During this time the trainee will remain in the work placement.
 - i. Should a SMART action plan not be agreed between the workplace and the centre, the trainee will be removed from the work placement
 - 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 to carry on in the work placement until an alternative placement can be allocated.

Policy 7: Workplace stipulations

The following information outlines how centres and employers should work together over the duration of the apprenticeship. It should be shared with employers and monitored by centres.

GDC

Employers and supervisors must read and comply with the requirements of the GDC, in respect of the following documents (where they are applicable to trainee Dental Nurses in the workplace):

- Standards for the Dental Team <u>www.gdc-uk.org/information-standards-guidance/standards-and-guidance/standards-for-the-dental-team/</u>
- Student Professionalism and Fitness to Practise <u>www.gdc-uk.org/docs/default-source/guidance-for-students/student-professionalism-and-fitness-to-practise-guidance-for-students.pdf?sfvrsn=5ddbc404_2?</u>

Learner contracts

Specific responsibilities are set out in placement contracts for:

- learner contract (Appendix D*: Learner contract)
- workplace/placement learner learning contract (Appendix F*: Workplace/placement learner learning contract)
- centre/learner learning contract (Appendix G*: Centre/learner learning contract).

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

The employer will establish and maintain a working relationship with the centre, which includes but is not limited to the following:

- provision of and response to progress reports in line with the centre schedule
- provision of a suitable environment and exposure to a wide variety of clinical experience to facilitate comprehensive Dental Nurse training
- identification of a supervising GDC registrant to carry out the day-to-day supervision of the learner
- ensuring that centre or NCFE Assessors are able to access the workplace in order to undertake observations/assessments and other monitoring
- allowing the gathering of appropriate patient/peer/customer feedback which contributes to the assessment process
- providing evidence of CPD records for all supervising registrants, in relation, but not limited, to equality and diversity training, if required
- reporting any learner absence to the centre named person.

Trainee Dental Nurse induction

The employer must provide a complete workplace induction which includes but is not limited to:

- patient safety
- confidentiality
- consent
- health and safety

- safeguarding of vulnerable children and adults
- dealing with medical emergencies
- professionalism and ethics
- GDC Standards and guidance.

This must be completed before the trainee Dental Nurse has any direct patient contact. An employer declaration of induction (Appendix B*) must be completed and sent to the centre/given to the Assessor to confirm that the learner has completed induction prior to treating patients. If the trainee Dental Nurse is already employed, the employer must also sign and confirm that they have been assessed as being safe to practise before entering the clinical area. The trainee Dental Nurse will not be able to continue without this evidence. This will be subject to internal and external quality assurance.

Health and safety

Safety in the workplace

Employers must provide a safe and appropriate clinical environment/workplace and comply with the requirement to provide evidence that supports this. This includes the completion of initial safety check and workplace monitoring documentation (Appendix C*). The employer must 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.

Patient safety

The employer must:

- check that the trainee Dental Nurse has had the appropriate vaccinations required to practise before undertaking exposure prone procedures and keep copies of the learner's vaccination status
- protect patients by ensuring that the learner undertakes only those duties in which they are trained, confident and competent
- raise concerns where issues around patient safety arise. The centre policy and procedure may be adopted by the practice, however, it is expected that each practice will comply with GDC Principle 8 – Raise concerns if patients are at risk
- ensure that the trainee Dental Nurse identifies themselves as a trainee in the workplace (eg by wearing a name badge). Posters (See Appendix O* : Example of a poster for the practice waiting room) should be displayed in the practice waiting room to specify that the practice is a training practice for Dental Nurses, and that patients' treatment may be observed by an Assessor of the learner. Patients 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. Patients must also be made aware if a trainee Dental Nurse 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 must be signed by all necessary parties and 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. Trainee Dental Nurses 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 student (Dental Nurse) and the possible implications of this. Patient agreement to treatment by a student must be obtained and recorded prior to treatment commencing' (GDC 2015)

Staff records

The dental practice will provide a list of the supervising GDC registrants and copies of their GDC documentation to the centre/Assessor. The centre will complete Appendix A*: GDC supervising registrant list. All those supervising must also provide details of current Disclosure and Barring Service (DBS) checks (copies of certificates can only be retained with the applicant's consent).

The employer will keep copies of the trainee Dental Nurse's vaccination status.

Qualification delivery

Learners

Learners will be employed as trainee Dental Nurses within a dental setting. Settings may include general dental practices, community dental services clinics, dental hospitals or specialist dental practices (eg orthodontic practices). Trainee Dental Nurses will be expected to undertake the full clinical role of a Dental Nurse after initial induction and a period of supervised practice, with continued mentorship to support their learning as they work towards the qualification and registration.

Centres are required to have a policy and procedure in place ensuring a further clinical placement is arranged if a learner works in a specialist dental setting where clinical experience may be limited.

The trainee Dental Nurse must have a written contract of employment with the training practice which specifies pay, statutory and annual holidays, etc. If requested, this contract must be available for inspection by us.

Supervision/mentorship

The GDC requires employers to identify a supervising GDC registrant to carry out the necessary supervision for the trainee Dental Nurse. The employer must:

- ensure that the trainee Dental Nurse works only under the supervision of a supervisor/mentor or other suitably qualified and named GDC registered individual
- ensure that the supervising GDC registrant takes full responsibility for providing direct supervision (refer to the GDC website for advice for those who employ dental professionals)
- complete all required evaluations and requests for feedback as required for quality monitoring by the course provider or other stakeholder
- ensure that where supervision/mentorship 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 a record of mentor/mentee contact is recorded for quality monitoring purposes; this can be done using Appendix R: Workplace mentor/supervisor/trainee Dental Nurse contact record
- ensure the supervisor/mentor is adequately indemnified to undertake this duty.

GDC registrants who employ, manage and/or supervise students/trainees risk fitness to practise proceedings if they fail to comply with the GDC guidance.

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"Mentoring is a supportive learning relationship between a caring individual who shares knowledge, experience and wisdom with another individual who is ready and willing to benefit from this exchange, to enrich their professional journey". – Suzanne Faure

"A mentor facilitates personal and professional growth in an individual by sharing the knowledge and insights that have been learned through the years. The desire to want to share these 'life experiences' is characteristic of a successful mentor". – Arizona National Guard

Source: <u>www.coachingnetwork.org.uk/information-portal/Articles/ViewArticle.asp?artId=54</u> Accessed Jan 2017

Assessment

Each learner will have an Assessor as well as a supervising GDC registrant. The Assessor may be workbased – in which case they may also act as mentor/supervisor to the learner – or peripatetic.

Assessors will undertake initial assessment for suitability of a workplace/placement dental practice against a standard. There will be an initial review by the centre 6 months after the practice is first approved and a formal annual review for all practices. Suitability of the practice will be reviewed informally at each assessment visit, and revalidated when a new trainee Dental Nurse is employed.

The employer will allow pre-arranged routine access to Assessors to assess the work of the learner by observation at agreed times. The employer will allow pre-arranged access for occasional internal and external quality assurance visits for audit purposes.

Workload and experience

The employer and supervising GDC registrant will ensure that the trainee Dental Nurse 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. The trainee will keep a weekly record of clinical experience with monthly collation of the procedures and types of patients they have assisted with. The record must be signed by the trainee and countersigned by the supervising GDC registrant, and must comply with minimum requirements. The format of the weekly and monthly record are in Appendix I*: Clinical experience monthly record.

The supervising registrant will assist the trainee to agree, implement and evaluate a personal development plan (PDP) (refer to Appendix P*: Continuing professional development reflective diary and log templates), which incorporates reflection based on self-evaluation, informal and formal feedback from peers, colleagues, mentors, supervisors, Assessors, etc in order to develop and improve their knowledge and skills. The employer will ensure that the supervising GDC registrant and the trainee have sufficient time to undertake this training within normal practice working hours.

Employer and supervisor training

The employer and supervisor will:

- attend all regular mandatory centre or NCFE events if/when required
- attend initial training from the centre for employers and supervisors when a learner enters the qualification

- attend refresher training for employers and supervisors prior to subsequent learners entering the qualification
- be provided training by the centre in relation to quality assurance (where required).
- * Appendices can be found within the following documents, which can be found on our website:
- Appendices, Policies and Statements
- Qualification Approval and EQA Reviews.

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Statement 1: Plagiarism

Centres must share plagiarism policies with their learners to identify the seriousness and potential outcome. Checks will be made by the centre Quality Advisor, as part of quality assurance monitoring.

Plagiarism occurs when learners use other people's work as their own. Centres have an obligation to inform their learners about the consequence of plagiarism in their work.

We take all plagiarism seriously, and such cases will be subject to investigation in line with the centre's Fitness to Practise procedure and policy and our malpractice and maladministration procedure and plagiarism guidance, which can be found on our website.

Statement 2: Diversity

In addition to the published diversity statement, which can be found on our website, the following should be adhered to:

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.

Contact us

NCFE Q6 Quorum Park Benton Lane Newcastle upon Tyne NE12 8BT

Tel: 0191 239 8000* Fax: 0191 239 8001 Email: <u>customersupport@ncfe.org.uk</u> Websites: <u>www.ncfe.org.uk</u>

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Version 1.0 September 2021

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* To continue to improve our levels of customer service, telephone calls may be recorded for training and quality purposes.