

Adaptations for Level 3 Dental Nursing Qualifications 2021-22

The adaptations described below have been agreed between City & Guilds and NCFE CACHE.

This document applies to qualifications regulated by:

- Ofqual
- QW
- CCEA and
- GDC.

The mitigations in this document update and replace those communicated for the 2020/21 academic year. They will be available until 31st August 2022 and apply to:

- Any learners who were registered and on-programme on or before 31 August 2020 and have yet to complete.
- Any learners registered from 01 September 2020 and have yet to complete
- Any new learners registered from 01 September 2021.

In recognition of the challenges to assessment as a result of national and/or local Covid -19 restrictions, the following adaptations may apply, **ONLY** where access to assessment is affected or where Covid-19 risk assessments identifies risk to the patient/learner/employer staff/centre staff.

Assessment of performance

The current assessment strategy for the Dental Nursing Ofqual regulated qualifications requires that observation by the assessor is the primary source of assessment. Observation of practice by the assessor in the workplace should continue:

- following a robust Covid-19 risk assessment involving the centre and employer, and
- the outcomes of the risk assessment are available to and agreed by all parties, and
- where it is safe and appropriate to do

Where it is not possible to use assessor observation in the workplace then observation of some work based activities may take place using remote technology. This methodology may **ONLY** be used where the activities to be observed **DO NOT** involve patients. In addition, the employer must have been consulted and provide consent. Use of remote technology to observe practice must be reflected in the assessment records. This must include, justification for the use of the technology planning, acknowledgement of employer consent and confirmation that no patients are involved in the activity to be observed remotely. Centres must produce auditable records of the activity that was observed and the candidate's contribution to the activity.

Examples of where this is appropriate include:

- decontamination of equipment

- setting up equipment/surgery prior to patient appointments
- processing of radiographs.
- simulated activity where this is already part of the assessment strategy of the qualification.

The dental nursing qualifications are assessed according to the Skills for Health Assessment Principles, which can be found on the [Skills for Health website](#).

Use of Expert Witness Testimony

Expert Witness testimony may be used to replace Observation of Practice by the assessor, where:

- it is deemed unsafe to use observation by the assessor in the workplace,
- the activities are NOT suitable to be observed remotely, or
- where assessor access to the workplace is not permitted.

Expert Witness Testimony may replace assessor observation, as long as the requirements below can be evidenced.

Role of the Expert Witness and Requirements for the use of Expert Witness Testimony

The role of the expert witness is to provide testimony to the competence of the learner in meeting the learning outcomes in any given unit. This testimony must directly relate to learner performance in the work place which has been seen by the expert witness.

Expert witnesses must be **inducted by the centre** to familiarise them with the content and requirements of the units for which they are giving testimony and the principles for writing an expert witness testimony.

It is not necessary for expert witnesses to hold assessor qualifications. The use of Expert Witness Testimony (EWT) must be discussed and agreed with the learner during assessment planning. The learner's assessor must assess makes the assessment decisions on all evidence including EWT.

Expert Witness Requirement

The expert witness must have:

- the same vocational expertise as assessors, which means they should have current GDC registration
- a working knowledge of the competences on which their expertise is based
- current expertise and occupational competence ie. within the last two years, either as a dental nurse, dental practitioner or oral health manager or a healthcare professional with expertise in decontaminating instruments and devices in a health setting. This experience should be credible and clearly demonstrable through continuing learning and development.

Centres must:

- Identify opportunities for using Expert Witness Testimony during the planning stage and as a result of discussion with the learner.
- Maintain records which detail the eligibility and agreement of the individual to act as an Expert Witness, including their GDC registration number and an outline of the activities for which EWT will be used.
- Make arrangements to induct the Expert Witnesses in relation to their role, the content of relevant units and centre recording requirements.
- Keep records relating to induction of Expert Witnesses

All of the above should be available for internal and external quality assurance sampling.

Triangulation of assessment decisions for performance criteria

Where Expert Witness Testimony is used as evidence of performance in units where there is no observation of practice by the assessor, then the assessor must use additional evidence methods to confirm the learner's competence by using Professional Discussion supplemented by:

- Reflective Accounts
- Questioning

Assessment criteria which are knowledge based can be assessed using the usual permitted methods such as professional discussion, questions and answer, reflective accounts.

Units containing First Aid and CPR

Evidence for these units could consist of **proof of training and First Aid/CPR simulation** as described in the unit, and

- professional discussion or Q&A to confirm the learner's knowledge
- expert witness testimony or assessor observation record covering simulation of the competence assessment criteria.

For centres delivering in house First Aid training, the chair of the First Aid Training Awarding Organisation Forum (FAAOF) has given permission to share the guidance of the FAAOF website. Please be aware that this may be subject to change and therefore centres should refer to the FAAOF website regularly and specifically if there are national or local changes to Covid-19 restrictions.

Useful links

[First Aid Awarding Organisation Forum](#)

[Resuscitation Council Guidance](#)

External Tests

Adaptations will be made by each Awarding Organisation if it is appropriate.