

NCFE

CACHE

Qualification Approval and EQA Reviews

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

QN: 601/2251/1

**NCFE CACHE Level 3 Diploma in the Principles
and Practice of Dental Nursing (Integrated
Apprenticeship)**

QN: 610/1340/7

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Summary of changes

This section summarises the changes to this document.

| Version | Publication date | Summary |
|---------|------------------|--|
| 1.0 | September 2021 | First publication |
| 1.1 | September 2023 | Removal of section 'mandatory requirements for centre approval and EQA reviews' as will be covered in separate 'approval guidance' document, which can be found on the NCFE website. Addition of annual monitoring review process throughout document. Update of terminology from EQA visit to EQA review. Inclusion of both dental qualifications – standalone and integrated. |

About this document

This document will support centres; firstly, through the centre approval process for our Level 3 Diplomas in the Principles and Practice of Dental Nursing (standalone and integrated) and, secondly, through the ongoing internal and external quality assurance and annual monitoring review (AMR) processes.

This document contains useful guidance about how to meet our dental quality assurance requirements, and exemplars that can be used. Alternatively, centres may devise their own in line with these exemplars.

You will need to read this document in conjunction with the following:

- Appendices, Policies and Statements, which contains all exemplars and templates.
-

Section 1

Learner fitness to practise

1.1 Learner Fitness to Practise policy and procedure

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

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

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

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

1.2 Learner vaccination records

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

The employer must check that the trainee Dental Nurse has had the appropriate vaccinations required to practise before undertaking exposure prone procedures.

1.3 Admissions/enrolment procedure

As part of the admissions/enrolment procedure, initial assessment of each learner should be undertaken by centres to evaluate the learner's suitability for the qualification and role of a Dental Nurse. Within this initial assessment, and before the commencement of the qualification, the following should be identified:

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

Learners will be required to sign and comply with a learner contract (example Appendix D below). This contract details the expected behaviours that learners must comply with in line with NCFE and GDC requirements.

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 | |
| I (.....) AGREE TO: (learner name) Learner signature: | ✓ |
| Read and comply with the requirements of the General Dental Council (GDC) in respect of the following documents (where they are applicable to learners): | |
| <ul style="list-style-type: none"> • Standards for the Dental Team • Student Professionalism and Fitness to Practise. These documents can be found at www.gdc-uk.org . | |

| Learner learning contract | |
|--|---|
| <p>I (.....) AGREE TO: (Learner name) Learner signature:</p> | ✓ |
| 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) (<i>insert workplace-named person</i>) b) (<i>insert centre-named person</i>) | |
| 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. | |

1.4 Equal opportunities and diversity policy and procedure

Centres must have an equal opportunities and diversity policy and procedure in relation to dental nursing.

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

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

The centre's equal opportunities and diversity policy and procedure should include a centre inclusion statement detailing how learners with specific needs will be initially assessed and supported to achieve.

1.5 Learner support policy and procedure

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

The centre's equal opportunities and diversity policy and procedure (see 1.4 above) should include a centre inclusion statement detailing how learners with specific needs will be initially assessed and supported to achieve.

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

Section 2

Employer liaison

2.1 Schedule of learner progress reports

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

Centres must also make contact with the learner's employers, establishing a working relationship.

2.2 Work-based supervising registrant list

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

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

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

Appendix A: GDC supervising registrant list

Learner name

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

| Name and email address | GDC registration no. | Current DBS certificate held and date | Qualification and date | Role* | Signature and date |
|------------------------|----------------------|---------------------------------------|------------------------|-------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

* Role eg clinical supervisor, Assessor, IQA, Tutor**, Practice Manager, Senior Dental Nurse.

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

2.3 Work-based placement procedure(s) and 4.1 Initial safety check and monitoring of learners' workplace

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

The work-based placement procedure(s) must also include the centre requesting evidence from the workplace that demonstrates the provision of a safe and appropriate clinical environment. This will support the completion of the Initial safety check and workplace monitoring documentation. Centres may wish to use the Initial safety check and workplace monitoring form provided by NCFE as part of their procedures (example Appendix C below).

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

Additional work-based placement procedure

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

Workplace suitability

This document supports centres when a workplace is no longer deemed suitable. It contains contingency plans for trainees in both centre allocated work placements and employment.

Also see Policy 6: Workplace suitability policy and procedure in the Appendices, Policies and Statements document.

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? | | | |
| B | Public Liability Insurance to cover the workplace? | | | |
| C | 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? | | | |
| H | 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? | | | |
| K | Staff trained to use the firefighting equipment? | | | |
| L | Adequately signposted and accessible fire exits? | | | |
| M | Fire extinguishers regularly inspected and serviced? | | | |
| N | Staff trained on emergency evacuation procedure? | | | |
| O | Adequate first aid provision? | | | |
| P | 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? | | | |
| T | 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? | | | |
| X | 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 | Yes | 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:

Section 3

Learner workplace induction

3.1 Employer declaration workplace induction

Centres must have a process in place to ensure that the workplace has completed and submitted a declaration of induction (example Appendix B below) confirming that the learner is competent in (at least) the following areas prior to contact with patients:

- patient safety, consent and confidentiality
- health and safety
- infection control
- safeguarding of vulnerable children and adults
- dealing with medical emergencies
- professionalism and ethics
- GDC Standards guidance.

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

Appendix B1 includes a declaration confirming that the named General Dental Council (GDC) 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.

Centres must provide the workplace with a declaration of induction (Appendix B) to complete and submit, which outlines the induction areas required to meet the GDC requirements.

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

This will be subject to internal and external quality assurance.

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

Appendix B: Employer declaration of induction

| |
|--------------------------------------|
| Employer name: |
| Employer GDC 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 | <input type="checkbox"/> | Post crown | <input type="checkbox"/> |
| Orthopantogram* | <input type="checkbox"/> | Bridge – adhesive* | <input type="checkbox"/> |
| Charting – tooth | <input type="checkbox"/> | Bridge – fixed | <input type="checkbox"/> |
| Charting – soft tissue | <input type="checkbox"/> | Extraction – non-surgical | <input type="checkbox"/> |
| Charting – basic periodontal examination (BPE) | <input type="checkbox"/> | Extraction surgical* | <input type="checkbox"/> |
| Charting – index of orthodontic treatment needs* | <input type="checkbox"/> | Orthodontics* | <input type="checkbox"/> |
| Fillings | <input type="checkbox"/> | Vitality testing – hot/cold or electric | <input type="checkbox"/> |
| Complete dentures | <input type="checkbox"/> | Oral hygiene instruction | <input type="checkbox"/> |
| Partial denture | <input type="checkbox"/> | Smoking cessation advice* | <input type="checkbox"/> |
| Impressions | <input type="checkbox"/> | Diet advice | <input type="checkbox"/> |
| Endodontics | <input type="checkbox"/> | Fluoride application | <input type="checkbox"/> |
| Veneers/inlay* | <input type="checkbox"/> | Fissure sealant | <input type="checkbox"/> |
| Jacket crown | <input type="checkbox"/> | Implant* | <input type="checkbox"/> |

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 DN 3.

* 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 registration may 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 | |
| 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.

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

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

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

Examples of each contract have been provided in:

- Appendix F: Workplace/placement learner learning contract
- Appendix G: Centre/learner learning contract

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

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

Appendix F: Workplace/placement learner learning contract

| 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: | ✓ |
| 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): <ul style="list-style-type: none"> • Standards for the Dental Team • Student Professionalism and Fitness to Practise. These documents can be found at www.gdc-uk.org . | |

| Workplace/placement learner learning contract | |
|--|---|
| (Name of employer) AGREE TO: | ✓ |
| <p>Provide a complete workplace induction which includes but is not limited to:</p> <ul style="list-style-type: none"> • 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 trainee Dental Nurse 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: | ✓ |
| <p>Establish and maintain a working relationship with the centre, which includes but is not limited to the following:</p> <ul style="list-style-type: none"> • 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 mentor/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. | |

| |
|---|
| <p>I have read and agree to all of the above:</p> <p>Employer signature:</p> <p>GDC registration no:</p> <p>Date:</p> |
| <p>Workplace mentor/supervisor signature:</p> <p>GDC registration no:</p> <p>Date:</p> |

| |
|---|
| <p>I have discussed the contents of this document with the employer/workplace mentor/supervisor.</p> <p>Centre/provider representative:</p> <p>GDC registration no: (if applicable):</p> <p>Date:</p> |
|---|

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: | ✓ |
| <p>Maintain records of all staff responsible for the delivery of the qualification including Tutors, Assessors and Internal Quality Assurers (IQA).</p> <p>Records held by the centre should include copies of:</p> <ul style="list-style-type: none"> • 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 review 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. | |
| <p>Have policies/protocols including, but not limited to, the following:</p> <ul style="list-style-type: none"> • 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. <p>Standardised sample policies are available within our Appendices document, and also on our website.</p> | |
| 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. | |
| <p>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:</p> <ul style="list-style-type: none"> • 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: | ✓ |
| Establish and maintain a working relationship with the employer, which includes, but is not limited to, the following: <ul style="list-style-type: none"> • 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: | ✓ |
| 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:

3.3 Placements/workplaces – registration with UK health regulators

www.cqc.org.uk/

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

The Care Quality Commission (CQC) registers dental practices if they can show that they are meeting national standards. If dental practices are not registered with CQC, they will not be able to provide services.

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

If a dental practice is not meeting the standards, action will be taken, followed by re-inspection.

Learners will need to be working or on practical placement to be able to show competence in both knowledge and skills. Centres must ensure that they have a process/procedure in place to check that all

learner placements and workplaces are registered with the CQC. After your EQA review, centres will be required to provide evidence of this taking place.

Centres may wish to add this to their workplace placement procedure and use Appendix C: Initial safety check and workplace monitoring, which includes checking that the practice is registered with the CQC as well as requesting the date of the last inspection.

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

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

Section 4

Safety in the workplace

4.1 Initial safety check and monitoring of learners' workplace – refer to Section 2, 2.3

4.2 Raising concerns in the workplace policy and procedure – refer to Section 3, 3.2

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

Identification of learners in the workplace/consent

Centres must ensure that workplaces comply with the requirement that all trainee Dental Nurses should be easily identifiable from registered Dental Nurses in the work setting. This is required so that a patient is aware that a trainee Dental Nurse may be working with one of the clinicians (Dentists, Hygienists or Dental Therapists). For example, learners should wear name badges in the workplace with the title on the badge reading 'Trainee Dental Nurse'. A poster may also be on display with this information (Appendix O: Example of a poster for the practice waiting room). Only those registered with the GDC are able to use the legally protected title Dental Nurse. Patients must also be made aware if a trainee 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 reviews and signpost them in their reports. Learners should simply explain how and why it was used and signpost where it is kept.

The patient consent process is designed to ensure compliance with the GDC Standards for Education (2015), Standard 1: Protecting Patients, Requirement 2:

"Providers must have systems in place to inform patients that they may be treated by students and the possible implications of this. Patient agreement to treatment by a student must be obtained and recorded prior to treatment commencing" (GDC 2015).

Safety

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

Centres must provide evidence of a raising concerns policy and procedure (refer to Policy 1: Raising fitness to practise and patient safety concerns (incident reporting)). This will support centres and learners in their obligation to raise concerns should they identify any risks to patient safety. This should be included in the learner induction carried out by the Assessor.

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

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

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

Our trainee Dental Nurses are expected to undertake the full clinical role of a Dental Nurse after initial induction and a period of supervised practice, and have continued mentorship throughout their training. Once they have qualified as a Dental Nurse (which takes about 2 years) they will be registered with the General Dental Council (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 Dental Nurse in the surgery. Consent will be recorded prior to treatment. If you wish to decline, this will not affect the treatment you receive at the practice.

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

We may also ask you to give 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 |
|--|
| <p>Name:</p> <p>Address:</p> |

| Learner details | Workplace mentor/supervisor | Assessor |
|---|--|--|
| <p>Name:</p> <p>Learner number:</p> | <p>Name:</p> <p>GDC registration no:</p> | <p>Name:</p> <p>GDC registration no:</p> |

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/Level 3 Diploma in the Principles and Practice of Dental Nursing (Integrated Apprenticeship) 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 Assessor, who would observe the trainee during my dental treatment. I am aware that the Assessor will be GDC registrant and understands the required standards of patient care and confidentiality. I have been advised that should a treatment session be observed, I will be given the choice of taking part in the assessment of the trainee Dental Nurse. If requested, I will provide feedback on the trainee to support them in improving their skills. I am aware 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 surgery and not within the learner’s portfolio.

Patient signature: Date:
 (Parent or guardian of child below 16 years)

Trainee signature: Date:

Workplace mentor/supervisor: Date:

Assessor (if applicable)

Date:

4.4 Process in place to check the workplace mentor/supervisor is keeping records of mentorship

Supervision/mentorship of a trainee Dental Nurse in the workplace is a GDC requirement. Workplace mentors/supervisors are encouraged to use this document (Appendix R below) to record and formalise the supervision/mentorship undertaken.

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

| | |
|--|--|
| <p>The workplace mentor/supervisor should:</p> <ul style="list-style-type: none"> record the topics discussed and guidance given to the trainee Dental Nurse create an action plan to support learning. <p>Copies of the contact record MUST be kept by the workplace mentor/supervisor and the trainee Dental Nurse.</p> | <p>Signature of workplace mentor/supervisor and trainee Dental Nurse</p> |
| <p>Topics discussed and advice given:</p> <p>Action plan:</p> <p>Duration of contact time (eg 30 minutes):</p> | <p>Workplace mentor/supervisor:</p> <p>GDC registration no:</p> <p>Trainee Dental Nurse:</p> <p>Date:</p> |
| <p>Topics discussed and advice given:</p> <p>Action plan:</p> <p>Duration of contact time:</p> | <p>Workplace mentor/supervisor:</p> <p>GDC registration no:</p> <p>Trainee Dental Nurse:</p> <p>Date:</p> |
| <p>Topics discussed and advice given:</p> <p>Action plan:</p> <p>Duration of contact time:</p> | <p>Workplace mentor/supervisor:</p> <p>GDC registration no:</p> <p>Trainee Dental Nurse:</p> <p>Date:</p> |

4.5 Process in place to support raising concerns in the workplace (incident reporting)

Centres must provide evidence of a raising concerns policy and procedure. This will support centres and learners in their obligation to raise concerns should they identify any risks to patient safety. This should be included in the learner induction carried out by the employer/workplace Assessor.

Policy 1: Raising fitness to practise and patient safety concerns (incident reporting), can be used as a guideline of what should be included in a policy/procedure; it covers what a patient safety concern is and how they can be dealt with.

Appendix S: Incident reporting form and Appendix T: Incident 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.

See also section 3.2, Appendix G: Centre/learner learning contract, in which raising concerns must also be covered.

Appendix S: Incident reporting form

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

| Issue raised by: | | |
|--|---|--|
| Centre <input type="checkbox"/> | Workplace <input type="checkbox"/> | Trainee Dental Nurse <input type="checkbox"/> |
| Name of person raising/recording the issue: | | |
| Title: | | |
| GDC registration no:(if applicable): | | |
| Date raised: | | |

| Nature of incident: | <input checked="" type="checkbox"/> Yes |
|--|---|
| Health and safety/infection control (H&S) | <input type="checkbox"/> |
| Patient safety (clinical treatment undertaken) (CLIN) | <input type="checkbox"/> |
| Patient safety (financial irregularity) (FIN) | <input type="checkbox"/> |
| Patient safety (data protection/confidentiality) (DATAP) | <input type="checkbox"/> |
| Equality and diversity (E&D) | <input type="checkbox"/> |
| Direct complaint raised against trainee Dental Nurse (DCOMP) | <input type="checkbox"/> |
| Plagiarism (PLAG) | <input type="checkbox"/> |
| Professional behaviour/misuse of social media (PB) | <input type="checkbox"/> |
| Does the issue being raised link to the learner Fitness to Practise policy (SFtP)? | <input type="checkbox"/> |

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&D** – Equality and diversity
- **DCOMP** – Direct complaint raised against trainee Dental Nurse
- **PLAG** – Plagiarism
- **PB** – Professional behaviour/misuse of social media
- **SFP** – Links to learner Fitness to Practise policy

Section 5

Staff/centre records

5.1, 5.2 and 5.3 Proof of staff records and centre organogram for the delivery of the qualification

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

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

All members of the centre team involved in the supervision and assessment of the learner must be registered with the General Dental Council (GDC). This is in line with the GDC Standards for Education requirements. It is also desirable that IQAs are registered with the GDC. For IQAs who are not GDC registrants, CPD relevant to dental nursing, ie ethics and professionalism, must be undertaken and evidence of current records must be provided and maintained.

The records of individuals must include the following:

- current CV
- job description
- copy of current GDC registration
- details of current Disclosure and Barring Service (DBS) checks (copies of certificates can only be retained with the applicant's consent)
- copies of vocational qualifications:
 - registerable qualifications, eg National Certificate in Dental Nursing
 - post certificate qualifications, eg Certificate in Dental Radiography
- copies of educational qualifications:
 - Assessors qualification, eg Level 3 Certificate in Assessing Vocational Achievement
 - internal quality assurance qualification
 - teaching certificate, eg Cert Ed
- CPD record – this must include CPD that is relevant to both dental nursing and the educational role(s) undertaken by the individual. A reflective statement should support each CPD event attended.

5.4 Centre's Professional Misconduct Panel

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

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

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

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

The GDC's student Fitness to Practise guidance and the centre's Fitness to Practise policy and learner contract (Appendix D) all require learners to raise concerns regarding their colleagues, including other learners, with the appropriate person if patients are at risk.

Section 6

Qualification delivery

6.1 Course programme/scheme of work setting

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

6.2 Internal quality assurance strategy and process

Centres must have an internal quality assurance strategy and process in place. A quality assurance framework is provided in Appendix K: Quality assurance framework and a training programme framework in Appendix L: Training programme framework for centres, 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 CPD
- complaints management
- standardised assessment
- programme delivery
- knowledge delivery.

Appendix K: Quality assurance framework

| Quality assurance process | Role | To be reviewed | Time scale |
|---|---|---|--|
| <p>Ensure all NCFE policies are in place.</p> <p>Review centre compliance with all NCFE requirements.</p> | <p>Internal quality assurance.</p> <p>External Quality Assurer (EQA).</p> <p>Each centre must also check these documents are in place before beginning the qualification.</p> | <ul style="list-style-type: none"> • Learner 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) | <p>Before the programme commences.</p> <p>Initial external assessment.</p> |
| <p>Ensure all centre staff documentation is in place.</p> | <p>Internal quality assurance.</p> <p>EQA.</p> <p>Each centre must also check these documents are in place before starting internal quality assurance.</p> | <ul style="list-style-type: none"> • 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 | <p>Before the programme commences.</p> <p>Initial external assessment.</p> |
| <p>Learners' application and associated documents.</p> | <p>Initially checked by centre and then by the EQA.</p> <p>Internal quality assurance.</p> | <ul style="list-style-type: none"> • 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 | <p>Once at the start of the programme and initial external assessment.</p> |

| Quality assurance process | Role | To be reviewed | Time scale |
|---------------------------|---|---|-------------------------------------|
| Learner progress. | Internal quality assurance. EQA. | <ul style="list-style-type: none"> • Centre should arrange a minimum of 2 reviews 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. | <ul style="list-style-type: none"> • Evidence for supporting learners who are not meeting agreed targets • Evidence of concerns being recorded and actioned where appropriate | Review and desk based. |
| Teaching observations. | Internal quality assurance. EQA. | <ul style="list-style-type: none"> • Lesson plans and SoW to ensure that they are on target • Tutor's ongoing CPD | Review and desk based. |
| End-of-course evaluation. | Internal quality assurance. EQA. | <ul style="list-style-type: none"> • 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 |
|--|------------------------|---|---|
| Workplace mentors/ supervisors Assessors Tutors | Equality and diversity | To ensure clarity on equality and diversity requirements. | <p>Mode: could use online packages that centres may have available.</p> <p>Face-to-face workshop.</p> <p>Annual, including review of policy.</p> |
| Workplace mentors/ supervisors Assessors Tutors | Assessment | <p>To gain an understanding of the process of assessment prior to learner registration in relation to:</p> <ul style="list-style-type: none"> • completion of learner handbook • assessment of knowledge and assessment of skills • planning and feedback • standardisation including identification of malpractice • methods of assessment • progress records. <p>To gain a better understanding of the needs of the learners who undertake the qualifications.</p> <p>To develop consistency and standardisation between Assessors and methods to ensure individual learners are assessed to the same standard. Workplace mentors/supervisors need to be aware of how the assessments are carried out in order to deal with concerns.</p> <p>To develop clarity of what needs to be observed and what needs to be assessed from knowledge-based tasks.</p> <p>To clarify the standard expected of learners in each area of assessment.</p> <p>To develop consistency and standardisation between Assessors.</p> | <p>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.</p> <p>Mode: Standardisation meetings with Assessors and IQAs held regularly throughout the year.</p> <p>NCFE training days in relation to the assessment process.</p> |

| Relevant to | Topics | Rationale | Training |
|--|---------------------|---|--|
| | | <p>To develop understanding of the documentation and processes that Assessors, supervisors and Tutors need to undertake to ensure a standard approach is maintained.</p> <p>To support internal and external quality assurance.</p> | |
| Workplace mentors/ supervisors Assessors Tutors | Supporting learners | <p>How to monitor and support learners so that their learning needs are met.</p> <p>How to appropriately discuss and record learners' progression throughout the programme. Providing constructive feedback and identifying areas of development.</p> <p>Raising concerns about a learner's progress, the actions that need to be taken and how to progress these concerns when necessary.</p> <p>Learner Fitness to Practise protocol and procedures.</p> <p>To develop consistency between workplace mentors/supervisors, Assessors and Tutors.</p> <p>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.</p> <p>Monitoring of progress reports.</p> <p>Clarity for all staff on how learner Fitness to Practise is addressed and their role.</p> | <p>Ongoing: at least twice per year.</p> <p>Mode: Standardisation meetings with Assessors and IQAs held regularly throughout the year.</p> <p>NCFE training days in relation to the assessment process.</p> |

| Relevant to | Topics | Rationale | Training |
|--|---|--|--|
| Workplace mentors/ supervisors Assessors Tutors | Raising concerns regarding patient safety | <p>Identifying and escalating patients' safety concerns.</p> <p>A clear and consistent approach for all staff members is required.</p> | <p>Mode: In line with GDC requirements:</p> <ul style="list-style-type: none"> • regular face-to-face meetings • standardisation activities in relation to quality assurance. |
| Workplace mentors/ supervisors Assessors Tutors | Induction training programme | <p>Equality and diversity and how this applies.</p> <ul style="list-style-type: none"> • NCFE statement of values • Data protection • Malpractice and maladministration • Complaints procedure • Appeals process • Raising patient safety concerns <p>Complaints – managing complaints and appeals.</p> <p>Learner Fitness to Practise process.</p> <p>All staff need to be aware of the relevant legislation and how to deal with any issues that may arise.</p> <p>Baseline knowledge and understanding established.</p> <p>Consistency of approach.</p> | <p>Mode: Ongoing review of induction process for learners.</p> |

| Relevant to | Topics | Rationale | Training |
|--|---|--|---|
| Workplace mentors/ supervisors Assessors Tutors | Staff development/ core CPD <ul style="list-style-type: none"> • 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. |
| Workplace mentors/ supervisors Centre management | Monitoring the overarching programme | To ensure sufficient competent and qualified staff, resources and systems are in place to support assessment of units. To ensure all requirements are met by Assessors, knowledge Tutors and external Assessors. Workplace mentors/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. | Ongoing. To include: <ul style="list-style-type: none"> • standardisation minutes • quality assurance preparation • external quality assurance preparation. |

Section 7

Quality assurance

Annual Monitoring Reviews

The focus of this review is to quality assure a centre's management and administration to ensure they remain compliant with our approval criteria. No learners will be sampled as part of this review, as this will be covered as part of an external quality assurance review.

Centres will be allocated a Quality Reviewer (QR), who will conduct the annual monitoring reviews (AMR) across all qualification groups. This means centre information around management and administration will only be reviewed once a year (unless the centre comes out as High risk at the review).

This User Guide to the Annual Monitoring Report will support centres when planning for reviews. The guide outlines the criteria that the QR will check as part of the AMR process, the evidence centres can provide to meet each criterion and how the centre risk status is calculated following the AMR.

External quality assurance

The role of external quality assurance is to reassure NCFE that the correct processes and procedures are being undertaken by centres and that learners are getting the right experiences, and above all that patient safety is maintained.

The External Quality Assurer (EQA) from NCFE will monitor the internal quality assurance process.

Each centre will be required to produce evidence for the EQA within agreed timescales. Examples of the types of evidence that centres may be able to provide to demonstrate compliance are listed below:

- learner/trainee support – induction, ongoing feedback and guidance
 - internal quality assurance – sampling plans, tracking, audit, support to Assessors, Tutors, supervisors, professional development for staff
 - resources – equipment, staffing
 - records – internal quality assurance/Assessor records, standardisation minutes, records of Fitness to Practise (including policies), sampling plans, audits, records of learner achievement
 - action plans to improve and any sanctions if concerns are detected.
-

General Dental Council (GDC) Standards for Education and Ofqual General Conditions of Recognition

The Standards for Education are the requirements that underpin dental qualifications, and these apply to all UK programmes leading to registration with the General Dental Council (GDC). They cover programmes in dentistry, dental hygiene, dental nursing, dental technology, dental therapy, clinical dental technology and orthodontic therapy.

The Standards cover three areas the GDC expects centres to meet in order for training programmes to be accepted for registration. These areas are:

- Patient protection
- Quality evaluation and review
- Learner assessment

The qualifications are approved by the GDC, and the Standards for Education have been mapped across the approval, AMR and external quality assurance process. Centres must evidence at each review that they continue to meet these standards.

Centres should be familiar with the standards and must ensure that they are using and adhering to the mandatory documents outlined in the qualification specification and associated qualification appendices, which are available on the NCFE website.

The GDC format will be used as the basis for approvals, AMRs and external quality assurance, as well as the requirements within Ofqual's General Conditions of Recognition (as stated in the Centre Agreement). These will sit alongside our requirements and all 3 areas must be adhered to by centres in order for centres to continue delivering the dental nursing qualification.

GDC inspections

Centres should be aware that as part of the **GDC inspection process**, the GDC may request at any time to inspect and quality assure **any** aspect of the delivery and assessment of the qualification undertaken by the centre. At an inspection, the GDC inspection team will meet with staff delivering the qualification, including work placement clinical supervisors, and with learners registered on it. The GDC will review documents presented before (if appropriate) and at the inspection. All inspections will be in line with guidance which can be found at www.gdc-uk.org.

All qualification supporting materials have been produced in line with GDC requirements to ensure continued compliance. Centres will be notified in a timely manner prior to any GDC inspections that are due to take place and will also be provided with supporting preparatory packs ahead of scheduled inspections.

The approval, Annual Monitoring Review (AMR) and external quality assurance process

The guidance below provides detailed information, which must be used to support you in preparing for the approval and following reviews:

Approval Review:

Approval User Guide: www.ncfe.org.uk/qualifications/preparing-for-ega/approval-review/

Annual Monitoring Review:

Annual Monitoring Review Guide: www.ncfe.org.uk/qualifications/preparing-for-ega/annual-review/

External Quality Assurance Review:

External Quality Assurance User Guide: www.ncfe.org.uk/qualifications/preparing-for-ega/review/

It is important to read the support guidance on the qualification pages for both dental qualifications:

- NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing (Integrated Apprenticeship)
 - NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing
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Section 8

Additional information

Reference/reading list

We recommend that centres have a copy of the following documents for reference. These should be made available to all learners and members of the delivery team.

www.gdc-uk.org/

- GDC Preparing for Practice: Dental Team Learning Outcomes for Registration
- GDC Standards for the Dental Team
- GDC Student Professionalism and Fitness to Practise
- GDC Continuing Professional Development for Dental Professionals
- GDC Scope of Practice
- COPDEND Standards for Dental Educators

Levison's Textbook for Dental Nurses (Carole Hollins) Oxford: Wiley-Blackwell 12th edition
ISBN: 978-1-119-40134-6

Mosby's Textbook of Dental Nursing (Mary Miller/Crispian Scully) Elsevier
ISBN 978-0-7234-3506-8

Questions and Answers for Dental Nurses (Carole Hollins) Oxford: Wiley-Blackwell
ISBN 978-0-470-67090-3

Trends in Oral Health Care (Richard White) Quay Books
ISBN 1-85642-226-7

Basic Guide to Anatomy and Physiology for Dental Care Professionals (Carole Hollins) Oxford: Wiley-Blackwell
ISBN 978-0-470-65611-2

Handbook for Dental Nurses (Jane Bonehill, Clare Roberts, Diana Wincott) (2007) Oxford: Wiley-Blackwell
ISBN 978-1405128032

Basic Guide to Dental Instruments (Carmen Scheller-Sheriden) 2011 Oxford: Wiley-Blackwell
ISBN 978-1444335323

Basic Guide to Dental Materials (Carmen Scheller-Sheriden) 2010, Oxford: Wiley-Blackwell
ISBN 978-1405167468

Department of Health – Health Technical Memorandum 01-05: decontamination in primary care dental practices 2013 edition

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