

Qualification Specification

NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing QN: 610/3114/8

Qualification summary

Qualification title	NCFE CACHE Level 3 Nursing	Diploma in the Principle	es and Practice of Dental			
Ofqual qualification number (QN)	610/3114/8	Aim reference	61031148			
Guided learning hours (GLH)	365	Total qualification time (TQT)	550			
Credit value	55					
Minimum age	16					
Qualification purpose	This qualification is designed for those who want to register with the General Dental Council (GDC) and qualify as a dental nurse. It can be taken as either stand-alone or as part of an apprenticeship. It is a mandatory element within the Dental Nurse (GDC 2023) occupational standard and the end-point assessment (EPA) is integrated into this qualification. To meet the GDC's outcomes, this qualification reflects the knowledge, skills, attitudes and behaviours a dental nurse must have to practise safely, effectively and professionally. The qualification fully meets The Safe Practitioner: Dental Nurse (superseding the GDC's Preparing for practice outcomes) and also meets the knowledge, skills and behaviours (KSBs) within the Dental Nurse (GDC 2023) occupational standard. Units include					
	underpinning ethics, professionalism, teamwork and communication, as well as practical dental principles and techniques. This qualification is currently provisionally approved (awaiting full approval) by the GDC and, upon completion, it will enable learners to apply for registration with the GDC.					
Rules of combination	Learners/apprentices must achieve 55 credits from the 12 mandatory units and a pass, merit or distinction in each of the two external, synoptic, multiple-choice question (MCQ) tests covering the underpinning knowledge across units.					
	There is no compensati	on between units, tests o	r observations in practice.			
Occupational standard	This qualification can be taken as part of an apprenticeship and is the mandatory element within the Dental Nurse (GDC 2023) occupational standard for Dental Nurses (England) (ST1431 v1.0). This apprenticeship has a statutory, integrated EPA.					
Grading	This qualification is grad	ded pass/merit/distinction				
	Learners/apprentices must be successful in both the internal and external assessments to gain the Level 3 Diploma in the Principles and Practice of Dental Nursing. The learners' overall qualification grade will be determined by the results of each test paper.					
		nievement of this qualifica audit they may begin the I	tion, and the completion of EPA period.			

End-point assessment (EPA)	The EPA takes place after the apprentice has completed all the requirements on-programme, for the Level 3 Diploma in the Principles and Practice of Dental Nursing, and their workplace agrees they are competent. The independent external quality assurers (IEQAs) will review claimed qualification certificates to ensure that apprentices have met all the requirements of the Dental Nurse apprenticeship. Please see the EPA support page on the NCFE website for more information.
Assessment method	This qualification is both internally and externally assessed. The assessment consists of two components:
	 an internally assessed portfolio of evidence for all units, which is assessed by the centre and externally quality assured by NCFE (internal quality assurance must still be completed by the centre as usual) two externally set and externally marked, synoptic, MCQ tests covering the underpinning knowledge across units – the assessments will be online and on demand
Work/industry	This qualification requires learners to complete a mandatory work/industry
Additional assessment	placement experience throughout the duration of the qualification, before certification. It is recommended that a minimum of 16 hours per week is spent in the workplace. If this qualification is being taken as part of an apprenticeship, apprentices will need to be working with a full-time employment contract in place and enrolled on the Dental Nurse apprenticeship to be able to show competence in the relevant KSBs and complete this qualification. Apprentices should be employed for a minimum of 30 hours per week, completing the minimum required off-the-job training in line with Department for Education (DfE) funding rules. Please refer to policy 7: workplace stipulations for additional guidance on work placements, located within the Appendices, Policies and Statements document on the qualification's page on the NCFE website. Units CORE DN 1 to 11 must be assessed in line with NCFE assessment
Additional assessment requirements	principles.
. 3 4 0 0	
	Unit CORE DN 12 must be assessed in line with Skills for Health's assessment principles.
UCAS	Please refer to the UCAS website for further details of points allocation and the most up-to-date information.
Regulation information	This is a regulated qualification. The regulated number for this qualification is 610/3114/8.
Funding	This qualification may be eligible for funding. For further guidance on
	funding, please contact your local funding provider.

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Summary of changes

This table summarises the changes to this Qualification Specification.

Version	Publication date	Summary of amendments
v1.1	October 2024	Updated wording to the following:
		CORE DN 1 AC3.1 and AC3.2 CORE DN 3 AC4.1
v1.2	July 2025	Updated the following:
		Amended IRMER to IR(ME)R throughout all units CORE DN 5 Added skills-based outcome to AC4.7 and AC4.8

Section 1: introduction

If you are using this Qualification Specification for planning purposes, please make sure that you are using the most recent version.

Aims and objectives

This qualification aims to:

- focus on the study of dental nursing
- offer breadth and depth of study, incorporating a key core of knowledge
- provide opportunities to acquire a number of practical and technical skills

The objective of this qualification is to:

- build knowledge and skills to work as a dental nurse
- focus on direct chairside work and support during a range of dental treatments
- encompass the underpinning ethics, professionalism, teamwork and communication required to work as a dental nurse

General Dental Council (GDC) and The Safe Practitioner: Dental Nurse

The General Dental Council (GDC) is the UK-wide statutory regulator of the dental team. Its primary purpose is to protect patient safety and maintain public confidence in dental services. To achieve this, it registers qualified dental professionals, sets standards for the dental team, investigates complaints about dental professionals' fitness to practise and works to ensure the quality of dental education.

The GDC's standards for the dental team underpin the statement of values for trainee dental nurses working towards this qualification and must be adhered to at all times. In addition, the learning outcomes (LOs) in the GDC's The Safe Practitioner: Dental Nurse (superseding Preparing for practice) describes the outcomes that an individual must be able to demonstrate by the end of their training, in order to register with the GDC as a dental professional and member of the dental team.

These LOs reflect the knowledge, skills, attitudes and behaviours a dental nurse must have to practise safely, effectively and professionally. A mapping document has been provided in appendix B to identify where these LOs have been fully met and mapped to the qualification.

This qualification is currently provisionally approved (awaiting full approval) by the GDC and upon completion, it will enable learners to apply for registration with the GDC.

Centres should be aware that as part of the GDC inspection process, the GDC may at any time request to inspect and quality assure any aspect of the delivery and assessment of this qualification undertaken by the centre. All inspections will be in line with guidance which can be found at www.gdc-uk.org.

Our value statement

The following statement of values should underpin delivery of the Level 3 Diploma in the Principles and Practice of Dental Nursing and every aspect of the assessment.

The learner will put the individual first by:

- providing individualised care
- ensuring the individual's welfare and safety
- · showing compassion and sensitivity
- upholding the individual's rights and dignity
- never using abusive language or physical violence
- respecting the wishes, needs and preferences of the individual and their family
- honouring the confidentiality of information relating to the individual and their family
- respecting the contribution and expertise of the staff in the care and education field, and other professionals with whom they may be involved
- upholding our equality and diversity statement
- acting in a manner consistent with the GDC standards for the dental team, which include communication, professionalism, teamwork and clinical skills
- acting in a non-discriminatory manner respecting diversity and upholding the rights, dignity and autonomy of others

Supporting documents and resources

The following documents will be essential for any centre involved in the delivery, assessment and administration of this qualification and should be used alongside this Qualification Specification. They can be found on the qualification's page on the NCFE website:

- Support Handbook (this Qualification Specification must be used alongside the mandatory Support Handbook, which can be found on the NCFE website – this contains additional supporting information to help with planning, delivery and assessment; this Qualification Specification contains all the qualification-specific information you will need that is not covered in the Support Handbook)
- Internal Assessment Tasks (comprehensive set of optional assessment tasks covering all knowledge LOs and providing the underpinning knowledge linked to the skills LOs)
- Assessment Specification (marking guidance for the Internal Assessment Tasks)
- Qualification Approval and External Quality Assurance Reviews (guidance on our external quality assurance and approval requirements)
- Appendices, Policies and Statements (comprehensive set of templates to support with delivery and assessment, these are not mandatory and established centres are likely to already have the appropriate processes in place and may wish to use their own)
- Knowledge, Skills and Behaviours (KSBs) Mapping document (this document outlines where the Level 3 Diploma in the Principles and Practice of Dental Nursing maps to the KSB statements within the occupational standard, showing which units, LOs and assessment criteria (AC) within the qualification content covers each KSB statement)
- Sample Assessment Materials (SAMs) (includes question papers and answer keys; these will support learners with preparation for the two external assessment, multiple-choice question (MCQ) tests that cover the underpinning knowledge across units)

Guidance for entry and registration

This qualification is designed for learners aged 16 or over who wish to qualify as a dental nurse.

Registration is at the discretion of the centre in accordance with equality legislation and should be made on the Portal.

There are no specific prior skills/knowledge a learner must have for this qualification. However, learners may find it helpful if they have already achieved a level 2 qualification.

Centres are responsible for ensuring that all learners are capable of achieving the LOs and complying with the relevant literacy, numeracy, and health and safety requirements.

Learners registered on this qualification should not undertake another qualification at the same level, or with the same/a similar title, as duplication of learning may affect funding eligibility.

Achieving this qualification

To be awarded this qualification, learners are required to successfully achieve 55 credits from the 12 mandatory units and a pass, merit or distinction in each of the two external, synoptic MCQ tests covering the underpinning knowledge across units. There is no compensation between units, tests or observations in practice.

To achieve this qualification, learners must successfully demonstrate their achievement of all LOs of the units as detailed in this Qualification Specification. A partial certificate may be requested for learners who do not achieve the full qualification but have achieved at least one whole unit; partial achievement certificate fees can be found in the Fees and Pricing document on the NCFE website.

Apprenticeship and end-point assessment (EPA) requirements

Please see the EPA support page on the NCFE website for more information.

Please see the End-point assessment plan for Dental Nurse apprenticeship standard for Dental Nurse (GDC 2023) for more information www.instituteforapprenticeships.org/apprenticeship-standards.

Please refer to the Knowledge, Skills and Behaviours (KSBs) Mapping document on the qualifications page on the NCFE website for information of where KSBs from the Dental Nurse (GDC 2023) occupational standard are mapped to the Level 3 Diploma in the Principles and Practice of Dental Nursing.

Progression

Learners who achieve this qualification could progress to the following:

- employment:
 - dental nurse
- further training:
 - orthodontic dental nursing
 - dental radiography
 - assisting in dental sedation
 - implant dental nursing
 - o impression taking
 - topical fluoride application
- further education:
 - orthodontic therapy
 - dental practice management
 - o oral health practitioner

- dental technician
- dental hygienist
- dental therapist

Progression to higher level studies

Level 3 qualifications can support progression to higher level study, which requires knowledge and skills different from those gained at levels 1 and 2. Level 3 qualifications enable learners to:

- apply factual, procedural and theoretical subject knowledge
- use relevant knowledge and methods to address complex, non-routine problems
- interpret and evaluate relevant information and ideas
- understand the nature of the area of study or work
- demonstrate an awareness of different perspectives and approaches
- identify, select and use appropriate cognitive and practical skills
- use appropriate research to inform actions
- review and evaluate the effectiveness of their own methods

Staffing requirements

- tutors are responsible for the delivery of the underpinning knowledge and understanding in line with the qualification requirements
- assessors are responsible for assessing knowledge and practical skills/competence through observation using a range of specified assessment methods to ensure learners are meeting the requisite standards to be able to practice as a dental nurse
- **internal quality assurers (IQAs)** are responsible for ensuring that the procedure for the quality of assessment is robust and applied consistently across the qualification by each assessor
- workplace mentors/supervisors are responsible 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 throughout their qualification journey; the GDC
 registrant undertaking the supervision/mentorship of the learner must be adequately indemnified to
 do so
- employers are responsible for providing an occupationally competent and knowledgeable workplace
 mentor/supervisor who is accountable for the learner and providing a clinical environment/workplace
 that is safe and appropriate; employers must 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 requirements of the GDC LOs

	Tutor	Assessor	Internal quality assurer (IQA)	Workplace mentor	Employer
Assesses knowledge	Υ	Υ	Y (of assessors)	N	N
Assesses competence	N*	Υ	Y (of assessors)	N	N
Mentors and supports learners	Υ	Υ	N	Υ	Υ

Occupationally competent	Υ	Υ	Υ	Υ	Υ
Occupationally knowledgeable	Υ	Υ	Υ	Υ	Υ
GDC registrant	Y*	Υ	Y**	Υ	Υ

^{*}If tutors are assessing the learner, they must be registered with the GDC, in line with GDC requirements. There could be an exception where some tutors who, depending on the topic they are teaching, would be subject specialists but not necessarily dental registrants (for example, infection control). In addition, some tutors may assess competence of the learner; it is the centre's responsibility to ensure that the tutor is qualified to undertake this role.

Real work environment (RWE)

Where the assessment guidance for a unit allows, it is essential that organisations wishing to operate a real work environment (RWE) do so in an environment that reflects a real work setting and replicates the key characteristics of the workplace in which the skill to be assessed is normally employed. This is often used to support simulation.

To assist in the delivery of this qualification, centres should have somewhere to recreate the dental environment where dental materials and equipment can be made available to learners, including having access to anatomical models (for example, teeth, skulls, model of the heart).

It is also suggested that centres should have an area to cover the following:

- the set-up of a dental surgery how equipment is stored, tray lay-ups, decontamination rooms, X-ray rooms (this does not mean that centres need these actual rooms, but somewhere that is not a classroom where equipment can be displayed and learners can handle equipment, and use personal protective equipment (PPE), for example, goggles, masks, apron, gloves)
- how equipment needs to be sterilised
- · somewhere to learn about charting
- somewhere to mix materials
- somewhere to view anatomical models/phantom heads

This is not an exhaustive list, and each centre will need to decide on how much they wish to invest in.

Simulation

Learners will need to be working or on practical placement to be able to show competence in both knowledge and skills. It is recommended that a minimum of 16 hours per week is spent in the workplace.

Please refer to policy 7: workplace stipulations for additional guidance on work placements, located within the Appendices, Policies and Statements document on the qualification's page on the NCFE website.

^{**}For IQAs who are not GDC registrants, a vocational dental qualification must be held and continuing professional development (CPD) relevant to dental nursing (for example, ethics and professionalism) must be undertaken and maintained. Evidence of current CPD records must be available upon qualification approval and subsequent external quality assurance reviews.

Please speak to your external quality assurer (EQA) for more information on requirements for learners in specialist practices (for example, orthodontics).

A learner's portfolio of evidence may only include simulation of skills where simulation is allowed for that specific unit. In this qualification, simulation is permitted against some criteria in units CORE DN 4, CORE DN 9 and CORE DN 12; see the units for more details. If simulation takes place outside of the workplace, it is essential that the environment reflects a real work setting and replicates key characteristics of the workplace in which the skill to be assessed is normally employed.

Order of delivery and assessment

To ensure learners are adequately prepared to embark on a qualification leading to professional registration, and in order to meet the GDC's requirements, particularly in relation to patient safety, the underpinning knowledge must be delivered and assessed before skills criteria and observations in practice are assessed. This includes core areas such as health and safety, infection control, ethics and professionalism, and dental anatomy. It is paramount that centres structure the delivery and assessment of certain specified LOs and/or units in a way that teaches the underpinning knowledge to learners first, to ensure that they – and their patients – are safe. This will ensure that the learner has been assessed as being safe to practise and can enter the clinical area. An induction checklist can be found in appendix B to support with this, located within the Appendices, Policies and Statements document on the qualification's page on the NCFE website.

Please note that unit CORE DN 3 Reflect on and develop own practice as a dental nurse, ensures continual reflective practice throughout the qualification (recommended assessment method), lending itself to the future requirements of ongoing reflective practice as a GDC registrant. Centres should note that this unit should be referenced throughout the whole qualification, and therefore should be signed off last.

Range

All elements of each unit must be met, including **all range**, which can be assessed holistically. Where possible, cross-referencing can be used to meet the range, especially those ranges that span a number of units in the qualification (for example, range for individuals).

Where possible it is recommended that performance evidence is cross-referenced to cover range (for example, direct observation or reflective account). However, it is recognised that due to the nature of some range, some will be better met through knowledge evidence.

Centres have an obligation to support learners in being exposed to a wide practice of dental nursing in order to meet all unit LOs, AC and range. Where learners do not have access to all elements (for example, not all practices will have extra-oral X-ray machines), learners can attend additional dental nursing placements outside their day-to-day practice. It is not envisaged that the learner will always undertake the task at the alternative practice placement but shadow another dental nurse. An arrangement such as this would provide the learner with the opportunity to observe wider practice than they might routinely see, and also give them the chance to gather evidence for unit CORE DN 3 Reflect on and develop own practice as a dental nurse. It is acknowledged that not all learners will get such an opportunity to visit an alternative practice placement. Therefore, assessors can also use the accompanying direct questioning to help their assessment of a learner's knowledge.

Additional assessment requirements

Unit CORE DN 12 First aid essentials must be assessed in line with Skills for Health's assessment principles. Please refer to www.skillsforhealth.org.uk for the current version.

The following form is mandatory for tracking clinical and technical experiences:

• Clinical Experience Monthly Record (appendix I), located within the Appendices, Policies and Statements document on the qualification's page on the NCFE website

Special waste

As of the 2005 the term 'special waste' has been substituted for 'hazardous waste'. Please see part 11 of The Hazardous Waste (England and Wales) Regulations 2005.

The term 'special waste' is still used in Scotland – this is also made clear in HTM 07-01: Safe and sustainable management of healthcare waste. As this is a qualification that applies across the UK, all learners must be aware of the variations between England, Scotland, Wales and Northern Ireland.

Observations and skills-based outcomes

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided, with agreement from the EQA. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion) but only as supplementary evidence alongside an EWT or direct observation.

Skills-based outcomes are clearly identified in the 'evidence record' column within each unit. Learners must be assessed in practice throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread across the course duration.

For units that require observations to be undertaken, learners must have exposure to an appropriate breadth of procedures and patients (for example, adults, children and young people, older people and those with additional needs such as hearing and visual impairments, learning disabilities, mobility issues). Learners should undertake each activity relating to patient care on sufficient occasions to enable them to develop the skills and the level of competency required to achieve the relevant skills LO/AC.

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

Expert witness testimony (EWT)

EWT must be used with professional discretion, and only selected when observation is not possible or is not appropriate. Those providing an EWT must be lead practitioners with experience of making judgements around competence. The circumstances that may allow for an EWT include:

- when assessment may cause distress to an individual, such as supporting a child with a specific need
- a rarely occurring situation, such as dealing with an accident or illness
- confidential situations, such as safeguarding strategy meetings, where it would be inappropriate for an assessor to observe the learner's performance

Expert witness evidence

This is a signed supporting statement by an expert witness, such as a registered professional (for example, dentist, dental nurse or dental hygienist), who has the opportunity to see the learner working in their workplace situations. Expert witnesses will often be the learner's clinical supervisor.

The expert witness will confirm competencies demonstrated by the learner through written examples of observed practice noted against the AC listed on the expert witness evidence statement. The learner will also be required to provide a supporting statement; this allows further detail to be included by the learner, which may provide an opportunity for the learner to demonstrate underpinning knowledge and understanding. This maintains the gathering of witnessed performance evidence where it would not be possible for an assessor to directly observe the learner's practice. The expert witness will have been approved by the centre, but the evidence provided by the expert witness will be judged against the units' AC by an assessor who is a GDC registrant and meets our assessment principles.

The expert witness will also be required to sign a declaration:

- confirming that they will undertake witnessing of the learner activities in a fair, honest and reliable way
- stating that the learner will be witnessed as safe to practice in relation to the skills outlined in the LO and related ranges (where applicable) within the specified units

Pro forma expert witness statements have been provided in the Assessment Specification, which can be found on the qualification's page on the NCFE website.

Approval and external quality assurance requirements

There are additional requirements set by the GDC for this qualification at approval stage and for external quality assurance reviews.

Once you have shortlisted this qualification for approval, you will be allocated a dedicated EQA who will support you through a smooth approval process with us and arrange your mandatory approval visit.

The following documents, which can be found on the qualification's page on the NCFE website, explain our approval and quality assurance processes and provide templates for newer centres to use:

- Qualification Approval and External Quality Assurance Reviews
- Appendices, Policies and Statements

These templates are not mandatory and established centres are likely to already have the appropriate processes in place and may wish to use their own.

Please note that this qualification is **not** eligible for direct claims status (DCS).

How the qualification is assessed and graded

Assessment is the process of measuring a learner's skill, knowledge and understanding against the standards set in a qualification.

This qualification is internally and externally assessed and externally quality assured by NCFE. The assessment consists of two components:

- an internally assessed portfolio of evidence for all units, which is assessed by the centre and externally quality assured by NCFE (internal quality assurance must still be completed by the centre as usual)
- two externally set and externally marked, synoptic, MCQ tests covering the underpinning knowledge across units the assessments will be online and on demand

Learners must be successful in both components to gain the Level 3 Diploma in the Principles and Practice of Dental Nursing. The learners' overall qualification grade will be determined by the results of each test paper.

Units CORE DN 1 to 11 must be assessed in line with NCFE assessment principles and unit CORE DN 12 assessed in line with Skills for Health's assessment principles.

All LOs, AC and all elements within the range must be achieved.

The Level 3 Diploma in the Principles and Practice of Dental Nursing is a competence-based qualification (CBQ).

A CBQ must be assessed in the workplace or in an RWE in accordance with the relevant assessment principles. Please refer to the assessment principles within this specification for further information.

Unless otherwise stated in this specification, all learners taking this qualification must be assessed in English and all assessment evidence presented for external quality assurance must be in English.

Internal assessment

We have created a comprehensive suite of sample tasks and marking guidance for the internally assessed units that can be found within the Internal Assessment Tasks and Assessment Specification documents on the qualification's page of the NCFE website. You can contextualise these tasks to suit the needs of your learners to help them build up their portfolio of evidence. The tasks have been designed to cover all knowledge LOs for the units and provide opportunities for stretch and challenge. For further information about contextualising the tasks, please contact the Provider Development team.

Each learner must create a portfolio of evidence generated from appropriate assessment tasks, which demonstrates achievement of all the LOs associated with each unit. The assessment tasks should allow the learner to respond to a real-life situation that they may face when in employment. On completion of each unit, learners must declare that the work produced is their own and the assessor must countersign this.

If a centre needs to create their own internal assessment tasks, there are four essential elements in the production of successful centre-based assessment tasks; these are:

ensuring the assessment tasks are meaningful with clear, assessable outcomes

- appropriate coverage of the content, LOs or AC
- having a valid and engaging context or scenario
- including sufficient opportunities for stretch and challenge for higher attainers

Please refer to the assessment principles within this specification for further information.

External assessment

Each learner is required to undertake two external assessments. Learners must achieve a pass, merit or distinction in each of the two external, synoptic, MCQ tests covering the underpinning knowledge across units.

External assessments are set and marked by NCFE. The assessment assesses learners' knowledge, understanding and skills based on the underpinning knowledge across all mandatory units of this qualification. Centres must not assess or internally quality assure external assessments or provide any feedback to the learner about their performance in the external assessments.

The external assessments consist solely of:

 on demand (invigilated) – the centre schedules the assessment date and time when making the bookings

The external assessments are administered under specified assessment conditions and each test will last for 90 minutes.

For further information, centres should refer to the Regulations for the Conduct of External Assessment, and Qualifications Specific Instructions for Delivery (QSID) documents, available on the NCFE website.

Where qualifications have external assessment, centres must have booked learners onto the assessment using the Portal.

Types of external assessment

Each learner is required to undertake two externally set, MCQ test papers.

Multiple-choice question (MCQ) tests

Centres are free to choose the date, time and location of assessment. The assessment for the qualification is available through our online assessment service.

Internal Assessment Tasks are available on the qualification's page on the NCFE website.

Learners must achieve a pass, merit or distinction in each of the two external, synoptic, MCQ tests.

Subject matter experts (SMEs) will use an Angoff method to determine the grade boundaries for pass, merit and distinctions for each test paper. The learners' overall qualification grade will be determined by the results of each test paper.

Online assessment

For centres using our online assessment service, assessments should be booked directly on the online assessment platform and can be carried out without any notice, and without notifying NCFE. MCQ online assessment results will be available 2 working days after the assessment has been sat. For more information about how to get started with online assessment, please go to the NCFE website.

For instructions on conducting online external assessments, please refer to our Regulations for the Conduct of External Assessments and QSID documents, available on the NCFE website.

Remote invigilation is also available for this qualification, please refer to <u>remote invigilation support</u> on the NCFE website.

Enquiries about results

All enquiries relating to learners' results must be submitted in line with our Enquiries about Results and Assessment Decisions Policy, which is available on the NCFE website.

Not yet achieved grade

A result that does not achieve a pass grade will be graded as a not yet achieved grade. Learners may have the opportunity to resit.

Improving the grade for the external assessment (upgrade the result)

Learners are permitted to resit each MCQ test twice more either because they failed or to improve their grade. This may be chargeable. This means that learners can have a total of three attempts at each external assessment.

For further information on assessment, please refer to the User Guide to the External Quality Assurance Report.

NCFE does not anticipate any changes to our aggregation methods or any overall grade thresholds; however, there may be exceptional circumstances in which it is necessary to do so to secure the maintenance of standards over time. Therefore, overall grade thresholds published within this Qualification Specification may be subject to change.

Records of grades achieved for the NCFE CACHE Level 3 Diploma in the Principles and Practice of Dental Nursing (610/3114/8)

Grades achiev	red			Distinct	ion	Merit		Pass		
Unit no.	Unit title	Hours	No. of	Grade	Points	Grade	Points	Grade	Points	Points per
		per unit	increments	value		value		value		unit
MCQ1/3114/8	MCQ Paper 1	N/A	1	5	5	3	3	1	1	
MCQ2/3114/8	MCQ Paper 2	N/A	1	5	5	3	3	1	1	
Total points										

No. of increments x grade value = points for each assessment.

To achieve the Level 3 Diploma in the Principles and Practice of Dental Nursing, learners must obtain a minimum of a pass in each of the MCQ assessments.

Overall boundary points

For example, if you achieve a pass on one assessment and a merit on the other, this is 1 point for the pass and 3 points for the merit, which gives a total points score of 4 and an overall qualification grade of a merit.

Grade	Point score*
Distinction	8 to 10
Merit	4 to 7
Pass	2 to 3

^{*} not all values in the point score range can be calculated.

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Section 2: unit content and assessment guidance

This section provides details of the structure and content of this qualification.

The types of evidence listed are for guidance purposes only. Within learners' portfolios, other types of evidence are acceptable if all learning outcomes (LOs) are covered, and if the evidence generated can be internally and externally quality assured. For approval of methods of internal assessment other than portfolio building, please contact your external quality assurer (EQA).

The explanation of terms explains how the terms used in the unit content are applied to this qualification. This can be found in section 3.

CORE DN 1 Work within regulatory requirements in relation to the role of a dental nurse (M/650/8103)

Unit summary						
This unit focuses on underpinning knowledge, skills and behaviours that contribute to the practice of						
	the dental care professional.					
Mandatory	Achieved/not yet achieved	Level 3	5 credits	30 GLH		

Learning outcomes (LOs)	Assessment criteria (AC) The learner can:	Evidence record
The learner will:		
1. Understand	1.1 Identify current legislation that governs the	
responsibilities of the	dental profession	
dental nurse in relation	1.2 Explain current legal and regulatory	
to current legislation,	requirements, professional codes of	
regulatory	practice and organisational policy and	
requirements,	procedure, including the role of the dental	
professional codes of	nurse within them:	
practice and	 equality, diversity and inclusion 	
organisational policy	discrimination	
and procedure	• rights	
	 General Dental Council (GDC) ethical and professional guidance 	
	 principles of information governance 	
	1.3 Describe the impact of direct access on	
	each registrant group's scope of practice	
	and its effect on dental team working	
	1.4 Explain the professional expectations,	
	potential impact and consequence of using	
	social media as a communication tool	
Range – LO1	1.1 Legislation:	
	noting that this legislation may differ in	
	England, Scotland, Wales and Northern	
	Ireland	
	1.2 Current legal and regulatory	
	requirements, professional codes of	
	practice and organisational policy and	
	procedure:	
	General Data Protection Regulation (UK)	
	GDPR)	
	Department of Health and Social Care	
	(DHSC) guidelines and regulations	
	social media	
	Care Quality Commission (CQC)	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	 1.2 GDC ethical and professional guidance: Standards for the Dental Team – principles, patient expectations, standards and guidance The Safe Practitioner: Dental Nurse (superseding Preparing for practice) Scope of Practice fitness to practise guidance 	
Understand the legal, financial and ethical issues associated with managing a dental practice	Describe the legal, financial and ethical issues associated with managing a dental practice Explain the importance of maintaining your practice's network of dental professionals and other stakeholders involved in the care and support of individuals	
	Describe the difference between management and leadership Explain the importance of having indemnity arrangements in place	
Range – LO2	 2.2 Individuals: adults children and young people older adults those with additional needs 	
Understand safeguarding policy	 3.1 Describe the signs and symptoms of abuse, neglect and emotional trauma 3.2 Explain national and local safeguarding systems and policies that safeguard the welfare of children, young people and adults 	
	3.3 Describe how to raise concerns and act accordingly 3.4 Explain the need to ensure that those who raise concerns are protected from discrimination or other detrimental effects	
Range – LO3	3.3 Concerns:safeguardingwhistleblowing	
4. Be able to comply with current legislation, regulatory requirements, professional codes of practice and organisational policy and procedure in relation to dental nursing	 4.1 Work within the following current legal and regulatory requirements, professional codes of practice and organisational policy and procedure at all times: equality, diversity and inclusion discrimination rights GDC ethical and professional guidance principles of information governance 	(Skills-based outcome)

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		
Range – LO4	 4.1 Current legal and regulatory requirements, professional codes of practice and organisational policy and procedure: GDPR DHSC Guidelines and Regulations social media CQC direct impact of Direct Access on each registrant group duty of candour 4.1 GDC ethical and professional guidance: Standards for the Dental Team – principles, patient expectations, 	
	 standards and guidance The Safe Practitioner: Dental Nurse (superseding Preparing for practice) Scope of Practice fitness to practise guidance enhanced continuing professional development (CPD) chaperoning procedures 	
5. Be able to identify the	5.1 Identify the requirements of competent,	
requirements of own	effective and safe practice	
job role	5.2 Describe the roles of dental and other healthcare professionals in the context of learning and working in a dental and wider healthcare team	
	5.3 Provide active support for individuals and key people within the team	(Skills-based outcome)
	5.4 Provide feedback for individuals and key people within the team	(Skills-based outcome)
	5.5 Work as part of a team	(Skills-based outcome)
	5.6 Work in a patient-centred way	(Skills-based outcome)
	5.7 Explain procedures for handling complaints	
	5.8 Follow procedures for handling complaints	(Skills-based outcome)
Range – LO5	5.3 Individuals:	
	adults	
	children and young peopleolder adults	
	older adultsthose with additional needs	
	5.3 Key people:	
	• carers	
	team members	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	 others with whom the individual has a supportive relationship management 	
	 5.5 Team: dental care professionals dental professionals own dental team 	
	 5.7 Procedures for handling complaints: Standards for the Dental Team, principle 5 private complaints NHS complaints 	

Delivery and assessment guidance

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding outcomes include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO3 must be assessed via approved methods for knowledge and understanding.

LO4 and LO5 must be assessed via approved methods for skills-based outcomes.

LO4 and LO5 must be assessed in the workplace.

CORE DN 2 Contribute to health and safety in the dental environment (R/650/8104)

Unit summary					
This unit focuses	This unit focuses on the knowledge, skills and behaviours required to minimise hazards and risks in				
the workplace.					
Mandatory Achieved/not yet Level 3 9 credits 60 GLH					
	achieved				

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs) The learner will:	The learner can:	
Understand current	1.1 Explain health and safety legislation and	
health and safety	practice policies in relation to infection	
legislation in relation to	control	
infection control	1.2 Explain the principles of standard infection	
	control precautions	
	1.3 Describe methods of preventing cross-	
	infection	
	1.4 Explain the preparation of a clinical area to	
	control cross-infection	
Range – LO1	1.1 Health and safety legislation:	
	Health and Safety at Work etc. Act 1974 The Control of the C	
	 The Control of Substances Hazardous to Health Regulations 2002 (COSHH) 	
	The Reporting of Injuries, Diseases and	
	Dangerous Occurrences Regulations	
	2013 (RIDDOR)	
	 The Special Waste Regulations 1996 	
	and The Hazardous Waste (England and	
	Wales) Regulations 2005	
	 The Ionising Radiation Regulations 2017 (IRR) 	
	 The Ionising Radiation (Medical 	
	Exposure) Regulations 2017 (IR(ME)R)	
	Department of Health and Social Care (SH22)	
	(DHSC) guidelines and regulations (for	
	example, Decontamination in primary care dental practices (HTM 01-05))	
	working practice policy	
	best practice	
	The Health and Safety (Young Persons)	
	Regulations 1997	
	The Management of Health and Safety at	
	Work Regulations 1999	
	Environmental Protection Act 1990	
	1.3 Methods:	
	 decreasing the transmission of infection 	

Learning outcomes	Assessment criteria (AC) Evidence record				
(LOs)	The learner can:	Evidence record			
The learner will:					
	 measures for preventing cross-infection (for example, single-use items) social cleanliness (for example, social cleaning plan) barrier techniques, including zoning importance of record keeping in relation to cross-infection use of personal protective equipment (PPE) clinical/non-clinical waste sharps disposal management of sharps injury – clean and contaminated sharps 				
2. Understand micro-	2.1 Describe the causes of cross-infection				
organisms	 2.2 Explain the terms: pathogen non-pathogen 2.3 Identify micro-organisms in: 				
	infectious conditions non-infectious conditions 2.4 Explain the route of transmission of micro.				
	2.4 Explain the routes of transmission of micro- organisms				
Range – LO2	2.3 Micro-organisms:				
C	bacteriavirusesfungisporesprions				
Understand the management of	3.1 Describe infectious conditions that affect individuals in the dental setting				
infectious conditions within the dental	3.2 Describe how infectious conditions relevant to dentistry affect body systems				
environment	3.3 Describe action to take to prevent the spread of infectious diseases3.4 Summarise the immunisation schedule for				
	the dental team before exposure to clinical work 3.5 Explain the reasons for immunisation of				
Range – LO3	dental personnel 3.1 Individuals:				
ivalige – LOS	 adults children and young people older adults those with additional needs 				

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
Know the methods of decontamination	4.1 Explain the chemical names and uses for decontaminants against types of microorganism	
	 4.2 Describe the principles and methods of: disinfection clinical and industrial sterilisation 	
	4.3 Explain the procedures used to	
	decontaminate a clinical environment after use	
Range – LO4	4.2 Disinfection:	
	 difference between asepsis, sterilisation and disinfection 	
	 different types of disinfectants and their 	
	uses in clinical environments	
	4.2 Clinical and industrial sterilisation:	
	 manual cleaning 	
	ultrasonic bath	
	washer-disinfector	
	vacuum autoclaves	
	non-vacuum autoclaves anno radiation	
5. Be able to work in	gamma radiation5.1 Identify current health and safety legislation	
accordance with	5.2 Describe workplace procedures relevant to	
current health and	health and safety	
safety legislation	5.3 Describe the purpose of and reasons for	
	guidance, legislation and adhering to	
	manufacturers' instructions	
	5.4 Work in accordance with:	(Skills-based outcome)
	workplace legislation	
	manufacturers' instructions	
Range – LO5	5.2 Workplace:	
	 single or multiple areas in which you carry out your work 	
	5.2 Workplace procedures/policies:	
	 safe working methods and equipment 	
	 safe use of hazardous substances 	
	smoking	
	• eating	
	Drinking and Drugs Policy	
	what to do in the event of an emergency	
	personal presentation poving and handling	
	moving and handling mercury spillage.	
	mercury spillage	

Learning outcomes (LOs)	Assessment criteria (AC) The learner can:	Evidence record
The learner will:		
The learner will.	 5.4 Workplace legislation: Health and Safety at Work etc. Act 1974 The Control of Substances Hazardous to Health Regulations 2002 (COSHH) Environmental Protection Act 1990 The Ionising Radiation (Medical Exposure) Regulations 2017 (including local rules) (IR(ME)R) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) The Special Waste Regulations 1996 and Hazardous Waste (England and Wales) Regulations 2005 The Fire Precautions (Workplace) (Amendment) Regulations 1999 The Health and Safety (First Aid) 	
	Regulations 1981	
6. Know hazards in the	6.1 Identify hazards within the workplace	
workplace	6.2 Describe working practices that could result in harm	
7. Be able to reduce the risks to health and safety in the workplace	 7.1 Work in a way that does not endanger the health and safety of: personnel materials 	(Skills-based outcome)
	7.2 Contribute to health and safety improvements within own workplace	(Skills-based outcome)
	7.3 Follow guidelines for environmentally friendly working practices	(Skills-based outcome)
	7.4 Maintain personal presentation to protect self and others in line with health and safety	(Skills-based outcome)
	7.5 Manage hazards in the workplace	(Skills-based outcome)
	7.6 Report hazards to the identified responsible person	(Skills-based outcome: knowledge evidence permitted)
Range – LO7	 7.2 Improvements: working towards best practice risk assessment 	
	 7.2 Workplace: single or multiple areas in which you carry out your work 	
	7.3 Working practices:activitiesprocedures	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		
	 use of materials or equipment and 	
	working techniques used in carrying out	
	your job	
	7.4 Daysand was sutation.	
	7.4 Personal presentation:personal hygiene	
	use of PPE	
	 clothing and accessories suitable to the 	
	workplace	
	7.5 Hazards:	
	radiation	
	cross-infection	
	 environmental factors 	
	 spillages (water, chemical, bodily fluids) 	
	waste disposal	
	• sharps	
	7.6 Responsible person:	
	 manager 	
	supervisor	
	section leader	
	 the health and safety person in your 	
	workplace	
8. Be able to apply	8.1 Maintain personal hygiene	(Skills-based outcome)
standard precautions for infection control	8.2 Select personal protective equipment (PPE)	(Skills-based outcome)
	 don the correct PPE 	
	doff the correct PPE	
	8.3 Maintain a clean and tidy working	(Skills-based outcome)
	environment during treatments	
	8.4 Use cleaning equipment and materials in a	(Skills-based outcome)
Daniel I OO	safe manner	
Range – LO8	8.1 Personal hygiene:	
	hairnails	
	jewelleryfootwear	
	uniform	
	social	
	hand hygiene	
	8.2 Personal protective equipment (PPE):	
	surgical gloves	
	face mask	
	goggles and/or visor	
	 heavy-duty gloves 	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	apron	
	8.4 Cleaning equipment:	
	general cleaning equipment	(8) !!!
9. Be able to prepare the	9.1 Maintain stock supplies for clinical	(Skills-based outcome)
dental environment	procedures	(0) ::: 1
	9.2 Adjust environmental factors to meet the	(Skills-based outcome)
	needs of the individual and the procedure	
	9.3 Explain the purpose of adjusting	
	environmental factors	
	9.4 Describe the process and reasons for	
	maintaining the aspirator, water lines and	
	water storage equipment, as per manufacturer's instructions	
Benge LOO	9.2 Environmental factors:	
Range – LO9		
	heating lighting	
	lighting	
40 D	ventilation and humidity	(Obilla la card contacto)
10. Be able to apply	10.1 Check equipment is functioning prior to use	(Skills-based outcome)
health and safety measures for the use	10.2 Explain the methods of testing autoclaves	(Obilla la a a d'aceta aceta)
	10.3 Demonstrate safe and secure storage of	(Skills-based outcome)
of equipment and materials	equipment, instruments and materials when	
Illaterials	not in use	
	10.4 Explain action to take in response to	
	equipment failure	
	10.5 Explain why records must be kept in relation	
	to the maintenance and servicing of equipment	
Range – LO10	10.1 Equipment:	
Kange = LOTO	dental chair	
	aspirator band pieces	
	hand piecesultrasonic scaler	
	X-ray machine X-ray machine a suring a print and a suring	
	X-ray processing equipment	
	autoclave // disinfectory	
	instrument washer (disinfector)	
44 De abla /	ultrasonic bath	
11. Be able to apply	11.1 Explain the potential risks of not	
methods of	decontaminating equipment and	
sterilisation for dental	instruments	
instruments and	11.2 Explain the reasons for pre-cleaning	
equipment	instruments prior to sterilisation	
	11.3 Explain the reasons for placing instruments	
	in the correct location relevant to the	
	different stages of sterilisation	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
The learner will.	11.4 Explain the potential long-term effects of	
	using damaged or pre-used sterile goods	
	11.5 Prepare instruments and hand pieces for	(Skills-based outcome)
	sterilisation	,
	11.6 Carry out sterilisation procedures	(Skills-based outcome)
	11.7 Store sterilised instruments and hand pieces	(Skills-based outcome)
	11.8 Maintain records of sterilisation procedures	(Skills-based outcome)
Range – LO11	11.5 Instruments and hand pieces:	
	non-surgical	
	surgical	
12. Be able to manage	12.1 Identify different types of waste	
hazardous and non-	12.2 Dispose of:	(Skills-based outcome)
hazardous waste	 hazardous waste 	
	 non-hazardous waste 	
	special waste	
	12.3 Explain the dangers of not disposing of	
	waste correctly and promptly	
Range – LO12	12.1 Waste:	
	 hazardous 	
	 non-hazardous 	
	special waste	
	12.2 Hazardous waste:	
	used gloves	
	face masks	
	tissues	
	cotton wool rolls	
	• gauze	
	napkins	
	alcohol wipes	
	mouthwash beakers	
	12.2 Special waste:	
	lead foil disposal	
	• sharps	
	 amalgam (including when in extracted teeth) 	
	medicinal	
	damaged instruments	
13. Understand reporting	13.1 Explain reporting procedures in case of:	
procedures	sharps injury	
	 damaged instruments 	
	 accidents or injuries 	
	 contaminated materials or equipment 	
	 damaged sterilised supplies 	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	 evidence of potentially infectious diseases 	

Delivery and assessment guidance

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO4, LO6 and LO13 must be assessed via approved methods for knowledge and understanding.

LO5 and LO7 to LO12 must be assessed via approved methods for skills-based outcomes.

LO5 and LO7 to LO12 must be assessed in the workplace.

CORE DN 3 Reflect on and develop own practice as a dental nurse (T/650/8105)

Unit summary				
This unit focuses of	This unit focuses on the knowledge, skills and behaviours required to reflect on own practice, as well			
as	as to agree, implement and evaluate a personal development plan.			
Mandatory Achieved/not yet Level 3 2 credits 15 GLH				
	achieved			

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs) The learner will:	The learner can:	
Be able to reflect	1.1 Reflect on own role as part of the dental and	
upon performance	wider healthcare team	
	1.2 Evaluate the impact of new techniques and	
	technologies on clinical practice to improve,	
	manage or mitigate risks	
	1.3 Identify sources of supervision and	
	support	
	1.4 Provide and use constructive feedback from	
	individuals and key people within the	
	development team 1.5 Understand the principles of an evidence-	
	based approach to learning, clinical and	
	professional practice and decision making	
	1.6 Explain the contribution that a diverse team,	
	and effective team working, make to the	
	delivery of safe and effective high-quality	
	diverse, individual care	
	1.7 Explain the responsibilities and limitations of	
	delegating to other members of the dental	
	team	(Ckilla based sutasma)
	1.8 Identify and address discriminatory language, behaviour and microaggressions from key	(Skills-based outcome: knowledge evidence
	people	permitted)
	1.9 Reflect on when to take the lead, manage	pormittou)
	and take professional responsibility for the	
	actions of colleagues relevant to individual	
	care	
Range – LO1	1.3 Supervision and support:	
	• formal	
	informal	
	provided from within your organisation	
	 provided from outside your organisation 	
	1.4 Feedback:	
	• verbal	
	written	
	electronic	

Learning outcomes	Assessment criteria (AC) The learner can:	Evidence record
The learner will:		
2. Be able to agree own personal development plan (PDP)	1.4 Individuals:	
	2.4 Agree specific, measurable, achievable and agreed, relevant, time bound (SMART) targets 2.5 Identify development opportunities that are available 2.6 Maintain records of own personal and professional development 2.7 Explain the importance of and requirement for commitment to lifelong learning	
Range – LO2	 2.5 Development opportunities: training educational programmes coaching personal and professional support 	
3. Be able to evaluate effectiveness of own personal development plan (PDP)	3.1 Identify development opportunities 3.2 Reflect on own practice following identification of the PDP 3.3 Review the impact of the PDP on own practice	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:	3.4 Describe a method of self-reflection and how	
	it can be used to inform personal	
	development, viewpoint, preconceptions,	
	bias and behaviour	
Range – LO3	3.1 Development opportunities:	
	training	
	educational programmes	
	coaching	
	personal and professional support	
4. Understand when it is	4.1 Identify when it is appropriate for a GDC	
appropriate for a	registrant to act as an advocate for individual	
General Dental	needs:	
Council (GDC)	 provide further information to support a 	
registrant to act as an	patient in making treatment decisions	
advocate for individual	raise concerns when patients are at risk	
needs	•	
5. Understand	5.1 Describe methods of self-monitoring, self-	
adaptability, wellbeing	care and where to seek advice from to	
and personal growth	support own wellbeing	
within own role	5.2 Describe strategies to identify and manage	
	personal and emotional challenges of work,	
	teamwork, workload and any related	
	uncertainty and change associated with the	
	challenges	
	5.3 Explain the role of coping strategies for	
	practice 5.4 Recognise personal assumptions, biases	
	and prejudices, and manage the impact of	
	these on individual care and professional	
	behaviour with colleagues, individuals and	
	wider society	
Range – LO5	5.3 Coping strategies:	
	reflection	
	self-acceptance	
	debriefing	
	handover to a colleague	
	peer support	
	asking for help in responding to	
	challenges and setbacks	
6. Be able to identify	6.1 Demonstrate engagement with systems and	(Skills-based outcome)
wellbeing and insight	personal strategies that promote and	,
	maintain physical and mental wellbeing	
	6.2 Recognise when and how to take action if	(Skills-based outcome:
	wellbeing is compromised to the point of	knowledge evidence
	affecting own role or professional	permitted)
	relationships	
	6.3 Explain what is meant by the term insight in	
	the context of professional practice	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		
	6.4 Explain why insight is important in ensuring safe and effective individual care and to personal development	
	6.5 Recognise the impact of contextual factors on the healthcare environment and individual safety and manage this professionally	(Skills-based outcome: knowledge evidence permitted)

Delivery and assessment guidance

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO3 must be assessed via approved methods for knowledge and understanding or skills-based outcomes.

LO4 and LO5 must be assessed via approved methods for knowledge and understanding.

LO6 must be assessed in the workplace.

This should be the last unit for sign off, as it should be observed throughout the qualification.

CORE DN 4 Promote oral health for individuals (Y/650/8106)

Unit summary				
This unit focuses on the knowledge, skills and behaviours required to support the promotion of oral				
health for individuals.				
Mandatory	Achieved/not yet	Level 3	3 credits	20 GLH
-	achieved			

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		
1. Understand the	1.1 Describe types of oral diseases	
common oral	1.2 Explain the aetiology, pathogenesis and	
diseases	epidemiological trends of oral and dental	
	disease and their application to individual	
	management	
	1.3 Describe the progression of dental caries	
	1.4 Describe the progression of periodontal	
	disease	
	1.5 Explain the development of plaque and its	
	composition	
	1.6 Describe the inflammatory process	
	1.7 Describe the effects of the disease process	
	1.8 Explain the variance in disease presentation	
	across diverse cultural and social groups,	
	and those with protected characteristics, and	
	how it impacts on diagnosis, prevention and	
	treatment	
	1.9 Explain the principles underpinning the	
	diagnosis, prevention and treatment of oral	
	disease	
	1.10 Evaluate the health risks of prescribed, non-	
	prescribed and recreational drug use and	
	misuse on oral and general health, include	
	appropriate advice and where support can	
	be found including signposting or referral	
Range – LO1	1.1 Oral diseases:	
	• caries	
	gingivitis	
	 periodontal disease 	
	erosion	
	abrasion	
	 attrition 	
	4.2 Individuals	
	1.2 Individual:	
	• adults	
	children and young people	
	older adults	
	 those with additional needs 	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	Evidence record
The learner will:	The loan oan.	
2. Understand the	2.1 Explain oral health techniques used to	
methods for the	prevent oral disease	
prevention and	2.2 Describe the effects on oral health of:	
management of oral	sugar in the diet	
diseases	 acid content of the diet 	
	• smoking	
	alcohol	
	substance misuse	
	social factors	
	2.3 Explain the different forms of fluoride and its	
	optimal level	
	2.4 Evaluate the uses of fluoride	
	2.5 Explain methods and the importance of	
	communicating information about the	
	prevention of oral diseases	
Range – LO2	2.1 Oral health techniques:	
	 fluoride supplements 	
	disclosing tablets	
	 toothbrushing 	
	interdental aids	
	 mouthwashes 	
	 dental health messages 	
	2.1 Oral disease:	
	caries	
	 gingivitis 	
	 periodontal disease 	
	erosion	
	abrasion	
	 attrition 	
	2.2 Sugar in the diet:	
	• types	
	 content and frequency 	
	 carbonated and non-carbonated acidic 	
	drinks	
	2.2 Social factors:	
	2.2 Social factors:	
	family background	
	• cultural	
	environmental	
	2.4 Uses of fluoride:	
	 methods of delivering fluoride both 	
	systemically and topically, including	
	advantages and disadvantages	
	effects of excessive fluoride – fluorosis	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs) The learner will:	The learner can:	
The leather will.	2.5 Communicating:	
	• verbal	
	non-verbal methods	
	 difficult discussions, for example 	
	breaking bad news, or discussing issues	
	such as alcohol consumption, smoking or	
	diet	
3. Be able to	3.1 Provide information to individuals , ensuring	(Skills-based outcome:
communicate with	that it is accurate and consistent with	simulation permitted)
individuals	organisational guidelines	(8)
	3.2 Give individuals the opportunity to discuss	(Skills-based outcome:
	and seek clarification	simulation permitted) (Skills-based outcome:
	3.3 Answer questions clearly	simulation permitted)
	3.4 Refer any questions beyond own role to an	(Skills-based outcome:
	identified member of the team	simulation permitted)
	3.5 Analyse methods of effective communication	
	to maximise understanding, confidence and	
	motivation	
	3.6 Describe the importance of non-verbal	
	communication, including listening skills, and	
	the barriers to effective communication	
	3.7 Respect individuals' personal beliefs and	(Skills-based outcome:
	preferences	simulation permitted)
	3.8 Explain the systems for internal and external referrals	
	3.9 Use appropriate methods to provide	(Skills-based outcome:
	accurate, clear and comprehensive	simulation permitted)
	information when referring individuals to	Simulation permitted)
	other dental and healthcare professionals	
Range – LO3	3.1 Individuals:	
	adults	
	 children and young people 	
	older adults	
	 those with additional needs 	
	2.7 Developed heliafe and mustaveness	
	3.7 Personal beliefs and preferences:	
	socialethnic group	
	religion	
	health	
4. Be able to provide	4.1 Provide individualised oral health	(Skills-based outcome:
oral hygiene advice	information	simulation permitted)
	4.2 Use oral health information aids	
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	(Skills-based outcome: simulation permitted)
	4.3 Advise individuals on suitable oral hygiene	(Skills-based outcome:
Í	techniques	simulation permitted)

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	4.4 Demonstrate methods of caring for dentures	(Skills-based outcome: simulation permitted)
	4.5 Advise individuals on maintaining orthodontic appliances	(Skills-based outcome: simulation permitted)
	4.6 Provide practical advice for caring for implant-supported restorations	(Skills-based outcome: simulation permitted)
	4.7 Contribute positively to the healthcare communities of which you are a part	(Skills-based outcome: simulation permitted)
Range – LO4	4.1 Oral health information:	- ,
	 gingivitus 	
	• caries	
	• diet	
	current oral health routine	
	 smoking, alcohol and substance misuse/recreational drugs/illegal drugs 	
	4.2 Oral health information aids: • models	
	modelsvisual aids	
	leaflets	
	media educational tools	
	4.3 Individuals:	
	• adults	
	children and young people	
	older adults	
	those with additional needs	
	4.3 Oral hygiene techniques:	
	cleaning teeth and the mouth	
	the use of interdental aids	
	mouthwash rinses disclosing agents	
	disclosing agents individuals' expresses of arel	
	 individuals' awareness of oral abnormalities (for example, oral cancer, 	
	inflammation)	
5. Understand how to	5.1 Explain factors that contribute to health and	
plan oral health	illness:	
promotion	• social	
	• cultural	
	 psychological 	
	• environmental	
	5.2 Describe methods of how oral health care	
	can be planned and delivered	

Learning outcomes (LOs)	Assessment criteria (AC) The learner can:	Evidence record
The learner will: 6. Understand the basic	6.1 Describe the basic principles of a population	
principles of	health approach, how these are measured	
population-based	and current patterns for:	
health and care	 demographic and social trends 	
	UK and international oral health trends	
	determinants of health	
	• inequalities in health	
	6.2 Explain the principles of an evidence-based	
	approach to prevention and improvement of oral health by evaluating dental and wider	
	healthcare systems	
	6.3 Describe and evaluate the role of health	
	promotion in terms of the changing	
	environment, community and individual	
	behaviours to deliver health gain	
Range – LO6	6.2 Dental and wider healthcare systems:	
	Care Quality Commission (CQC)	
	Department of Health and Social Care (BUGG)	
	(DHSC)	
	National Institute for Health and Care Excellence (NICE)	
	Excellence (NICE)British Association for the Study of	
	Community Dentistry (BASCD)	
7. Understand social	7.1 Explain the principles of planning oral health	
accountability in oral	care for communities to meet needs and	
health and individual	demands	
care	7.2 Describe the principles and limitations of the	
	options currently available for funding of	
	dental healthcare provision for individuals	
	7.3 Explain the ethical challenges associated	
	with providing individual care within the current dental healthcare systems	
	7.4 Describe the considerations of the	
	management of resources in provision of	
	care decisions including appropriate use of	
	primary and secondary care networks	
	7.5 Describe the importance of collaboration	
	across the health and social care sector for	
	the benefit of communities and individual	
	patients	
	7.6 Describe and, where appropriate, support individuals to negotiate the barriers and	
	challenges that prevent sections of the	
	population accessing oral healthcare,	
	including individuals from marginalised	
	populations and individuals with protected	
	characteristics	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	7.7 Describe the main principles relating to sustainable oral health care, and the challenges/barriers to implementing a sustainable approach	
	7.8 Evaluate and apply the evidence base in relation to the environmental impacts of common treatment methods and common approaches to the delivery of care	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1, LO2, LO5 to LO7 must be assessed via approved methods for knowledge and understanding.

LO3 and LO4 must be assessed via approved methods for skills-based outcomes.

LO3 and LO4 must be assessed in the workplace. Where this is not possible, simulation is permitted for some ACs within this unit, this is indicated in the LO/AC table (in the evidence record column).

CORE DN 5 Provide support during the assessment of individuals' oral health (A/650/8107)

Unit summary					
This unit focuses	This unit focuses on the knowledge, skills and behaviours required to assist the clinician during the				
assessment of individuals' oral health.					
Mandatory	Mandatory Achieved/not yet Level 3 4 credits 25 GLH				
_	achieved				

Learning outcomes	Assessment criteria (AC) The learner can:	Evidence record
(LOs) The learner will:	The learner can:	
Be able to prepare the dental environment	1.1 Prepare the equipment, instruments, materials and medicaments required for a full dental clinical assessment	(Skills-based outcome)
	1.2 Handle equipment, instruments, materials and medicaments in a manner that minimises the possibility of injury, damage and crossinfection	(Skills-based outcome)
Range – LO1	 1.1 Equipment, instruments, materials and medicaments: mouth mirror right angled probe tweezers Briault probe World Health Organization (WHO) probe basic periodontal examination (BPE) Williams probe vitality testing materials (cold stimulus/hot stimulus or electric pulp tester) manual inspection (palpation and visual) 	
Be able to record a range of oral health assessments	2.1 Identify the importance of obtaining valid patient consent and the legal responsibilities of maintaining and protecting patient information 2.2 Identify the different types and functions of	
	dental records and charts 2.3 Explain the importance of contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice	
	2.4 Select the individual's charts, records and images prior to assessment	(Skills-based outcome)
	2.5 Record a full medical history, to include medications, past and present medical conditions, and alcohol and smoking habits	(Skills-based outcome)
	2.6 Record and complete contemporaneous dental assessments spoken by the clinician, to include all relevant records and documentation during an oral assessment	(Skills-based outcome)

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:	0.7.5:	
	2.7 Discuss each component of the patient	
	assessment process	(01:11 1 1 1 1
	2.8 Store records and relevant documents	(Skills-based outcome)
	securely following an oral assessment	(Obilla based suites as a)
	2.9 Contribute to relevant special investigation	(Skills-based outcome)
	and diagnostic procedures used at	
Bongo LO2	assessment 2.2 Dental records and charts:	
Range – LO2		
	radiographs	
	photographs	
	study models	
	personal details	
	orthodontic measurements	
	2.4 Individual's charts, records and images:	
	baseline dental charting	
	medical history	
	periodontal charting	
	orthodontic classifications and charts	
	radiographs	
	Tadiographs	
	2.6 Dental assessments:	
	 baseline dental charting 	
	• BPE	
	2.9 Investigation and diagnostic procedures:	
	soft tissue	
	hard tissue	
	biopsy	
	vitality testing	
3. Be able to assist with	3.1 Describe methods of monitoring the	
monitoring and	physical characteristics of an individual and	
supporting the	the possible outcomes linked to these	
individual	physical characteristics	
individual.	3.2 Monitor the individual throughout the	(Skills-based outcome)
	assessment	(Crime sacea careams)
	3.3 Support the individual throughout the	(Skills-based outcome)
	assessment	(Crime sacea careame)
	3.4 Explain the indicators of a potential medical	
	emergency	
Range – LO3	3.1 Methods of monitoring:	
	visual	
	• verbal	
	O.A. In dividuals	
	3.1 Individual:	
	• adults	
	children and young people	

Learning outcomes (LOs)	Assessment criteria (AC) The learner can:	Evidence record
The learner will:	The learner can.	
The realities with	older adults	
	those with additional needs	
	anos with additional mode	
	3.1 Outcomes:	
	 patient anxiety 	
	past dental experiences	
	 treatment expectations 	
4. Be able to	4.1 Communicate the reasons for further	(Skills-based outcome:
communicate with	assessment or treatment	knowledge evidence
individuals, carers		permitted)
and team members	4.2 Arrange for further assessment or treatment	(Skills-based outcome)
	4.3 Describe the reasons for individual referral	
	to other team members	
	4.4 Explain how a referral to other team members	
	is communicated	
	4.5 Describe how communication can support	
	individuals who present signs of distress	
	4.6 Explain the importance of candour and	
	effective communication with individuals	
	when things go wrong or when dealing with a	
	complaint	(01:11-1
	4.7 Communicate effectively and sensitively , in relation to:	(Skills-based outcome)
	individuals with anxious or challenging helpevious or appoid appoid retions such	
	behaviour or special considerations such as emotional trauma	
	 difficult circumstances, such as breaking 	
	bad news or discussing issues such as	
	alcohol consumption, smoking or diet	
	4.8 Communicate effectively by spoken, written	(Skills-based outcome)
	and electronic means with colleagues from	(0
	dental and other healthcare professions in	
	relation to:	
	the direct care of individuals	
	oral health promotion	
	 raising concerns when problems arise, 	
	including where individuals cause distress	
	to staff	
Range – LO4	4.3 Individual:	
	• adults	
	 children and young people 	
	older adults	
	those with additional needs	
	4.3 Team members:	
	dental team	
	 healthcare professionals 	
	- Healthoare professionals	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	4.7 Effectively and sensitively: Tailoring to context, by spoken, written and/or electronic means with all individuals, including individuals whose first language is not English (using representatives or interpreters where necessary)	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO4 must be assessed via approved methods for skills-based outcomes.

LO1 to LO4 must be assessed in the workplace.

CORE DN 6 Contribute to the production of dental images (D/650/8108)

Unit summary				
This unit focuses on the knowledge and skills required when assisting the clinician throughout the				
dental imaging process.				
Mandatory Achieved/not yet Level 3 5 credits 35 GLH				
	achieved			

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:	4.4. Chata the principles of the current ID/ME\D	
Know the regulations and hazards	1.1 State the principles of the current IR(ME)R	
associated with	regulations	
ionising radiation	1.2 Explain the safe use of X-ray equipment	
lonising radiation	1.3 Identify the hazards associated with ionising radiation	
	1.4 Explain the role of dental personnel when	
	using ionising radiation	
	1.5 Explain current practices and policies	
	relating to ionising radiation	
Range – LO1	1.1 IR(ME)R regulations:	
	The Ionising Radiation (Medical	
	Exposure) Regulations 2017 (IR(ME)R)	
	The Ionising Radiation Regulations 2017	
	(IRR)	
	The Ionising Radiation (Medical	
	Exposure) (Amendment) Regulations	
	2018	
	as low as reasonably practicable	
	(ALARP)	
	1.4 Dental personnel:	
	referrer	
	practitioner	
	clinician	
	 radiation protection supervisor 	
	 radiation protection advisor 	
	 medical physics expert (MPE) 	
	employer	
	1.5 Practices and policies:	
	local rules	
	quality control systems	
	staff training records	
	personal monitoring systems	
2. Know the different	2.1 Explain the uses of different intra-oral	
radiographic films	radiographs	
and their uses	2.2 Explain the uses of different extra-oral	
	radiographs	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	Evidence record
The learner will:		
	2.3 Explain the purpose of intensifying screens	
	in dental radiography	
Range – LO2	2.1 Intra-oral radiographs:	
	The function and purpose of the following	
	radiographs:	
	 bitewing 	
	periapical	
	occlusal	
	2.2 Extra-oral radiographs:	
	The function and purpose of the following	
	radiographs:	
	lateral oblique	
	cephalostats	
	 orthopantomographs 	
3. Understand the	3.1 Explain the automatic and digital (both direct	
imaging process	and indirect) processing of radiographs	
3 31	3.2 Describe faults that may occur during the	
	taking and processing of radiographs	
	3.3 Explain how processing chemicals are:	
	handled	
	stored	
	 disposed of 	
	3.4 Explain action to take in response to	
	imaging equipment failure	
	3.5 Explain how to handle different films to	
	maintain quality	
Range – LO3	3.2 Faults:	
	 clinician and relevant corrective action 	
	needed	
	 processing and relevant corrective action 	
	needed	
	3.4 Imaging equipment:	
	 intra-oral X-ray machine 	
	 extra-oral X-ray machine 	
	 computer programme 	
	 automatic film processor 	
	image receptors	
4. Understand stock	4.1 Explain the reasons for rotating film stock	
control and storage of	4.2 Describe how to store radiographs	
radiographic films	4.3 Explain the reasons why films should be	
	stored away from ionising radiation	
	4.4 Explain why film stock that has deteriorated	
	should not be used	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
5. Understand quality	5.1 Explain the purpose of quality assuring	
assurance processes	dental radiographs	
of dental images	5.2 Describe quality control recording systems	
	5.3 Identify the methods of mounting	
	radiographs	
	5.4 Explain the consequences of not mounting radiographs correctly	
6. Be able to assist during the taking of	6.1 Maintain health and safety throughout imaging procedures	(Skills-based outcome)
dental images	6.2 Prepare the resources for the production of a dental image	(Skills-based outcome)
	6.3 Confirm that imaging equipment is fully functioning and ready for use	(Skills-based outcome)
	6.4 Identify the different intra-oral and extra-oral radiographs	(Skills-based outcome)
	6.5 Ask individuals to remove items that may interfere with the radiographic image	(Skills-based outcome)
	6.6 Explain the concerns that individuals may have regarding dental imaging	
	6.7 Offer individuals support during a radiographic process	(Skills-based outcome)
	6.8 Refer any questions that are beyond own role to an appropriate member of the team	(Skills-based outcome: knowledge evidence permitted)
Range – LO6	6.2 Resources:	1
	 holders 	
	• film	
	receptors	
	mounting sheet	
	• software	
	6.3 Imaging equipment:	
	intra-oral X-ray machine	
	extra-oral X-ray machine	
	computer programme	
	automatic film processor	
	image receptors	
	6.5 Individuals:	
	adults	
	children and young people	
	older adults	
	those with additional needs	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
7. Be able to process	7.1 Process dental images	(Skills-based outcome)
dental images	7.2 Maintain quality of the image during processing	(Skills-based outcome)
	7.3 Describe the chemicals used in dental processing	
8. Be able to contribute to the quality	8.1 Store images produced according to organisational procedure	(Skills-based outcome)
assurance process of dental images	8.2 Maintain records of quality assurance checks	(Skills-based outcome)

Evidence requirements

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Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO5 must be assessed via approved methods for knowledge and understanding.

LO6 to LO8 must be assessed via approved methods for skills-based outcomes.

LO6 to LO8 must be assessed in the workplace.

CORE DN 7 Provide support during the prevention and control of periodontal disease, caries and the restoration of cavities (F/650/8109)

Unit summary					
This unit focu	This unit focuses on the knowledge and skills required to support the clinician and individual				
	throughout treatment.				
Mandatory	Mandatory Achieved/not yet Level 3 4 credits 30 GLH				
achieved					

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
Know the methods of prevention of oral disease	 1.1 Identify the methods of controlling plaque 1.2 List the treatments available for controlling caries 1.3 List the treatments available for controlling periodontal disease 1.4 Identify and evaluate sources of fluoride 	
Range – LO1 2. Understand the purpose and stages of different dental procedures	1.4 Fluoride:	
3. Know how to manage and handle equipment, instruments, materials and medicaments during dental procedures	 3.1 State the functions of different equipment, instruments, materials and medicaments used in: prevention of dental caries preparation, restoration and finishing of cavities periodontal therapy 3.2 Evaluate the scientific principles underpinning the use of materials and biomaterials, their limitations and selection, with emphasis on those used in dentistry: preventive materials restorative materials lining materials different types of etchants different types of bonding agents curing lights 3.3 Explain matrix systems 	
	3.4 Explain the hazards associated with amalgam 3.5 Describe the administration of local anaesthesia	
Range – LO3	3.1 Equipment:	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
The learner will:	 excavators tweezers amalgam plugger burnisher flat plastic high/slow speed hand pieces latch grip/friction grip burs 3.2 Preventive materials: fissure sealant application of fluoride varnish 3.2 Restorative materials: composites glass ionomer 	
4. Be able to provide	 amalgam temporary restorative materials 3.5 Local anaesthesia: topical intrapulpal intraosseous intraligamentary local infiltration nerve block local anaesthetic cartridge syringe needle 4.1 Select the individual's charts, records and 	(Skills-based outcome)
support to the individual and clinician before, during and after treatment	 images 4.2 Identify the planned treatment 4.3 Select the equipment, instruments, materials and medicaments for dental treatments 4.4 Identify the different methods of aspirating during treatment 4.5 Demonstrate appropriate aspiration techniques 4.6 Retract soft tissues to facilitate a clear view of 	(Skills-based outcome) (Skills-based outcome) (Skills-based outcome) (Skills-based outcome)
	the treatment area 4.7 Select for the clinician: • a suitable matrix system to aid the placement of restorations • the correct quantity of the mixed restorative material • any materials or equipment required for finishing the restoration	(Skills-based outcome)

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs) The learner will:	The learner can:	
THE learner will.	4.8 Dispose of amalgam safely	(Skills-based outcome: knowledge evidence permitted)
	4.9 Explain the reasons for finishing restorations	
	4.10 Evaluate the ergonomics when assisting the clinician	
Range – LO4	4.1 Individuals' charts, records and images:	
	 dental history/pending treatment charting 	
	medical history	
	 periodontal charting 	
	 radiographs 	
	• consent	
	4.2 Treatment:	
	 temporary restorations 	
	 amalgam restorations 	
	 composite restorations 	
	 glass ionomer restorations 	
	 fissure sealants 	
	 fluoride treatments 	
	 scaling and polishing 	
	debridement	
	4.4 Methods of aspirating:	
	saliva ejector	
	 surgical aspirator 	
	wide bore aspirator	
	4.10 Ergonomics:	
	• seating	
	 positioning of patient and team 	
	instrument passing	
	suction tip placement	
	 monitoring the clinician and patient 	
	 four-handed dentistry 	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO3 must be assessed via approved methods for knowledge and understanding. Observation of treatments (LO3) must include one preventive and two restorative.

LO4 must be assessed via approved methods for skills-based outcomes.

LO4 must be assessed in the workplace.

CORE DN 8 Provide support during the provision of fixed and removable prostheses (K/650/8110)

Unit summary					
This unit focuse	This unit focuses on the knowledge, skills and behaviours required to support the individual and				
	clinician during the provision of fixed and removable prostheses.				
Mandatory	Mandatory Achieved/not yet Level 3 6 credits 35 GLH				
	achieved				

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
(LOs)		
	 using spoon dentures 2.6 Describe the role of the dental nurse in the oral health care team 	
	 2.7 Describe the purpose of close liaison between dental staff and laboratory in relation to: laboratory prescription materials dental appointments 	
Range – LO2	2.2 Stages:impressionsbite	

Learning outcomes	Assessment criteria (AC) The learner can:	Evidence record
(LOs) The learner will:	The learner can.	
The learner will.	• try-in	
	• fit	
	adjustment relines	
	obturators	
	tissue conditioners	
	additions	
	2.3 Prosthetic treatments:	
	implants	
	bridges	
	dentures	
3. Be able to support the	3.1 Select patient charts, records and images	(Skills-based outcome)
individual and clinician	3.2 Provide equipment required for the taking of	(Skills-based outcome)
with fixed and	shades	
removable prosthetic	3.3 Support the clinician throughout the	(Skills-based outcome)
procedures	procedure of taking shades	
	3.4 Provide the necessary equipment and	(Skills-based outcome)
	materials for taking occlusal registrations	
	3.5 Assist the clinician to:	(Skills-based outcome)
	 protect soft tissues during treatment 	
	 retract soft tissues during treatment 	
	3.6 Provide aftercare advice to individuals on	(Skills-based outcome)
	the care of new removable prostheses and	
	immediate dentures	
Range – LO3	3.1 Patient charts, records and images:	
	 dental history/pending treatment 	
	charting	
	medical history	
	periodontal charting	
	 orthodontic records and charts 	
	 radiographs 	
	 laboratory tickets 	
	 photographs 	
	study models	
	• consent	
	3.3 Procedure:	
	fixed prostheses	
	removable prostheses	
	3.4 Equipment and meterials:	
	3.4 Equipment and materials:	
	wax occlusal rims pink way	
	• pink wax	
	heat source	
	markers	
	shade guides	
	mould guides	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	occlusal registration materialarticulating paperhand mirror	
	 3.6 Individuals: adults children and young people older adults those with additional needs 	
Be able to select and prepare impression materials for fixed and removable prostheses	 4.1 Select the following for taking impressions for fixed and removable prostheses: impression material impression trays 	(Skills-based outcome)
	 4.2 Prepare the quantity of impression materials: to the required consistency within the handling and setting time relative to the material and ambient temperature 	(Skills-based outcome)
	4.3 Load impression materials on the impression tray	(Skills-based outcome)
	4.4 Provide support while monitoring the individual when impressions are in the mouth	(Skills-based outcome)
	4.5 Disinfect impressions on removal from the individual's mouth	(Skills-based outcome)
	4.6 Store impressions so accuracy is maintained	(Skills-based outcome)
	4.7 Complete laboratory prescription	(Skills-based outcome)
	4.8 Attach laboratory prescription securely to the packaging	(Skills-based outcome)
	4.9 Explain the manipulation, disinfection, storage of impression materials and why this is important prior to attaching the laboratory prescription	
Range – LO4	4.1 Impression materials:	
	 alginate 	
	 putty/elastomer 	
	 4.4 Individual: adults children and young people older adults those with additional needs 	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		(2)
5. Be able to prepare	5.1 Select the equipment, instruments and	(Skills-based outcome)
equipment,	materials for preparation, fitting and	
instruments and	adjustment of temporary crowns and bridges	(01.31. 1
materials for fixed	5.2 Prepare adhesive material for the fitting of	(Skills-based outcome)
prostheses	fixed prostheses:	
	to the required consistency	
	 using a technique appropriate to the material 	
	 at a time required by the clinician 	
	5.3 Provide the instruments required for	(Skills-based outcome)
	trimming, cleaning and checking the final	
	adjustment of fixed prostheses	
	5.4 Provide advice and instruction to individuals	(Skills-based outcome)
	on caring for fixed prostheses	
Range – LO5	5.1 Equipment, instruments and materials:	
	 local anaesthetic 	
	 hand pieces and burs 	
	suction equipment	
	 equipment for protecting and retracting 	
	the soft tissues	
	 rubber dam 	
	 gingival retraction cord 	
	 temporary cements 	
	 temporary crown and bridge materials 	
	 permanent cements 	
	Beebee crown scissors	
	Miller forceps	
	5.2 Fixed prostheses:	
	• crowns	
	inlays	
	veneers	
	 permanent bridges 	
	 adhesive bridges 	
	 temporary bridges 	
	 temporary crowns 	
	implants	
6. Be able to prepare	6.1 Provide the equipment , instruments and	(Skills-based outcome)
equipment,	materials required for:	
instruments and	 bite registration of removable 	
materials for	prostheses	
removable prostheses	try-in stage of removable prostheses	
and orthodontic	fitting stage of removable prostheses	
appliances	6.2 Explain the equipment, instruments and	
	materials that are used in the stages of	
	fixed and removable orthodontic	
	treatments	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
Range – LO6	6.1 Equipment, instruments and materials for prostheses:	
	 6.2 Stages of fixed and removable orthodontic treatments: fitting monitoring adjusting 	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and

records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 and LO2 must be assessed via approved methods for knowledge and understanding.

LO3 to LO6 must be assessed via approved methods for skills-based outcomes.

LO3 to LO6 must be assessed in the workplace.

CORE DN 9 Provide support during non-surgical endodontic treatment (L/650/8111)

Unit summary				
This unit focuses on the knowledge, skills and behaviours required to provide support during non-				
surgical endodontic treatment.				
Mandatory Achieved/not yet Level 3 4 credits 25 GLH				
_	achieved			

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
Understand the purpose and procedures of nonsurgical endodontic treatment	 1.1 Identify different types of non-surgical endodontic treatment 1.2 Explain the risks during and after non-surgical endodontic treatment 1.3 Explain the potential complications during and after non-surgical endodontic treatment 1.4 Evaluate non-surgical endodontic treatment 1.5 Explain the relationship between non-surgical endodontic treatment and other forms of dental treatment 	
2. Know how to manage and handle equipment, instruments, materials and medicaments during dental procedures	1.1 Non-surgical endodontic treatment:	
3. Be able to prepare the clinical environment for non-surgical endodontic treatment	3.1 Select the individual's charts, records and images 3.2 Identify the planned treatment 3.3 Select the equipment, instruments, materials and medicaments for the different stages of non-surgical endodontic treatment 3.4 Identify and explain the function of the different equipment, instruments, materials and medicaments that may be required at each stage of non-surgical endodontic treatment 3.5 List the equipment and instruments that may be required for the isolation of a tooth	(Skills-based outcome) (Skills-based outcome) (Skills-based outcome)
Range – LO3	for non-surgical endodontic treatment 3.1 Individual's charts, records and images: • dental history/pending treatment charting	

Learning outcomes	Assessment criteria (AC) The learner can:	Evidence record
(LOs) The learner will:	The learner can.	
The learner will.	medical history	
	periodontal charting	
	radiographs	
	• consent	
	3.2 Treatment:	
	• permanent	
	deciduous	
	doddddd	
	3.3 Equipment, instruments, materials and	
	medicaments:	
	identifying and locating	
	filing and measuring irrigation avringe	
	irrigation syringesolution	
	Solution	
	3.3 Non-surgical endodontic treatment:	
	pulp capping	
	• pulpotomy	
4. Be able to assist the	pulpectomy A 1 Assist to monitor and support the individual.	(Skille based outcome)
clinician during non-	4.1 Assist to monitor and support the individual during treatment	(Skills-based outcome)
surgical endodontic	4.2 Assist the clinician during isolation of the	(Skills-based outcome)
procedures	tooth	,
	4.3 Aspirate the treatment area to maintain a	(Skills-based outcome)
	clear field of operation	(01:11 1 1 1)
	4.4 Provide equipment and medicaments required for irrigating root canals	(Skills-based outcome)
	4.5 Assist the clinician in the measurement and	(Skills-based outcome)
	recording of the root canal length	(Craine Bacoa Gateomo)
	4.6 Prepare materials and medicaments for:	(Skills-based outcome)
	 temporary placement in canals 	
	 permanent placement in canals 	
	• restoration of the tooth	(01:11 1 1
	4.7 Provide post-operative instructions on the care of the mouth to the individual	(Skills-based outcome: simulation permitted)
Range – LO4	4.1 Individual:	Simulation permitted)
	adults	
	children and young people	
	older adults	
	those with additional needs	
	4.4 Equipment and medicaments:	
	irrigation syringe	
	irrigation solution	
	paper points	
	 identifying and locating 	
	filling and measuring	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 and LO2 must be assessed via approved methods for knowledge and understanding.

LO3 and LO4 must be assessed via approved methods for skills-based outcomes.

LO3 and LO4 must be assessed in the workplace. Simulation is allowed for AC4.7 within this unit.

CORE DN 10 Provide support during the extraction of teeth and minor oral surgery procedures (M/650/8112)

Unit summary					
This unit focuses o	This unit focuses on the knowledge, skills and behaviours required when providing support during the				
	extraction of teeth and minor oral surgery procedures.				
Mandatory	Mandatory Achieved/not yet Level 3 4 credits 25 GLH				
-	achieved				

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs) The learner will:	The learner can:	
1. Understand the	1.1 Explain why it may be necessary to extract:	
purpose and	teeth	
procedures for	• roots	
extractions and minor	unerupted teeth	
oral surgery	1.2 Explain the role of the dental nurse during	
	the removal of:	
	• teeth	
	• roots	
	unerupted teeth	
	1.3 Explain the reasons for raising	
	mucoperiosteal flaps	
	1.4 Explain the role of the dental nurse during	
	the procedure of raising mucoperiosteal flaps	
	1.5 Explain the reasons for:	
	tooth sectioning	
	bone removal	
	1.6 Explain the role of the dental nurse in	
	relation to:	
	tooth sectioning	
	bone removal	
2. Know how to manage	2.1 Explain the pre- and post-operative	
individuals before,	instructions given to an individual for dental	
during and after	procedures	
dental treatment	2.2 Explain the reasons for giving pre- and post-	
	operative instructions to individuals	
	2.3 Describe the common conditions and	
	complications associated following dental	
	implant therapy	
	2.4 Explain the role of the dental nurse in	
	clinically monitoring an individual	
Range – LO2	2.1 Dental procedures:	
	 preventive 	
	 restorative 	
	 extractions and minor oral surgery 	
	2.4 Clinically monitoring:	
	2.4 Clinically monitoring:skin tone	
	breathing	

Assessment criteria (AC)	Evidence record
	Evidence record
The learner ear.	
body language	
body language	
2.4 Individual:	
· · · · · · · · · · · · · · · · · · ·	
	(Skills-based outcome)
	(Crimo bassa satssiris)
	(Skills-based outcome)
	(Crimo Bassa Garesinis)
•	
·	
· · ·	
• • • •	
·	
	(Skills-based outcome)
	(Crime sussa suissinis)
3.5 Report non-compliance to prescribed pre-	(Skills-based outcome:
	knowledge evidence
member of the team	permitted)
3.1 Charts, records and images:	
 dental history/pending treatment charting 	
· · · · · · · · · · · · · · · · · · ·	
• consent	
3.2 Equipment, instruments, materials and	
medicaments:	
 topical anaesthetic 	
local anaesthetic	
 local anaesthetic syringes and needles 	
 luxators and/or elevators (for example, 	
Couplands, Warwick James, Cryer)	
 extraction forceps 	
scalpel	
periosteal elevator	
cheek retractor	
 Spencer Wells forceps 	
suture pack	
suture holder	
	 3.1 Charts, records and images: dental history/pending treatment charting medical history periodontal charting radiographs consent 3.2 Equipment, instruments, materials and medicaments: topical anaesthetic local anaesthetic local anaesthetic syringes and needles luxators and/or elevators (for example, Couplands, Warwick James, Cryer) extraction forceps scalpel periosteal elevator cheek retractor Spencer Wells forceps suture pack

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
	 suture scissors surgical suction tip surgical hand piece and burs irrigation syringe/needle/solution (for example, saline) haemostatic medicaments (for example, gelatine sponges, oxidised cellulose) 	
	3.2 Teeth:deciduouspermanent	
	 3.2 Minor oral surgery: implants apicectomy frenectomy biopsy removal of impacted teeth removal of buried roots removal of erupted teeth 	
4. Be able to support the clinician and the individual during	removal of unerupted teeth and roots 4.1 Support the individual during the administration of local or regional anaesthesia	(Skills-based outcome)
extractions and minor oral surgery	4.2 Aspirate, irrigate and protect the individual's soft tissues	(Skills-based outcome)
procedures	4.3 Assist the clinician in the:preparation of packsplacing of sutures	(Skills-based outcome)
	4.4 Monitor the individual	(Skills-based outcome)
	4.5 Respond to any risks and complications	Skills-based outcome: knowledge evidence permitted)
	4.6 Complete records and charts following the procedure	(Skills-based outcome)
Range – LO4	4.1 Individual: adults children and young people older adults those with additional needs	
	 4.5 Complications: nerve damage haemorrhage oral antral fistula equipment failure collapse 	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
5. Be able to provide support for the clinician and the individual following	 5.1 Provide the individual with post-operative instructions following: extraction of erupted teeth minor oral surgery 	(Skills-based outcome)
extraction and minor oral surgery	5.2 Explain requirements of confirming with the clinician that the individual is fit to leave the surgery	
Range – LO5	 5.1 Individual: adults children and young people older adults those with additional needs 	
	5.1 Teeth:deciduouspermanent	

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 and LO2 must be assessed via approved methods for knowledge and understanding.

LO3 to LO5 must be assessed via approved methods for skills-based outcomes.

LO3 to LO5 must be assessed in the workplace.

CORE DN 11 Dental anatomy and assessment of oral health (R/650/8113)



Unit summary					
This unit focuses on knowledge, skills and behaviours of dental anatomy and oral health with regard to					
assessment and treatment planning.					
Mandatory Achieved/not yet Level 3 6 credits 40 GLH					
	achieved				

Assessment criteria (AC)	Evidence record
The learner can:	
•	
1.2 Describe the structure and function of:	
gingivae	
 supporting tissue 	
1.3 Describe the position and function of the:	
 salivary glands 	
 muscles of mastication 	
1.4 Describe the structure of the:	
 maxilla 	
mandible	
1.5 Describe the movements of the temporo-	
•	
assessment	
2.2 Describe materials used in dental	
assessment	
2.3 Explain the reasons for taking radiographs	
and photographs during assessment and	
treatment planning	
2.4 Describe the methods of assessing and	
recording soft and hard tissue conditions	
2.5 Explain the methods of assessing and	
recording periodontal conditions using	
periodontal charts	
2.6 Evaluate the methods of measuring pulp	
vitality	
	The learner can: 1.1 Describe the morphology, eruption dates and function of the:

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
THE REALITE WIII.	2.7 Explain the relevance of obtaining valid, written, informed consent prior to any treatment being undertaken, taking into account the legal requirements and, where appropriate, scope of practice	
Range – LO2	2.2 Materials:	
	2.4 Methods: Different methods of clinical assessment, for example: use of dental probes and mouth mirrors Palmer notation/dental history/pending treatment charting visual and manual inspection dyes transillumination vitality testing study models radiographs photographs 2.5 Periodontal charts: basic periodontal examination (BPE) full periodontal charting	
3. Know the clinical assessments and instructions associated with orthodontics	3.1 Describe the classifications of malocclusion 3.2 Describe the types of orthodontic appliances in relation to treatment 3.3 Explain pre- and post-operative instructions for orthodontic procedures	
	3.4 Explain the role of the dental nurse in providing support during orthodontic assessment and treatment	
Range – LO3	 3.2 Orthodontic appliances: function and uses of removable orthodontic appliances (for example, removable retainers and functional appliances) function and uses of fixed orthodontic appliances and fixed retainers 3.3 Orthodontic procedures: care and maintenance of both removable and fixed appliances 	

Learning outcomes	Assessment criteria (AC)	Evidence record
(LOs)	The learner can:	
The learner will:		
	3.4 Support:	
	 advice to individuals on stages and 	
	duration of orthodontic treatments	
	oral health instruction	
4. Understand the	4.1 Explain diseases of the oral mucosa	
general, systemic and	4.2 Describe the effects of ageing on the soft	
psychological	tissue	
diseases relevant to	4.3 Explain the general and systematic diseases	
oral health	and their relevance and impact on clinical	
	treatment, patient compliance, self-care and	
	outcomes	
	4.4 Describe the common signs and symptoms	
	of oral cancer and explain the importance of	
	raising a concern and early referral	
	4.5 Explain psychological conditions and their	
	relevance and impact on clinical treatment,	
	patient compliance, self-care, and outcomes	
	4.6 Describe psychological and sociological	
	concepts and theoretical frameworks of	
	health, illness, behavioural changes and	
	disease and how these are applied to clinical	
	practice	
Range – LO4	4.1 Diseases:	
	malignant	
	 potentially malignant lesions 	
	4.3 Diseases:	
	oral cancer	
	• herpes	
	• HIV	
	hepatitis	
	• diabetes	
	epilepsy	
	eating or digestive disorders	
5. Understand the	5.1 Identify the signs of normal and abnormal	
management of oral	facial growth, physical, mental and dental	
health	development milestones and explain their	
	significance	
	5.2 Explain the methods of diagnosis, prevention	
	and management of:	
	malignant lesions	
	potentially malignant lesions	
	5.3 Describe the diagnosis and management of	
	disorders of:	
	the oral mucosa	
	soft tissue	
	facial pain	

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
The learner will.	facial bonesfacial joints	
	5.4 List and explain the classes and role of drugs that are used in dentistry	
Range – LO5	 5.3 Disorders: oral cancer lichen planus oral candidiasis (oral thrush) herpes glossitis osteoporosis salivary gland disorders xerostomia 	
	 5.4 Drugs: analgesics antibiotics anti-viral anti-fungal tranquillisers/hypnotics emergency drugs 	
6. Understand the structures and functions of the major organ systems of the human body	 6.1 Describe the structures and functions of the major organ systems of the human body with particular reference to oral disease and treatment: respiratory system heart and circulatory system digestive system nervous system 	

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 to LO6 must be assessed via approved methods for knowledge and understanding.

CORE DN 12 First aid essentials (T/650/8114)

Unit summary				
The purpose of this unit is to assess the knowledge, skills and behaviours required to deal with the				
range of emergencies requiring first aid in the workplace.				
Mandatory	Achieved/not yet	Level 3	3 credits	25 GLH
	achieved			

Learning outcomes	Assessment criteria (AC) The learner can:	Evidence record
(LOs) The learner will:	THE learner can.	
Know the medical emergencies that may	1.1 Identify potential medical emergencies	
occur in the dental environment	1.2 Explain action to take in response to medical emergencies	
Range – LO1 2. Understand the role	1.1 Medical emergencies:	
and responsibilities of a first aider	 2.1 Identify the role and responsibilities of a first aider 2.2 Identify how to minimise the risk of infection to self and others 2.3 Identify the need for establishing consent to provide first aid 2.4 Identify the first aid equipment that should be available 2.5 Describe the safe use of first aid equipment 2.6 Explain the safe working practices for first aid and medical emergencies in line with organisational and legal requirements 	
Range – LO2	2.6 Working practices:	
Be able to assess an incident	3.1 Conduct a scene survey 3.2 Conduct a primary survey of a casualty	(Skills-based outcome: simulation permitted) (Skills-based outcome:
	3.3 Give examples of when to call for help	simulation permitted) (Skills-based outcome: simulation permitted)

Learning outcomes (LOs) The learner will:	Assessment criteria (AC) The learner can:	Evidence record
Be able to manage an unresponsive casualty who is breathing normally	4.1 Assess a casualty's level of consciousness	(Skills-based outcome: simulation permitted)
	4.2 Open a casualty's airway and check breathing	(Skills-based outcome: simulation permitted)
	4.3 Identify when to place an unconscious casualty into the recovery position	(Skills-based outcome: simulation permitted)
	4.4 Place an unresponsive casualty in the recovery position	(Skills-based outcome: simulation permitted)
	4.5 Manage a casualty who is in seizure	(Skills-based outcome: simulation permitted)
5. Be able to manage an unresponsive casualty	5.1 Recognise the need to commence cardiopulmonary resuscitation	(Skills-based outcome: simulation permitted)
who is not breathing normally	5.2 Demonstrate cardiopulmonary resuscitation using a manikin	(Skills-based outcome: simulation permitted)
	5.3 Identify the accepted modifications to cardiopulmonary resuscitation for children	(Skills-based outcome: simulation permitted)
6. Be able to recognise and assist a casualty who is choking	 6.1 Describe how to identify a casualty with a: partially blocked airway completely blocked airway 	(Skills-based outcome: simulation permitted)
	6.2 Administer first aid to a casualty who is choking	(Skills-based outcome: simulation permitted)
7. Be able to manage a casualty with external bleeding	7.1 Identify the types of external bleeding	(Skills-based outcome: simulation permitted)
	7.2 Control external bleeding	(Skills-based outcome: simulation permitted)
8. Be able to manage a casualty who is in	8.1 Recognise shock	(Skills-based outcome: simulation permitted)
shock	8.2 Administer first aid to a casualty who is in shock	(Skills-based outcome: simulation permitted)
Be able to manage a casualty with a minor	9.1 Administer first aid to a casualty with small cuts, grazes and bruises	(Skills-based outcome: simulation permitted)
injury	9.2 Administer first aid to a casualty with minor burns and scalds	(Skills-based outcome: simulation permitted)
	9.3 Administer first aid to a casualty with small splinters	(Skills-based outcome: simulation permitted)

Evidence requirements

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes (for example, reflective accounts, question and answer, professional discussion, work products, such as policies, reports and records that can be used to underpin or move a professional discussion forward) but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a

Delivery and assessment guidance

specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread throughout the duration of the qualification, ideally at the beginning, middle and end of the qualification.

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

LO1 and LO2 must be assessed via approved methods for knowledge and understanding.

LO3 to LO8 must be assessed via approved methods for skills-based outcomes.

LO3 to LO8 must be assessed in the workplace. Where this is not possible, simulation is permitted for some ACs within this unit, this is indicated in the LO/AC table (in the evidence record column).

Recommended assessment methods

A recommended range of assessment methods has been identified, which may be used for the units in this qualification. This gives the opportunity for the individual needs of learners to be taken into account.

If you are proposing to use an assessment method that is not included within the recommended list, you should contact your external quality assurer (EQA) with full details of your proposed method. It will need formal approval from NCFE before it can be used.

Each learner must generate evidence from appropriate assessment methods that demonstrate achievement of all the learning outcomes (LOs), assessment criteria (AC) and **all range** associated with each unit (grades are not awarded).

Skills-based outcomes **must** be assessed via direct observation in the workplace. If this is not possible or appropriate, an expert witness testimony (EWT) may be provided. Other methods of assessment may be used as evidence against skills-based outcomes but only as supplementary evidence alongside an EWT or direct observation to triangulate the evidence.

Skills-based outcomes are typically achieved throughout the duration of the programme of study to allow for increasing confidence and competence in practice. There are no requirements relating to a specific number of observations for any of the units, but as a minimum we expect three direct observations of practice, which are spread across the course duration.

Approved assessment methods for competence/skills-based outcomes include:

- direct observation of learner in work placement/employment (it is essential to include observations)
- professional discussions
- reflective accounts
- EWTs (must be accompanied by professional discussion to triangulate the evidence)
- work products (for example, policies, reports and records that can be used to underpin or move a professional discussion forward)

Approved assessment methods for knowledge and understanding include:

- professional discussion
- reflective accounts, learner log or reflective diary
- written and pictorial information
- optional tasks set by NCFE (see Internal Assessment Tasks document)
- question and answer

Assessment principles relevant to this qualification

NCFE assessment principles for adult care, childcare and health qualifications

1. Introduction

- 1.1 These principles and approaches to unit/qualification assessments should be read alongside individual unit assessment requirements, where appropriate.
- 1.2 These principles will ensure a consistent approach to those elements of assessment that require further interpretation and definition, and support sector confidence.
- 1.3 The centre needs to ensure that individuals undertaking assessor or quality assurer roles within the centre conform to the Sector Skills Council and/or NCFE assessment principles for the unit they are assessing or quality assuring.

Assessing knowledge, skills and competence

Learners will need to meet all of the AC for knowledge, skills and competence included in the qualification using appropriate assessment methods.

Practical skills competence

The centre with whom the learners are registered will be responsible for making all assessment decisions. Assessors must be **contracted** to work directly with the centre, contributing to all aspects of standardisation. The centre must ensure a process of training is followed, including during induction and quality assurance activities. Occupationally competent and qualified assessors from the centre must use direct observation to assess practical skills-based outcomes. Further information and guidance can be found below:

2. Assessment principles

- 2.1 Assessment decisions for competence/skills-based LOs must relate to experience gained in a real work environment (RWE).
- 2.2 Assessment decisions for competence/skills-based LOs must be made by an occupationally competent assessor, qualified to make assessment decisions.
- 2.3 Competence/skills-based assessment must include direct observation as the main source of evidence.
- 2.4 Simulation may only be utilised as an assessment method for competence/skills-based LOs where this is specified in the assessment requirements (for example, CORE DN 4, 9 and 12).
- 2.5 Given the nature of work with children, young people, service users and their families (if applicable), which may from time to time include sensitive situations requiring confidentiality/privacy, there may be a need to make use of an EWT as a source of performance evidence in the workplace.

Expert witnesses can be drawn from experienced individuals who can attest to the learner's performance in the workplace. This may include line managers or other experienced colleagues from inside an organisation or from other agencies. This may prove particularly important for those learners who work

unsupervised, but who have contact with a range of different professionals in the course of their work activities.

Expert witnesses must only be used for observation where they have occupational expertise of specialist areas or the observation is of a particularly sensitive nature. It is not necessary for expert witnesses to hold an assessor qualification, as a qualified assessor must assess the testimony provided by an expert witness when making summative assessment decisions. See also section 4.5.

The centre should enable expert witnesses to provide and present their evidence in an efficient way that does not compromise validity and reliability. This could include the following:

- the use of voice and audio recordings
- through remote discussions where the main assessor could scribe the expert witness contributions (for example, via Microsoft Teams or Zoom)
- over the telephone where the assessor could scribe the testimony

Additionally, centres must adapt their internal quality assurance strategies to ensure that assessor judgements based on EWT are prioritised for standardisation and sampling activities.

The use of professional discussion and reflective accounts can be used to support other forms of evidence but are not direct evidence sources that can replace the observation requirement.

- 2.6 Assessment of knowledge-based LOs may take place in or outside of an RWE.
- 2.7 Assessment decisions for knowledge-based LOs must be made by an occupationally knowledgeable member of staff, qualified to make assessment decisions. The centre with whom the learners are registered will be responsible for making all assessment decisions. Occupationally competent and qualified assessors from the centre must use direct observation to assess practical skills-based outcomes.

Remote technology

2.8 The use of remote technology is prohibited within early years, school, childcare, health and adult care settings where there is a potential risk of users of the service, or their carers/families, being inadvertently seen or heard. This includes the use of all recording and streaming devices such as mobile phones, laptops and tablets. Please note that technology must not be used to view assessments remotely, even when not recording. For example, assessors cannot complete remote observations to prove competency by viewing learners 'live' using remote technology.

The use of remote technologies could be considered to support aspects of the learner's performance. For example, this may include planning sessions, online meetings and remote activities in which the learner is contributing, and where the assessor could also attend remotely or observe through use of technology. In these examples, the learner MUST be in an environment away from any children, young people, service users and their families. The use of technologies could also be considered for capturing EWT.

3. Internal quality assurance

3.1 Internal quality assurance is key to ensuring that the assessment of evidence for units is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally

knowledgeable in the area they are assuring and be qualified to make quality assurance decisions. It is also desirable that internal quality assurers (IQAs) are registered* with the GDC.

* For IQAs who are not GDC registrants, a vocational dental qualification must be held and continuing professional development (CPD) relevant to dental nursing (for example, ethics and professionalism) must be undertaken and maintained. Evidence of current CPD records must be available upon qualification approval and subsequent external quality assurance reviews.

Knowledge LOs

- assessors will need to be both occupationally knowledgeable and qualified to make assessment decisions
- IQAs will need to be both occupationally knowledgeable and qualified to make quality assurance decisions

Competence/skills LOs

- assessors will need to be both occupationally competent and qualified to make assessment decisions
- IQAs will need to be both occupationally knowledgeable and qualified to make quality assurance decisions

4. Definitions

4.1 Occupationally competent:

This means that each assessor must be capable of carrying out the full requirements within the competency units they are assessing. Being occupationally competent means they are also occupationally knowledgeable. This occupational competence should be maintained through clearly demonstrable continuing learning and professional development.

4.2 Occupationally knowledgeable:

This means that each assessor should possess relevant knowledge and understanding and be able to assess this in units designed to test specific knowledge and understanding, or in units where knowledge and understanding are components of competency. This occupational knowledge should be maintained through clearly demonstrable continuing learning and professional development.

4.3 Qualified to make assessment decisions:

This means that each assessor must hold a qualification suitable to support the making of appropriate and consistent assessment decisions. Awarding organisations will determine what will qualify those making assessment decisions according to the unit of competence under assessment.

Assessors of these qualifications should be appropriately qualified to make assessment decisions. Although it is not a specific requirement of these qualifications, we consider it to be good practice for assessors to hold, or be working towards, a recognised qualification in assessment. Where a recognised qualification is not held, assessors should be able to demonstrate relevant and current experience of assessment.

In order to assess knowledge-based units, the assessor should be occupationally knowledgeable. They should have relevant knowledge to assess units designed to test the knowledge and understanding of learners. This knowledge should be demonstrable through relevant qualifications/experience, and at an equivalent or higher level than the units under assessment.

In order to assess competence-based units, the assessor should be occupationally competent. They should be able to carry out the requirements of the units they are assessing. This competence should be demonstrable through relevant qualifications/experience, and at an equivalent or higher level than the units under assessment. The following are examples of qualifications/roles that tutors/teachers/assessors may hold to be able to make decisions involving the assessment of learners:

- an assessor qualification such as D32/D33, A1/A2 or a Level 3 Award/Certificate in Assessing Vocationally Related Achievement
- Qualified Teacher Status/Early Years Professional Status
- Certificate in Education in Post Compulsory Education (PCE)
- Certificate in Teaching in the Lifelong Learning Sector (CTLLS)
- Diploma in Teaching and Lifelong Learning Sector (DTLLS)

Any examples given are not intended to be exhaustive or definitive. Examples of relevant qualifications and occupational backgrounds are given as benchmarks. Other equivalent qualifications or backgrounds may also qualify prospective staff for assessment roles. Centres seeking further clarification should contact their EQA in the first instance.

4.4 Qualified to make quality assurance decisions:

NCFE will determine what qualifications and/or experience is required in relation to the:

- role of the assessor for knowledge-based AC
- role of the assessor for skills/competence-based AC
- role of the IQA

4.5 Expert witness:

Evidence from expert witnesses must meet the tests of validity, reliability and authenticity. Expert witnesses will need to demonstrate:

- they have a working knowledge of the units on which their expertise is based
- they are occupationally competent in their area of expertise
- they have **either** any qualification in assessment of workplace performance **or** a professional work role that involves evaluating the everyday practice of staff
- they have current or recent (within the last 2 years) experience of working at or above the level for which they are attesting competence
- they can demonstrate appropriate CPD relevant to the sector for which they are attesting competence
- that they have no conflict of interest in the outcome of the evidence

Skills for Health assessment principles

In reference to unit CORE DN 12 First aid essentials, please refer to www.skillsforhealth.org.uk for the latest assessment principles.

Section 3: explanation of terms

This table explains how the terms used at level 3 in the unit content are applied to this qualification (not all verbs are used in this qualification).

Apply	Explain how existing knowledge can be linked to new or different situations in practice.
Analyse	Break the subject down into separate parts and examine each part. Show how the main ideas are related and why they are important. Reference to current research or theory may support the analysis.
Clarify	Explain the information in a clear, concise way.
Classify	Organise according to specific criteria.
Collate	Collect and present information arranged in sequential or logical order.
Compare	Examine the subjects in detail and consider the similarities and differences.
Critically compare	This is a development of compare where the learner considers the positive aspects and limitations of the subject.
Consider	Think carefully and write about a problem, action or decision.
Demonstrate	Show an understanding by describing, explaining or illustrating using examples.
Describe	Write about the subject giving detailed information in a logical way.
Develop (a plan/idea which)	Expand a plan or idea by adding more detail and/or depth of information.
Diagnose	Identify the cause based on valid evidence.
Differentiate	Identify the differences between two or more things.
Discuss	Write a detailed account giving a range of views or opinions.
Distinguish	Explain the difference between two or more items, resources, pieces of information.
Draw conclusions (which)	Make a final decision or judgement based on reasons.
Estimate	Form an approximate opinion or judgement using previous knowledge or considering other information.

Evaluate	Examine strengths and weaknesses, arguments for and against and/or similarities and differences. Judge the evidence from the different perspectives and make a valid conclusion or reasoned judgement. Reference to current research or theory may support the evaluation.
Explain	Provide detailed information about the subject with reasons showing how or why. Responses could include examples to support these reasons.
Extrapolate	Use existing knowledge to predict possible outcomes which might be outside the norm.
Identify	Recognise and name the main points accurately. (Some description may also be necessary to gain higher marks when using compensatory marking.)
Implement	Explain how to put an idea or plan into action.
Interpret	Explain the meaning of something.
Judge	Form an opinion or make a decision.
Justify	Give a satisfactory explanation for actions or decisions.
Perform	Carry out a task or process to meet the requirements of the question.
Plan	Think about and organise information in a logical way using an appropriate format.
Provide	Identify and give relevant and detailed information in relation to the subject.
Reflect	Learners should consider their actions, experiences or learning and the implications of this for their practice and/or professional development.
Review and revise	Look back over the subject and make corrections or changes.
Select	Make an informed choice for a specific purpose.
Show	Supply evidence to demonstrate accurate knowledge and understanding.
State	Give the main points clearly in sentences or paragraphs.
Summarise	Give the main ideas or facts in a concise way.
Test	Complete a series of checks utilising a set procedure.

Section 4: support

Support materials

The following support materials are available to assist with the delivery of this qualification and are available on the NCFE website:

- Qualification Factsheet
- Internal Assessment Tasks
- Assessment Specification
- Qualification Approval and External Quality Assurance Reviews
- Appendices, Policies and Statements
- Knowledge, Skills and Behaviours (KSBs) Mapping
- Sample Assessment Materials (SAMs) question papers and answer keys

Useful websites

Centres may find the following website helpful for information, materials and resources to assist with the delivery of this qualification:

www.gdc-uk.org

This link is provided as a source of potentially useful information for delivery/learning of this subject area. NCFE does not explicitly endorse this website or any learning resources available on this website. For official NCFE-endorsed learning resources, please see the additional and teaching materials sections on the qualification's page on the NCFE website.

Other support materials

The resources and materials used in the delivery of this qualification must be age-appropriate and due consideration should be given to the wellbeing and safeguarding of learners in line with your institute's safeguarding policy when developing or selecting delivery materials.

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Appendix A: units

To simplify cross-referencing assessments and quality assurance, we have used a sequential numbering system in this document for each unit.



Knowledge only units are indicated by a star. If a unit is not marked with a star, it is a skills unit or contains a mix of knowledge and skills.

Mandatory units

Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
CORE DN 1	M/650/8103	Work within regulatory requirements in relation to the role of a dental nurse	3	5	30	
CORE DN 2	R/650/8104	Contribute to health and safety in the dental environment	3	9	60	
CORE DN 3	T/650/8105	Reflect on and develop own practice as a dental nurse	3	2	15	
CORE DN 4	Y/650/8106	Promote oral health for individuals	3	3	20	
CORE DN 5	A/650/8107	Provide support during the assessment of individuals' oral health	3	4	25	
CORE DN 6	D/650/8108	Contribute to the production of dental images	3	5	35	
CORE DN 7	F/650/8109	Provide support during the prevention and control of periodontal disease, caries and the restoration of cavities	3	4	30	
CORE DN 8	K/650/8110	Provide support during the provision of fixed and removable prostheses	3	6	35	
CORE DN 9	L/650/8111	Provide support during non-surgical endodontic treatment	3	4	25	

Unit number	Regulated unit number	Unit title	Level	Credit	GLH	Notes
CORE DN 10	M/650/8112	Provide support during the extraction of teeth and minor oral surgery procedures	3	4	25	
CORE DN 11	R/650/8113	Dental anatomy and assessment of oral health	3	6	40	
CORE DN 12	T/650/8114	First aid essentials	3	3	25	



Appendix B: mapping to the General Dental Council's (GDC's) The Safe Practitioner: Dental Nurse

This qualification has been mapped to the **General Dental Council's (GDC's)** The Safe Practitioner: Dental Nurse document

Safe Practitioner domains

Domain	Sub domain
Clinical Knowledge and Skills	Clinical knowledge and its application to patient management
	Clinical/technical skills
Interpersonal Skills	Effective communication
	Teamwork and wellbeing of others
Professionalism	Ethics and integrity
	Leadership
	Social accountability
Self-management	Insight
	Reflection, continued and self-directed learning
	Adaptability, wellbeing and personal growth
	Organisation and time management

Explanatory notes on this framework¹

- 1. This is the framework for all UK education and training programmes that lead to registration with the General Dental Council (GDC) as a dental professional. The descriptions under the four domains in the framework together summarise the GDC's expectations for new dental professionals, or 'safe practitioners'.
- 2. The learning outcomes and behaviours within this framework have been designed to allow education providers flexibility to use their expertise to develop programme curricula and to amend these to reflect changes in practice over time.
- 3. Where a learning outcome sets an expectation for knowledge or skills in a certain area (for example diseases or medicines) the role of the education provider is to determine the right areas to teach and assess within the remit of that professional group at the level expected to be a safe practitioner.
- 4. Overlap of content in particular areas of practice, for example content covered in both knowledge and skills in the clinical domain, is deliberate to separate out and clearly define the purpose of each outcome and what is required to be assessed. There are some outcomes and behaviours which have aspects that apply across two or more domains. Providers should consider all aspects of the outcome/behaviour and not limit the teaching and assessment/monitoring to only those aspects that fall within the domain listed.
- 5. The behaviours and learning outcomes are not structurally dependant on each other. Content in some areas is replicated across outcomes and behaviours. Determining whether content is a behaviour or an outcome (or a behaviour in addition to an outcome) is based on how it should be assessed and/or monitored by the provider.
- 6. All expected behaviours are common across the dental professional groups. Many of the learning outcomes are also shared across all groups. Where the learning outcome number has an '*' against it, this means that this outcome is a variant of an outcome shared with other groups, or it is specific to this group. Differences and gaps in the numbering reflect that professional groups are required to have demonstrated only those learning outcomes relevant to their profession.

¹ The Safe Practitioner: Dental Nurse, page 2, November 2023

Domain: Clinical knowledge and skills						
Description	includes the abili	Possesses the skills and underpinning knowledge to undertake routine clinical and technical procedures and tasks. This includes the ability to apply that knowledge and those skills to specific contexts and situations, patients, and stages of treatment including, where relevant, assessment, diagnosis, treatment planning and onward referral				
Sub domain	GDC criteria	GDC learning outcomes	Mapping to units			
Clinical knowledge and its application to patient management	C 1.1	Explain the aetiology, pathogenesis and epidemiological trends of oral and dental disease and their application to patient management	CORE DN 4 LO1 AC1.1 to AC1.7, specifically AC1.2			
	C 1.2*	Describe and identify the clinical presentations of oral and dental diseases relevant to the role of a dental nurse and explain the principles underpinning their diagnosis, prevention, and treatment	CORE DN 4 LO1, AC1.9, LO2 CORE DN 7 LO1 AC1.3			
	C 1.3	Explain the variance in disease presentation across diverse cultural and social groups, and those with protected characteristics and how this impacts diagnosis, prevention, and treatment	CORE DN 4 LO1 AC1.8			
	C 1.4*	Explain general and systemic diseases and psychological conditions and their relevance to oral health and impact on clinical treatment, patient compliance, self-care, and outcomes	CORE DN 11 LO4 AC4.3, LO5			
	C 1.5	Identify relevant and appropriate dental, oral, craniofacial, and general anatomy (recognising the diversity of anatomy across the patient population) and explain their relevance to patient management	CORE DN 11 LO1 AC1.8			
	C 1.6	Describe relevant physiology and discuss its application to patient management	CORE DN 11 LO1 all ACs, LO5 AC5.1, AC5.2, AC5.3			
	C 1.7*	Describe psychological and sociological concepts and theoretical frameworks of health, illness, behavioural change and disease, and how these can be applied in clinical practice	CORE DN 11 LO1 all ACs, LO5 AC5.1, AC5.2, AC5.3			

	Explain the potential routes of transmission of infectious	CORE DN 2 LO1 all ACs, LO2 all
C 1.8	agents in dental practice, mechanisms for the prevention of infection, the scientific principles of decontamination and disinfection and their relevance to health and safety	ACs, LO3 all ACs, LO4 all ACs, LO5 AC5.1 to AC5.3
C 1.9	Explain the need for effective recorded maintenance and testing of equipment and requirements for appropriate storage, handling, and use of materials	CORE DN 2 LO9, LO10
C 1.13	Evaluate the health risks of prescribed, non-prescribed and recreational drug use and misuse on oral and general health and how to provide appropriate advice and support including signposting or referral	CORE DN 4 LO1, AC1.10
C 1.14	Describe the scientific principles underpinning the use of materials and biomaterials and evaluate their limitations and selection, with emphasis on those used in dentistry	CORE DN 7 LO3 AC3.1, AC3.2, AC3.4
C 1.15	Explain the scientific principles of medical ionizing radiation and statutory regulations, and how these are applied to clinical practice	CORE DN 6 LO1 all ACs
C 1.16	Explain the principles of obtaining valid patient consent	CORE DN 11 LO2 AC2.7 CORE DN 12 LO2 AC2.3
C 1.17	Discuss the importance of each component of the patient assessment process	CORE DN 5 LO2 AC2.7
C 1.23	Identify the signs of abuse, neglect or emotional trauma, explain local and national systems that safeguard the welfare of children and adults and understand how to raise concerns and act accordingly	CORE DN 1 LO3 all ACs

	C 1.24*	Explain the principles of preventive care	CORE DN 4 LO2 all ACs, LO4, AC4.1, LO5 all ACs
	C 1.25	Underpin all patient care with a preventive approach that takes account of patient compliance and self-care, to contribute to the patient's long-term oral and general health	CORE DN 4 all LOs and all ACs
	C 1.27	Explain how diet and nutritional status can influence oral and general health and how to provide appropriate advice and support	CORE DN 4 LO2 AC2.1, AC2.2, LO4 AC4.1
	C 1.31*	Describe the common signs and symptoms of oral cancer and explain the importance of raising a concern and early referral	CORE DN 11 LO4 AC4.4
	C 1.32	Identify the signs of normal and abnormal facial growth, physical, mental and dental development milestones and explain their significance	CORE DN 11 LO1 AC1.1, LO5 AC5.1, AC5.2, AC5.3
	C 1.38	Explain the roles and organisation of various referral networks, clinical guidelines and policies and local variation	CORE DN 4 LO3 AC3.8 CORE DN 5 LO4 AC4.3, AC4.4
	C 1.40	Explain the responsibilities of the dental team as an access point to and from wider healthcare	CORE DN 4 LO6 AC6.2
	C 1.43*	Describe the common conditions and complications that may arise following dental implant therapy	CORE DN 10 LO2 AC2.3
	C 1.44*	Explain the importance and components of a comprehensive and contemporaneous patient history	CORE DN 5 LO2 AC2.4, AC2.5, CORE DN 11 LO2 AC2.3, AC2.5, AC2.6
	GDC criteria	Behaviours	Mapping to unit/s
	C (B)1	Adopt an evidence-based approach to clinical practice	CORE DN 4 LO6 all ACs
	GDC criteria	GDC learning outcomes	Mapping to unit/s
Assessment, Diagnosis and Treatment Planning	C 2.1.3	Assess patients' levels of anxiety, experience, and expectations in respect of dental care and oral health	CORE DN 5 LO3 all ACs, LO4 all ACs
	C 2.1.5*	Contribute to relevant special investigations and diagnostic procedures	CORE DN 5 LO2 AC2.9
	C 2.1.6	Undertake an orthodontic assessment	CORE DN 5 all LOs and all ACs

	C 2.1.10*	Obtain valid consent from patients explaining all the relevant factors and taking into account the legal requirements where appropriate within scope of practice	CORE DN 5 LO1 all ACs CORE DN 7 LO4 all ACs CORE DN 8 LO3 AC3.4, LO4 AC4.2, LO5 AC5.1, AC5.2 CORE DN 9 LO3 AC3.3, LO4 AC4.4, AC4.6 CORE DN 10 LO3 AC3.2
	C 2.1.12*	Record an accurate and contemporaneous patient history	CORE DN 5 LO2 AC2.5
	C 2.1.13*	Accurately record an oral health assessment	CORE DN 5 LO2 AC2.5
	C 2.1.14*	Accurately record dental charting as carried out by other appropriate registrants	CORE DN 5 LO2 AC2.5
	C 2.1.15*	Prepare records, images, equipment and materials for clinical assessment	CORE DN 5 LO1, LO2 AC2.2, AC2.4
	C 2.1.16*	Process and manage dental radiographs and images	CORE DN 6 LO7 all ACs, LO8 all ACs
	GDC criteria	GDC learning outcomes	Mapping to unit/s
Patient Management	C 2.2.2*	Manage patient anxiety appropriately, effectively, and safely	CORE DN 5 LO3 all ACs
	C 2.2.6*	Monitor, support and reassure patients through effective communication and behavioural techniques	CORE DN 5 LO3 AC3.2, AC3.3 CORE DN 8 LO4 AC4.4 CORE DN 9 LO4 AC4.1 CORE DN 10 LO2 AC2.4, LO4 AC4.4
	C 2.2.7*	Identify changes in the patient's reported oral health status and take appropriate action	CORE DN 5 LO2 AC2.4, AC2.5, AC2.6 CORE DN 11 LO4, LO5 AC5.1, AC5.2, AC5.3
	C 2.2.8*	Make arrangements for follow-up care as prescribed by the operator	CORE DN 5 LO4 AC4.1, AC4.2
	C 2.2.9*	Provide chairside support to the operator during treatment	CORE DN 7 LO4 all ACs CORE DN 8 LO3 all ACs, LO4 all ACs, LO5 all ACs, LO6 all ACs CORE DN 9 LO4 all ACs

			CORE DN 10 LO4 all ACs, LO5 all ACs CORE DN 5 LO1 all ACs
	C 2.2.10*	Prepare, mix and handle dental materials	CORE DN 3 LOT all ACS CORE DN 7 LO4 all ACS CORE DN 8 LO3 AC3.4, LO4 AC4.2, LO5 AC5.1, AC5.2 CORE DN 9 LO3 AC3.3, LO4 AC4.4, AC4.6 CORE DN 10 LO3 AC3.2
	GDC criteria	GDC learning outcomes	Mapping to unit/s
Safe Clinical Environment	C 2.3.1	Identify and explain the risks within and around the clinical environment and manage these in a safe and effective manner	CORE DN 1 LO1 all ACs CORE DN 2 LO6 all ACs, LO7 all ACs, LO8 all ACs
	C 2.3.2	Implement, perform and manage effective decontamination and infection control procedures according to current guidelines	CORE DN 2 LO5 all ACs, LO7 all ACs, LO8 all ACs, LO9 all ACs, LO10 all ACs, LO11 all ACs, LO12 all ACs
	C 2.3.3*	Prepare and maintain the clinical environment including the instruments and equipment	CORE DN 2 LO9 all ACs CORE DN 5 LO1 all ACs CORE DN 6 LO6 all ACs CORE DN 7 LO4 all ACs CORE DN 8 LO3 all ACs, LO4 all ACs, LO5 all ACs CORE DN 9 LO3 all ACs CORE DN 10 LO3 all ACs, LO4 all ACs
Acute Conditions	C 2.4.1	Identify, assess and manage medical emergencies	CORE DN12 LO1 all ACs, LO3 all ACs, LO4 all ACs, LO5 all ACs, LO6 all ACs, LO7 all ACs, LO8 all ACs
	C 2.4.2*	Support the management of patients with acute oral conditions ensuring involvement of appropriate dental team members	CORE DN 4 LO3 all ACs, LO4 all ACs CORE DN 7 LO4 all ACs CORE DN 11 LO4 all ACs, AC4.1, LO5, AC5.3

Oral Health/Prevention	C 2.5.1	Provide patients/carers with comprehensive, personalised preventive advice, instruction and intervention in a manner which is accessible, promotes self-care and motivates patients/carers to comply with advice and take responsibility to maintain and improve oral health	CORE DN 4 LO4 all ACs CORE DN 5 LO4 all ACs
Domain: Interpersonal skills Description	which is underpini	al skills and emotional awareness to enable effective communioned by behaving in a caring, compassionate, empathic, and result helps foster wellbeing of others.	
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Effective Communication	I (B)1	Communicate with care, compassion, empathy and respect in all professional interactions with patients, their representatives, the public and colleagues	CORE DN 4 LO3 all ACs, LO4 all ACs CORE DN 5 LO3 all ACs, LO4 all ACs CORE DN 8 LO3 AC3.6 CORE DN 9 LO4 AC4.7 CORE DN 10 LO3 AC3.4, AC3.5, LO4 AC4.1, LO5 all ACs
	GDC criteria	GDC learning outcomes	Mapping to unit/s
	I 1.1	Describe the use of a range of communication methods and technologies and their appropriate application in support of clinical practice	CORE DN 3 LO1 AC1.2 CORE DN 4 LO3 AC3.5
	I 1.2	Describe the importance of non-verbal communication, including listening skills, and the barriers to effective communication	CORE DN 4 LO3 AC3.6
	I 1.3	Communicate effectively and sensitively, tailoring to context, by spoken, written and/or electronic means with all patients, including patients whose first language is not English (using representatives or interpreters where necessary), in relation to:	CORE DN 4 LO2 AC2.5, LO3 all ACs CORE DN 5 LO4 AC4.6
		patients with anxious or challenging behaviour or special considerations such as emotional trauma	CURE DIN 5 LU4 AU4./

		difficult circumstances, such as breaking bad news or discussing issues such as alcohol consumption, smoking or diet	CORE DN 5 LO4 AC4.7
	I 1.4	Communicate effectively and sensitively by spoken, written and electronic means with the public	CORE DN 5 LO4 AC4.7
		Communicate effectively by spoken, written and electronic means with colleagues from dental and other healthcare professions in relation to:	CORE DN 5 LO4 AC4.8
	I 1.5	the direct care of individual patients	CORE DN 5 LO4 AC4.8
		oral health promotion	CORE DN 5 LO4 AC4.8
		 raising concerns when problems arise, including where patients cause distress to staff 	CORE DN 5 LO4 AC4.8
	I 1.6	Use appropriate methods to provide accurate, clear and comprehensive information when referring patients to other dental and healthcare professionals.	CORE DN 4 LO3, AC3.9
	I 1.7	Communicate appropriately and effectively in professional discussions and transactions	CORE DN 3 LO1 AC1.4, AC1.7, LO2 all ACs
	I 1.8	Give feedback effectively to other members of the team	CORE DN 3 LO1 AC1.4
	I 1.9	Explain the professional expectations, potential impact and consequence of using social media as a communication tool	CORE DN 1 LO1 AC1.4
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Teamwork and Wellbeing of Others	I (B)2	Respect the roles of dental and other healthcare professionals in the context of learning and working in a dental and wider healthcare team	CORE DN 1 LO5 all ACs
	I (B)3	Demonstrate effective team working	CORE DN 1 LO5 all ACs
	I (B)4	Contribute to your team in providing dental care for patients	CORE DN 1 LO5 all ACs
	I (B)5	Take a patient-centred approach to working with the dental and wider healthcare team	CORE DN 1 LO5 all ACs

	Where appropriate manage and refer/delegate work	CORE DN 1 LO1 AC1.3
I (B)6	according to the scope of practice of members of the dental	CORE DN 4 LO3 AC3.4, AC3.8
(-)*	team, in line with competence and professional practice	CORE DN 5 LO4 AC4.3, AC4.4
GDC criteri		Mapping to unit/s
I 2.1	Explain the responsibilities and limitations of delegating to other members of the dental team	CORE DN 3 LO1 AC1.7
I 2.2	Explain the role and professional responsibilities associated with appraisal; training and review of colleagues; provision of and receipt of effective feedback in the context of developing members of the dental team	CORE DN 3 all LOs and all ACs
12.3	Describe the roles of dental and other healthcare professionals in the context of learning and working in a dental and wider healthcare team	CORE DN 1 LO5 AC5.4
I 2.4	Explain the contribution that team members and effective team working makes to the delivery of safe and effective high-quality care, including the benefits of working in culturally diverse teams	CORE DN 3 LO1 AC1.6
I 2.5	Describe the team working guidance provided by the GDC and other relevant bodies	CORE DN 1 LO1 AC1.2, LO4 AC4.1, LO5 AC5.7
I 2.6	Describe the impact of Direct Access on each registrant group and the impact on the application of each group's scope of practice	CORE DN 1 LO1 AC1.3
I 2.7	Describe the scope of practice of each member of the dental team and how the roles interact for effective teamwork and patient care	CORE DN 1 LO1 AC1.2, LO4 AC4.1, LO5 AC5.7
I 2.8	Explain the need to ensure that those who raise concerns are protected from discrimination or other detrimental effects	CORE DN 1 LO3 AC3.4

Domain: Professionalism	Domain: Professionalism			
Description	committed to adv	rofessionalism and integrity by behaving ethically, shows leader vocating for oral health, promoting good oral health and underst n in the population and across communities, and addressing price	ands the importance of sustainable	
Sub domain	GDC criteria	Behaviours	Mapping to unit/s	
Ethics and Integrity	P (B)1	Treat your patients, members of the public and your colleagues with dignity and respect and without discrimination	CORE DN 1 LO1 all ACs, LO4 all ACs CORE DN 4 LO3 AC3.7 Evidence gathered from all units that cover procedures will also contribute to evidence for this criteria	
	P (B)2	Support patients to make informed decisions about their care, making their interests your first concern	CORE DN 3 LO4 all ACs CORE DN 4 LO3 all ACs, LO4 all ACs CORE DN 11 LO2 AC2.7 CORE DN 12 LO2 AC2.3	
	P (B)3	Demonstrate cultural competence, accepting and respecting the diversity of patients and colleagues	CORE DN 3 LO1 AC1.6 CORE DN 4 LO1 AC1.8 CORE DN 11 LO1 AC1.8	
	P (B)4	Provide the best possible outcome for your patients by using your knowledge and skills, acting as an advocate for their needs where appropriate	CORE DN 1 all LOs and all ACs CORE DN 2 all LOs and all ACs CORE DN 4 all LOs and all ACs CORE DN 5 all LOs and all ACs CORE DN 6 all LOs and all ACs CORE DN 7 all LOs and all ACs CORE DN 8 all LOs and all ACs CORE DN 9 all LOs and all ACs CORE DN 10 all LOs and all ACs CORE DN 12 all LOs and all ACs CORE DN 12 all LOs and all ACs CORE DN 3 LO4 all ACs	
	P (B)5	Speak up to protect others from harm	CORE DN 1 LO1 all ACs, LO3 AC3.3, AC3.4 CORE DN 3 LO1 AC1.9, LO4 all ACs	

P (B)6	Raise concerns where appropriate about your own or others' health, behaviour or professional performance	CORE DN 1 LO3 AC3.3 CORE DN 3 LO1 AC1.1, AC1.4, LO2 AC2.1, AC2.2, AC2.5
P (B)7	Comply with systems and processes to support safe patient care	CORE DN 2 all LOs and all ACs
P (B)8	Act in accordance with current best practice guidelines	CORE DN 1 all LOs CORE DN 2 all LOs
P (B)9	Act in accordance with national and local clinical governance and health and safety requirements	CORE DN 2 LO1 AC1.1, LO5 all ACs
P (B)10	Act within the legal frameworks which inform personal behaviour, the delivery of healthcare and the protection and promotion of the health of individual patients	CORE DN 1 LO3 all ACs, LO4 all ACs, LO5 AC5.1
P (B)11	Maintain contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice	CORE DN 5 LO2 AC2.6 CORE DN 11 LO2 AC2.3, AC2.4, AC2.5, AC2.7
P (B)12	Act with integrity and ensure your actions maintain the trust of colleagues, patients and the public in you, your team, and the profession across all environments and media	CORE DN 1 LO4 all ACs, LO5 all ACs CORE DN 2 all LOs CORE DN 4 LO3 all ACs, LO4 all ACs
P (B)13	Proactively address discriminatory language, behaviour and microaggressions from colleagues, patients and other professionals	CORE DN 3 LO1, AC1.8
P (B)14	Demonstrate personal accountability to patients, the regulator, the team and wider community	CORE DN 1 LO1 AC1.2, AC1.3, LO4 AC4.1
P (B)15	Work in partnership with colleagues to develop and maintain an effective and supportive environment which promotes the safety and wellbeing of the patient and dental team	CORE DN 3 LO1 AC1.1 CORE DN 4 LO3 AC3.4, AC3.7 CORE DN 5 LO4 AC4.3, AC4.4
GDC criteria	GDC learning outcomes	Mapping to unit/s
P 1.1	Explain the importance of contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice	CORE DN 5 LO2 AC2.3

P 1.2	Describe the legal responsibilities of maintaining and	CORE DN 1 LO1 AC1.2
1 1.2	protecting patients' information	CORE DN 5 LO2 AC2.1
P 1.3	Describe diversity, equality, inclusion and discrimination and the underpinning legislation and explain how to apply these principles to manage patients with protected characteristics and work within the dental team (noting that this legislation may differ in England, Scotland, Wales and Northern Ireland)	CORE DN 1 LO1 AC1.2
P 1.4	Explain cultural competence and its relevance in assessing the needs and planning care for patients from diverse backgrounds	CORE DN 3 LO1 AC1.6
P 1.5	Describe the GDC's expectations and requirements as set out in regulations and guidance and other relevant laws, ethical guidance and systems (In addition to the above legal frameworks)	CORE DN 1 LO1 AC1.2, LO4 AC4.1
P 1.6	Explain the importance of having appropriate indemnity arrangements in place for both the professional and patient	CORE DN 1 LO2 AC2.4
P 1.7	Explain the importance of candour and effective communication with patients when things go wrong or when dealing with a complaint	CORE DN 5 LO4 AC4.6
P 1.8	Explain how and where to report any patient safety issues which arise	CORE DN 1 LO1 AC1.1, AC1.2, LO3 AC3.3, AC3.4, LO5 AC5.7, AC5.8
P 1.9	Explain the personal responsibility and the mechanisms for raising concerns about your own or others' health, behaviour or professional performance as described in GDC guidance	CORE DN 1 LO3 AC3.3
P 1.10	Explain the attributes of professional attitudes and behaviour in all environments and media, including interaction with social media	CORE DN 1 LO1 AC1.2, AC1.4, LO4 AC4.1
P 1.11	Explain the principles and procedures for good complaints handling	CORE DN 1 LO5 AC5.7, AC5.8

	P 1.12	Describe the responsibility that dental practices and individual practitioners have in compliance with legal and regulatory frameworks	CORE DN 1 LO1 AC1.1, AC1.2, AC1.3
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Leadership	P (B)16	Where appropriate lead, manage and take professional responsibility for the actions of colleagues and other members of the team involved in patient care	CORE DN 3 LO1 AC1.9
	GDC criteria	GDC learning outcomes	Mapping to unit/s
	P 2.1	Describe the differences between management and leadership	CORE DN 1 LO2 AC2.3
	P 2.2	Describe own management and leadership role and the range of skills and knowledge required to do this effectively	CORE DN 1 LO2 all ACs
	P 2.3	Describe how to take responsibility for the quality of services and devices provided to the patient as relevant to your scope of practice	CORE DN 1 LO1 AC1.2, AC1.3, LO4 AC4.1
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Social Accountability	P (B)17	Contribute positively to the healthcare communities of which you are a part	CORE DN 4 LO4 AC4.7
	GDC criteria	GDC learning outcomes	Manning to unit/o
	ODO CITICITA		Mapping to unit/s
	P 3.1	Discuss the basic principles of a population health approach including demographic and social trends, UK and international oral health trends, determinants of health and inequalities in health, and the ways in which these are measured and current patterns	CORE DN 4 LO6 AC6.1
		Discuss the basic principles of a population health approach including demographic and social trends, UK and international oral health trends, determinants of health and inequalities in health, and the ways in which these are	

P 3.4*	Describe methods of evidence-based prevention at a community / population level and evaluate their effectiveness	CORE DN 4 LO6 AC6.2
P 3.5	Explain the principles of planning oral health care for communities to meet needs and demands	CORE DN 4 LO7 AC7.1
P 3.6	Describe the principles and limitations of the currently available options for funding of dental healthcare provision for individual patients	CORE DN 4 LO7 AC7.2
P 3.7	Discuss the ethical challenges associated with providing patient care within the current dental healthcare systems	CORE DN 4 LO7 AC7.3
P 3.8	Describe the considerations of the management of resources in provision of care decisions including appropriate use of primary and secondary care networks	CORE DN 4 LO7 AC7.4
P 3.9	Describe the importance of collaboration across the health and social care sector for the benefit of communities and individual patients	CORE DN 4 LO7 AC7.5
P 3.10	Describe and where appropriate support patients to negotiate the barriers and challenges which prevent sections of the population accessing oral healthcare, including patients from marginalised populations and patients with protected characteristics	CORE DN 4 LO7 AC7.6
P 3.11	Describe the main principles relating to sustainable oral health care, both environmentally and in terms of patient compliance, and the factors that might affect implementing a sustainable approach	CORE DN 4 LO7 AC7.7
P 3.12	Evaluate and apply the evidence base in relation to the environmental impacts of common treatment methods and approaches to the delivery of oral healthcare	CORE DN 4 LO7 AC7.8

Domain: Self-management			
Description	Can self-manage, adapt, and respond to different situations using insight and reflection. Plans and manages their time and keeps up to date with continued learning and development.		
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Insight	S (B)1	Accurately assess your own capabilities and limitations in the interest of high-quality patient care and seek advice from supervisors or colleagues where appropriate	CORE DN 3 LO2 all ACs, LO3 all ACs
	S (B)2	Recognise personal assumptions, biases and prejudices and manage the impact of these on patient care and professional behaviour with colleagues, patients and wider society	CORE DN 3 LO5 AC5.4
	S (B)3	Recognise the impact of contextual factors on the health care environment and patient safety and manage this professionally	CORE DN 3 LO6 AC6.5
	GDC criteria	GDC learning outcomes	Mapping to unit/s
	S 1.1	Explain what is meant by the term insight in the context of professional practice	CORE DN 3 LO6 AC6.3
	S 1.2	Explain why insight is important in ensuring safe and effective patient care and to personal development	CORE DN 3 LO6 AC6.4
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Reflection, Continued and Self-directed Learning	S (B)4	Demonstrate own professional responsibility in the development of self	CORE DN 3 LO1 all ACs, LO2 all ACs, LO3 all ACs, LO5 all ACs, LO6 all ACs Evidence gathered from all units that cover procedures will also contribute to evidence to demonstrate own professional responsibility

S (B)5	Develop and maintain professional knowledge and competence	CORE DN 3 LO1 all ACs, LO2 all ACs, LO3 all ACs, LO5 all ACs, LO6 all ACs Evidence gathered from all units will also contribute to evidence to maintain professional knowledge and competence
S (B)6	Demonstrate appropriate continuous improvement activities	CORE DN 3 LO1 all ACs, LO2 all ACs, LO3 all ACs, LO5 all ACs, LO6 all ACs Evidence gathered from all units will also contribute to evidence to demonstrate continuous improvement activities
GDC criteria	GDC learning outcomes	Mapping to unit/s
S 2.1	Explain the principles of an evidence-based approach and evaluate an evidence base	CORE DN 4 LO6 AC6.2
S 2.3	Describe an appropriate model for self-reflection and how this process can be used to inform personal development, viewpoint, preconceptions, bias and behaviour	CORE DN 3 LO3 AC3.4
S 2.4	Explain the importance of assessment, feedback, critical reflection, identification of learning needs and appraisal in personal development planning	CORE DN 3 LO1 all ACs, LO2 all ACs, LO3 all ACs
S 2.5	Explain the importance of and requirement for commitment to lifelong learning	CORE DN 3 LO2, AC2.7
S 2.6	Utilise the receipt of effective feedback in the professional development of self	CORE DN 3 LO1 AC1.4
S 2.7	Describe the principles of and demonstrate personal development planning, recording of evidence, and reflective practice	CORE DN 3 LO2 all ACs
S 2.8*	Evaluate the impact of new techniques and technologies as they relate to dental nurse practice	CORE DN 3 LO1 AC1.2

	S 2.9	Describe opportunities for improvement of a clinical service or to manage / mitigate risks	CORE DN 3 LO1 AC1.2
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Adaptability, Wellbeing and Personal Growth	S (B)7	Demonstrate engagement with systems and personal strategies which promote and maintain physical and mental wellbeing	CORE DN 3 LO6 AC6.1
	S (B)8	Recognise when and how to take action if wellbeing is compromised to a point of affecting an individual's role or professional relationships	CORE DN 3 LO6 AC6.2
	GDC criteria	GDC learning outcomes	Mapping to unit/s
	S 3.1	Describe ways of self-monitoring, self-care and routes of seeking appropriate advice in terms of personal wellbeing	CORE DN 3 LO5 AC5.1
	S 3.2	Describe strategies to identify and manage the personal and emotional challenges of work, teamwork and workload	CORE DN 3 LO5 AC5.2
	S 3.3	Describe strategies to identify and manage the personal and emotional challenges of uncertainty and change	CORE DN 3 LO5 AC5.2
	S 3.4	Explain the role of coping strategies for practice, such as reflection, self-acceptance, debriefing, handing over to another colleague, peer support and asking for help in responding to challenges and setbacks	CORE DN 3 LO5 AC5.3
Sub domain	GDC criteria	Behaviours	Mapping to unit/s
Organisation and Time Management	S (B)9	Effectively manage your own time and resources	CORE DN 3 LO3 all ACs Evidence gathered from all units will also contribute to evidence linked to effectively prioritising, managing own time and resources

Appendix C: mapping to the National Occupational Standards (NOS)

The tables below show the mapping of relevant National Occupational Standards (NOS) to the content of the Level 3 Diploma in the Principles and Practice of Dental Nursing qualification.

Unit reference number	Unit title	NOS number and title
CORE DN 1	Work within regulatory	SCDHSC0024 Support the safeguarding of individuals
	requirements in relation to	SFHGEN36 Make use of supervision
	the role of a dental nurse	SFHGEN1 Ensure personal fitness for work
		SFHGEN2 Prepare and dress for work in healthcare settings
		SFHGEN22 Communicate effectively with individuals
CORE DN 2	Contribute to health and	SFHGEN1 Ensure personal fitness for work
	safety in the dental	SFHGEN2 Prepare and dress for work in healthcare settings
	environment	SFHGEN22 Communicate effectively with individuals
		SFHIPC7 Safely dispose of healthcare waste, including sharps, to prevent the spread of infection
		SFHIPC1 Minimise the risk of spreading infection by cleaning, disinfecting and maintaining
		environments
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHDEC3 Prepare, load and operate decontamination equipment
		SFHIPC4 Minimise the risk of spreading infection by cleaning, disinfection and storing care equipment
		SFHIPC5 Minimise the risk of exposure to blood and body fluids while providing care
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHIPC7 Safely dispose of healthcare waste, including sharps, to prevent the spread of infection
		SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental
		procedure
CORE DN 3	Reflect on and develop	CLDAL19 Manage personal development and reflect on current practice
	own practice as a dental	CLDAL10 Enable learners to identify, reflect and use their learning to enhance their future personal
	nurse	development
		SFHGEN1 Ensure personal fitness for work
		SFHGEN36 Make use of supervision

Unit reference number	Unit title	NOS number and title
CORE DN 4	Promote oral health for	SFHGEN1 Ensure personal fitness for work
	individuals	SFHGEN2 Prepare and dress for work in healthcare settings
		SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHOH2 Offer information and support to individuals about dental services and the protection of oral health
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHIPC7 Safely dispose of healthcare waste, including sharps, to prevent the spread of infection SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental
		procedures
		SFHOH3 Provide chairside support during the assessment of individuals oral health
CORE DN 5	Provide support during the	SFHGEN1 Ensure personal fitness for work
	assessment of individuals'	SFHGEN2 Prepare and dress for work in healthcare settings
	oral health	SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH2 Offer information and support to individuals about dental services and the protection of oral
		health
		SFHOH3 Provide chairside support during the assessment of individuals' oral health
CORE DN 6	Contribute to the	SFHGEN1 Ensure personal fitness for work
	production of dental	SFHGEN2 Prepare and dress for work in healthcare settings
	images	SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental
		procedures
		SFHOH4 Contribute to the production of dental images

Unit reference number	Unit title	NOS number and title
CORE DN 7	Provide support during the	SFHGEN1 Ensure personal fitness for work
	prevention and control of	SFHGEN2 Prepare and dress for work in healthcare settings
	periodontal disease, caries	SFHGEN22 Communicate effectively with individuals
	and the restoration of	SFHIPC2 Perform hand hygiene to prevent the spread of infection
	cavities	SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
		SFHOH5 Provide chairside support during the prevention and control of periodontal disease and
		caries and the restoration of cavities
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
CORE DN 8	Provide support during the	SFHGEN1 Ensure personal fitness for work
	provision of fixed and	SFHGEN2 Prepare and dress for work in healthcare settings
	removable prostheses	SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental
		procedures
		SFHOH6 Provide chairside support during the provision of fixed and removable prostheses
		SFHOH09 Take a direct oral impression of an individual to produce an analogue or cast
CORE DN 9	Provide support during	SFHGEN1 Ensure personal fitness for work
	non-surgical endodontic	SFHGEN2 Prepare and dress for work in healthcare settings
	treatment	SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental
		procedures
		SFHOH7 Provide chairside support during non-surgical endodontic treatment

Unit reference number	Unit title	NOS number and title
CORE DN 10	Provide support during the	SFHGEN1 Ensure personal fitness for work
	extraction of teeth and	SFHGEN2 Prepare and dress for work in healthcare settings
	minor oral surgery	SFHGEN22 Communicate effectively with individuals
	procedures	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC5 Minimise the risk of exposure to blood and body fluids while providing care
		SFHIPC6 Use personal protective equipment to prevent the spread of infection
		SFHOH8 Provide chairside support during the extraction of teeth and minor oral surgery
CORE DN 11	Dental anatomy and	SFHGEN1 Ensure personal fitness for work
	assessment of oral health	SFHGEN2 Prepare and dress for work in healthcare settings
	assessment of star fisation	SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHOH2 Offer information and support to individuals about dental services and the protection of oral
		health
		SFHOH3 Provide chairside support during the assessment of individuals' oral health
CORE DN 12	First aid essentials	SFHIPC5 Minimise the risk of exposure to blood and body fluids while providing care
		SFHCHS35 Provide first aid to an individual needing emergency assistance
		SFHGEN1 Ensure personal fitness for work
		SFHGEN2 Prepare and dress for work in healthcare settings
		SFHGEN22 Communicate effectively with individuals
		SFHIPC2 Perform hand hygiene to prevent the spread of infection
		SFHIPC6 Use personal protective equipment to prevent the spread of infection