



T Level Technical Qualification in Health

Occupational specialism assessment (OSA)

Dental Nursing

Assignment 3 - Case study - Distinction

Guide standard exemplification materials (GSEM)

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Introduction

The material within this document relates to the Dental Nursing occupational specialism sample assessment. These exemplification materials are designed to give providers and students an indication of what would be expected for the lowest level of attainment required to achieve a pass or distinction grade.

The examiner commentary is provided to detail the judgements examiners will undertake when examining the student work. This is not intended to replace the information within the qualification specification and providers must refer to this for the content.

In assignment 3, the student must assess and analyse information on a patient, plan patient goals and outcomes related to wider contextual issues, implement a health plan, and reflect on the situation presented in the context of continued professional development (CPD).

After each live assessment series, authentic student evidence will be published with examiner commentary across the range of achievement.

Task 1: assessment of the patient and the scenario

Scenario

A 40 year old patient attends the practice where you work as a dental nurse for a new examination appointment because they have pain around the upper left 6. You greet the patient at reception and escort them into the dental surgery.

The patient seems to be very nervous. They state that they have not been to the dentist for over 20 years due to fear and past experiences as a child.

The dentist investigates the patient's lifestyle choices and asks about the patient's oral health regime, noting that the patient chews tobacco, as well as smokes 20 cigarettes per day. The dentist notes that the patient has poor oral health.

Note: The dentist starts their examination at the upper right sextant and proceeds in a clockwise order.

You will be played an audio file of the conversation between the dentist and patient (item A), which provides information for both task 1 and task 2.

The audio file will be played twice. It is advised that you only listen during the first playback. You will then have a one minute break to make notes. You will then hear the conversation a second and final time, during which you may make further notes.

Task

Analyse the situation detailed above, using your notes taken whilst listening to the conversation between the dentist and patient (item A). You are also provided with the patient's radiograph for reference (item B).

You should then complete the following:

- write up the patient's clinical notes (item C), identifying at least 2 areas of concern for the patient
- complete the basic periodontal examination (BPE) charting (item D)

You should then create a written response that:

- explains how you would prepare for a clinical examination, including which information you would need for the records and how you would comply with legal requirements and guidelines
- explains the importance of accurate record keeping

Student evidence

Patient's clinical notes (as demonstrated on item C)

New patient consultation

Patient verbal consent obtained.

Medical history checked.

Patient attended the surgery today as he is experiencing pain from an upper molar tooth, upper left quadrant (ULQ). Patient is aware of bleeding and has explained that he has not seen a dentist in many years due to a traumatic experience in his teenage years. Patient is very anxious.

Patient has a sweet tooth and enjoys chocolate and fizzy drinks.

Coffee and one sugar.

Patient works night shifts.

Patient's medical history:

Smoke - yes, 20 a day and chews tobacco, and has smoked since 16 years old.

Alcohol - 20 units a week.

Oral health:

Patient brushes once daily.

No interdental cleaning.

Uses mouthwash.

The clinician explains to the patient that his scores on the BPE chart are lower than desired and unhealthy gingival conditions can lead to server bone loss resulting in tooth loss. This can cause complications later if the patient decides on replacing teeth with prosthetics.

Examination:

Patient requires periapical (PA) X-ray - patient is anxious about having an X-ray but is aware that it is required for diagnosis.

PA X-ray taken of upper left molar: X-ray findings - bone loss 26.

Infection: present.

Diagnosis: periodontal disease.

Patient is made aware that further assessment of the tooth is required. Explained that ethylene chloride spray will be used, and patient will feel a cold sensation but no pain. Ethylene chloride is used with a cotton pellet on tooth 14 - vital normal response 25 - vital normal response 26 - instant response.

26 has extensive inflammation.

Patient made aware that periodontitis is a concern present throughout and a full charting is required to give a better and clearer diagnosis. The patient is aware and is hesitant to have treatment carried out today because he

is anxious about getting local anaesthetic and would prefer to have all the treatment carried out at one appointment. The clinician explains that a dental plan will be written up today and the patient will be able to take it home and have a think about treatment. However, it is in the patient's best interest that dental treatment is undertaken to control periodontitis and prevent further break down.

The patient discloses that he has a high sugar intake and finds that high non-milk extrinsic (NME) sugars are helping through his long shifts. Patient is made aware that high levels of sugar intake are a significant contribution to the development of tooth decay. If tooth decay is left untreated, the health of the mouth will deteriorate and this will lead to extensive dental treatment, tooth loss and in some cases bone loss.

Patient is made aware that smoking is another concern and is linked with poor oral health of the mouth and gums and can lead to high risks of oral cancer. Patient is advised to have a think about stopping smoking and cutting alcohol intake. Patient voices that he has tried in the past but only lasts about a week. Patient explains that his work and home life are stressful, and he feels his only aid to relax is smoking/alcohol. Patient is made aware that we understand but would like to offer alternate ways to manage stress that would also improve his overall health. Patient is made aware that we can refer for smoking cessation support group and is happy to be given a referral.

Next visit: Full pocket chart and referral for smoking and discuss future treatment.

Examination (as demonstrated on item D):

Charting recorded on software of excellence (SOE):

Treatment required:

26 - fracture distal cusp present

38 - is partially erupted

37 - requires a mesial occlusal (MO) restoration

32 - lingual fractured present

46 - has a mesial/occlusal/distal (MOD) amalgam which needs replacing

47 - requires an occlusal restoration

Heavy staining throughout.

BPE: 4 2 3

3 2 3

Written response:

For an examination, I would set out a mirror probe, BPE probe and tweezers for the dentist. I would also prepare the ethylene chloride with a small cotton wool pellet, X-ray holder and X-ray sensor with individual use hygiene cover.

The patient's BPE chart scores are lower than desired and unhealthy. Gingival conditions can lead to severe bone loss, resulting in tooth loss and that can cause complications later if the patient decides on replacing with prosthetics.

The patient has disclosed that he has a high sugar intake and finds high non-milk extrinsic (NME) sugars are helping through his long shifts. The patient is made aware that high levels of sugar intake is a massive

contribution to the development of tooth decay. If tooth decay is left untreated the health of the mouth will deteriorate and this will lead to extensive dental treatment, tooth loss and in some cases bone loss.

I would have the patients records up on the computer screen.

We would require:

- medical history
- GP details
- reason for attending practice
- BPE chart
- X-rays if obtained or we would take new X-rays

All information on the computer is saved securely and password protected.

As a dental nurse, we follow General Dental Council (GDC) standard number 4, maintain and protect patients' information. It is particularly important to keep up-to-date and accurate dental records of each appointment as it is a diagnostic tool for clinicians to track a patient's oral health and changes that may occur. It is also a way to prevent wrong treatment being carried out, wrong diagnosis or legal implications.

This includes:

- patient records being up to date, complete, clear, accurate and legible
- their personal details to be kept confidential
- to be able to access their dental records
- their records to be stored securely

standards.gdc-uk.org/pages/principle4/principle4.aspx)

Task 2: plan goals and patient outcomes

Scenario

Following on from the patient's visit, the dentist asks you to plan and create an individualised oral health plan, based on the patient's oral health, in preparation for their return visit to the practice.


Task

You should plan and complete an oral health plan (item E), which provides individualised recommendations for the patient. You must consider:

- the patient's medical and social history
- the patient's lifestyle factors

You should use your notes taken from the dentist and patient conversation from task 1 (item A) and the patient's radiograph (item B).

Student evidence

Patient review and personal care plan			
A summary of the status of your oral health is summarised below with details of when your next review or assessment will be.			
Surname: XXXXXXXX	Dentist's details: XXXXXXXX		
Forename: XXXXXXX	Phone number: XXXXXXXX		
Examination date: XXXXXXXX			
Assessment of Oral Health Status			
	High Risk	Medium Risk	Low Risk
Soft tissue disease assessment			
Gum disease assessment tooth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Tooth</u> decay assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other assessment (details below)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental PA intra oral X-ray taken: findings, show signs of bone loss associated with upper left first molar tooth.			
Overall risk of future dental problems			
Delaying of periodontal and dental treatment will create more breakdown of teeth resulting in more bone loss and decay. Long term prognosis will result in tooth loss with difficulty in replacing gaps due to the lack of bone.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your next review or assessment:			
After your treatment is complete, your next check up with your dentist will be in one week.			
Your type of assessment:			
Full pocket chart assessment with local anaesthetic.			
If you have problems or concerns about your oral health before your next scheduled visit, contact your dental practice.			

Patient review and personal care plan (continued)

Actions for the patient:

Things you can do to maintain or improve your oral health are shown below, followed by what the dental team plans to do.

You have been diagnosed by your dentist with localised periodontitis in relation to the upper left first molar tooth. Periodontitis, also known as gum disease, is a severe gum infection that can lead to tooth loss and other serious health complications. It affects the soft tissues causing them to be swollen, red and bleeding and, without treatment, can destroy the bone that supports your teeth.

I have attached a copy of your dental X-ray: X-ray findings show signs of bone loss (attach item B).



This is a common disease and can easily be treated and kept under control with regular dental and hygienist appointments. We recommend every 6 months.

There are several factors as to why you have developed periodontitis and this plan is personally created to make those changes to get your mouth into a healthier state.

Although regular appointments are highly recommended, the key to good oral hygiene is applying your new dental routine and lifestyle habits at home. This can be challenging at first but over time we will have created a plan that works best for you and your lifestyle.

Below are some of the reasons why periodontitis has developed and what changes are required to get the localised disease under control and prevent further breakdown.

We understand that due to you working shifts, you find it easy to snack and understandably you have a high sugar diet which has a direct effect on the teeth, creating decay. We want to change this habit and create a new meal plan with foods that have different forms of sugar. We class sugars in 2 categories: non-milk extrinsic (NME) sugars and milk extrinsic (ME) sugars. NME sugars are the sugars we want to replace, these sugars are found in foods and drinks like chocolate, sweets and energy drinks.

We want to swap high sugary NME snacks and fizzy drinks for low sugar foods like honey, berries, and water. There are lots of tasty foods that have a low sugar intake. For example, instead of white sugar in your coffee, swap the sugar for a sweetener.

There are many free websites online which I recommend you have a look at for healthy, easy to make recipes with ME sugars.

By changing your high NME sugar diet to ME sugars, you may even see an improvement to your type 2 diabetes. Taking into consideration that you require a stable sugar intake to keep your diabetes under control, here are a few tips that can keep your blood sugar in check.

1. Eat a wide range of foods - including fruit, vegetables, and some starchy foods like pasta.
2. Keep sugar, fat and salt to a minimum.
3. Eat breakfast, lunch and dinner every day - do not skip meals.

We ask that you stop snacking in between meals and keep all treats for mealtimes to avoid the change in the pH levels in the mouth. The change in the pH levels creates a window for decay to develop which means we would like the pH level to stay neutralised for most of the day, apart from mealtimes.

We want to get you into your own oral hygiene routine which will involve brushing twice a day, using interdental brushes or floss for cleaning and regular visits to the dentist and hygienist. We will be asking you to return for a hygiene appointment where they will go through in depth how to maintain your new routine with brushing and interdental techniques. Your dentist or hygienist may prescribe high fluoride toothpastes and mouthwash at these appointments.

As discussed with the dentist, alcohol intake, chewing tobacco and smoking are major contributors to poor oral hygiene and you have been advised to cut down or better to stop both.

Smoking has considerable risk factors linked to oral cancer and combining smoking with alcohol creates an even higher risk of developing oral cancer.

We understand that this is a difficult thing to do, and we have different methods to help you quit and be supported. Help is easily accessible through a referral from the dentist or GP/doctors. As discussed at the appointment, we are referring you to a smoking cessation support group. For more information, please have a look at the NHS website: www.nhs.uk/live-well/quit-smoking/nhs-stop-smoking-services-help-you-quit/

Actions for the dental team

Prevention:

- regular dental and hygiene appointments
- prescription of high fluoride toothpaste and mouthwash by the hygienist or dentist
- diet advice by the dental nurse
- advice on smoking and alcohol intake by the dentist
- referral information by the dental nurse

Treatment:

- hygiene appointments
- full pocket chart assessment by the dentist or hygienist
- routine dental treatment

Maintenance:

- hygiene appointments
- routine dental treatment
- oral hygiene home routine

Referral:

- smoking cessation support group

Source: www.sdcep.org.uk/published-guidance/oral-health-assessment/

Task 3: implementation of oral health/care/treatment plan

Scenario

The patient has been booked in for the treatment for the localised periodontal disease around the upper left 6.

The patient asks a lot of questions before the treatment and hesitates when speaking. Throughout the treatment the patient is sweating and clenching their fists. They worry that they will be judged for their oral health issues.

The dentist has made the decision to refer the patient for smoking cessation and has provided them with their individualised oral health plan.

The patient has asked for an explanation so that they understand the process and would like some further information on their oral health plan. The dentist has asked you to find the closest support group and get the referral form ready. You explain that the written information the patient has requested will be sent via post.

You will be played an audio file of the conversation between the dentist and patient (item F), which provides information to complete both task 3 and task 4. The audio file will be played twice. It is advised that you only listen during the first playback. You will then have a one minute break to make notes. You will then hear the conversation a second and final time, during which you may make further notes.

Task

Analyse the situation detailed above, using your notes, whilst listening to the conversation between the dentist and patient (item F), and consult the NHS quit smoking website (item G).

You should then write a response that:

a) Explains your role as a dental nurse throughout the patient's appointment, in terms of:

- fears and anxieties
- body language
- compliance with GDC standards

b) Explains the referral process and oral health plan to the patient, in terms of:

- what the referral process is
- oral health advice and information, in compliance with GDC standards, on:
 - smoking cessation in the patient's area, whom to refer to, and the pathway chosen
 - recommended improvements based on the areas of concern detailed in the oral health plan

Student evidence

The plan is personally designed to improve your oral health, we are taking all the steps to make this happen. Helping you quit smoking and creating a new oral hygiene routine is a step in the right direction to improvement.

Smoking comes with many health risks, oral cancer is a main factor, but it also can affect your overall health. Smoking has been linked to heart and respiratory diseases which can create other illnesses and cancers of the body. It is never too late to quit, and you are taking all the right steps to a healthier and happier you.

I completely understand that this is a noticeably big event to happen in your life and we are here to help you through the treatment in every way possible. I noticed that your fists were clenched during the treatment. I want you to know that you are not alone, many people are going through similar treatments, and it is completely normal to have anxious thoughts about dental treatment and quitting smoking. Everything that we discuss, and plan is completely confidential, including the referral for smoking. With your consent we can also talk you through each step of the treatment if you feel this would help with the anxiety by completely understanding everything that we are doing and why.

As you have decided that you would like to join the support group, I have found a clinic that is closest to you. What happens now is I will fill out an online referral form to the chosen clinic with your permission, all information given to the clinic is confidential and will not be passed on to any other parties. Once the referral form has been received by the clinic, the service will contact you by a professionally trained expert and they will offer a personal one to one service. Then you will have weekly appointments, motivational support, and prescribed medical treatment, such as nicotine patches or nicotine chewing gum.

The clinic that I found is called Live Well Leicester.

[Address:](#) City Hall, 115 Charles St, Leicester, LE1 1FZ

Opens 9:00am Monday

[Phone:](#) 0116 454 4000

Here is a link for the NHS website for smoking. You can go on and have a look in your own time for more information regarding the support group.

www.nhs.uk/live-well/quit-smoking/

We feel this group will be beneficial for you but there are also other methods to stop as well. "Stoptober" is a popular national campaign that starts on the first of the month and there are applications and groups to join to keep you motivated during the quitting progress.

We also recommend an appointment with our hygienist. At this appointment, she will give the teeth and gums an in depth clean that will remove biofilm, plaque and staining.

Once finished with the treatment, a demonstration of the different forms of interdental cleaning will be given and specific sizes and items will be chosen for you to carry on at home.

We would ask you to start brushing your teeth twice a day for the best prevention of decay forming, once before night shift and once before you go to bed. When brushing, do not rinse with water, just spit out and leave the toothpaste to coat your teeth. You may also like to use a mouthwash at a separate time to brushing, such as at work, if there are any easily accessible sinks.

The technique to use when brushing is large circular motions and not to apply too much pressure and concentrate on a minute on each side, with a total of 2 minutes. Remember to brush your gums as well as your teeth for maximum results.

The dentist or hygienist may prescribe a high fluoride toothpaste (Colgate, Duraphat 5000/2800) and when

brushing not to use water as it will wash away the fluoride required to coat the teeth to prevent decay.

When using a mouthwash, please use this at a separate time to brushing as it will wash away all the fluoride applied to the teeth.

An electrical toothbrush is recommended but a manual is sufficient if the correct technique is being used.

Interdental brushes and floss are to be incorporated into your new oral health routine. A demonstration of these will be given at your next appointment with the hygienist.

Your referral will be processed today and written information regarding the smoking cessation group will be sent to your home address by post as requested.

Task 4: reflection

Scenario

The patient returns to the practice for an appointment to monitor healing. The periodontal disease has improved. The patient has been visiting the smoking cessation support over the past 3 months and has reduced their smoking.

There seems to be a great improvement within the patient's oral health regime from the smoking cessation support and the basic periodontal examination (BPE) recording (item I). The dentist is happy and requests the patient book back in for a 6 monthly check-up to keep on top of everything.

As a result of your involvement with this patient's journey, your line manager has conducted an initial one-to-one meeting to discuss your learning needs. Your line manager has requested that you complete the personal development plan (PDP), ahead of your formal appraisal, as part of your own enhanced continual professional development (ECPD).

Task

Reflecting on your performance throughout all the tasks, you should:

- use the Gibbs reflection cycle (item H) to complete the General Dental Council PDP (item J) to reflect on your involvement with this patient's journey
- referring to your completed PDP, explain the importance of completing and maintaining a PDP for a dental nurse's ECPD

Student evidence

Learning or maintenance need	How does this relate to my field of practice?	Which development outcome does it link to?	What benefit will this have to my work?	How will I meet this learning or maintenance need?	When will I complete the activity?
1. Communicating with and supporting an anxious patient	In practice I deal with very anxious patients. It is quite common and having the right set of skills to communicate clearly with patients is required for patient care.	A, D	Improving my communication and learning how to handle different lifestyles will create a better rapport with patients and create trust.	Online CPD courses for communication with dentistry. Courses for dealing with anxious patients. Learn from experienced staff and how they deal with an anxious patient.	Online course booked to commence in 3 weeks' time for a one week course.
2. Supporting the patient journey by providing referral advice	In practice I use referral forms to help or support patients with complex treatments or support groups. A common one is a smoking support group referral.	A, C	Ensuring I am up to date with the referral process and completing regular training will build my confidence in sharing information with patients. Patients will have confidence in me if I am knowledgeable with my tasks.	Online CPD courses on referrals. In-house training refresher days. Reading dental nurse journals.	Scheduled in-house training with an experienced member of staff.

Learning or maintenance need	How does this relate to my field of practice?	Which development outcome does it link to?	What benefit will this have to my work?	How will I meet this learning or maintenance need?	When will I complete the activity?
3. Managing person centred advice around links between smoking and oral health risks	In practice it is common for me to have sensitive conversations with patients regarding smoking and health risks.	A, C, D	Having a clear understanding of patient relationships/ behaviour and lifestyle is a good starting point when having sensitive conversations. I will be aware of what instructions I can give or not, having a well-educated understanding of the health factors and discussing with patients. Having the right information to discuss will come across as professional and creates best patient care.	Online CPD courses on smoking and health risks. In-house training refresher days. Reading dental nurse journals. Learning from other staff.	Online CPD course booked. Due to finish in January 2022.
4. Any areas that did not go so well	Lack in confidence when verbally discussing dietary advice.	A, D	It will increase my confidence when talking to patients and this will reflect on clear delivery of verbal instructions or advice. This will come across as professional and knowledgeable.	In-house training Online courses	Scheduled in-house training with the lead dental nurse in dietary and post-operative instruction.

Referring to the PDP plan you just completed, explain the importance of completing and maintaining a PDP plan for a dental nurse's professional development.

The PDP plan is created to help me develop and maintain my skills in my role as a dental professional. The plan creates a clear pathway for my progression and will help me with my annual CPD for learning new skills for my current and future areas of work.

Having a PDP plan helps me reflect on the previous year and see where I have improved or may require more focus. PDP are always positive, and it is designed to keep me on track to continue my development as a GDP registered professional.

Feedback is important as is being able to self-evaluate. Throughout my career I am aware that new experiences are positive and are required for growth, learning new skills and building confidence as a dental nurse.

Examiner commentary

This student has demonstrated excellent knowledge of dental nursing and was able to communicate in a highly effective manner. The student demonstrated exceptional accurate knowledge when writing up clinical notes, recording and handling policy of patients and good practice techniques, although the student could have gone into more detail regarding what periodontal disease is and explained in a jargon-free description.

The student applied clinical skills and knowledge when making the personal care plan. The student showed commitment to following all required standards, codes of conduct and health and safety requirements/legislation decisively to maintain a safe and healthy working environment. Although the student demonstrated excellent clinical and patient care skills, I feel they could have elaborated more in the patients' care plan with regards to the patients' health risks linked with smoking.

The student had a friendly and caring approach when carrying out task 3. The student displayed a clear and extensive understanding of how the referral process runs and was able to communicate this very well to the patient.

The student demonstrated an excellent understanding of the importance of a PDP plan. They were able to show an awareness for the need for ongoing development in the dental profession, especially when it came to patient care. The student was able to provide a detailed justification of how personal development is required for continuous learning and is important in the health care profession.

Overall grade descriptors

The performance outcomes form the basis of the overall grading descriptors for pass and distinction grades.

These grading descriptors have been developed to reflect the appropriate level of demand for students of other level 3 qualifications, the threshold competence requirements of the role and have been validated with employers within the sector to describe achievement appropriate to the role.

Grade	Demonstration of attainment
Pass	<p>A pass grade student can:</p> <ul style="list-style-type: none"> • carry out a range of dental procedures to support dental professionals at the chairside, by demonstrating adequate knowledge and skill of: <ul style="list-style-type: none"> ○ current legislation regulations to maintain a safe working environment ○ infection control in relation to health technical memorandum (HTM) 01-07 and hand hygiene ○ instruments and equipment used in a dental surgery, including correct storage in relation to HTM 01-05 ○ anatomy and physiology ○ dental treatments ○ duty of care to patients in relation to GDC Scope of Practice • provide factual information and up-to-date advice to help patients to maintain and improve their oral health, by demonstrating adequate knowledge and skill of: <ul style="list-style-type: none"> ○ oral disease causes and preventions - provide patients with basic diet advice, as well as demonstrating the correct techniques for toothbrushing and interdental aids ○ the role of dental professionals and the healthcare team in respect of patient management (for example, checking the patient understands the treatment plan and ensure further appointments are appropriately booked if required) • accurately record patients' dental information to contribute to their treatment and dental care on dental charts, using technology where appropriate, by demonstrating adequate knowledge and skill of: <ul style="list-style-type: none"> ○ the principles of dental charting and soft tissue assessment including: <ul style="list-style-type: none"> ▪ federation dentaire internationale (FDI) ▪ Palmer notation ▪ BPE ▪ periodontal charting ○ the use of information technology and electronic systems within a dental setting • prepare, mix and handle filling and impression material in an appropriate and timely way by demonstrating adequate knowledge and skill of: <ul style="list-style-type: none"> ○ filling and impression materials ○ ensuring there is ventilation

	<ul style="list-style-type: none"> ○ adjusting room temperature accordingly ○ mixing equal amounts of materials if required <p>Students should demonstrate content covered in all bullet points where applicable to be awarded a pass.</p>
<p>Distinction</p>	<p>A distinction grade student can:</p> <ul style="list-style-type: none"> ● carry out a range of dental procedures to support dental professionals at the chairside, by demonstrating exceptional knowledge and skills of: <ul style="list-style-type: none"> ○ current legislation regulations to maintain a safe working environment and the purpose of regular training and enhanced continuing professional development ECPD ○ infection control in relation to HTM 01-07 and hand hygiene, including social, clinical and aseptic ○ instruments and equipment used in a dental surgery, including correct storage in relation to HTM 01-05 and the purpose of audits ○ anatomy and physiology ○ dental treatments and their respective referral process, if necessary ○ duty of care to patients in relation to GDC Scope of Practice, GDPR, Equality Act 2010 and safeguarding ● provide factual information and up-to-date advice to help patients to maintain and improve their oral health by demonstrating exceptional knowledge and skills of: <ul style="list-style-type: none"> ○ oral disease causes and preventions ● provide patients with: <ul style="list-style-type: none"> ○ basic diet advice ○ demonstration of the correct techniques for toothbrushing and interdental aids ○ potential health risks ○ local health initiatives that will help to maintain and improve oral health (for example, smoking cessation services) ○ information about the role of dental professionals and the healthcare team in respect of patient management, including patients who have determinants of health inequalities in the UK and internationally that support oral health planning and improvement ● accurately record patients' dental information to contribute to their treatment and dental care on dental charts, using technology where appropriate, by demonstrating exceptional knowledge and skills of: <ul style="list-style-type: none"> ○ principles of dental charting, and soft tissue assessment including: <ul style="list-style-type: none"> ▪ FDI ▪ Palmer notation ▪ BPE ▪ periodontal charting ▪ use of information technology and electronic systems within a dental setting

	<ul style="list-style-type: none">▪ effective and contemporaneous note-taking▪ good use of time management• prepare, mix and handle filling and impression material in an appropriate and timely way by demonstrating exceptional knowledge and skills of:<ul style="list-style-type: none">○ filling and impression materials○ ensuring there is ventilation○ adjusting room temperature accordingly○ adjusting the lighting accordingly○ mixing equal amounts of materials if required○ communicating with the dentist, as well as observing their actions, to determine when to prepare materials <p>Students should demonstrate content covered in all bullet points where applicable to be awarded a distinction.</p>
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Owner: Head of Assessment Design

Change History Record

Version	Description of change	Approval	Date of Issue
V1.0	Post approval, updated for publication.		April 2023