

## City & Guilds Level 3 Extended Diploma in Dental Nursing (4238-12)

July 2022 Version 1.4

## **Qualification Handbook**



Meets Skills for Health qualification design criteria

## Qualification at a glance

Subject area	Dental Nursing	
City & Guilds number	4238-12	
Age group approved	16+	
Entry requirements	None	
Assessment	Portfolio of evidence, Synoptic Knowledge Test, Observation of Practice, Interview	
Grading	Pass/Distinction	
Approvals	Fast track available. See section 2	
Support materials	Centre handbook End Point Assessment Pack for Centres	
Registration and certification	Registration is through EPA Pro	

Title and level	City & Guilds number	Qualification number	GLH	ΤQΤ
City & Guilds Level 3 Extended Diploma in Dental Nursing	4238-12	603/7099/3	367	586

Version and date	Change detail	Section
1.0 January 2021 1.1 January 2021	Initial document – draft 'Draft' watermark removed Qualification number added Grading added	All All Qualification at a glance Section 4 Assessment
1.2 February 2021	Skills for Health logo added. Skills for Health approval added	Front page Section 1
	Approval – location of EPA application form	Section 2
	Unit 308 Evidence requirements for AC 6.5 amended to include observation or simulation where observation is not possible.	Section 5
	Formatting corrections	All
1.3 April 2021	Assessment unit (032) added to unit listing table.	Section 1 – Introduction
1.4 July 2022Clarification of Gateway requirementsSection 1 – In		Section 1 – Introduction

## Contents

Quo	alificatior	n at a glance	2
Cor	ntents		4
1	Introduc	tion	6
		Structure	7
		Total Qualification Time	8
2	Centre r	equirements	11
		Approval	11
		Resource requirements	11
		Learner entry requirements	14
		Age restrictions	14
3	Deliverir	ng the qualification	15
		Initial assessment and induction	15
		Support materials	15
		Recording documents	16
4	Assessm	ent	19
		Summary of assessment and grading	19
		Assessment strategy	20
5	Units		24
Unit	301	Preparing for professional practice in dental nursing	25
Unit	t 302 The impact of health and safety legislation on working practices in the		•
		dental setting	32
Unit	303	Prevention and control of infection in the dental setting	38
Unit	nit 304 Dental and regional anatomy, oral health assessments and treatment		47
Unit	305	Recognising and supporting actions during first aid and medical	<u>, 1</u>
UIIII	305	emergencies	55
Unit	306	The safe use of ionising radiation to produce quality radiographic images	60
Unit	307	Provide support for the control of periodontal disease and caries, and the restoration of cavities	65
Unit	308	Provide support during the stages of prosthetic treatments	71
Unit	309	Provide support during the stages of endodontic procedures	78
Unit	310	Provide support during extractions and minor oral surgery	82
Unit	311	Scientific and practical information to support the patient's oral and physical health	86
App	oendix 1	Learner Induction Checklist	93

Appendix 2	Sources of general information	95
Appendix 3	Mapping to standards	96

## 1 Introduction

This document tells you what you need to do to deliver the qualification:

	nis qualification has been designed specifically for dental
re ST in ne As gu	urse apprentices in England. The qualification meets the equirements of the Dental Nurse apprenticeship standard 10113 and Assessment Plan AP03. This qualification includes content and assessments which will meet the eeds of the on-programme AND the End Point assessment requirements within the qualification. This means that apprentices will NOT be awarded the full ualification until both the on-programme AND the End- oint Assessment have been achieved.
cover? pr pr m w Th th	nis qualification allows candidates to learn, develop and ractise the skills required for employment and/or career rogression in Dental Nursing. The content covers and is happed to the Knowledge, Skills and Behaviours (KSBs) vithin the ST0113 Dental Nurse apprenticeship standard. he qualification content also meets the requirements of he General Dental Council (GDC) Learning Outcomes nd is approved by the GDC.
progression are there? approach	nis qualification allows candidates to make an pplication to enter the General Dental Council rofessional register as a Dental Nurse. After being ccepted onto the register, the candidate is then ecognised as a qualified and competent dental nurse.
CC	On gaining further experience as a dental nurse, the andidate may then progress onto the following City & Guilds qualifications:
63	317 Assessment qualifications
65	502 Education and Training qualifications
IL/	M Coaching and Mentoring qualifications
IL/	M Leadership and Management qualifications
qualification with? nu	nis qualification was developed with a group of dental ursing experts from a number of different organisations icluding Employers, FE Colleges, and Private Training roviders.
D	ne qualification has been approved by the General ental Council as meeting the qualification requirements or applicants to the dental nurse professional register.
Th	nis qualification has been approved by Skills for Health.

ls it part of an Yes apprenticeship framework Or initiative?

#### Structure

This qualification has been designed specifically for three purposes:

- to provide a structured programme to meet the Knowledge, Skills and Behaviours (KSBs) of the Dental Nurse apprenticeship standard ST0113
- to reflect the assessment requirements of the Dental Nurse assessment plan AP03, which requires the End Point Assessment to be part of the qualification
- to provide a qualification which meets the requirements of the GDC Learning Outcomes for Dental Nurses, so that the GDC approve the City & Guilds Level 3 Extended Diploma in Dental Nursing as meeting the qualification requirement which supports application to the Dental Nurse professional register.

To achieve the City & Guilds Level 3 Extended Diploma in Dental Nursing, learners must achieve both the on-programme assessments, successfully pass through the apprenticeship Gateway AND achieve the End Point Assessment.

#### On-programme phase

During the on-programme phase of the qualification, the candidate **must** provide evidence which meets all of the Evidence Requirements in every unit.

This evidence must be presented in a portfolio which can be paper or digital.

There **must** be evidence of a minimum of **five** observations of practice in the workplace, which can be holistic in nature and cover a number of units across the qualification. At least **two** of these must be carried out by the assessor, the remaining three may be carried out by an Expert Witness.

All of the Knowledge, Skills and Behaviours must be delivered to the candidate. Evidence must be generated for all of the Learning Outcomes and Assessment Criteria prior to Gateway.

Where specific Learning Outcomes and Assessment Criteria are linked to the End Point Assessment Test, candidates must provide evidence in their portfolio which shows that they have met this knowledge. This portfolio may also provide a useful revision resource for candidates as they prepare for their End Point Assessment Test.

#### Gateway

The gateway requirements for End-Point Assessment (EPA) are:

#### **EPA** Portfolio

• EPA Portfolio must be uploaded. This must contain 8 pieces of evidence as described in detail in the EPA Pack.

#### Integrated qualification on-programme component (032 Portfolio of Evidence)

• Upload a candidate history report / Walled Garden extract showing completion 4238-12 Level 3 Extended Diploma in Dental Nursing, Unit 032 Portfolio of Evidence.

Evidence that the apprentice has met the English and Maths requirements for the EPA.

For full details of all gateway requirements, please refer to the Centre pack for End Point Assessment which can be found in the Support Documents section on EPA Pro.

#### **End Point Assessment**

The End Point Assessment of the Dental Nurse apprenticeship is part of the qualification. The candidate cannot achieve the qualification without being successful in the End Point Assessment, which consists of the following:

- Knowledge Test
- Observation of Practice followed by Question and Answer
- Interview underpinned by a portfolio

The portfolio submitted at Gateway, which will underpin the interview, may contain evidence taken from the on-programme portfolio as long as the evidence meets the specific requirements detailed in the End Point Assessment pack.

For more details of all of these assessments and the requirements of the portfolio which underpins the interview, and how to prepare for the end point assessments, please refer to the End Point Assessment Pack for Centres which can be found in the Support Documents section of EPAPro.

#### **Total Qualification Time**

Total Qualification Time (TQT) is the number of notional hours which represents an estimate of the total amount of time that could reasonably be expected for a learner to achieve and demonstrate the achievement of the level of attainment necessary for the award of a qualification.

TQT is comprised of the following two elements:

- 1) The number of hours that an awarding organisation has assigned to a qualification for Guided Learning, and
- 2) An estimate of the number of hours a learner will reasonably be likely to spend in preparation, study or any other form of participation in education or training, including assessment, which takes place as directed by - but, unlike Guided Learning, not under the immediate guidance or supervision of - a lecturer, supervisor, tutor or other, appropriate provider of education or training.

Title and level	GLH	TQT
City & Guilds Level 3 Extended Diploma in Dental	367	586
Nursing		

#### City & Guilds Level 3 Extended Diploma in Dental Nursing

City & Guilds unit number	Unit title	GLH
301	Preparing for professional practice in dental nursing	36
302	The impact of health and safety legislation on working practices in the dental setting	35
303	Prevention and control of infection in the dental setting	44
304	Dental and regional anatomy, oral health assessments and treatment planning	40
305	Recognising and supporting actions during first aid and medical emergencies	28
306	The safe use of ionising radiation to produce quality radiographic images	32
307	Provide support for the control of periodontal disease and caries, and the restoration of cavities	28
308	Provide support during the stages of prosthetic treatments	28
309	Provide support during the stages of endodontic procedures	24
310	Provide support during extractions and minor oral surgery	24
311	Scientific and practical information to support the patient's oral and physical health	48
Assessme	ent units:	
032	Portfolio of evidence	

(portfolio meeting all evidence requirements of units 301-311)

Mapping to the National Occupational Standards, the Knowledge, Skills and Behaviours and the General Dental Council Learning Outcomes is provided in Appendix 3.

### 2 Centre requirements

#### Approval

If your Centre is approved to offer the qualification 5234-01 Level 3 City & Guilds Diploma in Dental Nursing you can apply for the 4238-12 approval using the **fast track approval form**, available from the City & Guilds website. Centres also need to apply for approval for the End Point Assessment aspect of the qualification by completing the EPA application form, which can be found on the City & Guilds Walled Garden.

Centres should use the fast track form if they meet the requirements set out in the fast track form.

Fast track approval is available for 12 months from the launch of the qualification. After 12 months, the Centre will have to go through the standard Qualification Approval Process. The centre is responsible for checking that fast track approval is still current at the time of application.

To offer this qualification, new centres will need to gain both centre, qualification and EPA approval. Please refer to the City & Guilds Centre Manual for further information.

Centre staff should familiarise themselves with the structure, content and assessment requirements of the qualifications before designing a course programme.

#### **Resource requirements**

#### **Centre staffing**

Staff delivering these qualifications must be able to demonstrate that they meet the following occupational expertise requirements. They should:

be occupationally competent or technically knowledgeable in the area[s] for which they are delivering training and/or have experience of providing training. This knowledge must be to the same level as the training being delivered hold a qualification recognised by the General Dental Council for registration and

hold a qualification recognised by the General Dental Council for registration and demonstrate on-going occupational competence

have recent relevant experience in the specific area they will be assessing and up to date knowledge of the legislation and guidance relating to dental settings have recent relevant experience in the specific area they will be assessing have credible experience of providing training.

See also Section 4 Assessment for further details from the assessment strategy.

Centre staff may undertake more than one role, eg tutor and assessor or internal verifier, but cannot internally verify their own assessments.

#### Assessors and Internal Quality Assurers

Centre staff should hold, or be working towards, the relevant Assessor/Internal Quality Assurer TAQA qualification for their role in delivering, assessing and verifying these qualifications, and/or meet the requirements for assessors and internal quality assurers outlined by the General Dental Council.

Assessors who do not hold the relevant Assessor/TAQA qualification, but have the occupational competence and experience required for delivering the Diploma in Dental Nursing, can be supported by a qualified assessor whilst they work towards an assessor qualification. Assessment decisions made by unqualified assessors must be countersigned by an occupationally competent and qualified assessor who meets the assessor requirements below

#### **Assessor requirements**

Assessors should be one of the following:

- a dentist who holds a qualification recognised by the GDC for registration
- a dental nurse who holds a qualification recognised by the GDC for registration and who can demonstrate on-going occupational competence
- a Dental Care Professional (DCP) who is competent in the area of practice and holds a qualification recognised by the GDC for enrolment or statutory registration.

#### All assessors must be registered dental (care) professionals.

All assessors must have current registration status with the General Dental Council. This is a mandatory requirement.

Centres must check the qualification and registration status of assessors prior to employment and ensure that registration is maintained.

Centres must also ensure they have the correct level of professional indemnity cover for staff, in line with current standards.

Please review the requirements for registration and indemnity cover on the GDC website for clarification **www.gdc-uk.org** 

#### **Expert Witnesses**

The expert witness must have:

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

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

Expert witnesses must be inducted by the centre to familiarise them with the requirements of the qualification and the principles for writing an expert witness testimony.

Centres must obtain and retain records which provide evidence of the Expert Witness' experience and competence which would deem them suitable to give Expert Witness Testimony. The record must confirm which parts/units of the qualification, for which the Expert Witness is competent to provide testimony and evidence of their competence to do so. Centres must also record the Expert Witnesses GDC registration number, which must be current.

It is not necessary for expert witnesses to hold assessor qualifications as a qualified assessor must decide upon the acceptability of all evidence sources, including Expert Witness Testimony.

Expert witness testimony may be used where it is not possible for an assessor to observe an activity in the workplace. Expert witness testimonies have parity with assessor observations but must NOT be used as a substitute for the required number of assessor observations. The minimum number of assessor observations must still be evidenced.

Recording of Expert Witness Testimony Centres should enable Expert Witnesses to provide and present their testimony in an efficient way ensuring that this does not compromise validity and reliability. This could include:

- the use of voice and audio recordings, or
- through remote discussions where the main assessor could scribe the Expert Witness contributions.

Please note that both paper and online forms are permitted.

#### Assessor's role where Expert Witness Testimony is used

Triangulation of Expert Witness Testimony evidence must include the following:

- Learner reflection
- Professional discussion

Work records may also be used an additional source of evidence, the candidate's contribution to the work products will need to be confirmed by the workplace manager, supervisor or Expert Witness. Actual work records must remain in situ in the workplace and be referred to in the assessor records regarding how they were used to inform the assessment decision.

#### **Co-ordinating assessors**

In order that the requirements for occupational competence of assessors and expert witnesses can be met while allowing flexibility of delivery, learners may have more than one assessor or expert witness involved in the assessment process.

Where more than one assessor or expert witness is involved, there must be a named assessor who is responsible for the overall co-ordination of the assessment for each learner.

Co-ordinating assessors will be responsible for co-ordinating, planning and directing assessment for the whole qualification. Co-ordinating assessors must ensure that the best use is made of all available evidence and will make the final judgement of competence in each unit where other assessors or expert witnesses have been involved.

The co-ordinating assessor must be a qualified assessor, who is occupationally competent, registered with the General Dental Council, occupationally experienced and experienced in the assessment of work based learning.

It is expected that co-ordinating assessors will work closely with internal quality assurers to ensure standardised practice and judgements within the assessment process.

#### Internal Quality Assurance (IQA) Staff

Those staff carrying out internal quality assurance roles must be occupationally knowledgeable in the area they are assuring and be qualified to make quality assurance decisions.

#### Learner entry requirements

City & Guilds does not set entry requirements for these qualifications. However, centres must ensure that candidates have the potential and opportunity to gain the qualifications successfully.

#### Age restrictions

City & Guilds cannot accept any registrations for candidates under 16 as this qualification is not approved for under 16s.

## 3 Delivering the qualification

#### Initial assessment and induction

An initial assessment of each candidate should be made before the start of their programme to identify:

if the candidate has any specific training needs,

support and guidance they may need when working towards their qualification[s], any units they have already completed, or credit they have accumulated which is relevant to the qualification[s],

the appropriate type and level of qualification.

We recommend that centres provide an induction programme so the candidate fully understands the requirements of the qualification[s], their responsibilities as a candidate, and the responsibilities of the centre. This information can be recorded on a learning contract. In addition, centres **must ensure that** the candidate completes a dental nursing specific induction as specified in Appendix 1. This should be completed preferably within the first six weeks of training and the signatures of the apprentice, the employer representative and the centre. Further guidance on the GDC induction requirements can be found on the GDC website **www.gdc.org** 

The requirement to demonstrate professional behaviours whilst maintaining accurate up to date records are skills covered in specific Assessment Criteria in some units. These Assessment Criteria must be evidenced to complete these units. It is expected that contributions to record keeping will naturally occur in most if not all of the unit activities. Assessors/Experts Witnesses may record these activities in assessment records to show consistency of practice.

#### **Support materials**

The following resources are available for these qualifications:

Description	How to access	
Fast track approval form	www.cityandguilds.com	
End Point Assessment Pack for Centres	www.cityandguilds.com	
Index of Dental Terminology to support delivery (password available from Walled Garden)	www.cityandguilds.com	

#### **Recording documents**

Candidates and centres may decide to use a paper-based or electronic method of recording evidence.

City & Guilds endorses several ePortfolio systems, including our own, **Learning** Assistant, an easy-to-use and secure online tool to support and evidence learners' progress towards achieving qualifications. Further details are available at: www.cityandguilds.com/eportfolios.

City & Guilds has developed a set of *Recording forms* including examples of completed forms, for new and existing centres to use as appropriate. *Recording forms* are available on the City & Guilds website.

Although new centres are expected to use these forms, centres may devise or customise alternative forms, which must be approved for use by the external verifier, before they are used by candidates and assessors at the centre. Amendable (MS Word) versions of the forms are available on the City & Guilds website.

City & Guilds recommends as best practice learners may need to have experience in and possibly be assessed in another dental practice in order that they are experienced in the variety of patient care and needs. It is the centre's responsibility to ensure that every effort is made to keep student experience as consistent possible across all delivery sites. In order to meet the range of patient care needs specified in the qualification this may mean that a learner in a small practice may need to be facilitated in gaining experience and assessment in other practices.

## The requirements of the General Dental Council for the delivery and quality assurance of the City & Guilds Level 3 Extended Diploma in Dental Nursing

The General Dental Council (GDC) is responsible for the regulation of the dental workforce (Dental Care Professionals) throughout the United Kingdom. Part of this role involves the maintenance of a register of practitioner's who are deemed appropriately qualified and competent to carry out the role of a dental care professional. Dental nurses are required to register with the GDC in order to practice. One of the requirements to gain entry to the register is that the dental nurse must possess a recognised qualification, such as the City & Guilds Level 3 Extended Diploma in Dental Nursing.

City & Guilds has undertaken an approval process with the GDC. The continued approval of the qualification as an entry qualification for the professional register is dependent on City & Guilds and its assessment centres proving that they continue to meet the GDC requirements based on the evidence that was submitted and in any subsequent inspections.

The approval is based on the GDC document Standards for Education – standards and requirements for providers, which can be found on the GDC website.

The Standards for Education are based on **three** areas:

- Standard 1 Protecting patients
- Standard 2 Quality evaluation and review of the programme
- Standard 3 Student assessment

City & Guilds has provided evidence to support the achievement of these standards based on our requirements for centre approval and the contents of the qualification handbook. There are additional requirements relating to GDC approvals, including those outlined below.

Centres offering the City & Guilds Level 3 Extended Diploma in Dental Nursing will need to be able to demonstrate they comply with Standard 1 – Protecting patients at:

- the approval stage (centre and scheme)
- regular external quality assurance monitoring activities
- inspections carried out by the quality assurance team from GDC

#### Specific requirements to meet Standard 1 – Protecting patients

Centres are required to have a written agreement with the learner's employers. This agreement outlines the responsibilities of the employer in the learning and assessment processes. To meet GDC requirements, this agreement must contain:

- reference to a process/written agreement in which there is a decision stating the learner has developed sufficient knowledge and skills to work directly with patients in a safe manner. An exemplar learner induction checklist may be found in Appendix 1
- a requirement that trainee dental nurses working in the surgery are identified as such, to ensure that patients are aware and have been advised on what they need to do if they are concerned in any way about this - to be recorded in learner induction checklist - see Appendix 1
- a stipulation that learners work under the direct supervision of a registered dental care professional until they become qualified as a dental nurse.

#### **Raising concerns**

Where either the centre or student (learner) have concerns regarding patients' safety and treatment, this needs to be raised with the IQA or External Quality Assurer either verbally or in writing. The IQA or EQA must act upon this knowledge following City & Guilds quality assurance procedures.

In addition to the written agreement with the learner's employers, centres must be able to evidence their commitment to delivering training which will equip the dental nurse with the core skills required to work safely in a dental setting. Core skills will include health and safety, infection control and aspects of the role and responsibilities of the dental nurse (including patient care). The core skills should feature in the first four months of a learning programme.

Centres must have a 'Fitness to Practise' policy based on the GDC document Student Fitness to Practise which can be located on the GDC website **www.gdc-uk.org** 

Implementation of professionalism and codes of conduct are imperative and underlie the basic principles of dental nursing. For this reason centres are to ensure that measures are in place to identify, report and act upon concerns raised relating to a student's and staffs behaviour, attitude and conduct whilst in training. Centres are expected to record all concerns and have transparent procedures in place. It is expected that Fitness to Practice policies will run alongside centre procedures when raising concerns. All records must be made available at each activity completed by External Quality Assurers. In event of escalated concerns, centres must contact their allocated External Quality Assurer for advice and guidance.

Centres must also ensure that students have information provided to help guide and inform on actions to take if concerns are identified whilst in training.

#### Student (learner) identification

Centres must ensure that all trainee dental nurses are clearly identifiable to members of the public and other Dental Care Professionals within the dental workplace. An appropriate name badge confirming learners' name and trainee status is to be clear at all times within the clinical workplace. This is a mandatory requirement and it is a centres responsibility to ensure adherence at all times. Each centre is to endure that employers and each clinical workplace are aware of the requirements.

## 4 Assessment

#### Summary of assessment and grading

Pre-Gateway, candidates must:

- collate a portfolio of evidence which meets the evidence requirements detailed in every unit. The portfolio is graded pass/fail.
- provide evidence of at least five observations of practice in the workplace, at least two of which should be based on observation by the assessor. A sixth observation of practice will be carried out by an Independent End-Point Assessor as part of the End-Point Assessment.

Post Gateway, candidates must complete the:

- synoptic knowledge test (distinction/pass/fail)
- interview which is underpinned by a portfolio (distinction/pass/fail)
- observation of practice, followed by a question and answer session (pass/fail)

The overall EPA grading is distinction/pass/fail.

Further details are provided on pages 5-6 of this document and in the End Point Assessment Pack for Centres.

#### Assessment strategy

The assessment strategy for this qualification is based on the Skills for Health Assessment Principles, which can be found on the Skills for Health website https://skillsforhealth.org.uk/info-hub/qualifications-in-england-wales-and-northernireland/

#### Observation

The primary source of evidence for competency-based learning outcomes within this qualification is observation of practice in the workplace, supported by Expert Witness Testimony where appropriate.

There is a minimum requirement of **five** observations of practice in the workplace, at least **two** of which must be carried out by the assessor. The remainder may be carried out by an expert witness.

Please refer to individual unit guidance, as some learning outcomes **must** be observed by an assessor and expert witness testimony will not be accepted as evidence for these specific outcomes.

#### **Expert Witnesses**

Expert witnesses may observe a learner's practice and provide testimony for competence-based units which will have parity with assessor observation for all competence-based units across the qualification. If an assessor is unable to observe the learner, she/he will identify an expert witness in the workplace, who will provide testimony of the learners work based performance.

Where Expert Witness Testimony is used, the assessor must use additional sources of evidence to ensure they are confident to sign off the evidence as proof of candidate competence.

#### Other sources of competence evidence:

Some competence criteria may be difficult to evidence by observation because they may refer to infrequently occurring activities. In the event of this occurring alternative methods of assessment may be used to support the evidence required the examples are:

**Work Products:** These are non-confidential records made, or contributed to, by the learner, eg incident records, maintenance reports. They can be any relevant products of learner's own work, or to which they have made a significant contribution, which demonstrate use and application within their practice.

**Confidential Records:** These may be used as evidence but **must not be placed in the learner's portfolio**. They must remain in their usual location and be referred to in the assessor records in the learner's portfolio eg copies of risk assessments the learner has contributed to.

**Questioning:** Questions may be oral or written. In each case the question and the learner's answer will need to be recorded eg what are your workplace procedures for dealing with risks which you are not able to handle yourself? Questions are asked by assessors and answered by learners to supplement evidence generated by observations and any other evidence type used. Assessors may be able to infer some knowledge and understanding from observing a learner's practice. They may ask questions to confirm understanding and/or cover any outstanding areas.

**Professional Discussion:** This should be in the form of a structured review of the learner's practice with the outcomes captured by means of audiotape or a written summary. These are particularly useful to provide evidence that the learner knows and understands principles which support practice; policies, procedures and legislation, and that the learner can critically evaluate their application eg Describe your responsibilities for health and safety in your workplace. It is highly recommended that Professional Discussion is used throughout the qualification as it will support authentication of other evidence and help prepare the apprentice for their end point assessment.

**Original Certificates:** Certificates of training and records of attendance must be authentic, current and valid. The learner's assessor will also want to check the content of such training so that this can be matched to the standards and check that the learner has retained and can apply learning to practice eg First Aid at Work. It is advised that copies of certificates be used and centres should authenticate the originals. Certificates can be used as supporting evidence but will not be taken as a replacement for evidence derived by the assessor eg simulation.

**Projects / Assignments:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification and occasionally because an event happens rarely or may be difficult to observe. Learners may have already completed a relevant project or assignment which can be mapped to the relevant standards and therefore provide evidence. Evidence from previous training courses and/or learning programmes which they have completed and which demonstrate their professional development may also be used following the agreed Recognition of Prior Learning process.

**Reflective Accounts:** describe learners' actions in particular situations and/or to reflect on the reasons for practising in the ways selected. The learner may be able to use a reflective account to provide some of the performance evidence for a unit eg an account of an occasion when you reported on a high risk hazard. Reflective accounts also provide evidence that learners are able to evaluate their knowledge and practice across the activities embedded in this qualification. Learner reflective accounts may also be used to authenticate or build on other forms of evidence, such as Expert Witness Testimony

**Case Studies:** must be based on real work practice and experiences and will need to be authenticated by an assessor if used as evidence of a competent performance. Theoretical or simulated exercises would only be admissible as evidence of knowledge and understanding.

NB Confidential records must **not** be included in learners' portfolios but must be referred to in the assessment records.

**Witness Testimony:** Colleagues, allied professionals and individuals with whom the learner works with may be able to provide testimony of their performance. The learner's assessor will help to identify the appropriate use of witnesses.

#### Simulation

Simulation is only allowed for specific learning outcomes within the following units:

- **304** Dental and regional anatomy, oral health assessments and treatment planning,
- **305** Recognising and supporting actions during first aid and medical emergencies,
- 308 Provide support during the stages of prosthetic treatments,
- 310 Provide support during extractions and minor oral surgery
- **311** Scientific and practical information to support the patient's oral and physical health.

Simulations have been specified for learning outcomes where the learner may be unable to complete the standards because of the lack of opportunity within their practice i.e.

- where performance is critical but events occur infrequently and yet a high degree of confidence is needed that the learner would act appropriately - for example (i) where there is a high risk of harm or abuse to the individuals, key people in their lives and others, (ii) where events such as medical emergencies (such as cardiac arrest) occur and competence is vital to ensure best practice and results (iii) completing manual charting.
- where performance is critical, happens frequently but where there is risk of harm to the learner or service user in a real situation, for example, dealing with aggressive or abusive situations (although evidence from direct observation should be used where possible).

Where simulations are used they must replicate working activities in realistic (but not necessarily actual) workplace environments.

The evidence must at all times reflect the policies and procedures of the workplace as informed by current legislation, the relevant service standards and codes of practice for the sector.

#### Recognition of prior learning (RPL)

Recognition of prior learning means using a person's previous experience or qualifications which have already been achieved to contribute to a new qualification. Centres must also consider whether any RPL would invalidate a potential candidate from being eligible for an apprenticeship in England. If centres carry out RPL activity it should be noted that the candidates will still have to meet all of the assessment criteria and evidence requirements of the Extended Diploma in Dental Nursing, including the end point assessment.

#### Suggested learning resources

This list is not exhaustive and is current as of January 2021. Centres should ensure that resources used are current at the time of us.

Basic guide to dental instruments Carmen Scheller-Sheridan

Basic Guide to Oral Health Education & Promotion Alison Chapman & Simon Felton New Edition expected in February 2021

Basic Guide to Dental Procedures Carole Hollins

Radiography and Radiology for Dental Care Professionals Eric Whaites

Basic Guide to Infection Prevention and Control in Dentistry Caroline L. Pankhurst & Wilson A. Coulter

Basic Guide to Medical Emergencies in Dental Practice Phillip Jevon

Basic Guide to Anatomy and Physiology for Dental Care Professionals Carole Hollins

Scientific Basis of Oral Health Education Ronnie Levine & Catherine Stillman-Lowe BDA books

Levison's Textbook for Dental Nurses Carole Hollins

Mosby's Textbook of Dental Nursing by Mary Miller and Crispian Scully

Questions and Answers for Diploma in Dental Nursing, Level 3

Carole Hollins

The unit numbers referred to in the above publication do not correspond with the unit numbers in this qualification.

## 5 Units

Each of the following units is structured as follows:

- Unit level
- GLH
- Unit aim
- Learning outcomes
- Assessment criteria
- Range (where needed)
- Evidence requirements

# Preparing for professional practice in dental nursing

Unit level:	Level 3
GLH:	36
Unit aim:	This unit will introduce the roles and responsibilities of a dental nurse, and the essential attributes and behaviours required to work within the legislative framework in this professional role. Additionally, it will enable the dental nurse to develop reflective practice, communication and patient-centred care, skills that are required throughout their career.

#### Learning Outcome

The learner will:

1. Be able to reflect on own current professional practice and identify areas for ongoing improvement using a Personal Development Plan (PDP).

#### Assessment Criteria

The learner can:

- 1.1 Assess own current capabilities and limitations using a SWOT/SWOB or similar type of analysis tool.
- 1.2 Create a PDP.
- 1.3 Develop and maintain the PDP throughout the programme of study.

#### Learning Outcome

The learner will:

2. Understand how a Personal Development Plan (PDP) is used to continuously improve professional knowledge, skills and behaviours.

#### Assessment Criteria

The learner can:

- 2.1 Explain how **effective feedback** helps to develop reflective practice, putting patients interests first.
- 2.2 Explain the benefits of reflecting on own performance.
- 2.3 Explain the purpose of a PDP.
- 2.4 Explain how the PDP will be used with appraisals to reflect on performance and set targets for continuous improvement.
- 2.5 Explain how the PDP will be used after qualification to identify CPD opportunities.

#### Range

#### (AC2.1) Effective feedback

- a) Feedback through appraisal
- b) Internal feedback
- c) External feedback (eg patient feedback)

#### Learning Outcome

The learner will:

3. Understand the roles and responsibilities of a dental nurse.

#### Assessment Criteria

The learner can:

- 3.1 State the role of governing bodies and regulators.
- 3.2 Summarise the scope of practice for a dental nurse.
- 3.3 Summarise how the role of the dental nurse is influenced by each of the principles in the GDC Standards for the Dental Team.
- 3.4 Describe how the following factors influence the role of a dental nurse:
  - a. Safe working practices
  - b. Treating patients and colleagues with dignity, integrity and respect
  - c. Acting professionally and ethically
  - d. Being aware of professional boundaries (eg appropriate use of social media)
  - e. Attitudes and behaviours within and outside of the workplace
  - f. Responsibility for own actions (eg negligence)
  - g. Chaperoning procedures
  - h. Duty of candour
  - i. Fitness to practise
  - j. Annual retention fee

- k. Duty of care
- I. Professional Indemnity
- m. Current Equality legislation
- n. Workplace policies
- o. Networking and collaborating with other dental professionals
- p. Stock maintenance (eg expiry dates, stock rotation).
- 3.5 Describe Direct Access for **dental registrants**.
- 3.6 Describe the roles of other team members in the practice.
- 3.7 Explain the **potential consequences** of unprofessional behaviour.
- 3.8 Describe the process for whistleblowing.
- 3.9 Explain how patient anxieties over **barriers to treatment** could be alleviated.

#### (AC3.1) Governing bodies and regulators

- a) General Dental Council (GDC)
- b) Care Quality Commission (CQC)

#### (AC3.5) Dental Registrants

- a) Dentists
- b) Dental Care Professionals

#### (AC3.7) Potential consequences

- a) Fitness to practise proceedings / sanctioning of the dental registrant
- b) Damaged reputation of the practice / dental profession
- c) Impacts on the patient(s)

#### (AC3.9) Barriers to treatment

- a) Fear
- b) Financial
- c) Availability of dental services
- d) Access to dental facilities

#### Learning Outcome

The learner will:

4. Understand the principles and importance of consent, information governance and safeguarding of patients.

#### Assessment Criteria

The learner can:

4.1 Explain the purpose of gaining valid consent.

- 4.2 Explain the **requirements that must be considered** by the clinician to obtain valid consent.
- 4.3 Explain the principles of information governance within the workplace.
- 4.4 Define the term 'confidentiality' in the dental setting.
- 4.5 Describe the current **legal requirements** for protecting confidential data relating to patients and their treatment.
- 4.6 Describe how patient confidentiality is maintained in the dental setting.
- 4.7 Define the term 'safeguarding' in the dental setting.
- 4.8 Describe the indicators of a potential **safeguarding concern**.
- 4.9 Explain the responsibilities of a dental nurse in safeguarding patients.

#### (AC4.2) Requirements which must be considered

- a) Capacity (Mental Capacity Legislation)
- b) Patients with additional needs
- c) Gillick consent
- d) Montgomery patient-centred approach to consent
- e) Treatment planning and costs

#### (AC4.5) Legal requirements

- a) Current Data Protection legislation
- b) Current General Data Protection regulations
- c) Human rights

#### (AC4.8) Safeguarding concerns

- a) Child Protection
- b) Vulnerable Adults
- c) Health and wellbeing
- d) Prevent Duty and British Values

#### Learning Outcome

The learner will:

5. Understand the importance of appropriate communication in healthcare at all times and through all media.

#### Assessment Criteria

- 5.1 Explain **methods** for communicating effectively and sensitively with all patients.
- 5.2 Explain how effective communication within the dental team contributes to the delivery of safe high-quality care.

- 5.3 Describe how communication methods can be adapted to overcome **barriers** when dealing with patients and colleagues.
- 5.4 Explain the importance of maintaining contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice.

#### (AC5.1) Methods

- a) Verbal
- b) Non-verbal
- c) Written
- d) Electronic

#### (AC5.3) Barriers

- a) Individuals with additional needs
- b) Language barriers
- c) Physical barriers
- d) Emotional barriers
- e) External distractions / environmental factors
- f) Use of terminology
- g) Perception / misunderstanding

#### Learning Outcome

The learner will:

6. Understand the procedures for the handling of complaints in the workplace.

#### Assessment Criteria

The learner can:

- 6.1 Explain how patients' rights to complain are respected.
- 6.2 Describe the complaints procedure in their workplace.
- 6.3 Identify the timeframe for dealing with written patients' complaints.
- 6.4 Explain how complaints can be used constructively to drive continuous improvement.

#### Learning Outcome

The learner will:

7. Be able to communicate appropriately, effectively and sensitively all times and through all media.

#### Assessment Criteria

- 7.1 Be able to communicate effectively and sensitively with all **service users** using a range of **communication methods** and technologies.
- 7.2 Communicate using a **patient centred approach**, being sensitive to patients needs and values.

#### Range

#### (AC7.1) Service users

- a) Patients
- b) Parents/carers
- c) Other members of the dental team (internal/external parties eg laboratories, company representatives).

#### (AC7.1) Communication methods

- a) Written
- b) Verbal
- c) Non-verbal

#### (AC7.2) Patient centred approach

- a) Reassure patients
- b) Provide support and communicate on behalf of the patient when appropriate (advocacy)
- c) Display professionalism, integrity, equality, dignity and respect for individual/additional needs

### Supporting Information

### **Evidence requirements:**

Learning Outcome 1 – The learner must complete a PDP to include a reflection activity for each unit in the qualification.

Learning Outcomes 2, 3, 4, 5, and 6 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcome 7 – observation of practice in the workplace. This outcome should be observed on at least **three** separate occasions. If three direct observations are not achievable, centres may cross-reference the simulation from unit 311 as the third observation.

## The impact of health and safety legislation on working practices in the dental setting

Unit level:	Level 3
GLH:	35
Unit aim:	This unit introduces learners to the health and safety legislation relevant to the dental setting. This includes the understanding of policies and procedures, and the application of safe working practices in the workplace.

#### Learning Outcome

The learner will:

1. Understand health and safety theory.

#### Assessment Criteria

The learner can:

- 1.1 Explain the purpose of health and safety:
  - a) legislation
  - b) policies
  - c) compliance.
- 1.2 Define the terms:
  - a) Hazard
  - b) Risk
  - c) Control measure
  - d) Reasonably practicable
  - e) Near miss
  - f) Incident.
- 1.3 Explain the purpose of risk assessments in practice.
- 1.4 Explain the roles of **governing bodies and regulators** in reducing risks to health and safety in the dental practice.

#### (AC1.4) Governing bodies and regulators

- a) National Sector Regulators: Care Quality Commission (England)
- b) Health and Safety Executive
- c) Office of the Chief Dental Officer

#### Learning Outcome

The learner will:

2. Contribute to safe working practices in the dental setting.

#### Assessment Criteria

The learner can:

- 2.1 Manage hazards by completing a risk assessment document.
- 2.2 Explain safe manual handling.
- 2.3 Participate in an activity that demonstrates understanding of manual handling.
- 2.4 Explain the **ergonomics** within a dental practice.
- 2.5 Describe the different types of **personal protective equipment (PPE)** used in the dental setting.
- 2.6 Summarise **working practices** that could harm self or others and identify safe working methods that have been put in place to meet current guidelines.
- 2.7 Describe how a mercury spillage is managed in the dental setting.
- 2.8 State the importance of using latex-free materials in the dental setting.
- 2.9 Explain how **maintenance and auditing** is carried out to ensure safe working environments.
- 2.10 Describe the process for reporting hazards to health and safety within the dental setting, and to whom.
- 2.11 Reflect on how professional **actions and behaviours** can reduce risks to health and safety.

#### Range

#### (AC2.2) Manual handling

- a) Storage and handling of stock
- b) Individuals
- c) Manual handling of patients during medical emergencies

#### (AC2.4) Ergonomics

a) Seating

- b) Positioning of patient and team
- c) Instrument passing / four-handed dentistry
- d) Aspirator tip placement
- e) Repetitive strain injuries / Musculoskeletal disorders

#### (AC2.5) Personal protective equipment (PPE)

- a) Employee PPE
- b) Patient PPE

#### (AC2.6) Working practices

- a) working with hazardous substances
- b) working with and storing mercury
- c) working with radiation
- d) working with utilities:
  - i. electricity
  - ii. gas leaks
  - iii. flooding
- e) fire safety
- f) working with pressure vessels
- g) infection control:
  - i. use of barrier techniques including zoning
  - ii. maintenance of water lines (Biofilm) (Legionella)
  - iii. National colour-coding system for cleaning of areas
  - iv. cross contamination between zones
  - v. working with sharps (handling and disposal)
  - vi. disposal of waste (eg design of waste containers)
  - vii. uniform during and outside of clinical hours

#### (AC2.9) Maintenance and auditing of:

- a) Oxygen cylinders
- b) Pressure vessels
- c) Emergency drug checks
- d) Fire drills
- e) Legionella testing

#### (AC2.11) Actions and behaviours

- a) Fitness to Practise
- b) Awareness of own health and wellbeing (physical and mental health)
- c) Personal hygiene
- d) Personal presentation
- e) Training

#### Learning Outcome

The learner will:

3. Understand organisational and legal requirements for health and safety within the dental setting.

#### Assessment Criteria

The learner can:

- 3.1 Summarise the purpose of different **legal requirements** for health and safety in a dental setting.
- 3.2 Identify the required vaccinations for dental nurses and their importance.
- 3.3 Explain the **consequences** if health and safety guidance is not followed.

#### Range

#### (AC3.1) Legal requirements

- a) Health & Safety at Work Act
- b) Health and Safety (Sharp Instruments in Healthcare) Regulations
- c) Control of Substances Hazardous to Health (COSHH)
- d) The current Health Technical Memoranda (HTM 07-01) on Management and Disposal of Healthcare Waste
- e) The current Health Technical Memoranda (HTM 01-05) on Decontamination in Primary Care Dental Practices
- f) The current Health Technical Memoranda (HTM 03-01) on Heating and Ventilation of Health Sector Buildings
- g) The current Ionising Radiations Regulations
- h) The current Ionising Radiation (Medical Exposures) Regulations
- i) Local Rules
- j) Portable Appliance Testing (PAT) regulations
- k) The current pressure vessel regulations
- I) The current regulatory standards for medical devices, equipment and materials (eg CE/UKCA mark)
- m) Public liability insurance
- n) Current regulations in reporting of injuries, diseases, dangerous occurrences (eg RIDDOR)

#### AC3.3 Consequences to:

- a) Self
- b) Practice
- c) Patients
- d) Environment

#### Learning Outcome

The learner will:

4. Be able to work safely to protect self, team, and patients.

#### Assessment Criteria

The learner can:

- 4.1 Carry out work in accordance with **organisational and legal requirements** and manufacturer's instructions.
- 4.2 Behave in a way that does not endanger the health and safety of self and others in the dental setting.
- 4.3 Ensure **personal presentation** and PPE protects the health and safety of self and others within the dental setting.
- 4.4 Dispose of waste in a safe manner according to legal and regulatory requirements.

#### Range

#### (AC4.1) Organisational and legal requirements

- a) Health & Safety at Work Act (including use of Personal Protective Equipment)
- b) Control of Substances Hazardous to Health (COSHH)
- c) Environmental Protection Act and the current Health Technical Memoranda (HTM 07-01) on Management and Disposal of Healthcare Waste
- d) Ionising Radiations Regulations, Ionising Radiation (Medical Exposures) Regulations and Local Rules
- e) Health and Safety (Sharp Instruments in Healthcare) Regulations
- f) The current Health Technical Memoranda (HTM 01-05) on Decontamination in Primary Care Dental Practices

#### (AC4.3) Personal presentation

- a) appropriate presentation
- b) use and reuse / disposal of personal protective equipment for patients and staff
- c) donning and doffing procedures, in line with current guidelines
- d) use of clothing and accessories that are suitable to the workplace

#### (AC4.4) Waste

- a) Non-hazardous
- b) Hazardous

**Legal and regulatory requirements:** The current Health Technical Memoranda (HTM 07-01) on Management and Disposal of Healthcare Waste

# Unit 302

# The impact of health and safety legislation on working practices in the dental setting

# Supporting Information

# **Evidence requirements:**

Learning Outcomes 1, 2 and 3 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments, work products and reflective accounts.

Learning Outcome 4 – minimum of **three** observations, evidence to be gathered holistically on separate occasions (simulation is **not** allowed).

A minimum of **two** must be carried out by the assessor. The remainder may be carried out by an Expert Witness.

# Prevention and control of infection in the dental setting

Unit level:	Level 3
GLH:	44
Unit aim:	The aim of this unit is for learners to develop an understanding of the principles of infection control within a dental setting.
	The unit considers infectious diseases, signs and symptoms, and their routes of transmission. The importance of appropriate levels of decontamination and ways to achieve this in the dental setting.
	Learners will develop the practical skills to create and maintain a hygienic and safe clinical environment.

# Learning Outcome

The learner will:

1. Understand the significance of micro-organisms.

#### Assessment Criteria

- 1.1 Describe the structure of **micro-organisms** and prions.
- 1.2 Explain the terms pathogen and non-pathogen.
- 1.3 Describe factors that impact the host's susceptibility to infection.
- 1.4 Summarise the **body's reaction** to **inflammation / infection**.
- 1.5 Summarise how **infectious conditions** affect the body.
- 1.6 Describe the principles of the 'chain of infection'.
- 1.7 Explain the importance of immunisation for dental personnel.

# Range

# (AC1.1) Micro-organisms

- a) Bacteria
- b) Viruses
- c) Fungi

# (AC1.3) Factors that impact the host's susceptibility to infection

- a) Pregnancy
- b) Immunocompromised
- c) Age
- d) Medical treatment / illnesses

# (AC1.4) Body's reaction

- a) Signs and symptoms
- b) Immune system
- c) Pus production

# (AC1.4) Inflammation / infection

- d) Local
- e) Systemic
- f) Acute
- g) Chronic

# (AC1.5) Infectious diseases/conditions

- a) Hepatitis B and C
- b) Human Immuno-deficiency Virus (HIV)
- c) Herpes Simplex
- d) Corona viruses (eg Covid-19)
- e) Mumps
- f) Human Papilloma Virus (HPV)
- g) Impetigo
- h) Tuberculosis (TB)
- i) Meningitis
- j) Influenza
- k) Infectious mononucleosis / Glandular fever ('kissing disease')
- I) Creutzfeldt-Jakob Disease (CJD)
- m) Candida albicans

# Learning Outcome

The learner will:

2. Understand the management and processes of infection control.

# Assessment Criteria

The learner can:

- 2.1 Explain the **routes of transmission** of infectious diseases in the dental setting.
- 2.2 Explain the principles of standard (universal) infection control precautions.
- 2.3 Identify the actions to take to prevent cross-contamination of infectious diseases.
- 2.4 Explain how correct levels of **hand hygiene** can be achieved.
- 2.5 Describe **factors** that influence hand hygiene.
- 2.6 Explain how blood and body fluid spillages are managed.
- 2.7 Describe the relevance of the following documents for quality management of infection control in a dental setting
  - a. The current Health Technical Memoranda (HTM 01-05) on Decontamination in primary care dental practices
  - b. The current Health Technical Memoranda (HTM 07-01) on Management and disposal of healthcare waste
  - c. Practice policies and audit records
  - d. Staff induction policy.

#### Range

#### (AC2.1) Routes of transmission

- a) Routes of entry into the body by direct contact
- b) Routes of entry into the body by indirect contact
- c) Aerosol Generating Procedures (AGP) / splatter / airborne transmission

#### (AC2.4) Hand hygiene

- a) Social
- b) Clinical
- c) Aseptic

#### (AC2.5) Factors

- a) Hand washing products
- b) Hand cleansing products
- c) Nail hygiene
- d) Hand care (drying, moisturising, wound management, dermatitis/allergies)
- e) Dispenser requirements
- f) Facilities and instructions
- g) Jewellery

The learner will:

3. Know the various methods of decontamination and sterilisation.

# Assessment Criteria

The learner can:

- 3.1 Define disinfection and when it is appropriate to use disinfectants.
- 3.2 Define the terms asepsis and sterilisation.
- 3.3 Explain the reason for pre-cleaning and dismantling instruments and equipment prior to sterilisation.
- 3.4 Explain the **procedures**, layout and equipment used to decontaminate instruments and handpieces in line with legal requirements and organisational procedures.
- 3.5 Explain how an autoclave should be loaded to achieve sterilisation.
- 3.6 Describe how **sterilisation** is achieved.
- 3.7 Explain the potential risks of failing to decontaminate equipment and instruments effectively.

# Range

#### (AC3.4) Procedures

- a) Transportation methods to and from the decontamination room
- b) Handwashing
- c) PPE
- d) Manual scrubbing
- e) Ultrasonic bath
- f) Washer disinfector
- g) Inspection using magnification / inspection light
- h) Autoclave cycle and parameters
- i) Principles of zoning
- j) Storage and timescales for clinical and non-clinical environments
- k) Air flow in the decontamination room

# (AC3.6) Sterilisation

- a) N-type autoclave (non-vacuum)
- b) B-type autoclave (vacuum)
- c) Industrial (gamma radiation)

The learner will:

4. Understand the maintenance and validation required on dental instrument reprocessing equipment in line with manufactures guidelines, organisational and legal requirements.

# Assessment Criteria

The learner can:

- 4.1 Describe how **equipment** is successfully validated.
- 4.2 Explain the actions to be taken if validation is unsuccessful.
- 4.3 Describe how **equipment** is checked and routinely maintained.
- 4.4 Explain the importance of documenting validation and maintenance of equipment.

# Range

#### (AC4.1, 4.3) Equipment

- a) Ultrasonic bath
- b) Washer disinfector
- c) N-type autoclave (non-vacuum)
- d) B-type autoclave (vacuum)

# Learning Outcome

The learner will:

5. Be able to apply standard precautions of infection control for clinical procedures.

# Assessment Criteria

- 5.1 Present themselves in the dental setting with the **required standard of personal hygiene**.
- 5.2 Select and don the appropriate **PPE** for the clinical procedure.
- 5.3 Apply the correct management of **infection control procedures** throughout the **dental setting**.
- 5.4 Provide the correct **patient PPE**.
- 5.5 Follow current guidelines to reduce risks of exposure when **doffing PPE**.
- 5.6 Deal with **waste** produced from clinical areas appropriately.

# Range

# (AC5.1) Required standard of personal hygiene

- a) Hair
- b) Nails
- c) Jewellery
- d) Uniform
- e) Footwear
- f) Overall presentation

# (AC5.2) **PPE**

- a) Clinical gloves
- b) Apron/gown
- c) Goggles/visor
- d) Face mask
- e) Heavy-duty gloves

# (AC5.3) Infection control procedures

- a) Handwashing and hand hygiene procedures
- b) Maintain zoning
- c) Use of single-use barriers
- d) Maintain a clean and tidy working environment for clinical dental procedures
- e) Select appropriate cleaning products and disinfectants
- f) Use re-processing equipment

# (AC5.3) Dental setting

- a) Surgery
- b) Decontamination room / designated decontamination area

# (AC5.4) Patient PPE

- a) Protective glasses
- b) Bib

# (AC5.5) Doffing PPE

- a) Disinfect
- b) Storage
- c) Disposal

# (AC5.6) Waste

- a) Clinical
- b) Non-clinical
- c) Sharps

The learner will:

6. Be able to carry out correct protocols for maintenance and validation of dental equipment, in line with manufacturers' guidelines, organisational and legal requirements.

# Assessment Criteria

The learner can:

- 6.1 Follow appropriate cleaning and disinfecting protocols prior to and on completion of work activities in the **dental setting**.
- 6.2 Use disinfectants in a safe manner in line with current legislation.
- 6.3 Ensure that **equipment** is validated, maintained and functioning in line with practice policies and legal requirements.
- 6.4 Complete a cleaning schedule and use a surgery checklist, to demonstrate that the surgery has been prepared in line with organisational policy.

# Range

#### (AC6.1) Dental setting

- a) Surgery
- b) Decontamination room / designated decontamination area

#### (AC6.2) Legislation

- a) Current Health & Safety at Work legislation
- b) Control of Substances Hazardous to Health regulations

#### (AC6.3) Equipment

- a) Dental chair
- b) Operating light
- c) Aspirator
- d) Dental unit water lines (DUWLs)
- e) Spittoon
- f) Instrument cleaning equipment found in the decontamination room

The learner will:

7. Be able to safely carry out correct decontamination and sterilisation processes for dental instruments.

# Assessment Criteria

The learner can:

- 7.1 Safely transport instruments into the decontamination area.
- 7.2 Prepare instruments and handpieces for sterilisation.
- 7.3 Demonstrate the application of correct decontamination workflow and **stages** in line with **organisational and legal requirements**.
- 7.4 Load instruments safely and correctly into the autoclave.
- 7.5 Select the correct autoclave cycle to achieve sterilisation.
- 7.6 Complete a validation test on the autoclave in line with **organisational and legal requirements** and document the evidence.
- 7.7 Store re-processed dental instruments in accordance with **organisational and legal requirements.**

# Range

#### (AC7.3) Stages

- a) Cleaning and disinfection process
- b) Inspection

#### (AC7.3, 7.6, 7.7) Organisational and Legal requirements

- a) Practice policies and procedures
- b) The current Health Technical Memoranda (HTM 01-05) on Decontamination in primary care dental practices

# Supporting Information

# **Evidence requirements:**

Learning Outcomes 1, 2, 3 and 4 - Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcomes 5, 6 and 7 – Evidence to be gathered holistically on separate occasions (simulation is **not** allowed). This must include:

- One surgery activity
- One decontamination process

Evidence should focus on current legislation, guidance and good practice.

Learning Outcome 7 - Centres that cannot meet 7.4, 7.5 and 7.6 due to reliance on off-site/external facilities for instrument decontamination should discuss the following alternatives with their EQA prior to assessment taking place:

- 1. Secure experience for the learner in an alternative work setting where skills in the use of decontamination equipment (autoclave) can be developed and assessment of competence can take place.
- 2. Carry out a simulated activity, observed by the assessor in a learning environment which has the required equipment.
- 3. Set a project for the learner, which is based on current Health Technical Memorandum 01-05 and follow this with a professional discussion
- 4. Carry out a professional discussion regarding previous relevant experience of using decontamination equipment (autoclave)

# Dental and regional anatomy, oral health assessments and treatment planning

Unit level:	Level 3
GLH:	40
Unit aim:	This unit introduces learners to dental and regional anatomy. The unit then focuses on preparing the dental environment and supporting the operator during an oral health assessment.
	Learners will develop understanding of how medical conditions inform treatment planning, and the ability to complete dental charts and maintain contemporaneous records.

# Learning Outcome

The learner will:

1. Understand dental and regional anatomy.

# Assessment Criteria

- 1.1 Describe the following features of permanent teeth:
  - a) Tooth morphology
    - i. Incisor
    - ii. Canine
    - iii. Premolar
    - iv. Molar
  - b) Usual number of roots
  - c) Tooth structure and surrounding tissues
    - i. Enamel
    - ii. Amelodentinal junction
    - iii. Primary dentine
    - iv. Secondary dentine
    - v. Odontoblasts
    - vi. Pulp

- vii. Pulp chamber
- viii. Pulp / root canal
- ix. Apical foramen
- x. Cementum
- xi. Periodontal ligament
- xii. Gingival crevice / gingival sulcus
- xiii. Furcation
- d) Surfaces of anterior and posterior teeth
- 1.2 Compare the morphology of permanent and deciduous teeth.
- 1.3 Describe head and neck anatomy.
- 1.4 Describe the anatomy of the temporomandibular joint.
- 1.5 Explain temporomandibular joint movement and **dysfunction**.
- 1.6 Identify the position and function of the **Maxillary and Mandibular** divisions of the Trigeminal nerve.
- 1.7 Identify the position and function of salivary glands:
  - a) Parotid
  - b) Submandibular
  - c) Sublingual
- 1.8 Describe the composition and function of saliva.
- 1.9 Describe the effects of the following on the salivary glands:
  - a) Ageing
  - b) Mumps
  - c) Mucocoele
  - d) Salivary stone
- 1.10 Identify the position and function of the following muscles:
  - a) Masseter
  - b) Temporalis
  - c) Buccinator
  - d) Orbicularis oris

# Range

# (AC1.3) Head and neck anatomy

- a) Skull
  - i. Temporal bone
  - ii. Zygomatic arch
- b) Maxilla

i.

- Palate
  - a) Hard palate
  - b) Soft palate
  - c) Rugae
  - d) Tuberosity
  - e) Cleft palate

- ii. Maxillary air sinus
- iii. Oropharynx
- c) Mandible
  - i. Coronoid process
  - ii. Ramus
  - iii. Body
- d) Tongue
- e) Lamina dura / compact bone
- f) Spongy / cancellous bone
- g) Alveolar process
- h) Oral mucosa
- i) Philtrum
- j) Fraenum

# (AC1.5) Dysfunction

- a) Trismus
- b) Clicking
- c) Crepitus

#### (AC1.6) Maxillary:

- a) anterior
- b) middle
- c) posterior

# Mandibular:

- d) Inferior Dental Nerve
- e) Mental Nerve
- f) Lingual Nerve

# Learning Outcome

#### The learner will:

2. Understand the recording and processing of oral health assessments.

# Assessment Criteria

- 2.1 Describe the reasons for carrying out extra-oral and intra-oral **methods** of assessment and diagnosis.
- 2.2 Explain the reasons for recording contemporaneous clinical information.
- 2.3 Explain how to process and store dental records, charts, and images in a manner that maintains their confidentiality.
- 2.4 Summarise the legal requirement for patients to access their dental records.
- 2.5 Explain **types of charting** used to record oral health assessments.

- 2.6 Describe why triaging is necessary.
- 2.7 Identify the questions a patient should be asked when making an appointment for an oral health assessment.
- 2.8 Describe the signs, symptoms and management of conditions of the oral mucosa that could be identified during a clinical assessment:
  - a) acute abscess
  - b) denture stomatitis
  - c) angular cheilitis
  - d) aphthous ulcer / traumatic ulcer
  - e) glossitis / fissured / geographic tongue
  - f) frictional keratosis
  - g) pregnancy epulis
- 2.9 Explain how **medical conditions** may affect oral tissues and influence treatment planning.
- 2.10 Explain why various **antibiotics** are prescribed in dentistry.
- 2.11 Describe the main side effects of antibiotics.
- 2.12 Explain the security measures that should be in place when providing the patient with a prescription.
- 2.13 Describe National Institute for Health & Care Excellence (NICE) guidelines for recall intervals between oral health assessment reviews / examinations.

# Range

# (AC2.1) Methods

- a) Visual
- b) Palpation
- c) Using probes for hard and soft tissue examinations
  - i. Sickle
  - ii. Straight
  - iii. Briault
  - iv. WHO / BPE
  - v. 6-point pocket chart (Williams)
- d) Transillumination
- e) Vitality testing
  - i. Cold
  - ii. Heat
  - iii. Electrical
- f) TTP (tender to percussion) technique

# (AC2.2) Clinical information

- a) Dental charts
- b) Basic periodontal examination (bpe) / periodontal chart
- c) Radiographs (to include orthodontics)
- d) Photographs (to include orthodontics)

- e) Study models (to include orthodontics)
- f) Personal details
- g) Social history
- h) Medical history
- i) Consent (with written/signed treatment plan)
- j) Referral letters

# (AC2.5) Types of charting

- a) Palmer Notation charting
- b) FDI (Fédération Dentaire Internationale)
- c) BPE (Basic Periodontal Examination)
- d) Full periodontal charting

#### (AC2.9) Medical conditions

- a) Herpes simplex cold sores
- b) Diabetes: insulin / medication / diet controlled
- c) Epilepsy / anticonvulsant medication
- d) Pregnancy
- e) Bleeding disorders / anticoagulants
- f) Osteoporosis (Bisphosphonate therapy)
- g) Cancer (Head and neck radiotherapy, chemotherapy)

### (AC2.10) Antibiotics

- a) Penicillin
- b) Erythromycin
- c) Clarithromycin
- d) Metronidazole

#### Learning Outcome

The learner will:

3. Understand the information required in an orthodontic assessment.

# Assessment Criteria

- 3.1 Define the **terms** that may be used in an orthodontic assessment.
- 3.2 Describe the Index of Orthodontic Treatment Needs (IOTN) rating system.
- 3.3 Describe the purpose of using **orthodontic appliances**.
- 3.4 Describe the function of an **orthodontic retainer**.

# Range

# (AC3.1) Terms

- a) Overjet
- b) Overbite
- c) Diastema
- d) Spacing
- e) Crowding
- f) Supernumerary tooth
- g) 'Open' bite
- h) Skeletal classification / jaw relationship
  - i. Class i
  - ii. Class ii
  - iii. Class iii
- i) Lip competency
- j) Angle's classification of incisors
  - i. Class i
  - ii. Class ii division 1
  - iii. Class ii division 2
  - iv. Class iii

# (AC3.2) Index of Orthodontic Treatment Needs (IOTN)

- a) Dental health component
- b) Aesthetic component

# (AC3.3) Orthodontic appliances: (eg types of tooth movement)

- a) removable appliance
- b) fixed appliance
- c) functional appliance

# (AC3.4) Orthodontic retainer

- a) removable
- b) fixed

The learner will:

4. Be able to assist during an oral examination and complete dental charts.

# Assessment Criteria

The learner can:

- 4.1 Provide clinical notes to assist the clinician when conducting an oral examination.
- 4.2 Prepare equipment and instruments for the clinician to:
  - a) examine intra-oral soft tissues
  - b) complete a dental charting of teeth
  - c) complete a gingival periodontal scan/pocket depths
- 4.3 Record a permanent dental chart as spoken by the clinician when conducting an oral examination.
- 4.4 Update patient records as directed by the clinician (eg social, medical and dental history) and ensure they are stored securely in line with legislation.

# Learning Outcome

The learner will:

5. Be able to complete hand-written Palmer Notation dental charts

# Assessment Criteria

- 5.1 Produce a hand-written Palmer Notation chart of:
  - a) an adult patient showing common restorative and prosthetic treatments along with decayed, missing and filled anterior and posterior teeth
  - b) a child in the mixed dentition stage showing decayed, missing and filled deciduous teeth, and permanent teeth with fissure sealants

Unit 304

Dental and regional anatomy, oral health assessments and treatment planning

Supporting Information

# Evidence requirements:

Learning Outcomes 1, 2 and 3 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcome 4 – minimum of **one** observation by assessor or expert witness (simulation is **not** allowed)

Learning Outcome 5 – To be assessed by simulation (centre resource is available) which **must** be carried out by the assessor to meet the assessment criteria. The learner must complete hand-written Palmer Notation charts to ensure sufficient evidence of competence in this area.

# Recognising and supporting actions during first aid and medical emergencies

Unit level:	Level 3
GLH:	28
Unit aim:	The aim of this unit is for learners to demonstrate underpinning knowledge and skills to enable the recognition of medical emergencies and to support effective first aid and treatment of medical emergencies.
	Learners will develop an understanding of the role of trained responders including the administration of emergency drugs, use of emergency equipment, record keeping and infection control.

# Learning Outcome

The learner will:

1. Understand the human respiratory and circulatory systems and potential impacts in a medical emergency.

# Assessment Criteria

The learner can:

- 1.1 Describe the function of the human **respiratory and circulatory systems**
- 1.2 Describe the **components** of blood.
- 1.3 Identify **changes in human respiratory and circulatory systems** which may indicate a medical emergency.

# Range

#### (AC1.1) Respiratory and circulatory systems

a) Heart

i. Ventricles

- ii. Atria
- iii. Valves
- iv. Coronary arteries
- v. Pulmonary artery / vein
- vi. Aorta
- vii. Vena Cava
- b) Lungs
  - i. Trachea
  - ii. Alveoli
- c) Blood vessels
  - i. Arteries
  - ii. Veins
  - iii. Capillaries

#### (AC1.2) Components of blood

- a) Plasma
- b) Red blood cells / haemoglobin
- c) White blood cells / immune system

#### (AC1.3) Changes in human respiratory and circulatory systems

- a) Breathing rate
- b) Heart rate

# Learning Outcome

The learner will:

2. Understand the role and responsibilities of a first aider.

# Assessment Criteria

- 2.1 Summarise the role and responsibilities of a qualified first aider.
- 2.2 Describe methods to minimise the risk of infection to self and others during first aid and Cardiopulmonary Resuscitation (CPR) procedures.
- 2.3 Describe how to **establish consent** to provide first aid and CPR.
- 2.4 Identify the contents of the first aid kit.
- 2.5 Describe the **safe working practices** for first aid and medical emergencies in line with organisational and legal requirements.

#### Range

#### (AC2.3) Establish consent

- a) Conscious patient
- b) Unconscious patient

#### (AC2.5) Safe working practices

- a) Training
- b) Accident record keeping
- c) Storage and auditing of emergency drugs

#### Learning Outcome

The learner will:

3. Be able to assess an incident.

#### Assessment Criteria

The learner can:

- 3.1 Conduct a scene survey.
- 3.2 Conduct a primary survey of a casualty.
- 3.3 Give examples of when to call for help.

# Learning Outcome

The learner will:

4. Be able to manage an unresponsive casualty who is breathing normally.

#### Assessment Criteria

- 4.1 Assess a casualty's level of consciousness.
- 4.2 Open a casualty's airway and check breathing.
- 4.3 Assess the casualty for any other injuries.
- 4.4 Demonstrate placing an unresponsive casualty in the recovery position.

The learner will:

5. Be able to manage an unresponsive casualty who is not breathing normally.

# Assessment Criteria

- 5.1 Demonstrate Cardio-Pulmonary Resuscitation (CPR) using a manikin.
- 5.2 Identify the accepted CPR requirements for children and adults as specified by
- the Resuscitation Council UK.
- 5.3 Demonstrate how to safely prepare the casualty for Automatic External Defibrillator (AED).
- 5.4 Demonstrate how to assist a casualty who is choking.

# Learning Outcome

The learner will:

6. Understand the management of medical emergencies in the dental setting.

# Assessment Criteria

The learner can:

- 6.1 Explain the signs and symptoms of **medical emergencies**.
- 6.2 Describe how to manage **medical emergencies** that may occur in the dental setting.
- 6.3 Identify the uses of emergency drugs to treat **medical emergencies**.
- 6.4 Describe the hazard associated with treating a patient in the supine position with an unprotected airway.
- 6.5 Describe how to assist a patient who is choking.

# Range

# (AC6.1, AC6.2, AC6.3) Medical emergencies

- a) Fainting
- b) Hypoglycaemia/hyperglycaemia
- c) Asthma attack
- d) Angina
- e) Myocardial infarction
- f) Cardiac arrest
- g) Epileptic seizure
- h) Anaphylaxis
- i) Stroke

# Recognising and supporting actions during first aid and medical emergencies

Supporting Information

# Evidence requirements:

Learning Outcomes 1, 2 and 6 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcomes 3, 4 and 5 – minimum of **one** simulation. RPL can be used (EFAW/FAW training and assessment within 1 year of completion).

# The safe use of ionising radiation to produce quality radiographic images

Unit level:	Level 3
GLH:	32
Unit aim:	The aim of the unit is to enable the learner to develop the knowledge and skills needed to carry out their duties relating to dental radiography.
	Learners will understand current legislation relating to radiography in addition to the principles and techniques of taking, processing, storing and quality assuring radiographs.
	Learners will also demonstrate the processing method used in their clinical environment.

# Learning Outcome

The learner will:

1. Understand the regulations and hazards associated with ionising radiation.

# Assessment Criteria

The learner can:

- 1.1 Describe the **legal requirements** for ionising radiation within a dental setting.
- 1.2 Summarise the **risks** associated with ionising radiation.
- 1.3 State the purpose of the controlled area.
- 1.4 State the importance of an isolation switch.
- 1.5 State the purpose of lead foil in a traditional radiographic film.
- 1.6 State the purpose of an intensifying screen in an extra-oral cassette.

# Range

#### (AC1.1) Legal requirements

a) The current Ionising Radiation Regulations

- b) The current Ionising Radiation (Medical Exposure) Regulations
- c) Local rules
- d) Radiation protection file

# (AC1.2) Risks

- a) Primary beam
- b) Scatter radiation
- c) Absorption by the patient
- d) Equipment failure
- e) Accidental exposure (to patient or self)

# Learning Outcome

The learner will:

2. Understand the different radiographic images and their diagnostic value.

# Assessment Criteria

The learner can:

- 2.1 Explain the diagnostic value of intra-oral radiographic images.
- 2.2 Explain the diagnostic value of **extra-oral radiographic images.**
- 2.3 Evaluate the advantages of using digital radiography in the dental setting.

# Range

#### (AC2.1) Intra-oral radiographic images

- a) Bitewing
- b) Periapical

#### (AC2.2) Extra-oral radiographic images

a) Dental pantomograph (DPT) / orthopantomograph (OPG) / panoral

# Learning Outcome

The learner will:

3. Understand the processing methods and faults that can occur when processing radiographs.

# Assessment Criteria

The learner can:

- 3.1 Explain **methods** for processing radiographs.
- 3.2 Describe the **reasons** for faults visible on radiographic images.

# Range

#### (AC3.1) Methods

- a) automatic film processing
- b) digital
  - i. direct
  - ii. indirect

#### (AC3.2) Reasons

- a) operator error
- b) processing error
- c) patient error and accessories (eg. dentures, glasses)
- d) equipment error
- e) storage of materials

# Learning Outcome

The learner will:

4. Understand the importance of quality assurance in dental radiography.

# Assessment Criteria

The learner can:

- 4.1 Describe the quality control systems used in dental radiography.
- 4.2 Explain how **quality control systems** are carried out to comply with the principle of ALARP (radiation dose to be As Low As Reasonably Practicable).
- 4.3 Explain the methods of mounting radiographic images.

# Range

#### (AC4.2) Quality control systems

- a) Radiographic image grading process
- b) Step-wedge test
- c) Quality assurance of direct and indirect digital X-ray sensors/plates
- d) IRMER operator requirements

The learner will:

5. Be able to provide support and resources for taking radiographic images.

# Assessment Criteria

The learner can:

- 5.1 Maintain safe working practices throughout radiographic imaging procedures.
- 5.2 Provide the correct **resources** required by the operator for taking radiographic images.
- 5.3 Decontaminate radiographic equipment after use.

# Range

#### (AC5.2) Resources

- a) Holder
- b) Sensor or phosphor plate or film

# Learning Outcome

The learner will:

6. Be able to process a radiographic image.

# Assessment Criteria

- 6.1 Process a radiographic image.
- 6.2 Maintain the quality of the radiographic image during processing.
- 6.3 Store the radiographic image permanently and securely.

Supporting Information

# Evidence requirements:

Learning Outcomes 1, 2, 3 and 4 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcomes 5 and 6 – minimum of **one** observation. This **must** be carried out by the assessor. Simulation is **not** allowed.

# Provide support for the control of periodontal disease and caries, and the restoration of cavities

Unit level:	Level 3
GLH:	28
Unit aim:	This unit will enable learners to gain the knowledge and skills required to prepare the clinical environment and assist with various periodontal and restorative procedures to provide appropriate patient care.

# Learning Outcome

The learner will:

1. Understand the range of procedures, materials, instruments and equipment available for periodontal treatments.

# Assessment Criteria

The learner can:

- 1.1 Explain the importance of removing supra-gingival and sub-gingival calculus by a clinician.
- 1.2 Describe the equipment, instruments and materials used for removing
  - a. supra-gingival calculus
  - b. sub-gingival calculus and infected cementum.
- 1.3 Explain using examples, the term 'plaque trap' / 'stagnation area'.

#### Range

#### (AC1.2) Equipment, instruments and materials

- a) Hand scalers
  - i. Push scaler
  - ii. Periodontal hoe
  - iii. Curette
  - iv. Jacquette/Sickle

- b) Prophylaxis paste
- c) Prophylaxis applicator
- d) Ultrasonic scaler

The learner will:

2. Understand the range of procedures, materials, instruments and equipment available for restorative treatments.

# Assessment Criteria

- 2.1 Describe Black's Classification of Cavities.
- 2.2 Describe the **equipment and instruments** used in the preparation of cavities.
- 2.3 Describe the different types of **matrix system** and how they are used.
- 2.4 Explain the advantages, disadvantages and restrictions associated with **restorative materials** and **lining materials**.
- 2.5 Describe the reasons for the use of
  - a. etchant
  - b. bonding agent
  - c. curing light
  - d. dental amalgamator
- 2.6 Describe the purpose and procedure for placing a fissure sealant.
- 2.7 Explain the importance of effective moisture control throughout restorative treatments.

# Range

# (AC2.2) Equipment and instruments

- a) Curing light
- b) Handpiece
  - i. High speed
  - ii. Slow speed
- c) Types of Bur
  - i. Friction grip/latch grip
  - ii. Diamond/steel
  - iii. Cylinder/tapered/rose-head
- d) Hand instruments
  - i. mirror
  - ii. probes
  - iii. tweezers
  - iv. excavator
  - v. flat plastic

- vi. wards carver
- vii. packer/plugger/condenser
- viii. burnishers
- ix. lining applicators
- e) Restorative material applicators (eg amalgam carrier, composite gun, glass ionomer dispenser)
- f) Items required for finishing (eg stones, strips, discs, articulating paper)

### (AC2.3) Matrix system

- a) Tofflemire matrix holder and band
- b) Siqveland matrix holder and band
- c) Wedges
- d) Transparent strips
- e) Single-use assembled matrix systems

#### (AC2.4) Restorative materials

- a) Amalgam
- b) Composite
- c) Glass ionomer
- d) Temporary cement

#### (AC2.4) Lining materials

- e) Zinc-based liners
- f) Calcium hydroxide
- g) Glass ionomer

# Learning Outcome

The learner will:

3. Be able to support the patient and clinician before, during and after periodontal treatment.

# Assessment Criteria

The learner can:

- 3.1 Provide the clinician with the **patient's records** for the planned treatment.
- 3.2 Select the **equipment**, instruments and materials for the planned treatment.
- 3.3 Aspirate during the treatment, maintaining a clear field of operation.

# Range

#### (AC3.1) Patient's records

a) clinical notes and dental charts

- b) radiographic images
- c) medical history
- d) valid consent

# (AC3.2) Equipment, instruments and materials

- a) handpiece
- b) hand instruments
- c) ultrasonic scaler
- d) items required for finishing (eg polishing brushes/cups, prophylaxis paste)

#### (AC3.2) Treatment

- e) scaling
- f) polishing

# Learning Outcome

The learner will:

4. Be able to support the patient and clinician before, during and after restorative treatment.

#### Assessment Criteria

The learner can:

- 4.1 Provide the clinician with the **patient's records** for the planned treatment
- 4.2 Select the equipment, instruments and materials for the planned treatment
- 4.3 Aspirate during the treatment, maintaining a clear field of operation
- 4.4 Provide the clinician with the correct quantity and consistency of restorative material
- 4.5 Support the patient by monitoring them through the procedure, putting their interests first and offering reassurance.

# Range

#### (AC4.1) Patient's records

- a) clinical notes and dental charts
- b) radiographic images
- c) medical history
- d) valid consent

#### (AC4.2) Equipment, instruments and materials

- a) curing light
- b) handpiece
- c) hand instruments

- d) matrix system
- e) restorative material
- f) items required for finishing (eg burs, strips, discs, articulating paper)

# (AC4.2) Treatment

- g) amalgam restorations
- h) composite restorations
- i) glass ionomer restorations

Unit 307

Provide support for the control of periodontal disease and caries, and the restoration of cavities

Supporting Information

# **Evidence requirements:**

Learning Outcomes 1 and 2 - Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcome 3 – Minimum of **one** observation by the assessor.

Learning Outcome 4 – Minimum of **one** observation\* of **one of the treatments from the range** by the assessor. The restorative treatments that are not observed by the assessor should be evidenced in the learner's portfolio. This evidence may include: expert witness testimony / professional discussion / question and answer / assignments / reflective account.

\*The primary method of assessment **must** be observation. Assessment criteria not sufficiently covered during the observation can be assessed by an appropriate secondary method.

# Provide support during the stages of prosthetic treatments

Unit level:	Level 3
GLH:	28
Unit aim:	The aim of this unit is for the learner develop the knowledge and skills to understand the range of fixed and removable appliances, when and how these are used in dentistry.
	This unit will also reflect the learner's practical skills and understanding of how to prepare the clinical environment for the stages of fixed and removable prostheses, and the appropriate support for patient- centred care.

# Learning Outcome

The learner will:

1. Know the purpose of fixed prostheses used in dentistry and the equipment, instruments and materials used in their construction.

# Assessment Criteria

- 1.1 Explain the difference between fixed and removable prostheses, and why they are used in dentistry.
- 1.2 Describe fixed prosthetic treatments available to replace missing teeth.
- 1.3 Describe why a clinician may choose to carry out a preparation for a **permanent restorative fixed prostheses.**
- 1.4 Explain the use of equipment, instruments, burs and materials during the preparation of a permanent restorative fixed prostheses.
- 1.5 Explain the purpose of a gingival retraction cord.
- 1.6 Describe the different types and purposes of **temporary fixed prostheses**.
- 1.7 Explain the equipment and materials used in the construction of a **temporary fixed prostheses**.
- 1.8 Explain the purpose of a temporary luting cement.

- 1.9 Outline the advice which should be given to a patient with a temporary fixed prostheses.
- 1.10 Explain the different types of permanent luting cements for cementation of **permanent fixed prostheses.**
- 1.11 Describe the equipment, instruments and materials used in the fitting of a permanent fixed prostheses.
- 1.12 Outline the CAD/CAM process used to produce a fixed prosthesis, including capturing the data and production of the prosthesis.

# Range

#### (AC1.2) Treatments available to replace missing teeth

- a) Implants
- b) Bridges
  - i. Conventional retainer / pontic
  - ii. Adhesive (maryland)

#### (AC1.3) Permanent restorative fixed prostheses

- a) Jacket crown (anterior and posterior)
- b) Post crown
- c) Veneer
- d) Inlay / onlay

#### (AC1.6, AC1.7) Temporary fixed prostheses

- a) Pre-formed temporary crown
- b) Chairside-constructed temporary crown
- c) Veneer
- d) Inlay / onlay

#### (AC1.10) Permanent fixed prosthesis

- a) Crown
- b) Veneer
- c) Inlay/onlay
- d) Bridge
  - i. Conventional
  - ii. Adhesive

# Learning Outcome

The learner will:

2. Be able to select and prepare equipment, instruments and materials for fixed prostheses.

# Assessment Criteria

The learner can:

- 2.1 Provide the clinician with the **patient's records** for the planned treatment
- 2.2 Prepare **equipment**, instruments and **materials** for preparation of a permanent fixed prosthesis to include fitting and adjustment of the temporary fixed prosthesis
- 2.3 Maintain a clear field of operation by applying moisture control and protect soft tissues during the clinical procedure
- 2.4 Monitor the patient and provide support to the patient and clinician during the clinical procedure

### Range

### (AC2.1) Patient's records

- a) Clinical notes and dental charts
- b) Radiographic images
- c) Medical history
- d) Valid consent

### (AC2.2) Equipment

- a) Aspirator
- b) Hand instruments
- c) Shade guide
- d) Handpieces

### (AC2.2) Materials

- e) Temporary crown material
- f) Temporary luting cement
- g) Permanent adhesive / luting cement
- h) Articulating paper

### Learning Outcome

The learner will:

3. Know the purpose of removable prostheses used in dentistry and the equipment, instruments and materials used in their construction.

# Assessment Criteria

The learner can:

- 3.1 Describe the types of removable prostheses available:
  - a) Partial
    - i. Acrylic
    - ii. Cobalt-chrome
  - b) Full
  - c) Immediate
- 3.2 Explain the **stages** and the use of **equipment**, **instruments and materials** required when constructing a full acrylic denture.
- 3.3 Explain how the stages would differ when constructing a partial cobalt-chrome or immediate prosthesis.
- 3.4 Describe the benefits of a cobalt-chrome partial denture when compared with an acrylic partial denture.
- 3.5 Explain the additional information the patient will require when an immediate denture is fitted.

# Range

### (AC3.2) Stages

- a) primary impressions
- b) secondary impressions
- c) bite (occlusal) registration
- d) try in
- e) retry
- f) fit
- g) review

### (AC3.2) Equipment, instruments and materials

- h) Stock impression trays
- i) Alginate impression material
- j) Shade guide
- k) Special trays
- I) Elastomer impression material
- m) Wax knife
- n) Willis bite gauge
- o) Le Cron carver
- p) Patient mirror
- q) Articulating paper
- r) Fox's occlusal plane guide
- s) Heat source
- t) Wax
- u) Acrylic trimming burs
- v) Straight handpiece

# Learning Outcome

The learner will:

4. Be able to select and prepare the equipment, instruments and materials for removable prostheses.

# Assessment Criteria

The learner can:

- 4.1 Provide the clinician with the **patient's records** for the planned treatment.
- 4.2 Prepare equipment, instruments and materials for a stage in the construction of a removable prosthesis.
- 4.3 Monitor the patient and provide support to the patient and clinician during the clinical procedure.

### Range

### (AC4.1) Patient's records

- a) clinical notes and dental charts
- b) radiographic images
- c) medical history
- d) consent

# Learning Outcome

The learner will:

5. Understand the materials and equipment used for fixed and removable prostheses.

### Assessment Criteria

The learner can:

- 5.1 Define the terms 'working arch' and 'opposing arch'.
- 5.2 Explain why different **impression materials** are used in the fabrication of prostheses.
- 5.3 Summarise the use of an articulator.
- 5.4 Explain the purpose of the laboratory prescription for a prosthesis.
- 5.5 Explain the relevance of the term 'custom made device'.
- 5.6 Explain the importance and the process of taking an accurate shade for prostheses.
- 5.7 Explain the disinfection and storage requirements for impression materials.

## Range

### (AC5.2, AC5.7) Impression materials

- a) Alginate
- b) Elastomer

## Learning Outcome

The learner will:

6. Be able to select, prepare and mix materials for fixed and removable prostheses.

# Assessment Criteria

The learner can:

- 6.1 Prepare **impression materials** to the correct ratio, consistency and quantity, within handling and setting times relative to the material.
- 6.2 Load **impression materials** on the impression tray.
- 6.3 Disinfect impressions upon removal from the patient's mouth and prepare for transportation to the laboratory, in line with current legal guidelines and practice policy.
- 6.4 Record appropriate and sufficient information on laboratory prescription.
- 6.5 Hand mix a powder/liquid permanent luting cement to the required consistency expected when fitting a crown.

### Range

### (AC6.1, AC6.2) Impression materials

- a) Alginate
- b) Elastomer

# Unit 308 Provide support during the stages of prosthetic treatments

# Supporting Information

# Evidence requirements:

Learning Outcomes 1, 3 and 5 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcomes 2 and 4 – must be observed as separate procedures.

LO2: **one** observation\* carried out by the assessor to cover **one** of the below preparations:

#### One of:

- Crown
- Conventional bridge
- Veneer

LO4: **one** observation\* by the assessor or expert witness to cover **one** of the removable prosthesis stages below:

One of:

- Primary / secondary impressions
- Bite
- Fit

\*The primary method of assessment **must** be observation. Assessment criteria not sufficiently covered during the observation can be assessed by an appropriate secondary method.

Learning Outcome 6 – Assessment criteria 6.1 – 6.4 may be observed during assessment of outcomes 2 and 4. Any assessment criteria not observed can be assessed by simulation. Assessment criteria 6.5 may be assessed during observations in the workplace by an assessor or expert witness, where this is not possible, then it may be assessed using a simulated activity.

# Provide support during the stages of endodontic procedures

Unit level:	Level 3
GLH:	24
Unit aim:	The unit aim is to is to understand the various types of endodontic treatment and their application.
	Learners will gain an understanding of the possible complications associated with providing endodontic treatment.
	This unit will also reflect the learner's practical skills and understanding of how to prepare the clinical dental environment for endodontic treatment and the appropriate support for patient-centred care.

# Learning Outcome

The learner will:

1. Understand endodontic treatments.

### Assessment Criteria

The learner can:

- 1.1 Explain the reasons for performing **endodontic treatment**.
- 1.2 Describe the procedures undertaken when performing **endodontic treatment**.
- 1.3 Describe the **stages** of pulpectomy treatment.
- 1.4 Describe the functions of **equipment**, **instruments and materials** used in pulpectomy treatment.
- 1.5 Explain the **complications** that could occur during pulpectomy treatment, safety measures and your actions.
- 1.6 Describe why moisture control is required in endodontic treatment.
- 1.7 Describe the potential **consequences** following endodontic treatment.

# Range

# (AC1.1, AC1.2) Endodontic treatment

- a) Indirect pulp capping
- b) Direct pulp capping
- c) Pulpotomy
- d) Pulpectomy
- e) Apicectomy

## (AC1.3) Stages

- a) Isolation
- b) Access and location
- c) Measurement and working length
- d) Preparation
- e) Irrigation
- f) Obturation

### (AC1.4) Equipment, instruments and materials

- a) Dental dam kit
- b) Apex locator
- c) Endodontic handpiece
- d) Irrigation needle and syringe
- e) Sodium Hypochlorite irrigation solution
- f) Lubricant
- g) Barbed broaches
- h) Gates-Glidden drills
- i) Endodontic files
- j) Paper points
- k) Medicaments for temporisation
- I) Gutta percha points
- m) Canal sealant
- n) Finger spreader/lateral condenser

### (AC1.5) Complications

- a) Instrument separation (fracture)
- b) Inhalation
- c) Ingestion
- d) Perforation of the apex
- e) Lateral canal
- f) Sclerosis

### (AC1.7) Consequences

- a) Re-treatment
- b) Tooth fracture
- c) Tooth discolouration

### Learning Outcome

The learner will:

2. Be able to prepare the clinical environment for the assistance of the clinician and support of the patient during a pulpectomy procedure.

### Assessment Criteria

The learner can:

- 2.1 Provide the clinician with the **patient's records** for the planned treatment.
- 2.2 Prepare and provide the clinician with equipment, instruments and materials for **stages** of a pulpectomy.
- 2.3 Monitor, support and reassure the patient throughout the treatment, ensuring patient centred care.
- 2.4 Aspirate during the treatment, maintaining a clear field of operation.

# Range

### (AC2.1) Patient's records

- a) Clinical notes
- b) Radiographic images
- c) Medical history
- d) Valid consent

### (AC2.2) Stages

- a) Access
- b) Isolation
- c) Pulp extirpation
- d) Measurement
- e) Preparation
- f) Irrigation
- g) Restoration (temporary or permanent)

Supporting Information

# **Evidence requirements:**

Learning Outcome 1 - Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcome 2 - Minimum of **one** observation to be carried out by the assessor. The primary method of assessment **must** be observation. Assessment criteria not sufficiently covered during the observation can be assessed by an appropriate secondary method.

Simulation is **not** allowed.

# Provide support during extractions and minor oral surgery

Unit level:	Level 3
GLH:	24
Unit aim:	The unit aim is to is to understand extractions and the various types of minor oral surgery including the possible complications associated with providing these treatments.
	This unit will also reflect the learner's practical skills and understanding of how to prepare the clinical dental environment for extractions and the appropriate support for patient-centred care.

### Learning Outcome

The learner will:

1. Know the processes, equipment, instruments and materials for extractions and minor oral surgery.

### Assessment Criteria

The learner can:

- 1.1 Explain the reasons for performing extractions and **minor oral surgery**.
- 1.2 Explain the purpose of raising a mucoperiosteal flap and bone removal during oral surgery.
- 1.3 Describe the functions of **equipment**, **instruments and materials** required for extraction and minor oral surgery.
- 1.4 Explain pre-operative instructions that may need to be followed by the patient prior to treatment.
- 1.5 Explain why post-operative instructions need to be followed by the patient after treatment.
- 1.6 Identify the causes of post-operative **complications** following extraction or minor oral surgery.

# Range

## (AC1.1) Minor oral surgery

- a) Implants
- b) Fraenectomy
- c) Biopsy
- d) Impacted teeth/retained roots
- e) Operculectomy

### (AC1.3) Equipment, instruments and materials

- a) Luxators
- b) Elevators
- c) Extraction forceps
- d) Scalpel
- e) Periosteal elevator
- f) Soft tissue retractor
- g) Spencer Wells
- h) Scissors
- i) Suture with suture needle
- j) Surgical aspirator tip
- k) Surgical hand piece
- I) Surgical burs
- m) Irrigation solution for surgical procedures
- n) Haemostatic agents
- o) Gauze pack

### (AC1.6) Complications

- a) Haemorrhage
- b) Localised osteitis
- c) Nerve damage
- d) Oro-antral communication

### Learning Outcome

The learner will:

2. Prepare the clinical environment and support the patient and clinician during the extraction of a permanent tooth.

# Assessment Criteria

The learner can:

- 2.1 Provide the clinician with the **patient's records** for the planned treatment.
- 2.2 Provide the **equipment**, instruments and materials required for the extraction.
- 2.3 Support the patient during the administration of local anaesthetic.

- 2.4 Monitor the patient during the procedure.
- 2.5 Assist the clinician during the procedure.

### Range

#### (AC2.1) Patient's records

- a) clinical notes and dental charts
- b) radiographic images
- c) medical history
- d) valid consent

#### (AC2.2) Equipment, instruments and materials

- a) Local anaesthetic syringe, needle and cartridge
- b) Luxator and/or elevator
- c) Extraction forceps
- d) Gauze

### Learning Outcome

The learner will:

3. Be able to assist the clinician and support the patient following extractions.

### Assessment Criteria

The learner can:

- 3.1 Provide the patient with appropriate **post-operative instructions** following the procedure.
- 3.2 Check that the patient is fit to leave the surgery following the procedure.

### Range

#### (AC3.1) Post-operative instructions

- a) Oral
- b) Written

# Provide support during extractions and minor oral surgery

Supporting Information

# **Evidence requirements:**

Learning Outcome 1 – Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcomes 2 and 3 – Minimum of **one** observation\* to cover learning outcomes 2 and 3. Can be carried out by the assessor or an Expert Witness. For outcome 3 simulation is allowed where observation is not possible.

\*The primary method of assessment **must** be observation. Assessment criteria not sufficiently covered during the observation can be assessed by an appropriate secondary method.

# Unit 311 Scientific and practical information to support the patient's oral and physical health

Unit level:	Level 3
GLH:	48
Unit aim:	This unit focuses on the theory of causes, progression and management of oral disease, and how this knowledge can be applied in order to provide information to support patients. Learners will develop the knowledge and skills required to provide patients with health information and advice tailored to their needs.

### Learning Outcome

The learner will:

1. Understand the reasons for providing patients with oral health information in response to promotional campaigns.

### Assessment Criteria

The learner can:

- 1.1 Explain the **reasons** for providing patients with oral health information.
- 1.2 Explain methods for delivering oral health messages in line with ethical responsibilities.
- 1.3 Identify recognised national oral health campaigns and describe how they can be implemented to a **target audience**.

### Range

(AC1.1) Reasons

- a) Regional, cultural and social trends, including variations in oral health in the UK
- b) Restricted access to oral healthcare

- c) National initiatives/guidelines (eg Public Health England / Department of Health / National Institute for Health and Care Excellence (NICE))
- d) Standardising patient information

# (AC1.3) Target audience

- a) Patients in the dental setting
- b) Dental care professionals
- c) Other healthcare professionals

# Learning Outcome

The learner will:

2. Understand the scientific basis of oral health

# Assessment Criteria

The learner can:

- 2.1 Explain the composition and **development of plaque**.
- 2.2 Describe the structure and function of the periodontium.
- 2.3 Explain the causes and progression of **oral disease**.
- 2.4 Identify the signs and symptoms of gingival inflammation.
- 2.5 Summarise the differences between gingivitis and periodontitis.
- 2.6 Describe the terms 'false pocket' and 'true pocket'.
- 2.7 Describe the causes of dental caries.
- 2.8 Describe the progression, signs and symptoms of dental caries from demineralisation to a pulpal exposure.
- 2.9 Describe how the following influence dental caries
  - a. pits and fissures
  - b. proximal surfaces
  - c. smooth surfaces
  - d. white spot lesion
  - e. remineralisation (arrested caries)
  - f. gum recession.
- 2.10 Describe the **causes** of non-carious tooth surface loss.

# Range

# (AC2.1) Development of plaque

- a) pellicle
- b) toxins/acids
- c) calcification

### (AC2.3) Oral disease

- a) gingivitis
- b) periodontal disease
- c) acute necrotising ulcerative gingivitis (ANUG)

### (AC2.10) Causes

- a) erosion
- b) abrasion
- c) attrition

### Learning Outcome

The learner will:

3. Understand factors that influence oral and general health

### Assessment Criteria

The learner can:

- 3.1 Describe the principles of preventative oral care when combating
  - a. caries
  - b. periodontal disease
  - c. non-carious tooth surface loss (erosion / abrasion / attrition).
- 3.2 Explain the **impact of diet on oral health**.
- 3.3 Explain the **impact of diet on physical health**.
- 3.4 Explain how **medical history** affects a patient's oral health.
- 3.5 Explain how **social history** affects a patient's oral health.
- 3.6 Explain how lifestyle affects a patient's oral health.
- 3.7 Describe pre-malignant and malignant lesions.
- 3.8 Describe how pre-malignant and malignant lesions are
  - a. diagnosed
  - b. referred
  - c. managed.

### Range

### (AC3.2) Impact of diet on oral health

- a) Sugars: intrinsic, extrinsic, hidden
- b) Sugars: frequency stephan's curve
- c) Acidic drinks eg. Carbonated / non-carbonated
- d) Acidic foods eg. Vinegar / citrus fruits

### (AC3.3) Impact of diet on physical health

- a) Portion size
- b) Nutritional balance
- c) Sugar consumption

### (AC3.4) Medical history

- a) Medication (include medicines containing sugar)
- b) Medical conditions
  - i. GORD (gastro-oesophageal reflux disease)
  - ii. Pregnancy
- c) Eating disorders
- d) Xerostomia
  - i. Medication
  - ii. Head and neck radiation therapy following oral cancer

### (AC3.5) Social history

- a) Family background
- b) Culture
- c) Socio-economic factors

#### (AC3.6) Lifestyle

- a) Environmental issues (include fluoridated water supply)
- b) Habits and recreational activities (include mouthguard)
- c) Sugar-free chewing gum
- d) Alcohol use
- e) Tobacco use
- f) Betel nut / pan habit
- g) Exposure to ultra-violet radiation

### (AC3.7) Lesions

- a) Lichen planus
- b) Leukoplakia
- c) Erythroplakia
- d) Non-healing ulcer
- e) Squamous cell carcinoma

### Learning Outcome

The learner will:

4. Understand the prevention and management of oral diseases.

### Assessment Criteria

The learner can:

- 4.1 Explain oral hygiene techniques and aids used to prevent oral disease
- 4.2 Explain methods of administering **fluoride** both systemically and topically
- 4.3 Explain the advantages and disadvantages of administering fluoride (topically / systemically including overdose / fluorosis)
- 4.4 Describe enamel hypoplasia
- 4.5 Explain how to clean and care for **prostheses**
- 4.6 Explain **post-operative advice** given to patients who have received a fixed or removable orthodontic appliance

# Range

### (AC4.1) Oral hygiene techniques and aids

- a) Toothbrushing
- b) Use of appropriate toothpastes according to patient's needs
  - i. 'over the counter' toothpastes
  - ii. Prescription only medicines
- c) Interdental cleaning aids
- d) Disclosing agents
- e) Mouthwashes
  - i. Fluoride
  - ii. Antibacterial

### (AC4.2) Fluoride

- a) Professionally applied
  - i. Varnish
  - ii. Full-mouth gels
- b) Water supply
- c) Tablets

### (AC4.5) Prostheses

- a) Dentures
  - i. Full
  - ii. Partial (acrylic, cobalt-chrome)
- b) Bridges
- c) Implants

### (AC4.6) Post-operative advice

- a) Care and maintenance of
  - i. Removable appliance
  - ii. Fixed appliance
- b) Caries risk

# Learning Outcome

The learner will:

5. Be able to communicate with patients to deliver standardised oral health information.

## Assessment Criteria

The learner can:

- 5.1 Plan to provide information to a patient on means of developing their skills, knowledge and behaviours for the prevention of oral disease.
- 5.2 Check the identity of the patient, introduce themselves and the purpose of the visit.
- 5.3 Provide information to the patient that is accurate, consistent, and in line with organisational/evidence-based guidelines, as set out in their treatment plan.
- 5.4 Use a range of **resources** to assist with the delivery of the oral health **information**.
- 5.5 Give the patient the opportunity to discuss their problems, treatment plan and ask questions.
- 5.6 Interact with and motivate the patient according to their needs.

### Range

### (AC5.4) Resources

- a) Models / demonstration pieces
- b) Oral hygiene aids
- c) Visual aids
- d) Leaflets
- e) Media educational tools

### (AC5.4) Information:

- f) to address the problems the patient is experiencing.
- g) to explain the consequences if the problems are not addressed.

# Unit 311

Scientific and practical information to support the patient's oral and physical health

# Supporting Information

# **Evidence requirements:**

Learning Outcomes 1, 2, 3 and 4 - Centres may use professional discussion, assessor devised questions, expert witness testimonies, outcomes of research-based activities, assignments and reflective accounts.

Learning Outcome 5 – minimum of **one** simulation\* to cover this learning outcome. The role of the patient must **not** be played by the assessor. The simulated scenario should cover **one** of the following patient types:

- children / young people
- adults
- seniors
- those with additional individual needs (capacity)

\*The primary method of assessment **must** be simulation. Assessment criteria not sufficiently covered during the simulation can be assessed by an appropriate secondary method.

# Appendix 1 Learner Induction Checklist

Name of Employer	
Name of Learner	
Start date of Employment/Placement	

Please confirm that the learner has received the following training and information during the workplace induction period	Date of Completion	Signed by Employer/Workplace Supervisor/Mentor
Immunisation protocols		
Workplace health and safety policies and procedures.		
Workplace COSHH policies and procedures		
Waste disposal training including hazardous waste and disposal of sharps		
Prevention and control of infection control policy		
Personal Protective Equipment (PPE)		
Hand washing		
Decontamination/sterilisation workplace procedures and policies		
Sharps injury protocol		
Reporting of injuries, accidents, hazards and risks, and records required		

Fire procedure	
Radiation protection policy and procedures	
Patient care	
Professionalism	
Confidentiality/data protection	
Patient consent	
Student identification	

I confirm that the learner has an allocated workplace supervisor/mentor.

The supervisor/mentor will be .....

GDC Number.....

All of the above listed activities and training have been completed during the workplace induction. I confirm that records of training completed during the induction process have been maintained and can be presented if requested and are available for external audit.

The above named learner is ready to provide chair side support during general dental procedures and provide support to the operator and patients during general dental procedures.

Signed by Employer/Workplace Supervisor/Mentor		
	GDC Number:	Date:
Signed by learner:		
		Date:
Centre Signature:		
	Position:	Date:

# Appendix 2 Sources of general information

The following documents contain essential information for centres delivering City & Guilds qualifications. They should be referred to in conjunction with this handbook. To download the documents and to find other useful documents, go to the **Centre document library** on **www.cityandguilds.com**.

City & Guilds Centre Manual contains detailed information about the processes which must be followed and requirements which must be met for a centre to achieve 'approved centre' status, or to offer a particular qualification, as well as updates and good practice exemplars for City & Guilds assessment and policy issues. Specifically, the document includes sections on: The centre and qualification approval process Assessment, internal quality assurance and examination roles at the centre Reaistration and certification of candidates Non-compliance Complaints and appeals Equal opportunities Data protection Management systems Maintaining records Assessment Internal quality assurance External quality assurance.

**Our Quality Assurance Requirements** encompasses all of the relevant requirements of key regulatory documents and sets out the criteria that centres should adhere to pre- and post-centre and qualification approval.

Access Arrangements and Special Consideration provides full details of the arrangements that may be made to facilitate access to assessments and qualifications for candidates who are eligible for adjustments in assessment.

The **centre homepage** section of the City & Guilds website also contains useful information on such things as:

Walled Garden: how to register and certificate candidates on line **Events**: dates and information on the latest Centre events **Online assessment**: how to register for e-assessments.

#### Linking to this document from web pages

We regularly update the name of documents on our website, therefore in order to prevent broken links we recommend that you link to our web page that the document resides upon, rather than linking to the document itself.

# Appendix 3 Mapping to standards

### Skills for Health National Occupational Standards (NOS)

The tables below contain the mapping of the NOS to the Level 3 Extended Diploma in Dental Nursing (4238-12)

Unit Title	Links to NOS
Unit 301 Preparing for	SFHGEN Make Use of Supervision
professional practice in dental nursing	SFHGEN22 Communicate effectively with individuals
	SFHGEN1 Ensure personal fitness for work
Unit 302 The impact of health and safety	SFHGEN22 Communicate effectively with individuals
legislation on working practices in the dental setting	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
	SFHIPC7 Safely dispose of healthcare waste, including sharps, to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
	SFHGEN1 Ensure personal fitness for work
Unit 303 Prevention and	SFHGEN22 Communicate effectively with individuals
control of infection in the dental setting	SFHGEN2 Prepare and dress for work in healthcare settings
	SFHDEC3 Prepare, load and operate decontamination equipment
	SFHIPC1 Minimise the risk of spreading infection by cleaning, disinfecting and maintaining environments
	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
	SFHGEN1 Ensure personal fitness for work
	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

	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 304 Dental and regional anatomy, oral	SFHGEN22 Communicate effectively with individuals
health assessments and treatment planning	SFHOH3 Provide chairside support during the assessment of patients' oral health
Unit 305 Recognising and supporting actions during first aid and medical emergencies	SFHGEN22 Communicate effectively with individuals
Unit 306 The safe use of ionising radiation to	SFHGEN22 Communicate effectively with individuals
produce quality radiographic images	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
	SFHOH4 Contribute to the production of dental images
	SFHIPC6 Use personal protective equipment to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 307 Provide support for the control of	SFHGEN22 Communicate effectively with individuals
periodontal disease and caries, and the restoration of cavities	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
	SFHIPC6 Use personal protective equipment to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 308 Provide support	SFHGEN22 Communicate effectively with individuals
during the stages of prosthetic treatments	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
	SFHOH6 Provide chairside support during the provision of fixed and removable prostheses

	۲ ۲
	SFHOH09 Take a direct oral impression of an individual to produce an analogue or cast
	SFHIPC6 Use personal protective equipment to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 309 Provide support	SFHGEN22 Communicate effectively with individuals
during the stages of endodontic procedures	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
	SFHOH7 Provide chairside support during non-surgical endodontic treatment
	SFHIPC6 Use personal protective equipment to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 310 Provide support	SFHGEN22 Communicate effectively with individuals
during extractions and minor oral surgery	SFHOH1 Prepare and maintain environments, instruments, and equipment for clinical dental procedures
	SFHOH8 Provide chairside support during the extraction of teeth and minor oral surgery
	SFHIPC6 Use personal protective equipment to prevent the spread of infection
	SFHIPC2 Perform hand hygiene to prevent the spread of infection
Unit 311 Scientific and	SFHGEN22 Communicate effectively with individuals
practical information to support the patient's oral and physical health	SFHOH2 Offer information and support to individuals about dental services and the protection of oral health
	SFHGEN32 Search information, evidence and knowledge resources and communicate the results
	SFHOH3 Provide chairside support during the assessment of patients' oral health
<u> </u>	

SFHIPC2 Perform hand hygiene to prevent the spread of
infection

### General Dental Council (GDC) Learning Outcomes

The tables below contain the mapping of the GDC Learning Outcomes to the Level 3 Extended Diploma in Dental Nursing (4238-12)

### The unit references to each outcome in this document are not exhaustive.

#### Overarching Outcomes

There are 7 **overarching outcomes** which should be demonstrated throughout education and training. These form the key principles of effective and professional practice, running through all the domains (Clinical, Communication, Professionalism, Management and Leadership), and are the same for all registrant categories.

Unit references
Units 301-310
Units 301, 305
Unit 311
Units 301, 303, 311
Units 301, 303, 305, 311
Units 301, 305
Units 301, 305
CAL

#### 1. Individual patient care

### 1.1 Foundations of practice

The Registrant will be able to apply to the practice of dental nurse principles that derive from the biomedical, behavioural and materials sciences

The registrant will recognise and take account of the needs of different patient groups including children, adults, older people, and those with special care requirements throughout the patient care process

<b>1.1.1</b> Describe the principles of an evidence- based approach to learning, clinical and	Unit 301 LO6
professional practice and decision making	Unit 304 LO2
<b>1.1.2</b> Recognise the range of normal human	Unit 303 LO1
structures and functions with particular reference to oral disease and treatment	Unit 304 LO1
	Unit 305 LO1
<b>1.1.3</b> Recognise abnormalities of the oral cavity and the rest of the patient and raise	Unit 304 LO1, LO2
concerns where appropriate	Unit 307 LO1, LO2
1.1.4 Explain the aetiology and pathogenesis	Unit 307 LO1
of caries and periodontal disease	Unit 311 LO2
<b>1.1.5</b> Describe relevant dental and oral anatomy and their application to patient	Unit 304 LO1 Unit 311 LO2, LO3, LO4
management	
<b>1.1.6</b> Describe relevant and appropriate	Unit 305 LO1
physiology and its application to patient management	
<b>1.1.7</b> Explain the potential routes of transmission of infectious agents in dental	Unit 303 LO1, LO2
practice, mechanisms for the prevention of infection, the scientific principles of	
decontamination and disinfection and their relevance to health and safety	
<b>1.1.8</b> Describe commonly used dental	Unit 308 LO1
biomaterials and their application	
<b>1.1.9</b> Describe psychological and sociological aspects of health, illness, behaviour change and disease	Unit 311 LO3
1.2 Contribution to patient assessment	
<b>1.2.1</b> Explain the need for and record an accurate and contemporaneous patient history	Unit 304 LO2
<b>1.2.2</b> Accurately describe and record and oral health assessment	Unit 304 LO4
<b>1.2.3</b> Accurately record dental charting as carried out by other appropriate registrants	Unit 304 LO4, LO5
<b>1.2.4</b> Recognise the significance of changes in the patient's reported oral health status and take appropriate action	Unit 304 LO2
<b>1.2.5</b> Prepare records, images, equipment	Unit 306 LO5
and materials for clinical assessment	Unit 307 LO3, LO4 Unit 308 LO2, LO4
	Unit 309 LO2

	Unit 310 LO2
	Unit 311 LO1, LO2, LO3, LO4, LO5,
<b>1.2.6</b> Recognise and describe the varying levels of patient anxiety, experience and expectations in respect of dental care	Unit 301 LO3 LO5
<b>1.2.7</b> Discuss the importance of each component of the patient assessment process	Unit 304 LO2
1.5 Responding to the treatment plan	
<b>1.5.1</b> Explain the principles of obtaining valid patient consent	Unit 301 LO4
<b>1.5.2</b> Discuss the role of the dental nurse and other members of the dental team in the treatment plan	Unit 301 LO4
1.7 Patient management	
<b>1.7.1</b> Treat all patients with equality, respect and dignity	Unit 301 LO4 Unit 305 LO2 Unit 308 LO2, LO4 Unit 310 LO2
<b>1.7.2</b> Explain the impact of medical and psychological conditions in the patient	Unit 305 LO1 Unit 311 LO2, LO3
<b>1.7.3</b> Monitor, support and reassure patients through effective communication and behavioural techniques	Unit 301 LO7 Unit 305 LO3, LO4, LO5, LO6 Unit 310 LO2
<b>1.7.4</b> Advise patients on oral health maintenance	Unit 308 LO1, LO3 Unit 310 LO3 Unit 311 LO4, LO5
<b>1.7.5</b> Recognise the need for and make arrangements for follow-up care as prescribed by the operator	Unit 311 LO4, LO5
<b>1.7.6</b> Describe the role of the dental nurse and other members of the dental team in the patient management process	Unit 311 LO1, LO4, LO5
1.8 Patient and public safety	
<b>1.8.1</b> Use the working and clinical environment in a safe and efficient manner	Unit 302 LO4 Unit 303 LO6, LO7 Unit 306 LO5, LO6 Unit 307 LO3, LO4 Unit 308 LO2, LO4, LO6

	Unit 310 LO2, LO3
<b>1.8.2</b> Perform effective decontamination and infection control procedures	Unit 303 LO3, LO4, LO5, LO6, LO7 Unit 306 LO5 Unit 308, LO6
<b>1.8.3</b> Comply with current best practice guidelines	Unit 301 LO3 Unit 302 LO1, LO2, LO4 Unit 303 LO1, LO2, LO3, LO4, LO5, LO6, LO7 Unit 306 LO5, LO6 Unit 307 LO3, LO4 Unit 308, LO2, LO4, LO6 Unit 310 LO2, LO3
<b>1.8.4</b> Recognise and manage medical emergencies	Unit 305 LO1, LO2, LO3, LO4, LO5, LO6
<b>1.8.5</b> Explain the importance of contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice	Unit 301 LO5 Unit 304 LO2
<b>1.8.6</b> Recognise the signs of abuse or neglect and describe local and national systems and raise concerns where appropriate	Unit 301 LO4
1.9 Treatment of acute oral conditions	
<b>1.9.1</b> Recognise and manage patients with acute oral conditions ensuring involvement of appropriate dental team members	Unit 309 LO1 Unit 310 LO1 Unit 311 LO1, LO2, LO3, LO4, LO5
1.10 Health promotion and disease prevention	
<b>1.10.1</b> Describe the principles of preventive care	Unit 309 LO1 Unit 310 LO1 Unit 311 LO1, LO2, LO3, LO4, LO5
<b>1.10.2</b> Provide patients with accurate and effective preventive information in a manner which encourages self-care and motivation	Unit 311 LO1, LO4, LO5
<b>1.10.3</b> Discuss the health risks of diet, drugs and substance misuse, and substances such as tobacco, alcohol and drugs on oral and general health	Unit 311 LO3, LO4
1.11 Contributing to treatment	
<b>1.11.1</b> Prepare and maintain the clinical environment including the instruments and equipment	Unit 303 LO6, LO7 Unit 307 LO3, LO4 Unit 308 LO2, LO4, LO6 Unit 309 LO2

t 307 LO3, LO4 t 308 LO2, LO4, LO6 t 309 LO2		
t 308 LO2, LO4, LO6 t 309 LO2		
t 308 LO2, LO4, LO6 t 309 LO2		
t 309 LO2		
+210100		
t 310 LO2		
t 307 LO4		
† 308 LO2, LO4, LO6 † 309 LO2		
t 310 LO2		
t 306 LO5, LO6		
† 311 LO1, LO3, LO5		
t 301 LO3		
t 311 LO1		
t 311 LO1		
† 311 LO1, LO2, LO3, LO4, LO5		
† 311 LO1, LO4		
COMMUNICATION		
The Registrant must recognise the importance of appropriate communication in healthcare at all times and through all media		
3 Patients, their representatives and the public		
t 301 LO5, LO7		
t 309 LO2		
t 310 LO3		
t 311 LO5		
† 301 LO5, LO7		
† 310 LO1, LO3		
t 311 LO5		

	1	
oral hygiene to patients and their representatives		
<b>3.3</b> Explain the purpose and process of informed consent	Unit 301 LO4	
4 Team and the wider healthcare environment		
<b>4.1</b> Communicate effectively with colleagues from dental and other healthcare professions in relation to the direct care of individual patients, including oral health promotion	Unit 301 LO5, LO7 Unit 304 LO4, LO5 Unit 306 LO5 Unit 310 LO2	
<b>4.2</b> Explain the role of appraisal, training and review of colleagues, giving and receiving effective feedback	Unit 301 LO2	
<b>4.3</b> Give and receive feedback effectively to and from other members of the team	Unit 301 LO1	
5 Generic communication skills		
<b>5.1</b> Communicate effectively and sensitively by spoken, written and electronic methods and maintain and develop these skills	Unit 301 LO2, LO5, LO7 Unit 304 LO4, LO5 Unit 307 LO3, LO4 Unit 310 LO2 Unit 311 LO5	
<b>5.2</b> Explain the importance of and maintain contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice	Unit 302 LO5 Unit 304 LO2 Unit 311 LO5	
<b>5.3</b> Recognise the use of a range of communication methods and technologies and their appropriate application in support of clinical practice*	Unit 301 LO5, LO7 Unit 304 LO4, LO5 Unit 311 LO5	
<b>5.4</b> Recognise and act within the principles of information governance	Unit 301 LO4 Unit 304 LO2 Unit 306 LO6	
PROFESSIONALISM		
6 Patients and the public		
<b>6.1</b> Put patients' interests first and act to protect them	Unit 301 LO2, LO5, LO7 Unit 302 LO2, LO4 Unit 305 LO3, LO4, LO5, LO6 Unit 308 LO2, LO4, LO6 Unit 309 LO2 Unit 310 LO2 LO3	

6.2 Be honest and act with integrity	Unit 301 LO2, LO4
	Unit 305 LO3, LO4, LO5, LO6
	Unit 308 LO2, LO4, LO6
	Unit 309 LO2
	Unit 310 LO2, LO3
<b>6.3</b> Respect patients' dignity and choices	Unit 301 LO3, LO4, LO5, LO7
	Unit 305 LO3, LO4, LO5, LO6
	Unit 308 LO2, LO4, LO6
	Unit 309 LO2 Unit 310 LO2, LO3
A Protect the confidentiality of all personal	
<b>6.4</b> Protect the confidentiality of all personal information	Unit 301 LO4, LO5 Unit 304 LO4
	Unit 306 LO6
4 E Pacagnica and respect the patient's	
<b>6.5</b> Recognise and respect the patient's perspective and expectations of dental care	Unit 301 LO3, LO4 Unit 310 LO3
and the role of the dental team taking into	
account current equality and diversity	
legislation, noting that this may differ in	
England, Scotland, Wales and Northern Ireland	
7 Ethical and legal	
<b>7.1</b> Be familiar with and act within the GDC's	Unit 301 LO3
standards and within other professionally	Unit 302 LO1, LO3
relevant laws, ethical guidance and systems	Unit 306 LO1, LO3
7.2 Recognise and act upon the legal and	Unit 301 LO3, LO5 LO7
ethical responsibilities involved in protecting and promoting the health of individual	Unit 302 LO3
patients	
<b>7.3</b> Act without discrimination and show	Unit 301 LO3, LO5, LO7
respect for patients, colleagues and peers	Unit 305 LO4, LO5, LO6
and the general public	Unit 308 LO4, LO5, LO6
	Unit 309 LO2
	Unit 310 LO3
7.4 Recognise the importance of candour	Unit 301 LO3, LO5, LO7
and effective communication with patients	
when things go wrong, knowing how and	
where to report any patient safety issues which arise	
<b>7.5</b> Take responsibility for and act to raise	Unit 301 LO3
concerns about your own of others' health,	Unit 302 LO2, LO3
behaviour or professional performance as	Unit 305 LO1, LO2, LO3, LO4, LO5, LO6
described in Standards for the Dental Team,	Unit 309 LO1
Principle 8 Raise concerns if patients are at risk	
8 Teamwork	
U IEMIIWUIK	

<b>8.1</b> Describe and respect the roles of dental and other healthcare professionals in the context of learning and working in a dental and wider healthcare team	Unit 301 LO3	
<b>8.2</b> Ensure that any team you are involved in works together to provide appropriate dental care for patients	Unit 302 LO4 Unit 304 LO4, LO5 Unit 305 LO1, LO2, LO3, LO4, LO5, LO6 Unit 306 LO5 Unit 308 LO2, LO4, LO6 Unit 309 LO2 Unit 310 LO2, LO3	
<b>8.3</b> Explain the contribution that team members and effective team working makes to the delivery of safe and effective high quality care	Unit 301 LO5	
9 Development of self and others		
<b>9.1</b> Recognise and demonstrate own professional responsibility in the development of self and the rest of the team	Unit 301, LO1, LO2	
<b>9.2</b> Utilise the provision and receipt of effective feedback in the professional development of self and others	Unit 301, LO1, LO2	
<b>9.3</b> Develop and maintain professional knowledge and competence and demonstrate commitment to lifelong learning	Unit 301, LO1, LO2	
<b>9.4</b> Recognise the impact of new techniques and technologies in clinical practice	Unit 301, LO1, LO2 Unit 305 LO1	
<b>9.5</b> Accurately assess own capabilities and limitations in the interest of high quality patient care and seek advice from supervisors or colleagues where appropriate	Unit 301, LO1, LO2 Unit 305 LO2, LO3	
<b>9.6</b> Describe and demonstrate the attributes of professional attitudes and behaviour in all environments and media	Unit 301 LO3, LO5, LO6 Unit 311 LO5	
MANAGEMENT AND LEADERSHIP		
10 Managing self		
<b>10.1</b> Put patients' interests first and act to protect them	Unit 302 LO4 Unit 306 LO4 Unit 308 LO2, LO4, LO6 Unit 309 LO2 Unit 310 LO2 Unit 311 LO5	
<b>10.2</b> Effectively manage own time and resources	Unit 308 LO2, LO4, LO6 Unit 309 LO3 Unit 310 LO3	

	Unit 311 LO5
<b>10.3</b> Recognise the impact of personal behaviour and manage this professionally	Unit 301 LO2
	Unit 302 LO2, LO3
<b>10.4</b> When appropriate act as an advocate for patient needs	Unit 301 LO7
<b>10.5</b> Take responsibility for personal development planning, recording of evidence and reflective practice	Unit 301 LO1, LO2
<b>10.6</b> Ensure that all aspects of practice comply with legal and regulatory requirements	Unit 301 LO1, LO2, LO3, LO4, LO5, LO6, LO7 Unit 302 LO4 Unit 303 Lo1, LO2, LO3, LO4, LO5, LO6 LO7 Unit 306 LO1, LO4 Unit 308 LO2, LO4, LO6 Unit 309 LO2 Unit 310 LO3
<b>10.7</b> Demonstrate appropriate continuous	Unit 301 LO1 LO2
improvement activities	Unit 305 LO1, LO2, LO3, LO4, LO5, LO6
11 Working with others	
<b>11.1</b> Take a patient-centred approach to working with the dental and wider healthcare team	Unit 301 LO7 Unit 309 LO2, LO4, LO6 Unit 309 LO2 Unit 310 LO2, LO3 Unit 311 LO5
<b>11.2</b> Recognise and respect own and others' contribution to the dental and wider healthcare team and demonstrate effective team working	Unit 301 LO3 Unit 304 LO4 Unit 306 LO5, LO6 Unit 309 LO2 Unit 310 LO2, LO3
<b>11.3</b> Recognise and comply with the team working requirements in the Scope of <i>Practice</i> and <i>Standards</i> documents	Unit 301 LO3 Unit 304 LO4
<b>11.4</b> Describe the impact of Direct Access on each registrant group's scope of practice and its effect on dental team working	Unit 301 LO3
<b>11.5</b> Recognise, take responsibility for and act to raise concerns about own or others' health, behaviour or professional performance as described in <i>The Principles</i> of <i>Raising Concerns</i>	Unit 301 LO3 Unit 302 LO2
12 Managing the clinical and working environr	nent

<b>12.1</b> Recognise and comply with systems and processes to support safe patient care	Unit 302 LO1, LO2, LO3, LO4 Unit 303 LO1, LO2, LO3, LO4, LO5, LO6, LO7 Unit 306, LO5, LO6 Unit 307 LO3, LO4 Unit 309 LO2 Unit 310 LO1, LO2, LO3
<b>12.2</b> Recognise the need for effective recorded maintenance and testing of equipment and requirements for appropriate storage, handling and use of materials	Unit 303 LO1, LO2, LO3, LO4, LO5, LO6, LO7 Unit 306 LO5
<b>12.3</b> Recognise and demonstrate the procedures for handling of complaints as described in Standards for the Dental Team, <i>Principle 5</i>	Unit 301 LO6
<b>12.4</b> Describe the legal, financial and ethical issues associated with managing a dental practice	Unit 301 LO3, LO4, LO6 Unit 302 LO2, LO3 Unit 303 LO2, LO3, LO4, LO5
<b>12.5</b> Recognise and comply with national and local clinical governance and health and safety requirements	Unit 302 LO1, LO2, LO3, LO4 Unit 303 LO1, LO2, LO3, LO4, LO5, LO6, LO7 Unit 304 LO1, LO2, LO3, LO4, LO5 Unit 305 LO1, LO2, LO3, LO4, LO5, LO6 Unit 306 LO1, LO2, LO3, LO4, LO5, LO6

## Apprenticeship Standard ST0113 – Knowledge, Skills and Behaviours (KSB's)

The tables below contain the mapping of the Apprenticeship Standard ST0113 Knowledge, Skills and Behaviours (KSB's) to the Level 3 Extended Diploma in Dental Nursing (4238-12)

Unit	Knowledge, Skills and Behaviours (KSB's) reference
301	K1, K2, K3, K5, K6, K10, K12, K13, K14, K25, K26, K35, K36, K37, K40
	S1, S2, S3, S4, S5, S8, S23, S24, S25, S26, S27 B1, B2
302	K1, K2, K3, K16, K17, K24, K39 S1, S2, S3, S4, S12 B1, B2
303	K1, K2, K3, K4, K9, K18, K19, K20, K21, K24, K30, K38, K39 S1, S2, S3, S4, S5, S12, S14, S15 B1, B2
304	K1, K2, K3, K7, K13, K14, K15, K26 S1, S2, S4, S5, S6, S7, S8, S9, S10, S11, S12, S13, S17, S28 B1, B2
305	K1, K3, K8. K9, K12, K14, K31, K32, K33, K34 S9, S21, S22, S24, S28

	B1, B2
306	K1, K2, K3, K4, K9, K15, K27, K28, K29, K38, K39 S1, S2, S3, S4, S5, S6, S7, S8, S10, S11, S12, S13, S14, S17, S18, S19, S27, S28 B1, B2
307	K1, K3, K12, K15, K22, K23, S1, S2, S3, S4, S5, S6, S7, S8, S10, S11, S12, S13, S16, S28 B1, B2
308	K1, K3, K12, K15, K22, K23, K25 S1, S2, S3, S4, S5, S6, S7, S8, S10, S11, S12, S13, S16, S17, S28 B1, B2
309	K1, K3, K12, K15, K22, K23, K25 S1, S2, S3, S4, S5, S6, S7, S8, S10, S11, S12, S13, S16, S28 B1, B2
310	K1, K3, K12, K15, K22, K23 K25 S1, S2, S3, S4, S4, S5, S6, S7, S8, S9 S10, S11, S12, S13, S16, S28 B1, B2
311	K1, K2, K3, K4, K5, K7, K11, K12, K30, K40 S1, S2, S3, S4, S5, S7, S8, S9, S12, S20, B1, B2

# **Useful contacts**

<b>UK learners</b> General qualification information	E: learnersupport@cityandguilds.com
International learners General qualification information	E: intcg@cityandguilds.com
<b>Centres</b> Exam entries, Certificates, Registrations/enrolment, Invoices, Missing or late exam materials, Nominal roll reports, Results	E: centresupport@cityandguilds.com
Single subject qualifications Exam entries, Results, Certification, Missing or late exam materials, Incorrect exam papers, Forms request (BB, results entry), Exam date and time change	E: singlesubjects@cityandguilds.com
International awards Results, Entries, Enrolments, Invoices, Missing or late exam materials, Nominal roll reports	E: intops@cityandguilds.com
Walled Garden Re-issue of password or username, Technical problems, Entries, Results, e-assessment, Navigation, User/menu option, Problems	E: walledgarden@cityandguilds.com
<b>Employer</b> Employer solutions including, Employer Recognition: Endorsement, Accreditation and Quality Mark, Consultancy, Mapping and Specialist Training Delivery	E: business@cityandguilds.com

Every effort has been made to ensure that the information contained in this publication is true and correct at the time of going to press. However, City & Guilds' products and services are subject to continuous development and improvement and the right is reserved to change products and services from time to time. City & Guilds cannot accept liability for loss or damage arising from the use of information in this publication.

If you have a complaint, or any suggestions for improvement about any of the services that we provide, email: **feedbackandcomplaints@cityandguilds.com** 

#### About City & Guilds

As the UK's leading vocational education organisation, City & Guilds is leading the talent revolution by inspiring people to unlock their potential and develop their skills. We offer over 500 qualifications across 28 industries through 8500 centres worldwide and award around two million certificates every year. City & Guilds is recognised and respected by employers across the world as a sign of quality and exceptional training.

#### City & Guilds Group

The City & Guilds Group is a leader in global skills development. Our purpose is to help people and organisations to develop their skills for personal and economic growth. Made up of City & Guilds, City & Guilds Kineo, The Oxford Group and ILM, we work with education providers, businesses and governments in over 100 countries.

### Copyright

The content of this document is, unless otherwise indicated, © The City and Guilds of London Institute and may not be copied, reproduced or distributed without prior written consent. However, approved City & Guilds centres and candidates studying for City & Guilds qualifications may photocopy this document free of charge and/or include a PDF version of it on centre intranets on the following conditions:

centre staff may copy the material only for the purpose of teaching candidates working towards a City & Guilds qualification, or for internal administration purposes

candidates may copy the material only for their own use when working towards a City & Guilds qualification

The Standard Copying Conditions (see the City & Guilds website) also apply.

Please note: National Occupational Standards are not © The City and Guilds of London Institute. Please check the conditions upon which they may be copied with the relevant Sector Skills Council.

Published by City & Guilds, a registered charity established to promote education and training

City & Guilds 5-6 Giltspur Street London EC1A 9DE www.cityandguilds.com