

# Level 3 Diploma in Dental Nursing (4234-31/93)

## Qualification handbook for centres

600/0168/9

[www.cityandguilds.com](http://www.cityandguilds.com)  
August 2017  
Version 2.3



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Version and date	Change detail	Section
1.3 June 2012	Amendments to range in units 312 – 315	Units
1.4 August 2012	Clarification to layout of unit range	Units
1.5 January 2013	New assessment method added and written paper removed	Assessment
2.0 June 2013	Unit 268 replaced Unit 303	Qualification structure
2.1 October 2013	Removed last registration and certification dates (centres to refer to Walled Garden)	Introduction
2.2 January 2014	Removed out of date references to unit 303	Units, Assessment
2.3 August 2017	Added TQT and GLH details	Introduction to the qualification
	Removed QCF	Throughout

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# 1 Introduction to the qualification

This document contains the information that centres need to offer the following qualification:

<b>Qualification title and level</b>	<b>Level 3 Diploma in Dental Nursing</b>
<b>GLH</b>	291
<b>TQT</b>	460
<b>City &amp; Guilds qualification number</b>	4234-31
<b>Qualification accreditation number</b>	600/0168/9
<b>Last registration date</b>	Consult the Walled Garden/Online Catalogue for last dates
<b>Last certification date</b>	Consult the Walled Garden/Online Catalogue for last dates

The Level 3 Diploma in Dental Nursing focuses on direct chairside work and support during a range of dental treatments: the worker would need to have considerable knowledge and skills in relation to dental equipment, instruments and materials and be able to work as a key member of the oral healthcare team. It is has been built on a number of principles: encourage access by those groups of staff for whom they are designed; promote good quality practice and high quality services; help the sector respond to changing requirements; encourage transfer and progression; be consistent with future legislation for statutory registration.

This qualification was developed to provide valuable accreditation of skills and knowledge for candidates. It replaces the City & Guilds Level 3 NVQ in Dental Nursing 3231-23/83 and the City & Guilds Level 3 Award in Dental Nursing 7393-01 which expires on 31/12/2010.

This qualification was developed in association with the sector skills council Skills for Health (SfH) who were responsible for developing the National Occupational Standards (NOS) and it is based on the curriculum set by the General Dental Council (GDC).

## 1.1 Qualification structure

To achieve the Level 3 Diploma in Dental Nursing, learners must achieve 46 credits from the 15 mandatory units in the table below; in addition to this, learners must achieve an overall pass in the evolve test (4234-317) which is a synoptic test covering the underpinning knowledge in units 312-315.

The table below illustrates the unit titles and the credit value of each unit which will be awarded to candidates successfully completing the required units.

<b>Unit accreditation number</b>	<b>City &amp; Guilds unit number</b>	<b>Unit title</b>	<b>Mandatory/ optional for full qualification</b>	<b>Credit value</b>
D/504/6101	Unit 268	First aid essentials	Mandatory	1
R/600/9413	Unit 301	Ensure your own actions reduce the risk to health and safety (EMPNT0) (Imported)	Mandatory	2
H/601/3465	Unit 302	Reflect on and develop your practice (HSC33) (Imported)	Mandatory	4
F/502/7346	Unit 304	Prepare and maintain environments, instruments, and equipment for clinical dental procedures (OH1)	Mandatory	2
J/502/7347	Unit 305	Offer information and support to individuals on the protection of their oral health (OH2)	Mandatory	4
D/502/7600	Unit 306	Provide chairside support during the assessment of patients' oral health (OH3)	Mandatory	1
R/502/7349	Unit 307	Contribute to the production of dental images (OH4)	Mandatory	3
J/502/7350	Unit 308	Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities (OH5)	Mandatory	3
H/502/7601	Unit 309	Provide chairside support during the provision of fixed and removable prostheses (OH6)	Mandatory	4
K/502/7602	Unit 310	Provide chairside support during non-surgical endodontic treatment (OH7)	Mandatory	2



R/502/7352	Unit 311	Provide chairside support during the extraction of teeth and minor oral surgery (OH8)	Mandatory	3
L/502/7446	Unit 312	Principles of infection control in the dental environment	Mandatory	5
J/502/7459	Unit 313	Assessment of oral health and treatment planning	Mandatory	3
H/502/7503	Unit 314	Dental radiography	Mandatory	4
D/502/7581	Unit 315	Scientific principles in the management of oral health diseases and dental procedures	Mandatory	5
N/A	Unit 317	Principles and theory of Dental Nursing (e-volve assessment)	Mandatory ( unit 316-written paper -discontinued)	N/A

## Total Qualification Time

Total Qualification Time (TQT) is the total amount of time, in hours, expected to be spent by a Learner to achieve a qualification. It includes both guided learning hours (which are listed separately) and hours spent in preparation, study and assessment.

Title and level	GLH	TQT
Level 3 Diploma in Dental Nursing	291	460

## 1.2 Opportunities for progression

On completion of this qualification candidates may progress into employment or to the following qualifications:

- specialist dental nursing roles
- dental hygiene or therapy
- dental technology
- teaching dental nursing
- dental practice management.

Dental nurses may also progress into other aspects of dental training like hygienists and therapists. Dental nurses who wish to progress into dentistry would have to complete an access course if they did not possess the requisite grades at Advanced Level.

## 2 Centre requirements

This section outlines the approval processes for Centres to offer this qualification and any resources that Centres will need in place to offer the qualifications including qualification-specific requirements for Centre staff.

### **Centres already offering City & Guilds qualifications in this subject area**

Centres already approved to offer the following qualifications:

- City & Guilds Level 3 In Dental Nursing (NVQ) 500/2906/X
- City & Guilds Level 3 Award in Dental Nursing 500/2907/1

are eligible for automatic approval for the new Level 3 Diploma in Dental Nursing (4234-31).

Centres may apply to offer the new qualifications using the fast track form

- providing there have been no changes to the way the qualifications are delivered, and
- if they meet all of the approval criteria specified in the fast track form guidance notes.

### **Centres not yet approved by City & Guilds**

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

## **2.1 Resource requirements**

### **Human resources**

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

- be technically competent in the area for which they are delivering training and/or have experience of providing training. This knowledge must be at least to the same level as the training being delivered
- have recent relevant experience in the specific area they will be assessing
- be occupationally knowledgeable in the area(s) of [e.g. Mental Health] for which they are delivering training. This knowledge must be at least to the same level as the training being delivered
- have credible experience of providing training.

Centre staff may undertake more than one role, e.g. tutor and assessor or internal verifier, but must never internally verify their own assessments.

### **Assessors and internal verifiers**

Centre staff should hold, or be working towards, the relevant Assessor/Verifier (A/V) units for their role in delivering, assessing and verifying this qualification, or meet the relevant experience requirements outlined above.

## Assessors

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
- those Dental Care Professionals Complementary to Dentistry (DCPs) who are competent in the area of practice to which the national occupational standards apply and who hold a qualification recognised by the GDC for enrolment or statutory registration when it comes into effect (e.g. dental hygienists, dental therapists, dental technologists)
- those professionals who are competent in the area of practice to which the national occupational standards apply and who hold a qualification recognised by another UK regulatory body in health and social care (e.g. anaesthetists, radiographers).

Assessors who are not yet qualified against the appropriate 'A' competences but have the necessary occupational competence and experience, can be supported by a qualified assessor who does not necessarily have the occupational expertise or experience, but must have occupational competence across some competences, a relevant occupational background and an appropriate assessor qualification.

Centres must check the qualification and **registration status** of assessors and where necessary with their External Verifier, agree an action plan to ensure that the requirements (**registered with the GDC**) of the assessment strategy are met.

The General Dental Council (GDC) require assessors who are not GDC registered to be in the process of updating their qualifications, where necessary, in order to gain access to the register. **All assessors should be registered dental professionals.**

### **Advice for dental nurse assessors who are not currently registered with the General Dental Council**

*What is required for GDC registration?*

You must hold a qualification approved by the GDC in order to be eligible to apply for registration. See GDC website for clarification e.g. Dental Nurse NVQ Level 3, Dental Nursing Level 3, National Certificate for Dental Nurses, Diploma in Dental Hygiene & Therapy **[www.gdc-uk.org/potential+registrant/](http://www.gdc-uk.org/potential+registrant/)**

### **Advice for dental nurse assessors who are not currently registered with the General Dental Council and do not have a recognisable qualification**

Assessors must make arrangements to complete a recognisable qualification, within a set timescale, as agreed with their External Verifier. This is in accordance with the GDC recommendations. A suitable period should be agreed which should be no longer than 18 months.

During this period of training an assessor can continue to assess as part of their normal job role as long as they do not leave their position within their centre and maintain their occupational competency.

## **Co-ordinating assessors**

In order that the requirements for occupational competence of assessors and expert witnesses can be met while allowing flexibility of delivery, candidates 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 candidate.

Co-ordinating assessors will be responsible for integrating, 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, occupationally experienced and experienced in the assessment of NVQs.

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

## **Expert witnesses**

The use of expert witnesses is encouraged as a contribution to the assessment of evidence of the candidate's competence.

The expert witness must have:

- the same vocational expertise as assessors
- a working knowledge of NOS for the competences on which their expertise is based
- current expertise and occupational competence i.e. within the last two years, either as a dental nurse, dental practitioner or oral health manager. 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 candidate in meeting the National Occupational Standards identified in any given unit. This testimony must directly relate to candidate performance in the work place which has been seen by the expert witness.

All expert witnesses must be inducted by the centre so that they are familiar with the standards for those units for which they are to provide expert witness testimony. They must also understand the centre's recording requirements and will need guidance on the skills required to provide testimony for the National Occupational Standards.

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.

## **Internal verifier**

Internal verifiers must:

- be occupationally knowledgeable in respect of the competences they are going to verify prior to commencing the role. It is crucial that internal verifiers understand the nature and context of the assessors' work and that of their candidates due to the critical nature of the work and the legal and other implications of the assessment process
- have working knowledge of dental settings, the regulation, legislation and codes of practice for the service (where applicable), and the requirements of national standards at the time any assessment is taking place
- occupy a position that gives them authority and resources to co-ordinate the work of assessors, provide authoritative advice, call meetings as appropriate, visit and observe assessments and carry out all the other internal verification roles as defined by the relevant national occupational standard
- hold, or be working towards, the appropriate IV qualification - achievement of the qualification must be within appropriate timescales.

Internal verifiers who are not yet qualified against the appropriate V1 competences but have the necessary occupational competence and experience, can be supported by a qualified internal verifier who does not necessarily have the particular occupational expertise or experience.

However, the supporting internal verifier must have relevant occupational expertise as a practitioner, manager or trainer. This can also be used as a method of supporting the accreditation of trainee internal verifiers.

### **Advice for internal verifiers who do not have a recognisable qualification**

IVs who carry out verification responsibilities only, are not required to hold a recognisable dental nurse qualification but will need to ensure that they maintain and have evidence of, their CPD as outlined in the assessment strategy; however, if they begin to assess, then arrangements must be made to complete an appropriate, recognisable qualification.

### **Continuing professional development (CPD)**

Centres are expected to support their staff in ensuring that their knowledge remains current of the occupational area and of best practice in delivery, mentoring, training, assessment and verification, and that it takes account of any national or legislative developments.

## **2.2 Candidate entry requirements**

Candidates should not be entered for a qualification of the same type, content and level as that of a qualification they already hold.

There are no formal entry requirements for candidates undertaking this qualification. However, centres must ensure that candidates have the potential and opportunity to gain the qualifications successfully.

### **Age restrictions**

This qualification is not approved for use by candidates under the age of 16, and City & Guilds cannot accept any registrations for candidates in this age group.

## 3 Course design and delivery

### 3.1 Initial assessment and induction

Centres will need to make an initial assessment of each candidate prior to the start of their programme to ensure they are entered for an appropriate type and level of qualification.

The initial assessment should identify:

- any specific training needs the candidate has, and the support and guidance they may require when working towards their qualification. This is sometimes referred to as diagnostic testing.
- any units the candidate has already completed, or credit they have accumulated which is relevant to the qualification[s] they are about to begin.

City & Guilds recommends that centres provide an induction programme to ensure the candidate fully understands the requirements of the qualification[s] they will work towards, their responsibilities as a candidate, and the responsibilities of the centre. It may be helpful to record the information on a learning contract.

### 3.2 Recommended delivery strategies

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

Centres may design course programmes of study in any way which:

- best meets the needs and capabilities of their candidates
- satisfies the requirements of the qualification

When designing and delivering the course programme, centres might wish to incorporate other teaching and learning that is not assessed as part of the qualification. This might include the following:

- literacy, language and/or numeracy
- personal learning and thinking
- personal and social development
- employability

Where applicable, this could involve enabling the candidate to access relevant qualifications covering these skills.

## 4 Assessment

### 4.1 Summary of assessment methods

For this qualification, learners will be required to complete the following assessments:

- one synoptic test consisting of multiple choice questions covering units 312-315.
- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method for units 301-311.

### Grading and marking

Grading of the examination for this qualification is pass or fail.

### 4.2 Evidence requirements

#### External quality control

External quality control is provided by the usual City & Guilds external verification process which includes the use of the electronically scannable report form which is designed to provide an objective risk analysis of individual centre assessment and verification practice.

#### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or 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, e.g. incident records, maintenance reports. They can be any relevant products of candidates' 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 e.g. 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 e.g. 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 candidates to supplement evidence generated by observations and any other evidence type used. Assessors may be able to infer some knowledge and understanding from observing candidate 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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety 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 e.g. simulation.**

- **Projects/ Assignments:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe. Candidates 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.
- **Candidate/ reflective accounts:** describe candidates' actions in particular situations and/or reflect on the reasons for practising in the ways selected, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit e.g. an account of an occasion when you reported on a high risk hazard. Reflective accounts also provide evidence that candidates' can evaluate their knowledge and practice across the activities embedded in this qualification
- **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 candidates' portfolios but must be referred to in the assessment records.

- **Expert witnesses:** may observe candidate 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 their candidate she/he will identify an expert witness in the workplace, who will provide testimony of the candidates work based performance.
- **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 him/her to identify the appropriate use of witnesses.
- **Observation requirements:** The prime source of evidence for competency based learning outcomes within this qualification is assessor observation. Where assessor observation would be difficult because of intrusion into areas of privacy and/or because activities occur rarely, expert witnesses can provide testimony for the occupationally specific units.

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.

## Simulation

Simulation is only allowed for unit 268 First Aid Essentials and Unit 305 Offer information and support to individuals on the protection of their oral health (OH2). Simulations should only be undertaken in the minority of cases, where the candidate is 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 candidate 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) where cash is being handled when this does not happen routinely in the workplace.

- Where performance is critical, happens frequently but where there is risk of harm to the candidate 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

### 4.3 Test specifications

The test specification for the e-evolve test – unit 317 is below:

**Evolve Test 317:** Units 312 - 315

**Duration:** 1 ½ hours

Unit number	Unit title	Approx. percentage %
312	Principles of infection control in the dental environment	30
313	Assessment of oral health and treatment planning	20
314	Dental radiography	15
315	Scientific principles in the management of oral health diseases and dental procedures	35
<b>Total</b>		<b>100</b>

For more information on e-evolve testing, please see <http://www.cityandguilds.com/Provide-Training/Delivery-Success/e-evolve>

### 4.4 Recording forms

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

City & Guilds endorses several ePortfolio systems. Further details are available at:

**[www.cityandguilds.com/eportfolios](http://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.

**N/SVQ Recording forms** are available on the City & Guilds website.

Although it is expected that new centres will 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.

### 4.5 Recognition of prior learning (RPL)

#### Recognition of prior learning (RPL)

Recognition of Prior Learning (RPL) is a process of using an individual's previous achievements to demonstrate competence. This is not a new process but expands on previously described terms like

“the accreditation of prior learning (APL), the recognition of experimental learning or “the validation of informal learning” by incorporating all types of prior learning and training.

In considering the appropriateness of any single piece of **evidence** the following should be considered:

- **Content** – the degree to which the content of any previous accredited learning meets the requirements of the National Occupational Standards against which it is being presented as evidence.
- **Comprehensiveness of Assessment** – ensure that all learning derived for the content has been assessed. If only a proportion has been assessed, then the learning for the ‘non-tested’ areas cannot be assumed.
- **Level** – the degree to which the level of learning offered and tested, related to that required by the Level 3 Diploma in Dental Nursing.
- **Performance and Knowledge** – the degree to which the previous learning covered both performance and knowledge. Some learning will only have offered and tested the latter, in which case the Recognition of Prior Learning can only cover this aspect. Performance will require further assessment. Although unlikely, the reverse (performance tested but not knowledge) could be true in which case knowledge and understanding would need further assessment.
- **Model of Learning** – difficulties can arise in mapping learning gained from non-competence based learning programmes into competence based models.
- **Relevance of Context** – the degree to which the context of the learning gained and assessed relates to the current context of candidates’ work roles. If the context was different, assessors will need to satisfy themselves of candidates’ ability to transfer the learning gained into their current setting.

## 5 Units

### Availability of units

The learning outcomes and assessment criteria are viewable on the Register of Regulated Qualifications [www.rits.ofqual.gov.uk](http://www.rits.ofqual.gov.uk)

### Structure of units

The units in this qualification are written in a standard format and comprise the following:

- City & Guilds reference number
- unit accreditation number
- title
- level
- credit value
- unit aim
- relationship to NOS, other qualifications and frameworks
- endorsement by a sector or other appropriate body
- information on assessment
- learning outcomes which are comprised of a number of assessment criteria
- notes for guidance.

### Summary of units

City & Guilds unit number	Title	Unit number	Credits
268	First Aid Essentials	D/504/6101	1
301	Ensure your own actions reduce risks to health and safety	R/600/9413	2
302	Reflect on and develop your practice	H/601/3465	4
304	Prepare and maintain environment, instruments, and equipment for clinical dental procedures	F/502/7346	2
305	Offer information and support to individuals on the protection of their oral health	J/502/7347	4
306	Provide chairside support during the assessment of patients' oral health	D/502/7600	1
307	Contribute to the production of dental images	R/502/7349	3
308	Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities	J/502/7350	3
309	Provide chairside support during the provision of fixed and removable prostheses	H/502/7601	4
310	Provide chair side support during non-surgical endodontic treatment	K/502/7602	2
311	Provide chairside support during the extraction of teeth and minor oral surgery	R/502/7352	3

312	Principles of infection control in the dental environment	L/502/7446	5
313	Assessment of oral health and treatment planning	J/502/7459	3
314	Dental radiography	H/502/7503	4
315	Scientific principles in the management of oral health diseases and dental procedures	D/502/7581	5

**Level:** 2  
**Credit value:** 1  
**UAN:** D/504/6101

**Unit aim**

Purpose of this unit is for learners to attain the knowledge and practical competences required to deal with the range of emergency first aid situations contained in this unit.

The aims are for learners to demonstrate the practical administration of safe, prompt, effective first aid in emergency situations with an understanding of the role of the first aider including equipment, record keeping and basic hygiene.

**Learning outcomes**

There are **eight** learning outcomes to this unit. The learner will:

1. Understand the role and responsibilities of a first aider
2. Be able to assess an incident
3. Be able to manage an unresponsive casualty who is breathing normally
4. Be able to manage an unresponsive casualty who is not breathing normally
5. Be able to recognise and assist a casualty who is choking
6. Be able to manage a casualty with external bleeding
7. Be able to manage a casualty who is in shock
8. Be able to manage a casualty with a minor injury

**Guided learning hours**

It is recommended that **10** hours should be allocated for this unit, although patterns of delivery are likely to vary.

**Support of the unit by a sector or other appropriate body**

This unit is endorsed by Skills for Care and Development.

**Assessment**

This unit must be assessed in line with the Skills for Health document Skills for Health First Aid Assessment Principles.

## Unit 268                      First Aid Essentials

### Assessment Criteria

**Outcome 0**    Error! Not a valid bookmark self-reference.

The learner can:

1. identify the role and responsibilities of a first aider
2. identify how to minimise the risk of infection to self and others
3. identify the need for establishing consent to provide first aid
4. identify the first aid equipment that should be available
5. describe the safe use of first aid equipment.

**Outcome 0**    Error! Not a valid bookmark self-reference.

The learner can:

1. conduct a scene survey
2. conduct a primary survey of a casualty
3. give examples of when to call for help.

**Outcome 0**    Error! Not a valid bookmark self-reference.

The learner can:

1. assess a casualty's level of consciousness
2. open a casualty's airway and check breathing
3. identify when to place an unconscious casualty into the recovery position
4. place an unresponsive casualty in the recovery position
5. manage a casualty who is in seizure.

**Outcome 0**    Error! Not a valid bookmark self-reference.

The learner can:

1. recognise the need to commence Cardio Pulmonary Resuscitation
2. demonstrate Cardio Pulmonary Resuscitation using a manikin
3. identify the accepted modifications to Cardio Pulmonary Resuscitation for children.

**Outcome 0**    Error! Not a valid bookmark self-reference.

The learner can:

1. describe how to identify a casualty with a
  - partially blocked airway
  - completely Blocked airway
2. administer first aid to a casualty who is choking.

**Outcome 0** Error! Not a valid bookmark self-reference.

The learner can:

1. identify the types of external bleeding
2. control external bleeding.

**Outcome 0** Error! Not a valid bookmark self-reference.

The learner can:

1. recognise shock
2. administer first aid to a casualty who is in shock.

**Outcome 0** Error! Not a valid bookmark self-reference.

The learner can:

1. administer first aid to a casualty with small cuts, grazes and bruises
2. administer first aid to a casualty with minor burns and scalds
3. administer first aid to a casualty with small splinters.

## Unit 268                      First Aid Essentials

### Notes for guidance

#### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

#### This unit should directly refer to current guidelines

##### Key words and concepts

**Cardio Pulmonary Resuscitation**      Refer to current UK Resuscitation Council guidelines.

**Practice**                                      Practice covers every aspect of the work you do including your skills, knowledge, attitudes and behaviour. It also involves experiences and personal beliefs that might affect your practice

**Rights**                                        The rights that individuals and key people have to  
be respected  
be treated equally and not be discriminated against  
be treated as an individual  
be treated in a dignified way  
privacy  
be protected from danger and harm  
be cared for in the way that meets their needs, takes account of their choices and also protects them  
access information about themselves  
communicate using their preferred methods of communication and language

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work



- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 301

## Ensure your own actions reduce risks to health and safety

**Level:** 2  
**Credit value:** 2  
**UAN number:** R/600/9413

### Unit aim

This unit is about health and safety in your day to day work. This includes identifying and dealing with risks and hazards in your workplace.

### Learning outcomes

There are **three** learning outcomes to this unit. The learner will:

1. be able to identify the hazards in the workplace
2. be able to act upon hazards in the workplace
3. be able to reduce the risks to health and safety in the workplace

### Guided learning hours

It is recommended that **8** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards

This unit is linked to the following NOS: Ensure your own actions reduce risks to health and safety (EMPNT0) HSS1.

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit)

## Unit 301

## Ensure your own actions reduce risks to health and safety

### Outcome 1

be able to identify the hazards in the workplace

#### Assessment Criteria

The learner can:

1. identify which **workplace procedures** are relevant to your job
2. identify those working practices in your job which could harm you or others
3. identify those aspects of your **workplace** which could harm you or others
4. outline any differences between **workplace legislation** and suppliers or manufacturer's instructions.

#### Range

##### Workplace procedures:

- a) safe working methods and equipment
- b) safe use of hazardous substances, smoking, eating, drinking and drugs
- c) what to do in the event of an emergency, personal presentation, moving and handling

**Workplace:** single or multiple areas in which you carry out your work.

##### Workplace legislation:

- a) Health & Safety at Work Act 1974
- b) Control of Substances Hazardous to Health (COSHH)
- c) Environmental Protection Act 1990
- d) Ionising Radiation (Medical Exposures) Regulations (including local rules)
- e) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

## Unit 301

## Ensure your own actions reduce risks to health and safety

### Outcome 2

be able to act upon hazards in the workplace

#### Assessment Criteria

The learner can:

1. report hazards to the identified **responsible person**
2. demonstrate the ability to deal with **hazards** in the **workplace**.

#### Range

##### Responsible person:

- a) your manager
- b) supervisor
- c) section leader or the health and safety person in your workplace

##### Hazards:

- a) mercury spillage
- b) radiation
- c) cross infection
- d) environmental factors
- e) spillages
- f) waste disposal
- g) sharps

##### Workplace:

- a) single or multiple areas in which you carry out your work

## Unit 301

## Ensure your own actions reduce risks to health and safety

### Outcome 3

be able to reduce the risks to health and safety in the workplace

#### Assessment Criteria

The learner can:

1. carry out your work in accordance with **workplace legislation** or manufacturer's instructions
2. behave in a way that does not endanger the health and safety of yourself, others and materials in your **workplace**
3. contribute to health and safety improvements within your workplace
4. follow guidelines for environmentally friendly **working practices**
5. ensure **personal presentation** protects the health and safety of you or others in line with instructions.

#### Range

##### Workplace legislation:

- a) Health & Safety at Work Act 1974
- b) Control of Substances Hazardous to Health (COSHH)
- c) Environmental Protection Act 1990
- d) Ionising Radiation (Medical Exposures) Regulations (including local rules)
- e) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

##### Workplace:

- a) single or multiple areas in which you carry out your work

##### Working practices:

- a) activities
- b) procedures
- c) use of materials or equipment and working techniques used in carrying out your job

##### Personal Presentation:

- a) personal hygiene
- b) use of personal protective equipment
- c) clothing and accessories suitable to the workplace

# Unit 301      Ensure your own actions reduce risks to health and safety

## Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

<b>Hazard</b>	something with potential to cause harm
<b>Others</b>	Refers to everyone covered by the Health and Safety at Work Act including: visitors, members of the public, colleagues, contractors, clients, patients.

### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

**Level:** 3  
**Credit value:** 4  
**UAN number:** H/601/3465

**Unit aim**

This unit introduces candidates with the knowledge and skills required to reflect on, evaluate and improve personal and professional practice.

**Learning outcomes**

There are **five** learning outcomes to this unit. The learner will:

1. be able to identify the competence requirements of the job role
2. be able to reflect on own performance
3. be able to implement a plan to improve performance
4. be able to evaluate the effectiveness of the development plan
5. be able to comply with current legislation, policy, good practice, organisational and professional codes of practice and ethical standards

**Guided learning hours**

It is recommended that **30** hours should be allocated for this unit, although patterns of delivery are likely to vary.

**Details of the relationship between the unit and relevant national standards (if appropriate)**

This unit is linked to the Reflect on and develop your practice HSC33.

**Support of the unit by a sector or other appropriate body (if required)**

This unit is endorsed by Skills for Health.

**Assessment**

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit)

## Unit 302

### Outcome 1

## Reflect on and develop your practice

be able to identify the competence requirements of the job role

### Assessment Criteria

The learner can:

1. identify what is required for competent, effective and safe practice
2. provide active support for individuals and **key people**

### Range

#### Key people

- a) patients, team members
- b) carers
- c) others with whom the individual has a supportive relationship



## Unit 302

### Outcome 2

## Reflect on and develop your practice

be able to reflect on own performance

### Assessment Criteria

The learner can:

1. regularly review performance in the job role
2. use constructive **feedback** from individuals to develop practice
3. identify **supervision and support** required.

### Range

#### Feedback

- a) verbal
- b) in written form
- c) electronic

#### Supervision and support

- a) formal
- b) informal
- c) provided from within your organisation
- d) provided from outside your organisation

## Unit 302

### Outcome 3

## Reflect on and develop your practice

be able to implement a plan to improve performance

### Assessment Criteria

The learner can:

1. identify any actions needed to improve practice
2. prioritise aspects of practice that need to be enhanced
3. prepare SMART objectives using available resources
4. utilise **development opportunities**.

### Range

#### Development opportunities

- a) training
- b) educational programmes
- c) coaching
- d) personal and professional support

## Unit 302

### Outcome 4

## Reflect on and develop your practice

be able to evaluate the effectiveness of the development plan

### Assessment Criteria

The learner can:

1. reflect on practice following implementation of the plan
2. demonstrate improvement in practice
3. regularly review the impact of the plan on working practice
4. implement identified **development opportunities**.

### Range

#### Development opportunities

- a) training
- b) educational programmes
- c) coaching
- d) personal and professional support

## **Unit 302**

### **Outcome 5**

## **Reflect on and develop your practice**

be able to comply with current legislation, policy, good practice, organisational and professional codes of practice and ethical standards

### **Assessment Criteria**

The learner can:

1. work in accordance with the standard operating procedures (SOPs) at all times
2. demonstrate compliance with legal, professional and organisational requirements, guidelines and confidentiality at all times
3. keep up to date records of your personal and professional development.

## Unit 302                      Reflect on and develop your practice

### Notes for guidance

#### Key words and concepts

<b>Development opportunities</b>	Opportunities that enable you to develop and practice more effectively
<b>Individuals</b>	The actual people requiring health and care services. Where individuals use advocates and interpreters to enable them to express their views, wishes or feelings and to speak on their behalf, the term individual within this standard covers the individual and their advocate or interpreter
<b>Key people</b>	Are those people who are key to an individual's health and social well-being. These are people in the individual's lives who can make a difference to their health and well-being
<b>Others</b>	Are other people within and outside your organisation that are necessary for you to fulfil your job role
<b>Personal and professional development</b>	Knowledge and practice of any type that will enable you to develop within your job role both as a person and as a practitioner
<b>Practice</b>	Practice covers every aspect of the work you do including your skills, knowledge, attitudes and behaviour. It also involves experiences and personal beliefs that might affect your practice
<b>Reflect</b>	This is the process of thinking about every aspect of your practice including identifying where and how it could be improved
<b>SMART objectives</b>	Specific Measurable Achievable Realistic Timescaled
<b>Standard operating procedures (SOPs)</b>	Could include manufacturing instructions, See deleted for LO5 AC1.

### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 304

## Prepare and maintain environment, instruments, and equipment for clinical dental procedures

**Level:** 2

**Credit value:** 2

**UAN number:** F/502/7346

### Unit aim

This unit focuses on infectious diseases and their routes of transmission. It concentrates on the methods of infection control and applying appropriate health and safety measures.

### Learning outcomes

There are **four** learning outcomes to this unit. The learner will:

1. be able to apply standard precautions of infection control for all treatments
2. be able to apply health and safety measures for all treatments
3. be able to apply methods of sterilisation for dental instruments and equipment
4. be able to safely dispose of hazardous waste and non-hazardous waste

### Guided learning hours

It is recommended that **17** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the National Occupational Standards unit 304 Prepare and maintain environments, instruments, and equipment for clinical dental procedures (OH1).

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit)

## Unit 304

## Prepare and maintain environment, instruments, and equipment for clinical dental procedures

### Outcome 1

be able to apply standard precautions of infection control for all treatments

### Assessment Criteria

The learner can:

1. wear **personal protective equipment** for all **treatments**
2. maintain a clean and tidy working environment for all **treatments**
3. use **cleaning equipment** and materials in a safe manner
4. adjust **environmental factors** to meet the needs of the patient and the procedure
5. explain which decontaminants are effective against the different types of micro organisms
6. explain the purpose of adjusting **environmental factors**.

### Range

#### Personal protective equipment

- a) surgical gloves
- b) face mask
- c) goggles and/or visor
- d) heavy duty gloves

#### Cleaning equipment

- a) general cleaning equipment
- b) sterilisation equipment

#### Environmental factors

- a) heating
- b) lighting
- c) ventilation and humidity

#### Treatments

- a) oral health assessment
- b) protection of oral health
- c) dental imaging
- d) prevention and control of periodontal disease
- e) cavity restorations
- f) fixed and removable prostheses
- g) orthodontic appliance
- h) non-surgical endodontic treatment
- i) extraction of teeth
- j) minor oral surgery



## Unit 304

## Prepare and maintain environment, instruments, and equipment for clinical dental procedures

### Outcome 2

be able to apply health and safety measures for all treatments

### Assessment Criteria

The learner can:

1. maintain **personal hygiene**
2. demonstrate that **equipment** is functioning prior to use
3. check equipment and materials are safe and secure, and leave them at the correct level of cleanliness, and in the correct location, on the completion of **procedures**
4. demonstrate methods of hand cleansing
5. explain what action to take in the event of **equipment** failure
6. explain what actions to take in the event of a **spillage** occurring
7. explain the reporting procedures for **hazards** and why they should be reported
8. explain the reasons why records must be kept in relation to the servicing of equipment.

### Range

#### Personal hygiene

- a) hair
- b) nails
- c) jewellery
- d) footwear
- e) uniform
- f) social
- g) clinical and aseptic hand-washing procedures

#### Hazards

- a) blood contamination
- b) Hepatitis B
- c) HIV
- d) Herpes simplex
- e) damaged instruments
- f) sharps

#### Spillage

- a) water spillage
- b) mercury spillage
- c) body fluids
- d) chemical spillage

#### Equipment

- a) dental chair
- b) aspirator
- c) hand pieces

- d) ultrasonic scaler
- e) x-ray machine
- f) x-ray processing equipment
- g) autoclave
- h) instrument washer
- i) ultrasonic bath

### **Procedures**

- a) oral health assessment
- b) protection of oral health
- c) dental imaging
- d) prevention and control of periodontal disease
- e) cavity restorations
- f) fixed and removable prostheses
- g) orthodontic appliance
- h) non-surgical endodontic treatment
- i) extraction of teeth and minor oral surgery

## **Unit 304                      Prepare and maintain environment, instruments, and equipment for clinical dental procedures**

Outcome 3                      be able to apply methods of sterilisation for dental instruments and equipment

### **Assessment Criteria**

The learner can:

1. prepare **instruments and hand pieces** for sterilisation
2. carry out sterilisation procedures
3. store sterilised instruments and hand pieces according to practice policy
4. maintain accurate and legible records of sterilisation procedures
5. explain the reason for pre cleaning instruments prior to sterilisation
6. explain the methods available for testing autoclaves are functioning correctly
7. explain the importance of placing **equipment** and instruments in the correct location relevant to the different **stages of sterilisation**
8. explain the potential risks of not decontaminating equipment and instruments
9. explain the potential long term effects of using damaged or pre-used sterile goods.

### **Range**

#### **Instruments and hand pieces**

- a) non-surgical
- b) surgical

#### **Equipment**

- a) washers
- b) ultrasonic cleaners

#### **Stages of sterilisation**

- a) storage sterilisation
- b) transportation

## Unit 304

## Prepare and maintain environment, instruments, and equipment for clinical dental procedures

### Outcome 4

be able to safely dispose of hazardous waste and non-hazardous waste

#### Assessment Criteria

The learner can:

1. list the different types of **waste**
2. dispose of **hazardous waste** in a safe manner according to practice guidelines
3. explain the dangers of not disposing of waste correctly and promptly.

#### Waste

- a) hazardous
- b) non-hazardous

#### Hazardous waste

- a) used gloves
- b) face masks
- c) tissues
- d) cotton wool rolls
- e) gauze
- f) napkins
- g) alcohol wipes
- h) mouthwash beakers
- i) lead foil
- j) needles
- k) waste amalgam
- l) LA cartridges

## Unit 304 Prepare and maintain environment, instruments, and equipment for clinical dental procedures

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

<b>Additional protective equipment</b>	Includes types of personal protective equipment such as visors, protective eyewear and radiation protective equipment
<b>Contaminated</b>	Includes items contaminated with body fluids, chemicals.  Any pack/item opened and not used should be treated as contaminated
<b>Equipment</b>	equipment may refer to equipment used in dental procedures, cleaning equipment or protective equipment
<b>Personal hygiene</b>	It is important that when working close to patients you inspire their confidence. Maintaining personal hygiene includes ensuring a clean professional appearance as well as hand washing/cleansing before, during and after and activity.
<b>Personal protective clothing</b>	Includes items such as plastic aprons, gloves - both clean and sterile, eyewear, footwear, dresses, trousers and shirts and gowns.  These may be single use disposable clothing or reusable clothing
<b>Potentially infectious conditions</b>	Potentially infectious conditions might relate to the worker her/himself or someone else. Could include – Influenza, AIDS, Measles, Herpes Varicella-Zoster (chicken pox), Shingles, Infective Mononucleosis ( glandular fever), Acute Viral Parotitis (mumps)

#### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.

- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 305

## Offer information and support to individuals on the protection of their oral health

**Level:** 3

**Credit value:** 4

**UAN number:** J/502/7347

### Unit aim

This unit concentrates on the causes and progression of oral diseases and methods of prevention. It focuses on the delivery of oral health promotion and ensuring that it suits the needs of different individuals is an essential part of this unit. Good communication is critical for success in this unit.

### Learning outcomes

There are **two** learning outcomes to this unit. The learner will:

1. be able to communicate with individuals
2. be able to provide oral hygiene advice to suit the individual

### Guided learning hours

It is recommended that **24** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards

This unit is linked to the National Occupational Standards unit 305 Offer information and support to individuals on the protection of their oral health (OH2).

### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit)

## Unit 305

## Offer information and support to individuals on the protection of their oral health

### Outcome 1

be able to communicate with individuals

#### Assessment Criteria

The learner can:

1. check the **individuals** identity and gain valid consent
2. give **individuals** the opportunity to discuss and seek clarification
3. provide information to **individuals** ensuring that it is accurate, and consistent with organisational guidelines
4. answer any questions clearly and in a manner that minimises fear and anxiety
5. refer questions beyond your role to an identified member of the team
6. explain the methods and importance of effective communication taking into account **personal beliefs and preferences**
7. explain the system for internal referrals to other team members.

#### Range

##### Individuals

- a) adults
- b) children and young people
- c) older people
- d) those with special needs

##### Personal beliefs and preferences

- a) social and ethnic background



## Unit 305

## Offer information and support to individuals on the protection of their oral health

### Outcome 2

be able to provide oral hygiene advice to suit the individual

#### Assessment Criteria

The learner can:

1. provide **individuals** with oral health **information**
2. prepare and use **oral health education aids**
3. advise individuals on suitable **oral hygiene techniques**
4. demonstrate methods of caring for dentures
5. give advice on maintaining orthodontic appliances.

#### Range

##### Individuals

- a) adults
- b) children and young people
- c) older people
- d) those with special needs

##### Information

- a) diet
- b) problems
- c) current practice and skills

##### Oral health education aids

- a) models
- b) visual aids
- c) leaflets

##### Oral hygiene techniques

- a) cleaning teeth and the mouth
- b) the use of interdental aids
- c) mouthwash rinses
- d) disclosing agents
- e) cleaning and maintenance of dentures and orthodontic appliances

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

**Individuals**

The individuals who are the focus of this competence may be individuals who are developing their own skills, or carers who are developing their knowledge and skills of working with others. They will not necessarily be patients or be undergoing healthcare treatment at this point in time.

**Other sources of competence evidence:**

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 306

## Provide chairside support during the assessment of patients' oral health

**Level:** 2  
**Credit value:** 1  
**UAN number:** D/502/7600

### Unit aim

This unit focuses on preparing the dental environment and assisting the operator during dental assessments. Practical competence must be proved during a variety of assessment procedures, and understanding of all instruments, materials and records used. It also enables learners to demonstrate knowledge of current legislation relating to confidentiality and the maintenance of records. Learner understanding of the structure and function of the oral anatomy is essential. Patient care is essential throughout this unit.

### Learning outcomes

There are **two** learning outcomes to this unit. The learner will:

1. be able to prepare the dental environment for an oral health assessment
2. be able to record a range of oral health assessments

### Guided learning hours

It is recommended that **10** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards

This unit is linked to the National Occupational Standards unit 306 Provide chairside support during the assessment of patients' oral health (OH3).

### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit).

## Unit 306

## Provide chairside support during the assessment of patients' oral health

### Outcome 1

be able to prepare the dental environment for an oral health assessment

#### Assessment Criteria

The learner can:

1. identify the different types and functions of **dental records and charts**
2. record assessments spoken by other team members using the correct notation on the correct dental charts
3. record the medical conditions that can affect an individual's dental treatment
4. provide examples of the terminologies and charting notation/symbols used in **dental assessment**
5. provide examples of dental charting using manual and computerised systems.

#### Dental records and charts

- a) dental charts
- b) radiographs
- c) photographs
- d) study models
- e) personal details
- f) orthodontic measurements

#### Dental assessment

- a) palmer's notation
- b) FDI
- c) BPE
- d) Periodontal

## Unit 306

## Provide chairside support during the assessment of patients' oral health

### Outcome 2

be able to record a range of oral health assessments

#### Assessment Criteria

The learner can:

1. retrieve and make available the correct **patient's charts, records and images** which are necessary for the assessment to be undertaken
2. select and arrange the **equipment, instruments, materials and medicaments** which are required for a full clinical assessment of the mouth
3. process and store dental charts, records and images in a manner which maintains their confidentiality.

#### Range

##### Patients' charts, records and images

- a) UK/FDI systems
- b) medical history
- c) periodontal charting
- d) orthodontic classifications and charts
- e) radiographs

##### Equipment, instruments, materials and medicaments

- a) observing hard and soft tissues
- b) measuring and making a record of the teeth and gingivae
- c) assessing the function of the dentition (orthodontic assessment)

## Unit 306                      Provide chairside support during the assessment of patients' oral health

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

**Additional protective equipment** includes types of personal protective equipment such as visors, protective eyewear and radiation protective equipment.

**Contaminated** includes items contaminated with body fluids, chemicals. Any pack/item opened and not used should be treated as contaminated.

**Personal protective clothing** includes items such as plastic aprons, gloves - both clean and sterile, eyewear, footwear, dresses, trousers and shirts and gowns. These may be single use disposable clothing or reusable clothing.

#### **Other sources of competence evidence:**

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard

- **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 him/her to identify the appropriate use of witnesses.

## Unit 307

## Contribute to the production of dental images

**Level:** 3  
**Credit value:** 3  
**UAN number:** R/502/7349

### Unit aim

This unit is focused on the nature of ionising radiations and the methods of protecting the patient and others from the hazards of ionising radiations. The learner must prove their practical competence related to the use of ionising radiations in the clinical dental environment and the relevant legislation and workplace policies.

### Learning outcomes

There are **three** learning outcomes to this unit. The learner will:

1. be able to provide the support and resources necessary for the taking of dental images
2. be able to process dental films
3. be able to contribute to the quality assurance process of dental images

### Guided learning hours

It is recommended that **21** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the National Occupational Standards unit 307 Contribute to the production of dental images (OH4).

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit).



## Unit 307

### Outcome 1

## Contribute to the production of dental images

be able to provide the support and resources necessary for the taking of dental images

### Assessment Criteria

The learner can:

1. maintain health and safety throughout imaging procedures
2. provide the correct **resources** for the taking of dental images
3. identify different intra oral and extra oral radiographs and ask **patients** to remove any items which may interfere with the radiographic image
4. offer patients support during the taking of a radiographic image
5. refer any questions which are beyond your role to an appropriate member of the team.

### Range

#### Resources

- a) holders

#### Patients

- a) adults
- b) children and young people
- c) older people
- d) those with special needs

**Unit 307**  
Outcome 2

**Contribute to the production of dental images**  
be able to process dental films

**Assessment Criteria**

The learner can:

1. process dental films using the correct resources for the **imaging equipment** used
2. ensure that the quality of the image is maintained during processing
3. list the chemicals used in dental processing and their purposes.

**Range**

**Imaging equipment**

- a) digital
- b) automatic
- c) manual

## **Unit 307**

### **Outcome 3**

## **Contribute to the production of dental images**

be able to contribute to the quality assurance process of dental images

### **Assessment Criteria**

The learner can:

1. store or save images produced according to the organisation's established procedure
2. keep accurate records of quality assurance checks
3. list methods of mounting radiographs.

## Unit 307                      Contribute to the production of dental images

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

#### **Items which may interfere with the radiographic image**

items which may interfere with the radiographic image would include: dental items (e.g. dentures, removable appliances) and ornamental items (such as earrings, nose clips)

#### **Resources**

resources may include intra and extra oral films and chemicals. It may use lead aprons which is a less common procedure

#### **Additional protective equipment**

includes: types of personal protective equipment such as visors, protective eyewear and radiation protective equipment

#### **Contaminated**

includes items contaminated with body fluids, chemicals. Any pack/item opened and not used should be treated as contaminated

#### **Personal protective clothing**

includes items such as plastic aprons, gloves - both clean and sterile, eyewear, footwear, dresses, trousers and shirts and gowns. These may be single use disposable clothing or reusable clothing.

#### **Other sources of competence evidence:**

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work

- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 308

## Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities

**Level:** 3  
**Credit value:** 3  
**UAN number:** J/502/7350

### Unit aim

This unit is focused on preparing the dental environment and assisting the operator during a variety of preventative and restorative dental procedures. Practical competence must be proved during a variety of restorative and preventative procedures, and understanding shown of all instruments, materials and records used. It also enables learners to demonstrate knowledge of current legislation relating to confidentiality and the maintenance of records. This unit reflects key points relating to cross infection control, communication techniques and waste control. Patient care is essential throughout this unit.

### Learning outcomes

There are **two** learning outcomes to this unit. The learner will:

1. be able to recognise the nature of oral diseases and their prevention
2. be able to provide support to the individual and operator before, during and after treatment

### Guided learning hours

It is recommended that **25** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards

This unit is linked to the National Occupational Standards unit 308 Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities (OH5).

### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit).

## Unit 308

### **Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities**

#### Outcome 1

be able to recognise the nature of oral diseases and their prevention

#### **Assessment Criteria**

The learner can:

1. identify methods of controlling plaque
2. list the treatments available for controlling caries
3. list the treatments available for controlling periodontal disease
4. identify the different methods and uses of **fluoride**.

#### **Range**

##### **Fluoride**

- a) systemic
- b) topical

## Unit 308

## Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities

### Outcome 2

be able to provide support to the individual and operator before, during and after treatment

#### Assessment Criteria

The learner can:

1. retrieve and make available the correct **patient's charts, records and images** and identify correctly the planned **treatment**
2. select the equipment, instruments, materials and medicaments for:
  - a) prevention and control of dental caries
  - b) prevention and control of periodontal disease
  - c) provision of amalgam restorations
  - d) provision of composite restorations
  - e) provision of glass ionomer restorations
3. aspirate the treatment area and maintain a clear field of operation
4. protect soft tissues using instruments and materials appropriately
5. select and offer the operator
  - a) a suitable matrix system to aid the placement of restorations
  - b) the correct quantity of the appropriately mixed restorative material
  - c) any materials or equipment required for finishing the restoration
6. demonstrate the safe handling and disposal of amalgam.

#### Range

##### Patient's charts, records and images

- a) paper based
- b) electronic
- c) radiographs

##### Treatment

- a) temporary restorations
- b) amalgam restorations
- c) composite restorations
- d) glass ionomer restorations
- e) fissure sealants
- f) fluoride treatments
- g) scaling
- h) polishing
- i) debridement



## Unit 308

# Provide chairside support during the prevention and control of periodontal disease and caries and the restoration of cavities

### Notes for guidance

#### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

**Level:** 3

**Credit value:** 4

**UAN number:** H/502/7601

### Unit aim

This unit aims to provide support to the patient and the operator during the provision of fixed and removable prostheses and orthodontic appliances. The learner will need to prove their practical competence related to these treatments for a range of patients. A detailed knowledge and understanding of all equipment, materials and medicaments is required. Learners will also need to prove their practical skills relating to health and safety and cross infection control relevant to these procedures. Patient care is essential throughout this unit.

### Learning outcomes

There are **four** learning outcomes to this unit. The learner will:

1. be able to support the patient and the operator for fixed and removable prostheses
2. be able to prepare equipment, instruments and materials for fixed prostheses
3. be able to select and prepare impression materials for fixed and removable prostheses
4. be able to prepare equipment, instruments and materials for removable prostheses and orthodontic appliances

### Guided learning hours

It is recommended that **31** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the National Occupational Standards unit Provide chairside support during the provision of fixed and removable prostheses (OH6).

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit).

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

### Outcome 1

be able to support the patient and the operator for fixed and removable prostheses

#### Assessment Criteria

The learner can:

1. provide the necessary **charts and records**
2. select the appropriate **impression materials**
3. provide support and monitor the **patients** whilst impressions are in the mouth
4. provide the necessary equipment required for the taking of shades supporting the operator in this **procedure**
5. provide the necessary **equipment and materials** for taking occlusal registrations
6. list the methods for protecting and retracting the soft tissues during treatment.

#### Range

##### Charts and records

- a) medical history
- b) personal details
- c) dental charts
- d) laboratory tickets
- e) dental images
- f) photographs
- g) study models

##### Impression materials

- a) alginates
- b) putty

##### Patients

- a) adults
- b) children
- c) young people
- d) older people
- e) those with special needs
- f) those from different social and ethnic backgrounds

##### Procedure

- a) fixed prostheses
- b) removable prosthesis

##### Equipment and materials

- a) wax occlusal rims
- b) pink wax
- c) heat source
- d) markers
- e) shade guides

- f) mould guides
- g) occlusal registration material
- h) articulating paper

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

### Outcome 2

be able to prepare equipment, instruments and materials for fixed prostheses

#### Assessment Criteria

The learner can:

1. prepare and list the **equipment , instruments and material** for:
  - a) preparation of temporary/permanent crowns and bridges
  - b) fitting temporary/permanent crowns and bridges
  - c) adjustment of temporary/permanent crowns and bridges
2. select the correct type of adhesive material required for the fitting of **fixed prostheses**
3. provide the instruments required for trimming, cleaning and checking the final adjustment of fixed prostheses.

#### Range

##### Equipment, instruments and material

- a) local anaesthetic
- b) hand pieces and burs
- c) suction equipment
- d) equipment for protecting and retraction the soft tissues
- e) rubber dam
- f) gingival retraction cord
- g) temporary cements
- h) temporary crown and bridge materials
- i) permanent cements

##### Fixed prostheses

- a) crowns
- b) inlays
- c) veneers
- d) permanent bridges
- e) adhesive bridges
- f) temporary bridges
- g) temporary crowns

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

### Outcome 3

be able to select and prepare impression materials for fixed and removable prostheses

#### Assessment Criteria

The learner can:

1. select the correct type of **impression material** for taking impressions for fixed prosthesis
2. prepare the correct quantity of impression material
  - a) to the correct consistency
  - b) within the handling and setting time relative to the material and ambient temperature
  - c) using the correct technique
3. load impression materials correctly on the impression tray
4. disinfect impressions appropriately on removal from the patient's mouth
5. store the impressions so that their accuracy is maintained
6. complete laboratory tickets with legible and accurate information regarding the stage, shade and requirements and attach it securely to the packaging.

#### Range

##### Impression material

- a) alginate
- b) putty

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

### Outcome 4

be able to prepare equipment, instruments and materials for removable prostheses and orthodontic appliances

#### Assessment Criteria

The learner can:

1. provide and list the **equipment, instruments and materials** required for:
  - a) try-in stage of a removable **prosthesis**
  - b) fitting stage of a removable **prosthesis**
2. list the range of orthodontic treatments available
3. list the equipment, instruments and materials which are used in the following stages of fixed and removable orthodontic treatments:
  - a) fitting
  - b) monitoring
  - c) adjusting

#### Range

##### Equipment, instruments and materials

- a) heat source
- b) shade guides
- c) wax knife
- d) LeCron carver
- e) sheet wax
- f) mirrors
- g) hand piece
- h) polymeric stones
- i) polymeric trimming burs
- j) pressure relief paste
- k) articulating paper

##### Prosthesis

- a) metal
- b) acrylic
- c) immediate

## Unit 309

## Provide chairside support during the provision of fixed and removable prostheses

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

#### **Prosthesis**

Orthodontic is seldom carried out in a dental practice

#### **Other sources of competence evidence:**

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.



## Unit 310

## Provide chair side support during non-surgical endodontic treatment

**Level:** 2

**Credit value:** 2

**UAN number:** K/502/7602

### Unit aim

This unit aims to reflect the learner's practical skills and understanding of preparing the clinical dental environment for non-surgical endodontic treatment. They will need to demonstrate that they are able to work effectively as part of the team. Learners will need to have an understanding of the possible complications and traumas associated with providing non-surgical endodontic treatment and actions to be taken in event of emergency. Patient care is essential throughout this unit.

### Learning outcomes

There are **two** learning outcomes to this unit. The learner will:

1. be able to prepare the clinical environment for non surgical endodontic procedures
2. be able to assist the operator during non surgical endodontic procedures

### Guided learning hours

It is recommended that **16** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards

This unit is linked to the National Occupational Standards unit 310 Provide chair side support during non-surgical endodontic treatment (OH7).

### Support of the unit by a sector or other appropriate body

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit).

## Unit 310

## Provide chair side support during non-surgical endodontic treatment

### Outcome 1

be able to prepare the clinical environment for non surgical endodontic procedures

#### Assessment Criteria

The learner can:

1. provide the necessary patient's **charts, records, and images**
2. correctly identify the planned **treatment**
3. select the correct **equipment, instruments materials and medicaments** for the different stages of endodontic treatment
4. list the different equipment, instruments, materials and medicaments that may be required at each **stage** of non-surgical endodontic treatment
5. list the different materials used in sealing, filling and restoration of the root canal
6. list the equipment and instruments that may be required for the isolation of a tooth for non-surgical endodontic treatment.

#### Range

##### Charts, records and images

- a) paper based
- b) electronic
- c) radiographs/images

##### Treatment

- a) permanent

##### Equipment, instruments, materials and medicaments

- a) for Identifying, locating, filling and measuring the roots of teeth
- b) rubber dam

##### Stage

- a) access
- b) isolation
- c) preparation
- d) measurement
- e) obturation
- f) restoration

## Unit 310

## Provide chair side support during non-surgical endodontic treatment

### Outcome 2

be able to assist the operator during non surgical endodontic procedures

#### Assessment Criteria

The learner can:

1. assist the operator and support the patient during the isolation of the tooth
2. aspirate the treatment area, maintaining a clear field of operation
3. provide **equipment and medicaments** required for irrigating root canals
4. assist the operator in the measurement and recording of the root canal length
5. correctly prepare materials and medicaments for either temporary or permanent placement in the canals
6. list the equipment, instruments, materials and medicaments that may be required during each type of **non-surgical endodontic treatment** and their uses.

#### Range

##### Equipment and medicaments

- a) syringes
- b) needles
- c) irrigation solution
- d) paper points

##### Non-surgical endodontic treatment

- a) pulp capping
- b) pulpotomy
- c) pulpectomy

## Unit 310

## Provide chair side support during non-surgical endodontic treatment

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

<b>Root canal instruments and medicaments</b>	include: Hand or rotary Broaches, reamers, files, paste fillers, spreaders, paper points, Gutta Percha points, Silver Points.
<b>Treatment</b>	Deciduous is seldom carried out and classified as non usual treatment

#### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.
- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 311

## Provide chairside support during the extraction of teeth and minor oral surgery

**Level:** 3  
**Credit value:** 3  
**UAN number:** R/502/7352

### Unit aim

This unit aims to ensure the correct preparation of the dental environment and assisting the operator during extractions and minor oral surgery within the dental environment. Understanding of complications that could occur during all treatments must be clear and reflect competence in the dental professional's own role throughout. Practical competence must be proved during all types of treatments relating to extractions and understanding shown of all instruments, materials and records used. It also enables learners to demonstrate knowledge of current legislations relating to confidentiality and the maintenance of records. This unit reflects key points relating to cross infection control, communication techniques and the identification of medical emergencies. Patient care is essential throughout this unit.

### Learning outcomes

There are **three** learning outcomes to this unit. The learner will:

1. be able to prepare the patient and the dental environment for extractions and minor oral surgery
2. be able to support the operator and the patient during extractions and minor oral surgery
3. be able to support the operator and the patient following extractions and minor oral surgery

### Guided learning hours

It is recommended that **24** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the National Occupational Standards Unit 311 Provide chairside support during the extraction of teeth and minor oral surgery (OH8).

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- portfolio containing examples of observed practice in the learner's workplace or via an appropriate alternative method (see guidance at the end of the unit)

## Unit 311

## Provide chairside support during the extraction of teeth and minor oral surgery

### Outcome 1

be able to prepare the patient and the dental environment for extractions and minor oral surgery

#### Assessment Criteria

The learner can:

1. make available the correct patient's **charts, records and images**
2. prepare and list the **equipment, instruments, materials and medicaments** that may be required for
  - a) extracting erupted **teeth**
  - b) during **minor oral surgery**
3. check with the patient that they have followed the prescribed pre treatment instructions and report any non-compliance promptly to the appropriate member of the team.

#### Range

##### Charts, records and images

- a) paper based
- b) electronic
- c) dental images

##### Equipment, instruments, materials and medicaments

- a) topical Anaesthetic
- b) Local Anaesthetic
- c) Local Anaesthetic syringes and needles
- d) Luxators and/or elevators e.g. Couplands, Warwick James, Cryers, Extraction Forceps, Scalpel, periosteal elevator, cheek retractor, Spencer Wells, suture, suture holder, dissecting forceps, scissors, surgical suction tip, surgical hand piece, and burs or surgical mallet and chisel,
- e) irrigation syringe/needle/solution (e.g. saline)
- f) Haemostatic medicaments e.g. gelatine sponges, oxidised cellulose.

##### Teeth

- a) deciduous
- b) permanent

##### Minor Oral Surgery

- a) implants
- b) apicectomy
- c) fraenectomy
- d) biopsy
- e) removal of impacted teeth
- f) removal of buried roots

## Unit 311

## Provide chairside support during the extraction of teeth and minor oral surgery

### Outcome 2

be able to support the operator and the patient during extractions and minor oral surgery

#### Assessment Criteria

The learner can:

1. provide the **patient** with appropriate support during the administration of local or regional anaesthesia
2. aspirate, irrigate and protect the patient's soft tissues
3. monitor the patient, identify any **complications** and take the necessary actions without delay
4. assist the operator during the:
  - a) extraction of erupted teeth
  - b) **minor oral surgery procedures**
5. assist the operator in the placing of sutures (if used), and record the sutures correctly.

#### Range

##### Patient

- a) adults
- b) children
- c) older people
- d) those with special needs

##### Complications

- a) nerve damage
- b) haemorrhage
- c) oral antral fistula
- d) equipment failure
- e) collapse

##### Minor oral surgery procedures

- a) implants
- b) apicectomy
- c) fraenectomy
- d) biopsy
- e) removal of impacted teeth
- f) removal of buried roots
- g) removal of erupted teeth
- h) removal of un-erupted teeth and roots
- i) minor oral surgery, (Including raising a mucoperiosteal flap, bone removal, tooth sectioning).

## Unit 311

### **Provide chairside support during the extraction of teeth and minor oral surgery**

#### Outcome 3

be able to support the operator and the patient following extractions and minor oral surgery

#### **Assessment Criteria**

The learner can:

1. provide the patient with appropriate post operative instructions following the extraction of erupted **teeth** and minor oral surgery, including access to emergency care and advice
2. complete the necessary charts and records accurately and legibly following the procedure
3. provide information on why it is important to confirm with the operator that the patient is fit to leave the surgery prior to them doing so.

#### **Range**

##### **Teeth**

- a) deciduous
- b) permanent



## Unit 311

## Provide chairside support during the extraction of teeth and minor oral surgery

### Notes for guidance

This section provides explanations and definitions of the terms used in this workforce competence. In competences, it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the competence, may be used in a very particular way.

<b>Charts and records</b>	includes: paper based; electronic and dental images
<b>Equipment, instruments, materials and medicaments</b>	includes: topical anaesthetic, local anaesthetic equipment – appropriate syringe, needle and LA cartridge; luxators and/or elevators e.g. Couplands, Warwick James or Cryers; forceps; surgical extraction equipment e.g. scalpel, periosteal elevator, cheek retractor, tongue retractor, spencer wells, suture, suture holder, dissecting forceps, scissors, surgical suction tip, surgical handpiece and burs or surgical mallet and chisel; irrigation, e.g. saline and haemostatic medicaments – gelatine sponges, oxidised cellulose
<b>Patients</b>	includes: adults; children; older people and those with special needs
<b>Treatment</b>	extraction of teeth and minor oral surgery includes: extraction of erupted teeth (deciduous and permanent); extraction of un erupted teeth or roots; bone removal and raising mucoperiosteal flaps
<b>Standard precautions and health and safety measures</b>	a series of interventions which will minimise or prevent infection and cross infection, including: hand washing/cleansing before during and after the activity; the use of <b>personal protective clothing</b> and <b>additional protective equipment</b> when appropriate it also includes: handling <b>contaminated</b> items; disposing of waste; safe moving and handling techniques; untoward incident procedures and safe handling of medicaments

### Other sources of competence evidence:

Some competence criterion may be difficult to evidence by observation and/or expert witness testimony because they may refer to contingencies or infrequently occurring activities.

- **Work Products:** These are non-confidential records made, or contributed to, by the learner, e.g. incident records, maintenance reports.
- **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 e.g. 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 e.g. what are your workplace procedures for dealing with risks which you are not able to handle yourself?
- **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 e.g. Describe your responsibilities for health and safety in your workplace.

- **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 e.g. City & Guilds Certificate in Health and Safety at Work
- **Case Studies, projects, assignments and candidate/reflective accounts of your work:** These methods are most appropriately used to cover any outstanding areas in the knowledge requirement of the learner's qualification. Occasionally, because an event happens rarely or may be difficult to observe, the learner may be able to use a candidate/ reflective account to provide some of the performance evidence for this unit. E.g. an account of an occasion when you reported on a high risk hazard
- **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 him/her to identify the appropriate use of witnesses.

## Unit 312

## Principles of infection control in the dental environment

**Level:** 3  
**Credit value:** 5  
**UAN number:** L/502/7446

### Unit aim

The aim of this unit is to describe infectious diseases, their routes of transmission and methods of preventing cross infection.

### Learning outcomes

There are **five** learning outcomes to this unit. The learner will:

1. understand the process of infection control
2. understand the significance of micro-organisms
3. understand the management of infectious conditions affecting dental patients
4. know the various methods of decontamination
5. understand relevant health & safety legislation, policies and guidelines

### Guided learning hours

It is recommended that **20** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the Ensure your own actions reduce the risk to health & safety EMPNTO.

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- an assessment paper containing multiple-choice and short answer questions.

## Unit 312

## Principles of infection control in the dental environment

### Outcome 1

understand the process of infection control

#### Assessment Criteria

The learner can:

1. describe the causes of cross infection
2. describe the methods for preventing cross infection
3. explain the principles of Standard (Universal) **infection** control precautions.

#### Range

##### Infection

- a) transmission of infection
- b) measures for preventing cross infection
- c) management of blood and body fluid spillages
- d) social
- e) clinical and aseptic hand hygiene procedures
- f) barrier techniques including zoning
- g) importance of record keeping in relation to cross infection

## Unit 312

## Principles of infection control in the dental environment

### Outcome 2

understand the significance of micro-organisms

#### Assessment Criteria

The learner can:

1. describe the main **micro-organisms** in potentially infectious conditions
2. explain the routes of transmission of **micro-organisms**
3. explain the significance of the terms pathogens and non-pathogens.

#### Range

##### Micro-organisms

- a) groups of micro organisms present in the oral cavity e.g., bacteria, viruses, fungi, and spores
- b) organisms capable of producing disease, routes of entry, direct/indirect contact.

## Unit 312

## Principles of infection control in the dental environment

### Outcome 3

understand the management of infectious conditions affecting dental patients

#### Assessment Criteria

The learner can:

1. describe infectious conditions which affect individuals within the dental environment
2. describe what actions to take to prevent the spread of **infectious diseases** in the dental environment
3. explain the importance of immunisation of **dental personnel**
4. describe how the potentially infectious conditions affect the body systems.

#### Range

##### Infectious diseases

- a) infections important in dentistry e.g. Hepatitis B, HIV, Herpes Simplex

##### Dental personnel

- b) dentist
- c) DCP personnel
- d) policies and records, e.g. Control of infection policy, staff induction policy, staff immunisation records. Relevance of staff and patient medical histories

## Unit 312

## Principles of infection control in the dental environment

### Outcome 4

know the various methods of decontamination

#### Assessment Criteria

The learner can:

1. describe the principles and methods of **clinical and industrial sterilisation**
2. describe the principles and methods of **disinfection**
3. explain the **preparation of a clinical area** to control cross infection
4. explain the procedures used to decontaminate a clinical environment after use
5. state the chemical names for decontaminants and where they are used.

#### Range

##### Clinical and industrial sterilisation

- a) clinical equipment used in preparing items for sterilisation, e.g. washers disinfectors, ultrasonic cleaners
- b) sterilisation equipment and methods, e.g. vacuum and non-vacuum autoclaves, gamma radiation, measures for checking sterility, decontamination areas.

##### Disinfection

- a) difference between asepsis, sterilisation and disinfection
- b) different types of disinfectants and their uses in clinical environments

##### Preparation of a clinical area

- a) different methods used in maintaining the cleanliness of clinical surfaces, equipment, handpieces, instruments and hand hygiene.

## Unit 312

## Principles of infection control in the dental environment

### Outcome 5

understand relevant health & safety legislation, policies and guidelines

#### Assessment Criteria

The learner can:

1. identify **health and safety policies and guidelines** in relation to infection control
2. describe how to deal with a **sharps injury**
3. explain the use of personal protective equipment in the dental environment
4. describe ways of dealing with clinical and non-clinical waste.

#### Range

##### Health and safety policies and guidelines

- a) Health & Safety at work Act
- b) Control of Substances Hazardous to Health regulations (COSHH)
- c) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)
- d) Special Waste and Hazardous Waste Regulations
- e) Department of Health guidelines and regulations, e.g. Decontamination in primary care dental practices
- f) Care Quality Commission
- g) Health & Safety Executive guidelines.

##### Sharps injury

- a) protocols for sharps disposal
- b) clean and contaminated sharps injuries



## **Unit 313                      Assessment of oral health and treatment planning**

**Level:**                      3  
**Credit value:**        3  
**UAN number:**       J/502/7459

### **Unit aim**

The aim of this unit is to understand the reasons and effective methods that can be used in oral health treatment planning.

### **Learning outcomes**

There are **five** learning outcomes to this unit. The learner will:

1. understand the various methods of dental assessment
2. know the clinical assessments associated with orthodontics
3. understand the changes that may occur in the oral tissues
4. know the medical emergencies that may occur in the dental environment
5. know the basic structure and function of oral and dental anatomy

### **Guided learning hours**

It is recommended that **15** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### **Details of the relationship between the unit and relevant national standards (if appropriate)**

This unit is linked to the Basic Life Support CHS36.

### **Support of the unit by a sector or other appropriate body (if required)**

This unit is endorsed by Skills for Health.

### **Assessment**

This unit will be assessed by:

- an assessment paper containing multiple-choice and short answer questions.

## Unit 313

## Assessment of oral health and treatment planning

### Outcome 1

understand the various methods of dental assessment

#### Assessment Criteria

The learner can:

1. describe **methods** of recording soft tissue conditions
2. explain **methods** of recording periodontal conditions using **periodontal charts**
3. describe the reasons for taking radiographs and photographs during assessment and treatment planning (include reasons for the monitoring of dental practices)
4. describe the uses of the different **materials** used within dental assessment (include impression materials for study models)
5. describe the methods of measuring pulp vitality and their advantages and disadvantages
6. explain the **legislation and guidelines** relating to patients' records and confidentiality
7. explain the importance of informed consent and its relevance prior to any treatment undertaken
8. explain the workplace **policies** relating to complaints and your role throughout.

#### Range

#### Methods

- a) different methods of clinical assessment, e.g. types of probes, dyes, transillumination, vitality testing

#### Periodontal charts

- a) BPE
- b) full perio charting
- c) definitions of both.

#### Materials

- a) impression materials
- b) aids to assessing the function of teeth

#### Polices, Legislation and guidelines

- a) Data protection act
- b) Department of Health guidelines and regulations.
- c) GDC Standards for Dental Professionals

## Unit 313

## Assessment of oral health and treatment planning

### Outcome 2

know the clinical assessments associated with orthodontics

#### Assessment Criteria

The learner can:

1. describe the classifications of malocclusion
2. describe the types of **orthodontic appliances** in relation to treatment required
3. explain pre and post operative instructions for **orthodontic procedures**
4. explain the role of the dental nurse in providing support during orthodontic assessment and treatment.

#### Range

##### Orthodontic appliances

- a) function and uses of removable appliances, e.g. retainers/functional
- b) function and uses of fixed appliances

##### Orthodontic procedures

- a) care and maintenance of both removable and fixed appliances

## Unit 313

## Assessment of oral health and treatment planning

### Outcome 3

understand the changes that may occur in the oral tissues

#### Assessment Criteria

The learner can:

1. explain **diseases** of the oral mucosa
2. describe the effects of ageing on the soft tissue
3. identify the **medical conditions** that may affect the oral tissues

#### Range

##### Diseases

- a) including both malignant and potentially malignant lesions

##### Medical conditions

- a) oral cancer
- b) herpes
- c) HIV
- d) Hepatitis
- e) Diabetes
- f) Epilepsy
- g) eating or digestive disorders

## Unit 313

## Assessment of oral health and treatment planning

### Outcome 4

know the medical emergencies that may occur in the dental environment

#### Assessment Criteria

The learner can:

1. identify **medical emergencies** that may occur in the dental environment and how to deal with them.

#### Range

##### Medical emergencies

- a) fainting
- b) diabetic coma
- c) asthma attack
- d) angina/myocardial infarction
- e) epileptic seizure
- f) respiratory arrest
- g) cardiac arrest

## Unit 313

## Assessment of oral health and treatment planning

### Outcome 5

know the basic structure and function of oral and dental anatomy

#### Assessment Criteria

The learner can:

1. describe the structure, morphology and eruption dates of the primary and secondary dentition
2. describe the structure and function of, gingivae and supporting tissue
3. describe the position and function of salivary glands and muscles of mastication
4. describe the structure of the maxilla and mandible and movements of the temporo-mandibular joint
5. describe nerve and blood supply to the teeth and supporting structures
6. describe the structure and function of teeth and gingivae including the number of roots
7. explain common oral **diseases** including both malignant and potentially malignant lesions and methods for their diagnosis, prevention and management
8. describe the diagnosis and management of **diseases** of the oral mucosa, of other soft tissues and the facial bones and joints.

#### Range

##### Diseases

- a) including oral cancer
- b) lichen planus
- c) oral candidiasis
- d) herpes
- e) glossitis
- f) osteoporosis
- g) salivary gland disorders

## Unit 314

## Dental radiography

**Level:** 3  
**Credit value:** 4  
**UAN number:** H/502/7503

### Unit aim

The aim of this unit is to understand current radiography legislation including the principles and techniques of taking and processing radiographs.

### Learning outcomes

There are **four** learning outcomes to this unit. The learner will:

1. know the regulations and hazards associated with ionising radiation
2. know the different radiographic films and their uses
3. understand the imaging process and the different chemicals used
4. understand the importance for stock control of radiographic films

### Guided learning hours

It is recommended that **15** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the Ensure your own actions reduce the risk to health & safety EMPNTO.

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- an assessment paper containing multiple-choice and short answer questions.

## Unit 314

### Outcome 1

## Dental radiography

know the regulations and hazards associated with ionising radiation

### Assessment Criteria

The learner can:

1. state the principles of the **IRMER regulations**
2. explain the safe use of x-ray equipment
3. explain the role of dental personnel when using ionising radiation in the dental environment
4. identify the hazards associated with ionising radiation
5. explain your organisation's **practices and policies** relating to ionising radiations and the taking of dental images.

### Range

#### IRMER regulations

- a) ionising radiation regulations 1999
- b) ionising radiation (medical exposure) regulations 2000

#### Practices and policies

- a) local rules
- b) quality control systems
- c) staff training records



## Unit 314

### Outcome 2

## Dental radiography

know the different radiographic films and their uses

### Assessment Criteria

The learner can:

1. explain the uses of different **intra oral radiographs**
2. explain the uses of different **extra oral radiographs**
3. state the reasons for using digital radiography
4. explain the purpose of intensifying screens in dental radiography
5. explain the concerns that patients may have regarding dental imaging.

### Range

#### Intra oral radiographs

- a) the function and purpose of bitewing, periapical, occlusal radiographs

#### Extra oral radiographs

- a) the function and purpose of lateral oblique, cephalostats, orthopantomographs radiographs

## Unit 314

### Outcome 3

## Dental radiography

understand the imaging process and the different chemicals used

### Assessment Criteria

The learner can:

1. explain the manual, automatic and digital processing of radiographs
2. describe the **faults** that may occur during the taking and processing of radiographs
3. explain how x-ray chemicals should be handled, stored and disposed of safely
4. explain how a spillage of x-ray chemicals should be dealt with
5. explain what action to take in the event of **equipment** failure
6. explain why it is important to protect the processing environment from accidental intrusion including the use of safe lights.

### Range

#### Equipment

- a) x-Ray machine
- b) automatic film processors

#### Faults

- a) operator
- b) processing and relevant corrective action needed

## **Unit 314**

### **Outcome 4**

## **Dental radiography**

understand the importance for stock control of radiographic films

### **Assessment Criteria**

The learner can:

1. explain the importance of rotating film stock
2. explain the methods of accurately mounting radiographs and the consequences of not mounting radiographs correctly
3. describe the storage of radiographs and why x-ray films should be stored away from ionising radiations
4. describe suitable quality control recording systems
5. explain why film stock that has deteriorated should not be used
6. explain the purpose of quality assuring dental radiographs.

## Unit 315

## Scientific principles in the management of oral health diseases and dental procedures

**Level:** 3  
**Credit value:** 5  
**UAN number:** D/502/7581

### Unit aim

The aim of this unit is to understand the aetiology and progression of oral diseases, methods of prevention, dental procedures and restoration of the dentition.

### Learning outcomes

There are **four** learning outcomes to this unit. The learner will:

1. know the common oral diseases
2. understand the methods for the prevention and management of oral diseases
3. know how to manage and handle materials and instruments during dental procedures
4. understand the purpose and stages of different dental procedures

### Guided learning hours

It is recommended that **25** hours should be allocated for this unit, although patterns of delivery are likely to vary.

### Details of the relationship between the unit and relevant national standards (if appropriate)

This unit is linked to the Ensure your own actions reduce the risk to health & safety EMPNTO.

### Support of the unit by a sector or other appropriate body (if required)

This unit is endorsed by Skills for Health.

### Assessment

This unit will be assessed by:

- an assessment paper containing multiple-choice and short answer questions.

## **Unit 315**

## **Scientific principles in the management of oral health diseases and dental procedures**

### **Outcome 1**

know the common oral diseases

### **Assessment Criteria**

The learner can:

1. describe the aetiology and progression of dental caries
2. describe the aetiology and progression of periodontal disease
3. explain the development of plaque and its composition
4. describe the inflammatory process and effects of the disease process.

## Unit 315

## Scientific principles in the management of oral health diseases and dental procedures

### Outcome 2

understand the methods for the prevention and management of oral diseases

#### Assessment Criteria

The learner can:

1. describe the main types and causes of **oral disease**
2. explain the different **oral hygiene techniques** used to prevent oral diseases
3. describe how **diet** and **social factors** can affect oral health
4. explain the different forms of **fluoride** and its optimal level
5. explain the methods of **communicating** information about the prevention of oral diseases.

#### Range

##### Oral disease

- a) caries
- b) gingivitis
- c) periodontal disease
- d) erosion
- e) abrasion
- f) attrition

##### Oral hygiene techniques

- a) fluoride
- b) disclosing tablets
- c) tooth brushing
- d) Interdental aids
- e) Mouthwashes
- f) dental health messages

##### Diet

- a) sugar – types – content and frequency
- b) carbonated and non carbonated acidic drinks

##### Social factors

- a) family background
- b) cultural
- c) environmental

##### Fluoride

- a) methods of delivering fluoride both systemically and topically including advantages and disadvantages

##### Communication

- a) Verbal and non verbal methods

## Unit 315

## Scientific principles in the management of oral health diseases and dental procedures

### Outcome 3

know how to manage and handle materials and instruments during dental procedures

#### Assessment Criteria

The learner can:

1. list and state the functions of different equipment, instruments and materials /medicaments used in:
  - a. preparation, **restoration** and finishing of cavities
  - b. periodontal therapy and their functions
  - c. different stages of endodontic treatment
  - d. **crowns, bridges and veneers**
  - e. **complete, partial and immediate dentures**
  - f. **different stages of orthodontic treatment**
2. describe the advantages/disadvantages and hazards associated with:
  - a. **restorative materials**
  - b. lining materials
  - c. different types of etchants
  - d. different types of bonding agents
  - e. curing lights
3. explain the uses, manipulation, disinfection and storage of different impression materials
4. explain the hazards associated with amalgam and how to deal with a mercury spillage
5. explain the importance of matrix systems and the equipment and instruments that may be used
6. describe the types of equipment used in the administration of **local and regional anaesthesia**.

#### Range

##### Restoration

- a) moisture control
- b) hand pieces and burs
- c) hand instruments
- d) additional equipment specific to preparing placement and finishing of restorative material

##### Restorative materials

- a) composites
- b) glass ionomer
- c) amalgam
- d) temporary restorative materials

##### Stages of fixed and removable prosthesis

- a) preparation
- b) impressions
- c) fitting and adjustment

##### Local and regional anaesthetic

- a) topical
- b) Intrapupal
- c) Intraoesous

- d) Intraligamentary
- e) Infiltration
- f) block



## Unit 315      Scientific principles in the management of oral health diseases and dental procedures

Outcome 4      understand the purpose and stages of different dental procedures

### Assessment Criteria

The learner can:

1. explain the different stages in cavity preparation for:
  - a) permanent teeth
  - b) deciduous teeth
2. explain the purposes of permanent and temporary crowns, bridges and veneer techniques
3. explain the different **stages** in making complete and partial prostheses including advice and after care
4. list the different types of non-surgical endodontic treatment
5. explain which **type** of appliance may be used for the different orthodontic treatments
6. list the benefits of the **treatments** available for replacing missing teeth.

### Range

#### Stages

- a) impressions
- b) bite
- c) try-in
- d) fit
- e) adjustment relines
- f) obturators
- g) tissue conditioners
- h) additions

#### Treatments

- a) implants
- b) bridges
- c) dentures

#### Type

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

## 6 Key skills mapping

Unit number	Communication	Application of Number	Information and Communication Technology
301	3	2	1
302	3	2	1
268	3	2	1
304	3	2	1
305	3	2	1
306	3	2	1
307	3	2	1
308	3	2	1

### Wider Key Skills – signposted evidence opportunities

The ‘signposts’ below identify the **potential** for ‘wider’ Key Skills portfolio evidence gathering that can be naturally incorporated into the completion of each unit. Any Key Skills evidence will need to be separately assessed and must meet the relevant standard.

Unit number	Problem Solving	Improving Own Learning and Performance	Working With Others
301	3	3	3
302	3	3	3
268	3	3	3
304	3	3	3
305	3	3	3
306	3	3	3
307	3	3	3
308	3	3	3

## Appendix 1 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 **Centres and Training Providers homepage** on [www.cityandguilds.com](http://www.cityandguilds.com).

***Centre Guide – Delivering International Qualifications*** 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. Specifically, the document includes sections on:

- The centre and qualification approval process and forms
- Assessment, verification and examination roles at the centre
- Registration and certification of candidates
- Non-compliance
- Complaints and appeals
- Equal opportunities
- Data protection
- Frequently asked questions.

***Providing City & Guilds qualifications – a guide to centre and qualification approval*** 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. Specifically, the document includes sections on:

- The centre and qualification approval process and forms
- Assessment, verification and examination roles at the centre
- Registration and certification of candidates
- Non-compliance
- Complaints and appeals
- Equal opportunities
- Data protection
- Frequently asked questions.

***Ensuring quality*** contains updates and good practice exemplars for City & Guilds assessment and policy issues. Specifically, the document contains information on:

- Management systems
- Maintaining records
- Assessment
- Internal verification and quality assurance
- External verification.

***Access to Assessment & Qualifications*** 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 such on such things as:

- ***Walled Garden***  
Find out how to register and certificate candidates on line

- **Events**  
Contains dates and information on the latest Centre events
- **Online assessment**  
Contains information on how to register for e-volve assessments.

City & Guilds  
**Believe you can**



[www.cityandguilds.com](http://www.cityandguilds.com)

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## Useful contacts

### UK learners

#### General qualification information

T: +44 (0)844 543 0033

E: [learnersupport@cityandguilds.com](mailto:learnersupport@cityandguilds.com)

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### International learners

#### General qualification information

T: +44 (0)844 543 0033

F: +44 (0)20 7294 2413

E: [intcg@cityandguilds.com](mailto:intcg@cityandguilds.com)

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### Centres

Exam entries, Registrations/enrolment, Certificates, Invoices, Missing or late exam materials, Nominal roll reports, Results

T: +44 (0)844 543 0000

F: +44 (0)20 7294 2413

E: [centresupport@cityandguilds.com](mailto:centresupport@cityandguilds.com)

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### 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

T: +44 (0)844 543 0000

F: +44 (0)20 7294 2413

F: +44 (0)20 7294 2404 (BB forms)

E: [singlesubjects@cityandguilds.com](mailto:singlesubjects@cityandguilds.com)

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### International awards

Results, Entries, Enrolments, Invoices, Missing or late exam materials, Nominal roll reports

T: +44 (0)844 543 0000

F: +44 (0)20 7294 2413

E: [intops@cityandguilds.com](mailto:intops@cityandguilds.com)

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### Walled Garden

Re-issue of password or username, Technical problems, Entries, Results, GOLLA, Navigation, User/menu option, Problems

T: +44 (0)844 543 0000

F: +44 (0)20 7294 2413

E: [walledgarden@cityandguilds.com](mailto:walledgarden@cityandguilds.com)

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### Employer

Employer solutions, Mapping, Accreditation, Development Skills, Consultancy

T: +44 (0)121 503 8993

E: [business\\_unit@cityandguilds.com](mailto:business_unit@cityandguilds.com)

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### Publications

Logbooks, Centre documents, Forms, Free literature

T: +44 (0)844 543 0000

F: +44 (0)20 7294 2413

**If you have a complaint, or any suggestions for improvement about any of the services that City & Guilds provides, email:**  
**[feedbackandcomplaints@cityandguilds.com](mailto:feedbackandcomplaints@cityandguilds.com)**

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