National Examining Board for Dental Nurses

A Toolkit for Course Providers and Witnesses

Helping to get the most from clinical practice-based placements

Contents

Introduction

The GDC learning outcomes reflect the knowledge, skills, attitudes and behaviours a registrant must have to practise safely, effectively and professionally.

- **Clinical** – the range of skills required to deliver direct care, where registrants interact with patients, and the essential technical skills, carried out in the absence of patients which support their care, for example, by dental technicians.
- **Communication** – the skills involved in effectively interacting with patients, their representatives, the public and colleagues and recording appropriate information to inform patient care Introduction 6 General Dental Council Introduction.
- **Professionalism** – the knowledge, skills and attitudes/behaviours required to practise in an ethical and appropriate way, putting patients' needs first and promoting confidence in the dental team.
- **Management and Leadership** – the skills and knowledge required to work effectively as a dental team, manage their own time and resources and contribute to professional practices.

The purpose of dental nurse education and training is to produce individuals (Safe Beginners) that can demonstrate their competencies in the outcomes required for registration as a dental professional with the GDC, or post registration. Students should aim for and be supported to achieve the highest standards in terms of knowledge and skills. This includes clinical, technical and professional attributes particularly putting the interests of the patients first and at all times, as well as being able to judge their own limitations and work within them in line with the GDC's Scope of Practice.

Aim

As an awarding body NEBDN understands the importance of high-quality clinical practice-based learning environments for dental nurse students. Our aim is to work collaboratively and in support of all accredited Course Providers to develop well rounded professionals. In addition to being a competent clinician, dental nurses will have the range of professional skills required to begin working as part of a dental team, be well prepared for independent practice and for taking the next steps in their dental career.

Outcome

In line with NEBDN's accreditation standards, all Students undertaking training towards the National Diploma in Dental Nursing or a Post Registration qualification are required to complete a formative work-based assessment portfolio called the Record of Experience (RoE), or Record of Competence (RoC).The joint completion of these documents by the Course Provider, Student and the Witness enables the workplace team to become an integral part of the training of the dental nurse.

For the National Diploma in Dental Nursing, the summative assessment comprises a written and practical component aimed at assessing knowledge and decision making to demonstrate trainee dental nurses' understanding and competence. The summative assessment also adheres to current educational best practice.

Our Post Registration qualifications also include a written component assessing the knowledge, understanding and competence in a range of enhanced dental nurse skills.

This results in qualifications that we're proud of which enhance teamwork within the dental practice. Providing peace of mind to both the student and the dental practice that they have completed a robust qualification and can look forward to a fulfilling career within the dental profession.

This toolkit will help you to:

- Consider how you can help Students can get the most from their clinical practice-based placements.
- Understand the roles and responsibilities of the Course Provider and others supporting the Student i.e. Tutor, Internal Moderator, Witness, Mentor, NEBDN. With a specific focus on the Course Provider and the Witness.
- Explore what Students can expect in terms of their learning experiences and overall journey.
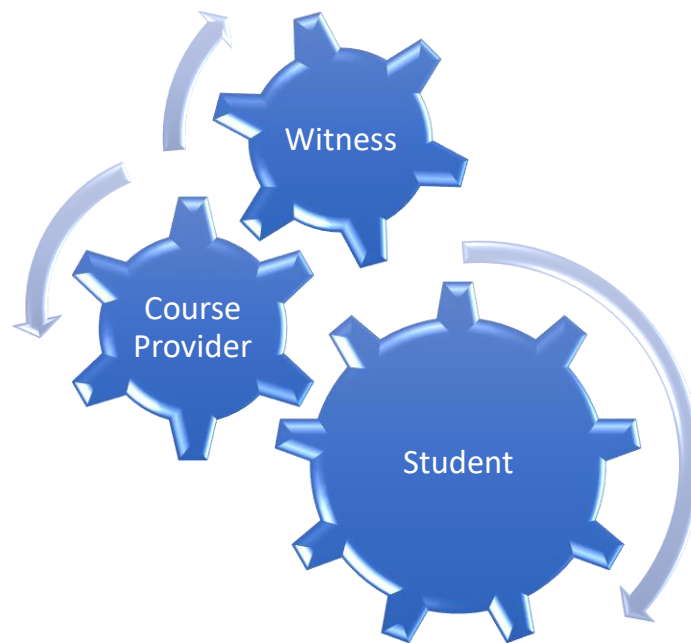
Section 1 – Course Providers

NEBDN's Accreditation **Standard 2 – Qualification Delivery and Development**, clearly defines that Course Providers must ensure that the delivery and development of the qualification/s is done so in line with all NEBDN and GDC specified requirements.

Course Providers have a real opportunity to work in collaboration with clinical practice-based placements and Witnesses who are appropriately prepared, to allow students' learning needs to be linked to specific experiences within a practical context. This results in a good working relationship across all stakeholders involved in the Students' learning journey, creating more positive outcomes for the patient.

It is the responsibility of education and training providers to deliver NEBDN's qualifications and develop individuals who will demonstrate the outcomes the GDC requires and that meet the requirements of the European Directive on dental training. In doing so, Course Providers and Clinical practice-based placements should make sure that they take account of the following:

- Patient needs and protection are a priority in delivering education and training, particularly relating to direct interaction with Students.
- Learning opportunities and experiences prepare Students adequately for the transition to vocational practice or further training.
- Developments in oral health need and the role of registrants in promoting the health and well-being of the public.
- Technological and clinical advances.
- Have an awareness that the qualification for registration only represents the first stage in the development of the dental professional, and training must prepare students to carry out reflective practice and self-directed learning to keep their knowledge and skills up to date throughout their professional lives. Adhering to any regulatory requirements regarding lifelong learning, CPD and revalidation.
- The importance of dental team working, with opportunities for Students to train and work with other dental professionals.
- That meaningful patient feedback is actively sought and recorded to be used to inform Student development.
- Students now learn and are assessed in a range of environments such as hospitals, primary care and community dental services. The education or training providers must ensure anyone involved in the supervision and training of students is adequately trained to carry out the role, both clinically and as appropriate in terms of assessment and reporting of student progress.

- All staff involved in the delivery and assessment of dental and DCP training must be familiar with and understand the GDC Preparing for Practice document.
- Students must have the opportunity to practise on a sufficient number and a wide range of patients, of all ages and including those with special care requirements, with a wide range of treatment needs, simple and complex – in order to achieve the outcomes.
- Students must have demonstrated to the education/training providers that they are clinically competent where the outcomes required this.
- Students must be trained in accordance with appropriate requirements in relation to dealing with medical emergencies.

Course Provider Responsibilities

- Provide an induction for the Student as well as all Witnesses allocated to your student, see appendix A for support and guidance with this.
- Information relating to all Witnesses must be documented, verified and monitored by the Course Provider, using the Student 'Witness status list' which forms part of the RoE/RoC.
- Course Providers must ensure that internal moderation is completed for each candidate in line with NEBDN's Standards for Accreditation:
  Internal Moderators are responsible for ensuring the quality of the workplace in which the Student will complete their Record of Experience (RoE) / Record of Competence (RoC). To this end they will need to ensure the safety of the clinical environment (using the Training Practice Monitoring Form) and that the workplace will allow the candidate to complete all aspects of the Record of Experience / Record of Competence as required (via the Service Level Agreement).
- Ensure that all new and existing Witnesses are fully aware of their role, responsibilities and obligations and maintain a consistent and standardised approach.

Continual Monitoring

The NEBDN Quality Auditors will make formal contact with all course providers on a quarterly basis to offer any support/advice that may be needed. Auditors will use a range of indicators, including results data to identify any concerns and may implement action plans to support Course Providers with any issues.

Annual Sampling

NEBDN has a duty to monitor the provision of both the Record of Experience (RoE) and the Post Registration Record of Competence (RoC). The Tutor, Witness and Internal Moderator (IM) sign to say that the candidate has completed the eRoE and RoC to the standards which have been clearly defined by NEBDN. The monitoring will be done in form of annual sampling as part of the annual audit process.

The RoE/RoC will be retained on PebblePad for 7 years following completion of the qualification, and will be accessible to the Student, Course Provider and NEBDN. This information is held for NEBDN auditing purposes.

Section 2 – Witnesses

NEBDN's Accreditation **Standard 3 – Administration, Supervision and Support of Students,** clearly defines that Course Providers must ensure that all Students must have appropriate supervision within the clinical and educational environment. The Course Provider and Witness must support students to improve their performance.

Dental professionals are part of a wider dental and healthcare team and should aim to deliver high quality patient care that puts patients' needs first. Therefore, supporting students with their education and training plays an integral role in this. Witnesses provide support and guidance in their practice area and have a unique opportunity to act as role model. Helping to shape the values and behaviours of students and to instil professional integrity. Good mentoring will depend on well-planned learning opportunities and the provision of support and coaching for students. NEBDN does however, acknowledge that this can be a challenging role as it is voluntary and provided alongside the delivery of care in a busy and challenging environment. It is essential that Witnesses are fully aware of the responsibilities and expectations required throughout the Students' programme of study. This will mean working collaboratively with the Student and Course Provider.

A key part of the training for Students is their Record or Experience (RoE) or Record of Competence (RoC), it documents their development over the course of the programme, and they need the help of a Witness to support them to complete it.

Key elements of the role:

- Supporting the application of theory into practice.
- Observing practice and performance within the Witnesses boundaries and providing constructive feedback.
- Encouraging reflection on practice, performance and experiences.

Whilst this is a voluntary role, it is a role that can be very rewarding and presents great opportunities to develop members of the dental team such as a Senior Dental Nurse or Dental Therapist. The key to success is making it work in practice to ensure consistency and a standardised approach.

Depending on the Student's placement, they may have access to multiple Witnesses, this may mean that a Witness may only support the Student with one practical assessment, or it

may be multiple. Regardless of this, the key responsibilities and expectations will be the same.

It is important to note that the registration of any person supporting a Student is at risk if they knowingly make a false declaration within the RoE or RoC. Any professional who witnesses any part of the RoE or RoC is, in their opinion, declaring the level of competency for the Student to independently complete the task. Should a Student's performance be questioned by the professional body in the future, a Witness may be called upon to justify their decision.

What is a Witness?

The Cambridge English Dictionary definition of a Witness is:

'someone who is asked to be present at a particular event and sign their name in order to prove that things have been done correctly'.

Who can be a Witness?

All Witnesses must meet the following requirements:

- Have a working knowledge of the qualification the Student is studying
- Be occupationally competent in the area of expertise - this should be credible and clearly demonstrable through continued learning and development.
- Must be registered with an appropriate professional body for example GDC or GMC.
- Must have an induction with the Course Provider, this can be face-to-face, by phone or other suitable means of communications.
- The Witness is not required to hold an assessor qualification.

The Role of the Witness

The role of a Witness is to provide confirmation and testimony of the Students competence in the relevant procedure or activity. All of which are clearly mapped to GDC learning outcomes set out in the qualification content. The testimony must relate directly to the Students performance in the workplace and can only be signed off by the Witness who has directly observed the task.

It is the Course Provider's responsibility to assess the Students overall performance against the set criteria provided by NEBDN, to ensure a standardised learning programme has been

followed. Therefore, the final decision relating to the Students Record of Experience/Record of Competence is still the responsibility of the Course Provider.

Why do NEBDN require Witnesses?

All Students need to complete tasks in the clinical placement/workplace whilst being observed by a Witness in real time. It is a form of observation by a suitably qualified individual rather than the Course Provider making and assessment without observing the task.

How does a Witness sign off Student performance?

The Witness will need to provide feedback on the Student's activity alongside the Student either on a mobile device or a computer using NEBDN's educational platform PebblePad. There is no need for the Witness to have an account directly with PebblePad, the entry will be completed via the Students account. However, once the entry is completed it can be instantly saved and locked down by the witness at the time of entry so that it cannot be changed or amended by the student post activity. This must be completed within a maximum of 14 days of the activity taking place.

Click here for a step-by-step guide as to how a Witness validates a procedure or activity.

Witness information and training tools

Each activity within the Roe/RoC is designed to demonstrate evidence of the Students level of competence during the treatment of patients. There is the potential that multiple competencies may be demonstrated during the treatment of one patient.

To support you with this process, NEBDN has provided two training videos, which can be found on YouTube at:
https://www.youtube.com/watch?v=diA3mWGFYOA
https://www.youtube.com/watch?v=Uib5Qkt_tsI

It is important to note that the training videos available specifically relate to The National Diploma in Dental Nursing Qualification only.

Video 1 – Relates to PER Unit 4 Section 4 of the RoE:
Removable Prosthesis Procedure, it provides a provides a simulation of a candidate undertaking this task. This will enable you to test your skills as a witness provide feedback and complete the grading process. Please refer to appendix B for an example of the criteria and assessment process.

Video 2 – Relates to PER Unit 5 Section 2 of the RoE:
Local Anaesthetic Procedure, it provides a provides a simulation of a candidate undertaking this task. This will enable you to test your skills as a witness provide feedback and complete the grading process. Please refer to appendix C for an example of the criteria and assessment process.

Principles of Good Practice

The following principles of good practice should be followed:

- Effective communication should be established with other members of the oral health care team.
- The health and safety of patients and the oral health care team should be promoted.

Each task will be carried out, where appropriate, during the normal treatment of a patient or, if this is not possible, in a simulated situation.

Assessment of Competence

For each case the candidate's competency must be assessed in line with the GDC domains of professional practice

1. **Clinical**
   The candidate demonstrated knowledge and clinical skills appropriate for the patient's condition and the type of sedation being used
2. **Professional**
   The candidate demonstrated professionalism in his/her duties and effective team working towards the delivery of safe, effective care.
3. **Communication**
   The candidate communicated appropriately, effectively and sensitively with patients, their relatives or carers and colleagues
4. **Management and Leadership**
   The candidate managed themselves and the clinical environment in line with current standards and guidelines.

For each area the performance in the domain should be graded as:

PCAS/PER Grade	Criteria
Not yet competent	In the view of the witness, the candidate's skills are not yet adequate in this area to a level you expect from a trainee/qualified dental nurse relevant to the subject matter
Competent	In the view of the witness, the candidate's skills meet or exceed the level you would expect from a trainee/qualified dental nurse relevant to the subject matter
DOC Grade	**Criteria**
Unsafe	In the view of the witness, the candidate demonstrated unsafe clinical practice relating to the requirements expected from a trainee/qualified dental nurse relevant to the subject matter clinical skill during the assessment.
Below Expectations	In the view of the witness, the candidate demonstrated below the expected standards of clinical practice relating to the requirements from a trainee/qualified dental nurse relevant to the subject matter clinical skill during the assessment.
Meets Expectations	In the view of the witness, the candidate was able to meet the expected standards of clinical practice relating to the requirements from a trainee/qualified dental nurse relevant to the subject matter clinical skill during the assessment.
Above Expectations	In the view of the witness, the candidate exceeded the expected standards of clinical practice relating to the requirements from a trainee/qualified dental nurse relevant to the subject matter clinical skill during the assessment.
Unable to Comment	The witness is unable to comment

It is essential for all Witnesses to note that only PCAS/PER/DOC that demonstrate FULL competence will count towards the requirements of the RoE/RoC. However, Students may wish to retain any PCAS/PER/DOC's that do not meet the expected requirements within their individual PDP to demonstrate the development of their clinical skills throughout their learning journey. For more detailed information and guidance please Click (here) for further resources to guide you on the key requirements for each NEBDN Qualification/Award.

For further guidance on the GDC domains of professional practice please see their website:

www.gdc-uk.org/dentalprofessionals/education/pages/dental-team-learning-outcomes.aspx

Providing feedback

To ensure feedback is appropriate and fit for purpose, Mentors and Witnesses should follow the guidance below and consider the examples of good, and bad feedback provided:

- Witnesses are required to give feedback on each element of the RoE/RoC submitted by the candidate.

- All feedback must be constructive – highlighting areas of good performance whilst also giving advice where improvement is needed, candidates must be encouraged to reflect on the performance as part of the mandatory requirements of the RoE/RoC.

- Avoid the use of the word 'but' because this negates the previous comment, however positive it was, and often gives the impression that the candidate should 'expect the worst' (substitute with the word 'and' instead).

- Refer to the relevant assessment criteria so that feedback is specific to that assessment process, and the candidate has an idea of 'what they're aiming for'.

- Give specific information on good performance so that this can be built upon for future assessments.

- Give specific information on poor performance so that improvement is correctly guided and obstacles to better performance can be overcome.

- Raise relevant issues or ask questions to determine the candidate's knowledge and understanding of the assessment content, to help clarify any misunderstandings and / or lack of knowledge.

- Provide feedback ideally at the time of completion or within 14 days of the assessment task, so that the candidate's performance is relatively fresh in their mind and they can relate comments effectively. Any element of the RoE/RoC signed outside the 14 days of the activity is deemed invalid (unless accompanied by explanatory statement).

- So that areas of concern or poor practice can be raised, the opportunity for dialogue should be provided to the candidate so that constructive discussion can take place,

and direct feedback can be given rather than just having to accept it with no comments.

Examples of good feedback:

Example 1 – The candidate fully understood the aim of the procedure and was well prepared. They were able to demonstrate each element of the criteria within the 3 key areas decontamination, sterilisation and professionalism. For example, the candidate wore appropriate PPE, and showed a good level of understanding of the dirty and clean zones and the significance of each. They were able to talk me through the sterilisation process and clear awareness of the national guidelines. They maintained full awareness of their clinical environment and displayed professionalism throughout and effective decision making. I am confident that the candidate is fully competent in the area.

Example 2 - The candidate fully understood the aim of the procedure, they were able to demonstrate each element of the criteria within the 4 key areas preparation, during the procedure, after procedure and professionalism. For example, the student was well prepared and had all the equipment required for the procedure including PPE for themselves and the patient. The candidate confirmed the procedure with me as the treating clinician and they implemented the appropriate disinfectant methods, which demonstrated a good level of knowledge and understanding. The patient's needs were met, and they were treated with dignity and respect before and after the procedure. I am confident that the candidate is fully competent in the area.

Example 3 - The candidate fully understood the aim of the procedure, they were able to demonstrate each element of the criteria within the 8 key areas preparation, during the procedure, for manual processing, for digital processing, for automatic processing, equipment maintenance, waste disposal and professionalism. For example, the student was well prepared and had all the equipment required for the procedure including PPE, disinfectant methods, and disposable covers. This demonstrated a good level of awareness and understanding of the clean and dirty zones. The candidate was also wearing their x-ray monitoring badge and was able to articulate its purpose. The candidate supported the patient appropriately, safely and reassured them throughout the procedure. Whilst the method we use is digital processing the candidate was able to describe the other methods clearly and explain the different processes involved such as processing, maintaining the equipment and waste disposal. I am confident that the candidate is fully competent in the area and managed themselves in a professional and safe way.

Examples of poor feedback:

Example 1 - Candidate carried out procedure satisfactorily

Example 2 - This PER has been signed off to satisfactory, well done

Example 3 - Student performed well

Top 5 Tips for Effective Feedback

1. Student feedback should be educative in nature.

Providing feedback means giving students an explanation of what they are doing correctly AND incorrectly. However, the focus of the feedback should be based essentially on what the students is doing right. It is most productive to a student's learning when they are provided with an explanation and example as to what is accurate and inaccurate about their work.

Use the concept of constructive feedback to guide you: be specific, descriptive and helpful. Identify issues, offer correction information and 'even better if...' scenarios.

2. Student feedback should be given in a timely manner.

When student feedback is given immediately after showing proof of learning, the student responds positively and remembers the experience about what is being learned in a confident manner. If we wait too long to give feedback, the moment is lost, and the student might not connect the feedback with the action.

3. Be sensitive to the individual needs of the student.

It is vital that we take into consideration each individual when giving student feedback. Some students need to be nudged to achieve at a higher level and other needs to be handled very gently so as not to discourage learning and damage self-esteem. A balance between not wanting to hurt a student's feelings and providing proper encouragement is essential.

4. Ask the 4 questions.

Studies of effective teaching and learning (Dinham, 2002, 2007a; 2007b) have shown that learners want to know where they stand in regard to their work. Providing answers to the following four questions on a regular basis will help provide quality student feedback. These four questions are also helpful when providing feedback to parents:

- What can the student do?
- What can't the student do?

- How does the student's work compare with that of others?
- How can the student do better?

5. Student feedback can be given verbally, non-verbally or in written form.

Be sure to keep your frowns in check. It is imperative that we examine our non-verbal cues. Facial expressions and gestures are also a means of delivering feedback.

6. Invite students to give YOU feedback.

Why not let students give you feedback on how you are doing as a witness?

Remember that feedback goes both ways and it is wise to never stop improving and honing our skills as mentors.

Further Resources

www.faculty.londondeanery.ac.uk/e-learning/feedback

www.dummies.com/how-to/content/giving-constructive-feedback.html

http://www.ascd.org/publications/educational-leadership/may99/vol56/num08/The-Good-Mentor.aspx

www.bdadyslexia.org.uk

Section 3 –The Student Journey

The GDC puts professionalism at the heart of its agenda. The scope of what the GDC require of students goes beyond the academic achievement, and incorporates the attitudes, values and behaviours needed for registration. These are described in the GDC's student Fitness to Practice guidance which students are expected to follow, more information can be found at: https://www.gdc-uk.org/education-cpd/students-and-trainees/student-professionalism/guidance-for-students

The GDC expects professionalism to be embedded throughout dental education and training. All Students must have knowledge of Standards for the Dental Team, and its associated guidance and be able to demonstrate their own professionalism.

Following completion of NEBDN's qualification and registration it is expected that Students will be able to:

- Practise safely and effectively, making the high-quality long-term care of patients the first concern
- Recognise the role and responsibility of being a registrant and demonstrate professionalism through their education, training and practice in accordance with GDC guidance
- Demonstrate effective clinical decision making
- Describe the principles of good research, how to access research and interpret it for use as part of an evidence-based approach to practice
- Apply an evidence-based approach to learning, practice, clinical judgment and decision making and utilise critical thinking and problem-solving skills
- Accurately assess their own capabilities and limitations, demonstrating reflective practice, in the interest of high-quality patient care and act within these boundaries
- Recognise the importance of lifelong learning and apply it to practice

The Student Journey:
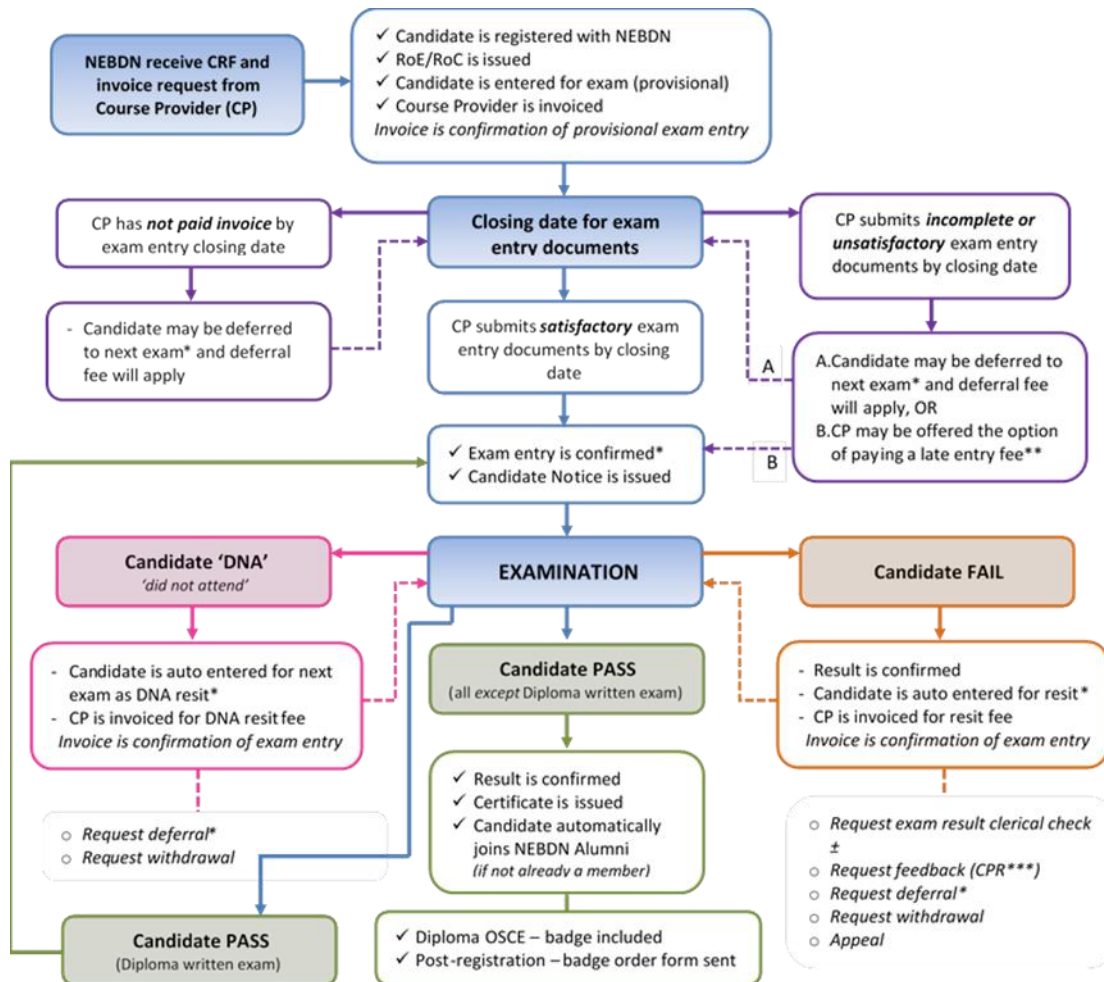
Glossary of terms

Assessment

This is the opportunity to provide feedback, support and guidance, while encouraging the student to identify their learning needs.

Assessment (practical)

This encompasses a variety of methods for assessing practice development, in order to measure the individual's competence to practice. It involves a tripartite approach to learning, involving the student, the clinical assessor and personal tutor. They agree objectives for practice-based learning and review the student's progress towards attaining these aims.

Assessment (formative)

This is an attempt to understand more about the student, discovering the nature and quality of their learning, their strengths and weaknesses, and their individual style of learning.

Assessment (summative)

This determines the extent to which a student has achieved the outcomes and objectives for the programme, either as a whole or a substantial part. It contributes to a grade or award of attainment, related to the stated outcomes of the programme.

Competency

The regulator (GDC) sets the standards for competence for entry to the GDC register. It defines competence as a holistic concept that includes the combination of skills, knowledge and attitudes, values and technical abilities that underpin safe and effective practice (GDC, 2015).

Independent practice

working with autonomy within the GDC Scope of Practice, and own competence, once registered. Independent practice does not mean working alone and in isolation, but within the context of the wider dental and healthcare team, and may be under supervision if newly qualified

Mentor

A mentor is suitably qualified professional registered with an appropriate professional body for example GDC or GMC who facilitates learning, supervises and assesses students in the practice setting.

Safe beginner

A rounded professional who, in addition to being a competent clinician and /or technician, will have the range of professional skills required to begin working as part of a dental team and be well prepared for independent practice. They will be able to assess their own capabilities and limitations, act within these boundaries and will know when to request support and advice.

Tutor

This person's role is to provide a supportive relationship with students throughout their programme of study. They record the student's progress in theory and practice and provide written summaries, as required, throughout the programme.

Practice placements

These are practice settings approved by the Course Provider to give Students the opportunity to observe or gain practical experience in order to meet the practical competencies required for registration.

Quality assurance

Quality assurance encompasses those activities within an organisation that help to identify good practice and prevent poor practice.

Witness

A witness is responsible for assessing a Students clinical competence at the end of a task.

References:

Enhanced CPD guidance for providers, General Dental Council (2018)
Available at: https://www.gdc-uk.org/docs/default-source/enhanced-cpd-scheme-2018/cpd-provider-guidance.pdf?sfvrsn=63766c6a_2

Preparing for practice, Dental team learning outcomes for registration, General Dental Council (2015 revised edition)
Available at: https://www.gdc-uk.org/docs/default-source/quality-assurance/preparing-for-practice-(revised-2015).pdf?sfvrsn=81d58c49_2

Scope of Practice, General Dental Council (2013)
Available at: https://www.gdc-uk.org/docs/default-source/scope-of-practice/scope-of-practice.pdf?sfvrsn=8f417ca8_4

Standards for Education, Standards and requirements for providers, General Dental Council (May 2015)
Available at: https://www.gdc-uk.org/docs/default-source/quality-assurance/standards-for-education-(revised-2015).pdf?sfvrsn=1f1a3f8a_2

Appendices

Appendix A – Induction Checklist

INDUCTION CHECKLIST

Course Providers are expected to provide certain information to students, witnesses and mentors during the course induction programme. This template is designed to support course providers with planning their induction programmes in line with NEBDN requirements.

INFORMATION	RECEIVED
Introductions:	
• Participants should be introduced to staff involved in their training provision, be given contact information for key members of the team and be advised when staff are available to respond to queries	☐
• Participants may also be introduced to one another to facilitate team working	☐
The Examination:	
• Participants should be introduced to NEBDN as the Awarding Body, advised of their web address and signposted to useful resources available from the website	☐
• Participants should be advised of the structure of the examination and shown examples of the question types used in the written paper and the OSCE's (if applicable)	☐
• Participants should be advised of the target examination date	☐
Record of Experience/Competence:	
• Participants should be introduced to the electronic Record of Experience (eROE)/Record of Competence (RoC) and the responsibilities of each of the following: student, witness, mentor, tutor and moderator within the RoE/RoC	☐
• The NEBDN Witness information can be accessed via NEBDN's Education Platform PebblePad. Course Providers are advised to share the link below with anyone involved in RoE/RoC support in the workplace.	☐

https://v3.pebblepad.co.uk/spa/#/public/8M5thW5wR4ffjrmyMqW5mcGtkW?historyId=5ewpe2VoPy&pageId=8M5thW5wR4ffjnywpyykWqppMr On accessing the link, you will be taken to a short introduction page, you will then need to select the tab relating to the qualification the student is undertaking.	
• Witnesses should be provided with a copy of A toolkit for Course Providers and Witnesses, helping to get the most from clinical practice-based placements	☐
Course Structure:	
• Participants should be given access to a copy of the course programme including dates, times and session titles for each course date where applicable	☐
• The structure of any online training should be explained to participants	☐
• Participants should be given information about any assessment methods used within the training programme including how these will be marked and how quickly students should expect marked work to be returned	☐
• Participants should be given information relating to mock exams provided during the course including dates, structure, details of how pass marks are calculated, attendance requirements and any additional costs to the student.	☐
Course Policies:	
Students should be given access to the following policies:	
• Health & Safety Policy This policy should include the mechanisms in place to manage identified risks to the student and the systems in place for reporting any accidents or near misses should these occur	☐
• Equal Opportunities Policy	☐

This policy should include the systems in place to ensure compliance with Equal Opportunities legislation and for reporting any instances of non - compliance	
• Assessment / Feedback Policy* This policy should outline the assessments used within the training programme, the marking criteria used for each assessment, the marking turnaround time the student should expect and what action may be taken where a student is not performing as expected in assessments. It should also include the frequency and type of feedback provided to the employer and the feedback required from the employer at various times throughout the training programme. *Please note these may be two separate policies*	☐
• Attendance / Participation Policy This policy should include the minimum expected attendance at / participation in training activity and the actions available to the course provider where a student falls below the minimum requirement	☐
• Complaints / Appeals Policy This policy should outline the Course Providers commitment to responding to complaints and or appeals in relation to the training programme or assessment decisions. It should also include the processes to follow in the event of a complaint / appeal including timescales for responses.	☐
• Student Support Policy This policy should outline the mechanisms available for student support and the process to be followed if student support is required.	☐
• Quality Assurance Policy This policy should outline the mechanisms used to ensure the quality of the training provision and how all interested parties may be required to contribute to this process	☐
• Fitness to Practice Policy	☐

This policy should outline the Course Providers commitment to the Fitness to Practice procedures required by the General Dental Council and the process to be followed should a fitness to practice issue be raised	
Initial Assessment:	
• Students should be asked to complete an Individual Training Plan. The format of this is decided by the course provider but should include some individual target setting and the process in place for reviewing progress against the targets set.	☐
• Students should be asked to complete a literacy assessment of some description during the induction process. The course provider should have mechanisms in place for managing students who fall below the expected literacy levels	☐

Appendix B – PER 4.4 refers to the simulation shown in video 1 - Unit 4 Section 4: Removable Prosthesis Procedure is an example of a candidates account of the completed procedure and outlines the competency framework expected of the candidate.

Witness Checklist to be used in conjunction with training video 1

UNIT 4.4 Removable Prosthesis Procedure

Activity	Competent	Not Yet Competent	Not Applicable
Chairside Support			
Student greeted patient appropriately			
Student provided the patient with a bib and safety glasses			
Student aspirated and retracted soft tissues when appropriate			
Student followed safe practice procedures throughout			
Student monitored the patient throughout			
Student reassured the patient during the treatment			
Student ensured lab work was made available			
Student gave after care instructions			
Student arranged follow up appointment			
Professionalism			
Student demonstrated professionalism in his/her duties and effective team working towards the delivery of safe, effective care			
Student demonstrated effective clinical decision making throughout the task			

Student managed themselves and the clinical environment in line with current standards and guidelines			
Student demonstrated knowledge and clinical skills appropriate to the patient's condition			
Student communicated appropriately, effectively and sensitively with the patient, their relatives or carers and colleagues			
Witness Feedback:			
Witness GDC/GMC Number:			
Witness Signature:			

Appendix C – PER 5.2 refers to the simulation shown in video 2 - Unit 5 Section 2: Local Anaesthetic Procedure is an example of a candidates account of the completed procedure, and outlines the competency framework expected of the candidate

Witness Checklist to be used in conjunction with training video 2

UNIT 5.2 - Local Anaesthetic Procedure

Activity	Competent	Not Yet Competent	Not Applicable
Chairside Support			
Student greeted patient appropriately			
Student provided the patient with a bib and safety glasses			
Student aspirated and retracted soft tissues when appropriate			
Student followed safe practice procedures throughout			
Student monitored the patient throughout			
Student reassured the patient during the treatment			
Student ensured the patient was clean prior to leaving			
Professionalism			
Student demonstrated professionalism in his/her duties and effective team working towards the delivery of safe, effective care			
Student demonstrated effective clinical decision making throughout the task			
Student managed themselves and the clinical environment in line with current standards and guidelines			
Student demonstrated knowledge and clinical skills appropriate to the patient's condition			

Student communicated appropriately, effectively and sensitively with the patient, their relatives or carers and colleagues			
Witness Feedback:			
Witness GDC/GMC Number:			
Witness Signature:			