



DENTAL THERAPIST FOUNDATION TRAINING CURRICULUM 2015



Health Education England
**Committee of Postgraduate Dental Deans
and Directors (COPDEND) UK**

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Context

Role of the Dental Therapist

Dental Therapists are valued members of the dental team, whose role has developed significantly over recent years. They provide a wide range of services for patients, including taking radiographs, treatment planning, performing direct restorations within their scope of practice, and the extraction of primary teeth.

In March 2013, the General Dental Council (GDC) introduced a direct access policy for the care of patients by a Dental Therapist, although at present there is no inclusion of Dental Hygienists or Therapists on the NHS Performers List in the UK. Previously, Therapists provided care following referral from a dentist. However, the change in regulations have enabled patients to have direct access to care and treatment from a Dental Therapist within their scope of practice.

Dental therapists (as 'registered healthcare professionals') can sell, supply or administer named medicines, including fluoride supplements and high strength fluoride toothpaste, where they are under Patient Group Directions (PGD). Legislation states that as long as the dental therapist is assessed as competent in the use of the medicine and there is an agreement between all signatories to the PGD, any licensed Pharmacy Medicine (P) or Prescription Only Medicine (PoM) can be included on a PGD (which needs to be renewed every 2 years). The legislation around the use of PGDs differs across the four countries within the UK.

Dental Therapist Foundation Training (DTFT)

To support the transition of newly qualified Dental Therapists into practice, some Deaneries have introduced Dental Therapist Foundation Training programmes (DTFT) where the practitioners spend a period of time working within a dental training practice under the supervision of a trainer. The first programme was introduced by Wales Deanery at Cardiff University Postgraduate Department in 2003 known as the 'Introduction to Practice' Scheme, and subsequently by NHS Education South Central in 2008/9. Evaluation of this programme demonstrated a positive impact on the skills and confidence of Therapists (Bullock, 2009). Subsequent programmes in the West Midlands, North West England and Scotland have also been successful.

DTFT programmes build on the competencies required of Therapists for GDC registration, providing a structured and nurturing learning environment in which a therapist can further develop their skills and ability to provide high quality care for patients, supported by a trainer.

DTFT Competency Framework Development

The DTFT competency framework describes the expected learning outcomes for Therapists completing the DTFT programme, in terms of their knowledge, skills and attitudes / behaviours. The format of the competency framework aligns with the competency framework for Dental Foundation Training, encompassing Clinical, Communication, Professionalism and Management & Leadership domains, and many of the competencies are relevant to both professional roles.

In developing this competency framework, key documents such as the GDC Scope of Practice (General Dental Council, 2013) for Dental Therapists, the GDC Standards for the Dental Team (General Dental Council, 2013), and existing undergraduate and postgraduate curricula have been considered by an Expert Advisory Group, prior to a national consultation with key stakeholders.

How to Use this Document

This curriculum document contains three sections, describing the syllabus, competency framework and assessment process for Dental Therapist Foundation Training (DTFT). An overview of these elements are described below, with further details in the relevant section. A **syllabus** is a summary (list) of the topics that will be covered within a training course. The **competency framework** describes the expected outcomes of the training (upon completion of the programme) in terms of knowledge, skills, attitudes and behaviours expected of those undertaking the training. The **curriculum** is an overarching term that describes everything associated with an education or training programme experience, including the syllabus, teaching methods, assessment and standards (expected outcomes / competencies) and other relevant aspects.

DTFT Syllabus and Training

DTFT is a period of training which combines experiential learning within General Dental Practice, with a number of study days targeting areas relevant to Therapist practice organised by Health Education England Local Education and Training Boards (LETB) and deaneries. In addition to the experience gained directly through treating patients in practice, experiential learning occurs as a result of the support from a Foundation Trainer which may include clinical supervision, mentoring, online learning, tutorials (minimum 20x 1hour), workplace-based assessments (formal and informal) and high quality feedback.

The DTFT syllabus also includes an educational programme, to supplement experiential learning in practice. Study days focus on a range of important areas; in addition to the 'core' areas identified within this document, the individual learning needs of the foundation therapist (identified by the trainer, self-reflection or assessment) can be met through clinical supervision, blended learning, tutorials in practice or through self-directed study.

Competency Framework

The expected learning outcomes for DTFT are described within a competency framework. The competencies within the framework describe the areas which all foundation therapists are expected to have had experience of, and be competent in, upon completion of DTFT.

The competencies within the framework are organised within domains and major competency areas, for ease of reference. However, it is important to recognise that DTFT is a period of training involving the treatment of patients within the general practice workplace. As such, within each single patient encounter (e.g. patient examination, or the provision of treatment) the foundation therapist will experience and demonstrate several of these individual competency statements within the framework, across multiple domains. Whilst it is necessary to describe specific competencies separately in this document in order to make clear the details of the knowledge, skills and behaviours required, the competency framework **does not** represent a prescribed list of areas to be assessed separately, i.e. a 'tick box' approach (see below and section III). The focus of assessment is rather in the context of the delivery of holistic patient care.

Assessment

The assessment of foundation therapists' competence needs to take place using a robust process that is valid, reliable and feasible within the context of DTFT. The assessment process needs to support foundation therapists throughout their training in order to identify their strengths and areas

needing improvement, whilst being sufficiently robust to identify (upon completion of the training) those who cannot demonstrate the standards of competence required for independent practice¹, thus protecting patients. It is anticipated that DTFT will move towards a process whereby competence must be demonstrated in order to complete the training successfully – i.e. ‘satisfactory completion’.

It is neither feasible nor appropriate to assess every competency within the framework separately, adopting a ‘tick box’ approach. As indicated above, whilst competencies need to be written down separately in order to convey the detail expected, foundation therapists are demonstrating several of these areas at the same time during a single patient encounter. In order to be valid, the assessment of DTFT will be at the level of ‘whole’ performance, rather than attempting to dissect practice into separate parts that would not reflect authentic care in a primary care setting.

It is recognised that each foundation therapist begins DFT with their own individual strengths, weaknesses and levels of prior experience with respect to practice. Whilst the validity of assessment will require that the cases assessed within the workplace are representative of all major areas of the competency framework, a prescribed ‘list’ of areas for assessment is not provided.

Essentially, competence is ensured through appropriate sampling of assessment across the domains and major competencies within the competency framework. A range of evidence will be collected throughout DTFT, providing regular valuable feedback that can be used to inform professional development during the training, and upon which a final (summative) judgement can be made upon completion of the programme. As such, we envisage that in terms of the assessment of DTFT, *“The whole is greater than the sum of its parts”*.

¹ There is currently no inclusion of dental hygienists or therapists on the NHS Performers List in the UK

Section I: DTFT Syllabus

The DTFT syllabus includes formal study days in addition to tutorials in practice with your trainer. The syllabus should support the experience gained in practice, focusing on building relevant knowledge, skills and behaviours.

The number of formal study days may vary, but is a minimum of 1 per month throughout the training period.

Core topics for the DTFT educational programme are:

- Induction, including health and safety in practice.
- Infection control
- Radiography and Radiology
- Direct restorations
- Child protection, disability discrimination and safeguarding
- Oral Medicine
- Consent
- CQC / HIW / HIS and legislation
- Conflict resolution
- Clinical record keeping
- Medical Emergencies

Other important topics may be delivered, such as:

- Communication skills
- Dealing with complaints
- Team working
- Paediatric dentistry
- Periodontics
- Emergency dental care
- Local Anaesthetic Techniques
- Taking Impressions
- Career planning
- Adhesive Dentistry
- Oral Surgery

Study days may also provide an opportunity for you and colleagues to present clinical cases for discussion.

Tutorials will also be held regularly with your trainer, providing an opportunity to discuss personal strengths and areas for development. The topics for tutorials should be targeted directly to your personal learning needs.

Section II: DTFT Competency Framework

The DTFT competency framework is organised into four 'Domains' of competency, each of which contain a number of 'Major Competency' areas within which the individual competency statements are described. An overview of the Domains and Major Competencies within the DTFT Competency Framework is shown below.

DTFT Competency Framework Overview

DOMAIN	MAJOR COMPETENCIES
Clinical	1. Patient examination, diagnosis & interpretation of dental prescription
	2. Planning treatment & patient management
	3. Health promotion & disease prevention
	4. Medical & dental emergencies
	5. Anaesthesia, pain & anxiety control
	6. Periodontal therapy & management
	7. Non-surgical management of the hard & soft tissues of the head & neck
	8. Management of the developing dentition
	9. Restoration of teeth
Communication	10. Patients, carers & the public
	11. Clinical team & peers
	12. Other professionals
Professionalism	13. Ethics
	14. Patients, carers & the public
	15. Self
	16. Clinical team & peers
Management & Leadership	17. Personal & practice organisation & management
	18. Legislation & regulation
	19. Financial management
	20. Clinical leadership

CLINICAL DOMAIN

1. PATIENT EXAMINATION, DIAGNOSIS & INTERPRETATION OF DENTAL PRESCRIPTION

The foundation therapist can demonstrate to an appropriate standard the ability to:

1. Obtain, interpret and record an accurate history that incorporates appropriate dental, medical (including medication history and allergies), social, demographical, cultural, nutritional, psychological and genetic factors.
2. Perform a comprehensive oral health assessment of the patient, and identify the symptoms, principal complaint, and any relevant history.
3. Perform a comprehensive extra-oral and intra-oral examination that is suitable for the patient, and record the findings accurately through communication either with or without a supporting healthcare professional.
4. Assess skeletal, dental and occlusal relationships in the primary, mixed and permanent dentition accurately, and identify conditions which may require treatment or referral onwards.
5. Assess hard and soft tissue developmental abnormalities and recognise conditions which may require investigation, treatment or onward referral.
6. Assess the patients' standard of oral hygiene accurately and use relevant information such as dental attendance pattern, ability, motivation and commitment to promote its improvement.
7. Distinguish between mucosal, gingival and periodontal health and disease, and identify conditions which may require investigation, treatment or onward referral.
8. Identify the location, extent and activity of tooth surface loss and caries, and plan for appropriate management at all levels of complexity appropriate to their own competence and resources available.
9. Distinguish between pulpal health and disease, and identify conditions which may require treatment or onward referral.
10. Prescribe* an appropriate and risk assessed radiographic imaging examination that meets the diagnostic needs of the patient in line with current national guidance. (* *requires additional training*).
11. Perform an accurate radiographic examination as prescribed, and expose, process, assess, interpret and store the radiograph correctly in line with current national guidance.
12. Generate a differential diagnosis, a management plan and / or need for onward referral based on evidence from an oral health assessment and risk screening, through the correct interpretation of clinical findings.
13. Assess the influence of systemic diseases and other disabilities (and associated treatment) on oral health and the delivery of dental treatment.
14. Evaluate and manage patients' treatment expectations, identify the degree to which they can be met, and discuss the different options.

CLINICAL DOMAIN

1. PATIENT EXAMINATION, DIAGNOSIS & INTERPRETATION OF DENTAL PRESCRIPTION

The foundation therapist can demonstrate to an appropriate standard the ability to:

15. Interpret prescriptions from the dentist accurately.

16. Keep clinical records (conventional and / or electronic) in line with current national guidance.

17. Record impressions for the production of accurate diagnostic casts, on prescription from a dentist.

18. Recognise the need for relevant clinical laboratory and diagnostic tests, and liaise with other healthcare professionals to acquire an accurate interpretation of the results.

19. Perform an accurate assessment of the patient to enable the early diagnosis of oral potentially malignant diseases and / or orofacial neoplastic change, and be knowledgeable about referral protocols (including local arrangements) taking into account the degree of urgency.

1. PATIENT EXAMINATION & DIAGNOSIS & INTERPRETATION OF DENTAL PRESCRIPTION *The foundation therapist can describe in appropriate detail:*

20. The signs of abuse or neglect in patients including vulnerable groups, and the local procedures that should be followed when reporting such circumstances.

21. The signs and symptoms of periodontal diseases, and identify conditions which may require treatment or onward referral.

22. The clinical features associated with oral mucosal diseases, and identify conditions which may require treatment or onward referral (including urgent referrals for suspected head and neck cancer).

23. The spectrum of patient behaviour which may contribute to orofacial problems, or their ability to cooperate with care or treatment plans, and identify conditions which require prevention or management.

CLINICAL DOMAIN

2. PLANNING TREATMENT & PATIENT MANAGEMENT

The foundation therapist can demonstrate to an appropriate standard the ability to:

1. Present to the patient (and check their understanding of) the findings resulting from the history and examination, including clinical and radiographic results, differential diagnoses, treatment options, prognoses, sequenced treatment plan and individualised recall intervals based on risk assessment in a manner that they can understand.
2. Understand and undertake the care plan provided by the referring practitioner where required, based on the individual needs of the patient, and discuss this with the patient or carer in a manner they can understand.
3. Formulate (within scope of practise) and undertake individualised treatment plans for patients according to their individual circumstances, medical history, needs and selected treatment options.
4. Discuss with the patient or carer (in a manner they can understand) their responsibilities associated with the treatment plan, including preventive education, time requirements for treatment, and fees and payment methods (where relevant).
5. Obtain valid informed consent from the patient / parent / guardian before starting treatment, explaining all relevant options and costs in a manner they can understand, and ensure the patients' consent remains valid at all stages of the treatment.
6. Effective management of patients with relevant medical conditions including bleeding disorders, and medications e.g. all oral anti-coagulants and bisphosphonates.

2. PLANNING TREATMENT & PATIENT MANAGEMENT *The foundation therapist:*

7. Knows which items of treatment fall within NHS primary dental care regulations* and any which do not, and can discuss the consequences of this with the patient in a manner he or she can understand. **relevant to the country of training (and that these may differ)*
8. Is able to manage effectively and professionally any situations where the patients' wishes and the recommendations of the dentist or therapist differ, and properly document the conversation and outcome.
9. Communicates with other professionals when appropriate in order to obtain additional information and / or treatment for the patient, and can demonstrate the ability to refer patients back to the dentist or for specialised treatment or advice in a manner that causes the least anxiety for the patient.
10. Demonstrates appropriate management of the patient following discharge from specialised care, subject to prescription from the referring dentist.
11. Monitors therapeutic outcomes and ensures that appropriate follow-up care is arranged. Recognises changes in the clinical picture and reviews diagnoses and management plans regularly.
12. Encourages patients to ask questions about their treatment options or treatment plan.

CLINICAL DOMAIN

3. HEALTH PROMOTION & DISEASE PREVENTION *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Recognise opportunities for, and provide patients / parents / carers with, comprehensive, accurate and current preventive education and instruction in self-care methods tailored to the individual needs of the patient.
2. Perform preventive and restorative treatment procedures that will conserve the tooth structure, prevent hard and soft tissue disease and promote hard and soft tissue health.
3. Identify habits that are detrimental to oral health and provide patients with an effective strategy for their control.

3. HEALTH PROMOTION & DISEASE PREVENTION *The foundation therapist can demonstrate:*

4. Knowledge of the relationship between socioeconomic factors and inequalities in populations, and risk factors for dental disease, and general and oral health.
5. Knowledge and understanding of prevention of dental disease in practice populations and the wider community, including preventive programmes and water fluoridation.
6. Knowledge, understanding and the application of techniques to support behaviour change and improvements in general and oral health, in the context of the role of general dental practice.

3. HEALTH PROMOTION & DISEASE PREVENTION *The foundation therapist can:*

7. Provide preventive education for patients and carers in a manner they can understand, and which encourages self-care and motivation, and check their understanding of their individual care plan.
8. Describe in appropriate detail the health risks of substances detrimental to oral and general health, and provide the patient with appropriate advice to adopt a healthy lifestyle, recording both the risks and advice provided in the clinical notes.
9. Provide health promotion advice within the contexts of diverse social and educational norms.
10. Demonstrate an understanding of safe, effective and legal prescribing and monitoring, including appropriate use of the British National Formulary and other national guidance, and antimicrobial stewardship.

CLINICAL DOMAIN

4. MEDICAL AND DENTAL EMERGENCIES *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Identify medical and dental emergencies (including oral infections and sepsis), which are beyond his or her scope of management and competence, and refer with an appropriate degree of urgency.
2. Recognise, manage, (and where required, provide) basic and immediate life support for medical emergencies, in line with guidelines from the UK Resuscitation Council.
3. Recognise and effectively manage common dental emergencies (and pain), including those resulting from treatment complications or failures, infection, allergic response or trauma.
4. Administer pharmacological agents correctly for the management of medical emergencies.
5. Manage and facilitate a team approach to medical emergencies in the primary care dental setting.
6. Apply local protocols to minimise risk and deal with medical emergencies in the primary dental care setting

4. MEDICAL AND DENTAL EMERGENCIES *The foundation therapist can demonstrate:*

7. Knowledge of potential drug interactions and side-effects (including prevention thereof), and manage situations appropriately when they occur.
8. Knowledge of the requirements and procedures involved in selection and maintenance of an emergency drug supply.

CLINICAL DOMAIN

5. ANAESTHESIA, PAIN & ANXIETY CONTROL *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Use local anaesthesia techniques for clinical dentistry as appropriate to ensure adequate pain control for patients.

2. Use suitable behavioural, psychological and interpersonal techniques for the relief of fear and anxiety.

5. ANAESTHESIA, PAIN & ANXIETY CONTROL *The foundation therapist can describe in appropriate detail:*

3. The limitations, risks and benefits of using general anaesthesia and sedation.

4. The limitations, risks and benefits of using conscious sedation procedures and analgesia for dental procedures, and the appropriate circumstances when this technique might be used.

5. The prevention, recognition and effective management of complications relating to the use of local anaesthesia.

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CLINICAL DOMAIN

6. PERIODONTAL THERAPY & MANAGEMENT. *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Evaluate the periodontal tissues and establish an accurate diagnosis of the patient's periodontal condition.

2. Measure and record periodontal indices accurately, according to current national guidelines.

3. Integrate periodontal findings into the patient's comprehensive treatment plan and understand how the periodontal status of the patient will impact upon his/her treatment plan.

4. Communicate, motivate and support behavioural change in patients in order to achieve effective self-management of the periodontal condition.

5. Establish a prognosis for periodontally involved teeth and inform the patient of this.

6. Deliver and monitor the use of antimicrobial agents where appropriate and prescribed by a dentist, to aid the treatment of periodontal diseases.

7. Assess the requirement for and provide oral hygiene advice, scaling and mechanical root debridement.

8. Evaluate the results of periodontal treatment, and establish and monitor a suitable recall maintenance programme for patients.

9. Assess the requirement for specialised advice and refer the patient appropriately.

6. PERIODONTAL THERAPY & MANAGEMENT. *The foundation therapist:*

10. Can demonstrate understanding of the aetiology of periodontal disease, and is able to explain this (and the prevention of disease) to patients in a manner they can understand.

11. Can describe the role of other dental professionals in periodontal therapy

12. Understands the role of periodontal surgery in the management of gingival overgrowth and advanced periodontal disease.

13. Can describe the conservative management of gingival recession.

CLINICAL DOMAIN

7. NON-SURGICAL MANAGEMENT OF THE HARD & SOFT TISSUES OF THE HEAD & NECK.

The foundation therapist can demonstrate to an appropriate standard the ability to:

1. Understand and assist in the investigation, and effective management of oral mucosal diseases.
2. Understand the pathology and clinical significance of neoplastic and non-neoplastic disease of the head and neck.
3. Recognise disorders in patients with craniofacial pain including temporomandibular disorders, and refer such conditions appropriately.
4. Assess the need for and (where prescribed by a dentist) administer, pharmacotherapeutic agents in the safe treatment of all dental patients.
5. Recognise and anticipate potential drug interactions that may occur between medications prescribed by the patient's doctor & those used in dental practice.

CLINICAL DOMAIN

8. MANAGEMENT OF THE DEVELOPING DENTITION *The foundation therapist can demonstrate to an appropriate standard the ability to :*

1. Recognise malocclusions and refer appropriately.
2. Recognise detrimental oral habits and occlusal trauma and where appropriate intercept correctly or refer.
3. Recognise problems related to orthodontic treatment, relieve trauma and discomfort related to orthodontic appliances and refer when appropriate.
4. Extraction of erupted primary teeth, and the appropriate diagnosis and management of any common complications.
5. Effective management, including extraction where appropriate, of buried primary roots (whether fractured during extraction or retained root fragments).

8. MANAGEMENT OF THE DEVELOPING DENTITION *The foundation therapist can demonstrate appropriate knowledge and understanding of :*

6. Facial growth and dental development, and recognise abnormalities as they appear.

CLINICAL DOMAIN

9. RESTORATION OF TEETH *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Assess patients to evaluate their risk factors for caries, and formulate and implement a suitable preventive strategy.
2. Remove carious tooth structure in preparation for restoration, using techniques which minimise unnecessary tooth damage and pulpal injury.
3. Monitor the use of chemotherapeutic agents in order to assist in the prevention and management of dental caries.
4. Restore carious teeth to form, function and appearance using a wide range of direct restorative materials.
5. Restore primary teeth, including any necessary pulpal therapy, using appropriate restorative materials and full coverage techniques relevant to the primary dentition.
6. Recognise and manage dental trauma and arrange onward referral, follow-up and subsequent management.
7. Isolate the tooth from saliva and bacterial contamination effectively, and is competent in the use of the rubber dam.

9. RESTORATION OF TEETH *The foundation therapist:*

8. Can demonstrate modern restorative concepts around minimally invasive techniques

COMMUNICATION DOMAIN

10. COMMUNICATION WITH PATIENTS, CARERS & THE PUBLIC *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Increase patients' awareness and understanding of treatment options and procedures by careful explanation and the use of effective communication skills.
2. Inspire confidence in patients (from all age groups and situations) and build rapport through the use of effective interpersonal and communication skills.
3. Present questions and information to the patient or carer in a clear, concise and understandable manner.
4. Refer patients from different age groups or situations for care or treatment, giving clear information about choices, in a sensitive manner that causes the least anxiety possible.
5. Communicate effectively with patients, relatives and carers in a manner which respects the patient's privacy, dignity, confidentiality and self-image.
6. Select and compose suitable written communications (electronic and paper-based) which are appropriate for the patient and/or carer in different clinical scenarios.
7. Address challenging communication situations including the effective management of anxiety, anger, confusion or misunderstanding of patients, and offer support to patients where they may need help in making decisions.

10. COMMUNICATION WITH PATIENTS, CARERS & THE PUBLIC *The foundation therapist can demonstrate to an appropriate standard the:*

8. Effective management of all patients through the use of suitable interpersonal and behavioural skills, including those with anxiety or other special needs.

10. COMMUNICATION WITH PATIENTS, CARERS & THE PUBLIC *The foundation therapist:*

9. Provides appropriate, relevant and up to date preventive education to individual patients in a manner that inspires motivation for change.
10. Can identify patients or carers with special communication needs and is able to make arrangements to meet these requirements effectively, e.g. use of interpreter, sign language, induction loop etc.
11. Listens effectively and is responsive to non-verbal cues.

COMMUNICATION DOMAIN

11. COMMUNICATION WITH CLINICAL TEAM & PEERS *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Work effectively with colleagues as part of a team, in accordance with current GDC standards.
2. Interact effectively with members of the clinical team and peers, and describe how each can contribute to patient care.
3. Deal with problems arising in connection with work prescribed by other team members.

11. COMMUNICATION WITH CLINICAL TEAM & PEERS *The foundation therapist:*

4. Provides treatment for patients from all age groups and situations in an organised and efficient manner through appropriate interaction with other members of the clinical team.
5. Communicates with all members of the clinical team and peers in an appropriate manner, which inspires confidence, motivation and teamwork.
6. Is able to interact with all members of the clinical team and peers with due regard to practice policies, rules and regulations, health and safety procedures and appropriate clinical techniques.
7. Recognises the need for and can organise, contribute to and facilitate team events.

COMMUNICATION DOMAIN

12. COMMUNICATION WITH OTHER PROFESSIONALS *The foundation therapist can demonstrate to an appropriate standard the ability to:*

1. Communicate effectively with other professionals (individually and in groups) both verbally and in writing.
2. Present professional knowledge effectively to a wide range of lay and professional individuals.
3. Communicate effectively (verbally and in writing) with referral bodies and healthcare / dental institution, and seek advice when necessary.
4. Discuss professional matters in an appropriate manner.

12. COMMUNICATION WITH OTHER PROFESSIONALS *The foundation therapist:*

5. Is able to explain the advantages of association with professional bodies and peer groups.

PROFESSIONALISM DOMAIN

13. ETHICS *The foundation therapist can demonstrate to an appropriate standard:*

1. Understanding and the application of the principles of current GDC publications on standards for dental professionals, that provide guidance to dental professionals on professional and personal conduct, and can describe the implications of failing to adhere to GDC Standards and legislation.
2. Understanding of the application of the principles of ethical behaviour relevant to dentistry, including honesty, confidentiality, personal and professional integrity and appropriate moral values.
3. A professional approach to patients' complaints in accordance with current GDC and NHS standards, and accepts responsibility for his/her actions where appropriate.

13. ETHICS *The foundation therapist:*

4. Respects and values equality and diversity and interacts with patients, carers, staff, peers and the general public without discrimination.
5. Is able to explain in appropriate detail the actions available to be taken (including raising concerns and whistleblowing), with regard to those colleagues who may be underperforming, behaving unethically, or posing a risk to patient safety, and / or incidents of patient harm.
6. Can demonstrate appropriate interpersonal skills in dealing with patients or colleagues exhibiting challenging or inappropriate behaviour.
7. Adheres to appropriate guidelines, and has knowledge of relevant standards and recommendations.
8. Understands their responsibility with regard to maintaining confidentiality in accordance with current GDC standards and legislation.

PROFESSIONALISM DOMAIN

14. PROFESSIONALISM WITH PATIENTS, CARERS & THE PUBLIC *The foundation therapist:*

1. Provides high quality, compassionate care for all patients, and always puts patients' safety first.
2. Demonstrates effective and ethical decision making.
3. Provides treatment for all patients with courtesy and respect, provides treatment options that are sensitive to the needs of the patient, and recognises the patients' right to choose.
4. Maintains honesty and confidentiality with all patients.
5. Interacts with patients and carers without discrimination.
6. Maintains the confidentiality and security of patient information, with respect to contemporary legislation and current GDC standards.
7. Regularly reviews and reflects on the outcomes of treatment provided in an effort to assure the highest standards of patient care, and can describe the importance of clinical audit and its regular implementation.
8. Provides relevant and appropriate preventive education for each patient or carer in a manner that he/she can understand.
9. Ensures patients & carers are provided with comprehensive information about options, choices and costs for treatment.
10. Always puts patients' interests before their own, or those of any colleague, business or organisation.
11. Does not express personal, political, religious or moral beliefs when working in relation to patient care.

PROFESSIONALISM DOMAIN

15. PROFESSIONALISM (SELF) *The foundation therapist can demonstrate to an appropriate standard:*

1. A thorough understanding of the professional responsibility of a Dental Therapist within and outside the NHS, including permitted scope of practice, and rules regarding patients' direct access to treatment provided by other dental professionals in accordance with current GDC standards.

2. A commitment to Continuing Professional Development (CPD) through the regular completion (and subsequent recording) of CPD activities which update and improve knowledge and skills, and the incorporation of these skills into everyday practice.

3. The ability (and commitment) to self-assess and reflect upon his/her own professional knowledge, skills, capabilities and limitations in order to provide the highest standards of patient care, demonstrating insight into his/her own strengths, weaknesses and development needs, and only accepts delegated / referred tasks if he / she has the capacity and is competent to do so.

4. The ability to critically evaluate new techniques and technologies.

5. The ability to critically evaluate published research and integrate this information to improve the quality of care for the patient.

6. The ability to recognise, integrate and reflect on learning opportunities within the workplace.

7. Knowledge of the requirements to have appropriate support from a trained member of the dental team when treating patients.

8. Knowledge and understanding of the principles involved in clinical audit and peer review, and participates in such activities.

9. Knowledge and understanding of the value of appraisal, and engages in this process.

15. PROFESSIONALISM (SELF) *The foundation therapist:*

10. Understands the importance of not practising whilst impaired by alcohol, other drugs, medication, legal or illegal substances, illness or injury and can describe the dangers associated with these situations, and knows how to seek help for self and others.

11. Protects patients and colleagues from risks posed by suboptimal health, conduct or performance, and does not rely solely upon their own assessment of such risks.

PROFESSIONALISM DOMAIN

16. PROFESSIONALISM WITH CLINICAL TEAM & PEERS *The foundation therapist:*

1. Is able to explain in appropriate detail the actions available to be taken with regard to perceived incompetence, impairment or unethical behaviour from colleagues.
2. Interacts with patients, colleagues, team members and peers without discrimination.
3. Is respectful and co-operative with colleagues, staff and peers, and can demonstrate a commitment to the maintenance of high levels of professionalism, training and safety for staff.
4. Understands the dynamics of multi-professional working and how these can contribute to the delivery of quality patient care.

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MANAGEMENT & LEADERSHIP DOMAIN

17. PERSONAL & PRACTICE ORGANISATION & MANAGEMENT *The foundation therapist can demonstrate to an appropriate standard:*

1. The efficient management of time and resources on a daily basis.
2. An understanding of the day to day running of a general practice, and any other areas of clinical practice relevant to their training, and where to find managerial assistance where necessary.
3. An understanding of different professional working and contractual agreements.
4. The full, accurate and secure maintenance of patients' information and records, in accordance with current GDC standards.
5. An understanding of the considerations to be made during the selection, care and maintenance of equipment for dental practice, including the appropriate procedures to be implemented with regard to the safety of reusable devices.
6. An understanding of the principles of staff recruitment and employment legislation, including interview techniques, job descriptions, contracts, equal opportunities, grievance and disciplinary matters.
7. An understanding of the requirements for and processes involved in risk assessment within the workplace and resultant action.
8. The prioritisation of professional duties effectively and appropriately when faced with multiple tasks and responsibilities.
9. The effective use and understanding of relevant IT systems in practice, including those used for risk screening.
10. The reporting and analysis of incidents and near misses, and the development of strategies (e.g. significant event analysis) to reduce or eliminate the risk of reoccurrence.
11. The use of research data and evidence-based knowledge in his/her approach to clinical practice.

17. PERSONAL & PRACTICE ORGANISATION & MANAGEMENT *The foundation therapist can describe in appropriate detail:*

12. Dental care pathways and current contractual models.
13. The procedures for local and national, serious and critical incident reporting systems.
14. The considerations required to ensure that material used for advertising, promotion or information (including the use of social media) is accurate, and complies with the GDC's current guidance on ethical advertising.

17. PERSONAL & PRACTICE ORGANISATION & MANAGEMENT *The foundation therapist:*

15. Ensures patients have the details they need to be able to contact the practice, and have clear information regarding arrangements for emergency care (including out of hours treatment).

MANAGEMENT & LEADERSHIP DOMAIN

18. LEGISLATION & REGULATION *The foundation therapist:*

1. Takes appropriate responsibility for health and safety issues, including those relating to patients, oneself and practice staff. The foundation therapist has up to date knowledge and understanding of infection control procedures and is competent in the implementation of these in daily practice.
2. Can assess the quality and describe in appropriate detail the safety issues in relation to dental radiography with regard to current guidelines and regulations.
3. Has up to date knowledge and understanding of discrimination and equality legislation, and how this applies in a practice setting.
4. Can describe in appropriate detail the principles of obtaining valid consent for patients of all ages and capacities.
5. Can demonstrate appropriate knowledge and understanding of regulation and legislation that impacts on dentistry.

18. LEGISLATION & REGULATION *The foundation therapist can demonstrate to an appropriate standard, understanding of:*

6. The legal issues and practical implications relating to health and safety and infection control, and where to get additional information if necessary.
7. The legal and ethical obligations of a dental therapist, and the definition of fitness to practise according to the GDC.
8. Information Governance, Data Protection and Freedom of Information legislation, and the implications of non-compliance.
9. The structure, principles, rules and regulations associated with working as a therapist within the NHS.
10. Avoidance and management of complaints in accordance with current GDC standards, and how/when to seek the advice of a professional indemnity organisation.
11. The requirement for membership of a professional indemnity organisation in accordance with current GDC standards.

MANAGEMENT & LEADERSHIP DOMAIN

19. FINANCIAL MANAGEMENT *The foundation therapist can demonstrate to an appropriate standard, understanding of:*

1. The charging structure relating to treatment provided for patients in general practice and other relevant clinical environments, including NHS dentistry, private fee per item and capitation schemes.
2. The financial management of a general dental practice and other relevant clinical environments.
3. The application of different remuneration systems for dental services.
4. UK Taxation, as it relates to employed and self-employed dental professionals.
5. Contracts and agreements, as they relate to salaried and self-employed professionals.

MANAGEMENT & LEADERSHIP DOMAIN

20. CLINICAL LEADERSHIP *The foundation therapist:*

1. Demonstrates effective leadership within the dental team, where appropriate.
2. Takes account of quality assurance, quality improvement and patient safety, and develops, implements and evaluates strategies to improve quality.
3. Understands the principles of adult learning, and facilitates the learning of patients, families, carers, colleagues and the public as appropriate.
4. Understands the value of mentoring and being a positive role model for other members of the healthcare team.
5. Understands how to act in the interests of patients who've been subjected to clinical harm or errors, & where to obtain appropriate advice and support.

20. CLINICAL LEADERSHIP *The foundation therapist can demonstrate to an appropriate standard the ability to:*

7. Accept and provide effective feedback in a manner that motivates and encourages learning.
8. Present effectively to colleagues ensuring understanding and meeting the expectations of the audience.
9. Demonstrate clinical skills and competencies to other colleagues in an effective manner.

Section III: Assessment of DFT

A range of assessment tools are available to enable you to demonstrate your ability, and get high quality feedback upon progress. These are described below, and summarised in Table 1.

Early Stage Peer Review (ESPR)

This is an informal, formative assessment usually carried out in the first weeks of training. ESPR involves the observation of performance by the trainer, in order to gain insight into the experience, strengths and training priorities of the foundation therapist. Following the observation the trainer provides the therapist with constructive feedback and support if necessary.

Direct Observation of Practice

A number of tools can be used by trainers or other assessors to provide feedback on your performance in practice. Most tools involve the assessor provide a number of ratings across a number of important skills such as 'Examination & Diagnosis', 'Clinical Decision Making', 'Technical Ability', 'Communication Skills', 'Professionalism' and 'Organisation'. In addition to ratings to highlight the standard of performance in the patient encounter, written feedback should be recorded and discussed with you in detail as soon as possible after the assessment. Examples of this type of assessment include:

- **ADEPTs** (A Dental Evaluation of Performance Tool)
- **LEPs** (Longitudinal Evaluation of Performance)
- **DOPs** (Directly Observed Procedures).

Case Presentations / Case-based Discussion

Many DTFT programmes will require you to present a case (which may be formally assessed, and / or written up into a report).

Case-based Discussion (CbD) is an assessment tool which enables your presentation and skills to be assessed, using ratings across key competencies such as those described above for direct observation of practice.

Patient Questionnaires

Patient questionnaires (e.g. the Patient Assessment Questionnaire PAQ, or a Patient Satisfaction Questionnaire PSQ) may be used for assess competencies such as Communication, Professionalism and Organisational Skills.

Multi-Source Feedback (MSF)

MSF tools (also known as 360 degree assessments) gather multiple team members' opinions of your abilities in a range of areas. These assessments can provide a valuable insight into your progress, particularly in areas of team work, professionalism, communication and other aspects which can be difficult to assess by other means.

Clinical Audit

Clinical Audit is a formal process by which your practice over a period of time is reviewed against formal standards or benchmarked against peers. Common areas for audit include clinical record keeping, and the quality of radiographs. The audit should provide a comparison of work against best practice, and a review of results should highlight any possible areas for improvement and an action plan put in place. The audit cycle is completed when a re-audit is completed after a suitable period of time, to check whether performance has continued / improved.

In addition to these assessments, you may be required to keep a portfolio throughout your training, which may include a record of types of procedures carried out i.e. your clinical experience), and reflections on progress or learning needs.

Table 1: Summary of Assessment Tools used in DTFT

Assessment Tool	Method	Assessors	Numbers / Frequency
ESPR	Informal peer review (observed performance)	Trainer	4 (in month 1)
Direct Observation (ADEPT / LEPs)	Observed performance, ratings awarded against global performance criteria, and feedback provided (written & verbally)	Trainer, and external assessor e.g. programme director, adviser	12 (minimum) Spread over the training period (ideally 1/month)
Patient Feedback	Patients provide feedback and ratings for items on a questionnaire	Patients (consecutive)	1 round (minimum 20 patients)
Case-based Discussion	Case presentation – may include assessment (ratings) against global criteria	Trainer	6 (minimum) – to include 1 case presentation to peers
Multi-Source Feedback (MSF)	Anonymised feedback via questionnaire	Colleagues & Trainer	1 round (minimum 8 assessors)
Clinical Audit	Full cycle of audit, including data collection, analysis & review, proposals for change, re-audit and report	Trainer	1 complete cycle

N.B. Tutorial time will not be used for assessment

Reference Documents and Links

General Dental Council. "Standards for the Dental Team. GDC, London." (2013).

General Dental Council: "Scope of Practice" GDC, London. (2013).

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