Role of Dental Nurse Within Assessment

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Aims

- Provide insight into reasonable expectation of a ‘safe practitioner’ and the pathway required for a foundation dentist to satisfactorily complete foundation training.
- Provide efficient chairside assistance including the use of extended competencies to support the foundation dentist encouraging best practice during every patient case

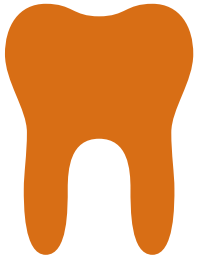
Objectives

1. Identify how the dental nurse can support the foundation dentist during assessments
2. Review effective feedback mechanisms
3. Review Practical Tips for dental nurses during FD assessment

Learning Outcomes



At the end of this training session the successful participant will:



Understand how the dental nurse can support the foundation dentist during these processes



Recognise the importance of and give effective feedback.

GDC Development Outcomes

B - Effective management of self and effective management of others or effective work with others in the dental team, in the interests of patients; providing constructive leadership where appropriate.

D - Maintenance of skills, behaviours and attitudes which maintain patient confidence in you and the dental profession and put patients' interests first.

Thinking Point



When were you last assessed?

How did you feel ?



How do you think the FD feels?

What are the challenges for DN in assessment of FD?

Quick Discussion

Challenges



Time



Patient



Patient safety



Environment – patient, guardian, other staff



FD personality type, confidence, cultural and language barriers



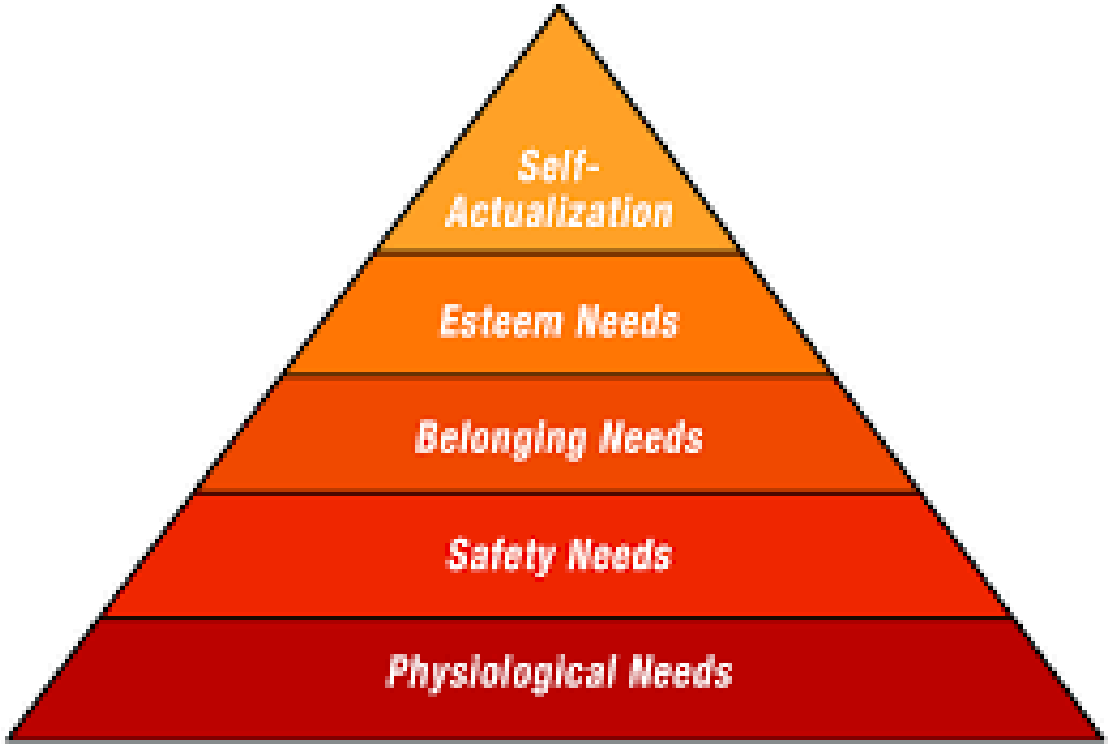
DN confidence and personality



Delivery style of feedback

How can we improve our role in assessment process?

Environment



DN role unique and invaluable in real assessment of FT

- Eyes and ears of trainer
- First line of support
- First to pick up on difficulties
- Confidante and Mentor

You have much experience.....

- You have worked with many dentists
- Have a deep knowledge of procedures
- May know the patients quite well
- You can observe the patient during the treatment (FD may have tunnel vision)
- Trust your instincts – share concerns or queries with ES
- Don’t be afraid to share helpful hints with the FD, offer alternatives
- You are a GDC registrant in your own right

Use of extended competencies

Skills you will gain on this course will enable you to further help your FD in their training

- FD struggling to place rubber dam for RCT
- FD getting impressions sent back from lab, or voids/tears in alginate impressions
- FD finding it difficult to produce a good quality radiograph
- FD not giving effective advice to a patient on OTC medications

Focus on the everyday

Good practice with every patient case embeds FD learning

Observed assessments by the ES should reflect what usually happens when the ES isn’t there to observe

An early conversation with the learner may rapidly identify the possible cause(s) of their difficulty, which may then be dealt with immediately.

Some may readily disclose information to a supervisor who clearly indicates their willingness to listen and support.

Others may have concerns about revealing information to those who they perceive to have power to influence their progression.

Unconscious Bias

Our brains are hard wired to rapidly **categorise people instinctively** and we use the most obvious and visible: **Age, body weight, physical attractiveness, skin colour, gender and disability.**

May use **less visible** dimensions: accent, social background, sexual **orientation, nationality, religion, education, and even job title.**

FEEDBACK

The 'feedback' element of MSF tools is key to changing performance.

Feedback perceived as negative and inaccurate is less likely to lead to practice improvement (Miller et al., 2010).

Feedback- group work

Think of a time when you received feedback that was genuinely helpful.

What was it about this experience that made it helpful?

Descriptive Feedback

Non-judgmental
Specific
About behaviour not personality
Checked with trainee
Outcome based
Problem solving
Suggestions not prescriptions

Principles of giving constructive feedback:

Give feedback as soon after the event/incident as possible

Initially focus on what went well

Generally, feedback should be given on a one-to-one basis, particularly if there is a need to highlight poor performance

It is important to focus on observable behaviour

Effective feedback includes exploring alternative behaviours with the trainee

Feedback is a form of inter-personal communication and needs to be considered carefully.

Assessment in DFT

MSF



Completed in fourth month of DF training



A minimum of eight completed and submitted forms are required



This must include feedback from the E.S, Foundation Dentist's Dental Nurse and a Practice Receptionist.

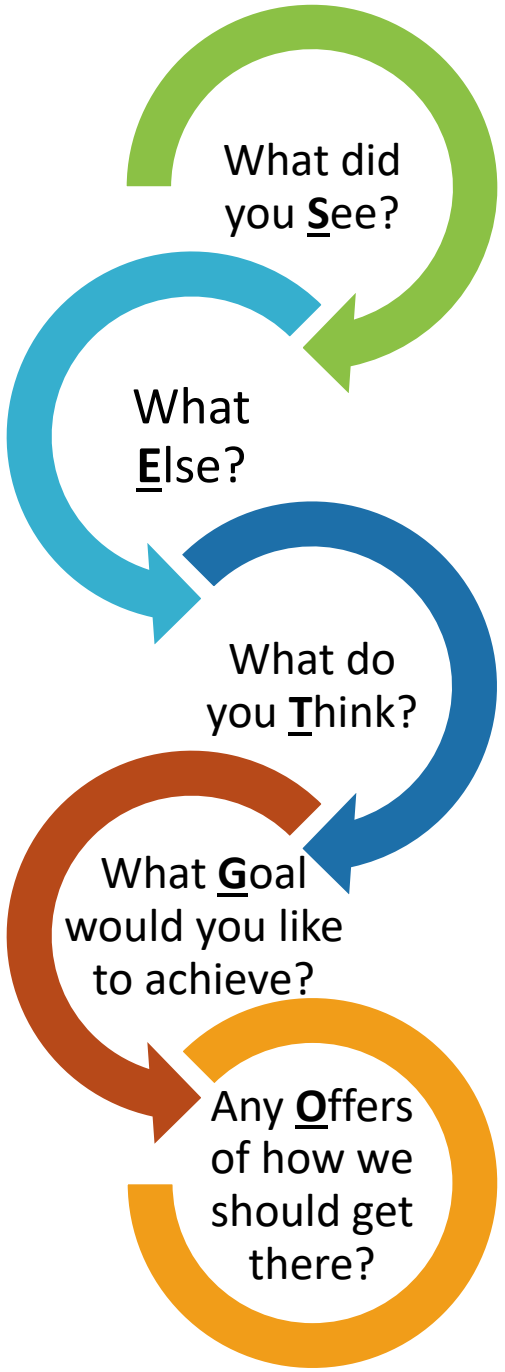


This will be repeated in the eighth or ninth month if required by the Interim RCP Panel

SLE's Supervised Learning Events – DOPs, MiniCex, CbDs

Trainees find feedback from Workplace Based Assessments provide support, increase confidence and highlight areas of weakness for development.
Scoring is usually perceived as fair and an accurate representation of ability.
New curriculum gives feedback and assigns Supervision Level rather than a numerical scoring of competency

SET-GO feedback model alternative steps



Observer

Observer

Recipient

Observer & Recipient

Observer

Practical Tips for FD Dental Nurse

- **Know when an SLE is taking place** – this helps you understand why an assessor may be present and observing. Confirm patient day before. Help FD source patient for upcoming slot
- **Keep things normal** – work with the FD as you usually would so the SLE reflects their normal clinical practice.
- **Don't coach or prompt the FD** – allow them to demonstrate their own clinical decision-making and communication.
- **Don't "rescue" unnecessarily** – give the FD space to demonstrate their abilities.
- **Patient safety always comes first** – if you identify a genuine safety concern, **speak up as you normally would**, regardless of the assessment.

Practical Tips for FD Dental Nurse

- **Continue your usual communication** – respond to the FD and patient naturally rather than changing your behaviour because an assessor is present.
- **Avoid discussing the FD's performance with the assessor** – the formal assessment and feedback are between the assessor and FD.
- **Maintain patient comfort and dignity** – an SLE should not adversely affect the patient's experience.
- **Allow space for the debrief** – the FD and assessor may require protected time afterwards to discuss performance and learning.
- **Help FD source APLAN cases in early stages**. Camera equipment readily available and charged up!

References

COPDEND (2024), *Early Years Dental Training Curriculum*;

COPDEND, *DFT Curriculum & Blue Guide*; GDC (2013), *Standards for the Dental Team*