Delegation

Duties, Responsibilities & Requirements:
An Overview of the Role in Dental Healthcare

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What is delegation?

- Give example of professional or personal situations where you delegated or had some task delegated to you?
- How do you delegate?

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Delegating tasks within the dental team is essential for efficient, safe, and high-quality care—but it must be done within legal, ethical, and professional boundaries.

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Safe Delegation = RACI

- R- Responsible
  - The team member carrying out the task
- A – Accountable
  - The delegator for the outcome
- C- Consulted
  - Anyone needed to plan/advise on delegation
- I- Informed
  - Patient and the rest of the team

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Understand Scope of Practice

You must know:

- What you are legally allowed to do.
- What the team member (e.g. dental nurse, hygienist, therapist, technician) is trained and qualified to do under the GDC Scope of Practice.

For example: A dental nurse can take radiographs only if they have a radiography qualification.

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Assess Competence

You must ensure the person you're delegating to is:

- Trained, competent, and confident to carry out the task.
- Registered with the GDC, if required (except some trainees under supervision).

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Give Clear Instructions

Provide:

- Specific guidance on the task, expected outcome, and timeframe.
- Details of what to do if they encounter problems or limitations.

Maintain Responsibility

Even when delegating:

- You remain accountable for the overall care of the patient.
- You must ensure the delegated task is carried out correctly and ethically.

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Supervise Appropriately

- The level of supervision must match the complexity and risk of the task and the experience of the team member.
- Some tasks (like administering local anaesthetic) require direct supervision if done by students or non-fully qualified staff.

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Limitations of Delegation

Cannot Delegate Beyond Scope

- You must not ask someone to do a task that they are:
- Not legally allowed to do (per GDC scope).
- Not trained or indemnified for.

Cannot Delegate Decision-Making

- Clinical judgment (like choosing a treatment plan or interpreting X-rays) must remain with the registered clinician.
- Tasks like explaining risks or obtaining consent should only be done by those trained and authorised.

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Delegating Without Consent

- The patient must be informed if someone other than the dentist will be carrying out part of their care.
- You must ensure they're comfortable and have given informed consent for this.

Delegation in Training Environments

- Trainees (student dental nurses, therapists, hygienists) can only perform tasks under appropriate supervision and within approved training programs.

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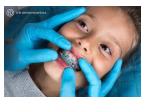
- What is an Orthodontic therapist?
- What are you key duties?



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What is an Orthodontic Therapist?

- Orthodontic therapists are key members of the dental team.
- They work under the supervision of a specialist orthodontist.
- Help deliver orthodontic treatment, often involving braces and aligners.
- A registered dental care professional.
- Specializes in assisting with orthodontic treatment.
- Works closely with patients to improve oral health and aesthetics.

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Key Duties

- Fit, adjust, and remove orthodontic appliances (e.g., braces).
- Take impressions, photographs, and X-rays.
- Provide oral hygiene advice related to orthodontic appliances.
- Record treatment progress and update patient records.
- Monitor patient progress under the direction of the orthodontist.

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Daily Responsibilities

- Preparing the surgery and equipment.
- Supporting patient care and reassurance.
- Following infection control and safety procedures.
- Liaising with orthodontists for treatment planning.
- Educating patients on appliance care and oral hygiene.

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Professional Requirements

- Education: Must complete a General Dental Council (GDC)-approved Orthodontic Therapy course.
- Registration: Must be registered with the GDC (UK-specific).
- Training: Often begins as a dental nurse or dental hygienist.
- CPD: Ongoing Continuing Professional Development is required.

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Key Skills

- Attention to detail and manual dexterity.
- Excellent communication and interpersonal skills.
- Patience and empathy with nervous patients.
- Teamwork and organizational abilities.
- Understanding of dental software and technology.

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Career Path & Progression

- Start as a dental nurse → Orthodontic Therapist.
- Opportunities to move into education, sales, or orthodontic practice management.
- May progress with further study into dental hygiene, therapy, or orthodontics.

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Work Environment

- Dental practices and orthodontic clinics.
- NHS and private sector.
- Generally full-time hours, but part-time roles exist.
- May include evening or weekend appointments.

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Role Of Dental Team

Role	Responsibilities
Dentist	Diagnoses, treatment planning, leads the team, carries out complex procedures.
Dental Nurse	Assists in procedures, cross-infection control, patient support, may hold qualifications in radiography, sedation, or oral health education.
Dental Hygienist	Preventative care (scaling, polishing), oral hygiene advice, fluoride application.
Dental Therapist	As above, plus carries out fillings, extractions of baby teeth, fissure sealants.
Clinical Dental Technician	Works with dentists to make dentures directly for patients.
Dental Technician	Creates crowns, bridges, dentures, aligners in the lab.
Practice Manager	Oversees operations, staffing, finance, compliance.
Receptionist	First point of contact, appointments, patient records, communication hub.

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Roles of Healthcare Professionals

External Healthcare Role	Contribution
GPs	Share medical histories, collaborate on systemic conditions (e.g., diabetes, infections).
Pharmacists	Assist with medication advice, interactions, and antibiotic stewardship.
Community Nurses	Support oral care in the elderly, housebound, or palliative care patients.
Dietitians	Collaborate on dietary advice related to caries, erosion, or systemic illness.
Social Workers/Safeguarding Teams	Liaise on concerns related to abuse, neglect, or capacity.
Mental Health Teams	Work together for anxious patients, those with learning disabilities, or mental illness.

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Feedback

- What is feedback?
- Why do we feedback?
- Is it beneficial?
- Can you give an example of good or bad experience?

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Feedback

Giving feedback is vital for learning, quality improvement, and team morale.

There are a number of tools to aid the process

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The SBI Model
(Situation – Behaviour – Impact)

- Situation: When and where it happened.
- Behaviour: What the person did (objective, not personal).
- Impact: What effect it had on the team/patient/outcome.
- Example: During the procedure this morning (situation), you stayed calm and reassured the anxious patient (behaviour), which really helped them settle and trust the process (impact)."

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Be Timely and Specific

- Give feedback soon after the event while it's fresh.
- Avoid vague statements like "good job" – specify what was good or what needs improvement.

Keep It Constructive and Respectful

- Focus on behaviour, not personality.
- Be honest but kind—your tone and body language matter

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Invite Reflection

- Ask for their perspective first: "How did you think that went?"
- This encourages self-assessment and open dialogue.

Follow Up

- Agree on a plan or support needed: "Let's go over that procedure again next week to boost your confidence."
- Recognise improvements: Positive reinforcement helps learning stick.

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Insight

What is it?

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Insight refers to a clinician's ability to:

- Recognise their own strengths, limitations, and impact on others (e.g. patients, colleagues).
- Understand how their decisions, behaviour, and communication affect patient outcomes and professional relationships.
- Acknowledge mistakes and take responsibility for learning and improvement.
- Be open to feedback and adjust practice accordingly.

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For Orthodontic Therapists

Recognising when:

- You are working outside your scope of competence.
- Treatment plans may not be appropriate for a particular patient.
- A referral is needed.
- Patient expectations are unrealistic, and better communication is required.

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Components of Insight in Orthodontic Practice:

- Clinical Self-Awareness: Understanding the limits of your expertise—knowing when to seek guidance, refer, or reconsider a diagnosis or treatment plan.
- Patient-Centered Awareness: Recognizing how your communication style, treatment decisions, and demeanor affect patient experience, adherence, and outcomes.
- Reflective Practice: The ability to think deeply about past cases, mistakes, or successes to improve future clinical performance.
- Feedback Integration: Accepting and learning from feedback—whether from colleagues, mentors, or patients—with a willingness to adapt and grow.

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Why is it important?

- Error Prevention and Risk Management: Insight allows orthodontists to recognize early signs of complications or errors and to intervene proactively, ensuring patient safety.
- Ethical Decision-Making: Clinicians with insight can better navigate complex treatment decisions, prioritize patient interests, and avoid over-treatment or unnecessary procedures.
- Enhanced Communication: Recognizing patient concerns (spoken or unspoken) improves trust and leads to better patient cooperation and treatment adherence.
- Continuous Improvement: Insight drives lifelong learning, encouraging orthodontists to pursue ongoing education and adapt to evolving best practices.

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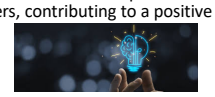
Importance for Personal and Professional Development:

- Growth Mindset: Insight fosters humility and curiosity, essential for developing expertise and adapting to challenges.
- Resilience: Understanding one's emotional responses and coping mechanisms supports mental well-being in a demanding clinical environment.
- Team Dynamics: Self-awareness helps in building better relationships with team members, contributing to a positive and collaborative workplace



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Personal Assumptions, Biases & Prejudices

- Assumptions: Unconscious beliefs or expectations about people or situations without evidence (e.g., assuming a patient will not follow instructions based on their age or appearance).
- Biases: Systematic, often unconscious, inclinations that affect decisions and judgments (e.g., preferring certain patients or dismissing others based on cultural background).
- Prejudices: Strongly held negative beliefs or attitudes about groups, often rooted in stereotypes (e.g., believing certain socioeconomic groups are less compliant or motivated).

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Patient-Related Biases

- Socioeconomic status: Assuming that patients from lower-income backgrounds cannot afford or will not value orthodontic treatment.
- Ethnicity or culture: Misjudging oral hygiene, pain tolerance, or compliance based on a patient's race or cultural background.
- Age: Assuming older patients are less suitable or less committed to orthodontic treatment.
- Gender: Underestimating aesthetic concerns in male patients or overemphasizing them in female patients.
- Body image and appearance: Treating patients differently based on attractiveness, which can influence clinical enthusiasm or communication style.

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Colleague-Related Assumptions

- Professional roles: Undervaluing input from dental nurses, hygienists, or technicians based on hierarchy.
- Gender and age: Assuming younger or female professionals are less competent or experienced.
- Cultural background: Misinterpreting communication styles or work habits of colleagues from diverse backgrounds.

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Wider Societal Impacts

- Failing to advocate for underrepresented communities or adapting care to meet diverse needs.
- Not participating in outreach or public health efforts due to assumptions about community engagement or interest.
- Supporting limited treatment models that exclude or marginalize vulnerable populations.

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Managing and Reducing Impact

Self-Awareness and Reflection:

- Regular self-reflection, journaling, or peer discussion to identify and challenge personal assumptions and biases.
- Participating in unconscious bias training.

Inclusive Communication:

- Using respectful, non-judgmental language with patients and staff.
- Actively listening to each individual's values, needs, and preferences.

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- Cultural Competence:
  - Learning about different cultural health beliefs and practices to improve rapport and treatment adherence.
  - Being sensitive to language barriers and using interpreters where needed.
- Standardized Protocols:
  - Using evidence-based criteria for treatment planning to avoid decisions influenced by subjective bias.
- Team and Peer Feedback:
  - Encouraging honest feedback from colleagues about your interactions and being open to improvement.
  - Creating a workplace culture that values diversity, equity, and mutual respect.

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Does it matter?

Unchecked biases and assumptions can:

- Lead to misdiagnosis, unequal care, or poor treatment outcomes.
- Damage trust and rapport with patients.
- Erode team morale and interprofessional collaboration.
- Undermine professional integrity and societal reputation of the dental profession.

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Question

- "Define the term 'insight' in the context of orthodontic clinical practice. Explain its importance and give an example of how an orthodontic practitioner may demonstrate insight in a clinical setting."

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Answer

- Insight in orthodontic practice refers to a clinician's ability to critically assess their own professional behaviour, skills, and decisions, and to recognise how these influence patient care and team dynamics.
- It involves being aware of one's limitations, taking responsibility for mistakes, and being open to feedback. Insight is essential for maintaining patient safety, upholding professional standards, and promoting lifelong learning.

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- An orthodontic practitioner may demonstrate insight by recognising that a complex skeletal malocclusion case is beyond their level of training and therefore referring the patient to a specialist orthodontist or maxillofacial surgeon. Rather than attempting treatment they are not fully confident in, they take steps to protect patient welfare.
- This demonstrates accountability, humility, and commitment to safe, ethical care.

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Summary

- Orthodontic therapists are crucial in delivering orthodontic care.
- They support both patients and orthodontists.
- Require specific training, registration, and soft skills.
- Rewarding role with patient-facing impact and growth opportunities.

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