Risk assessments Practice based portfolio

Karl Grimes
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Objectives

- Understand how to undertake a risk assessment
- Explain how to complete the portfolio and the assessments throughout the year

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Risk assessment

- Risk assessment is an important step in protecting dental care professionals and patients, as well as complying with the law.
- A risk assessment helps you focus on the risks that really matter in the dental practice
- Risk is defined as the potential that a chosen action or activity (including the choice of inaction) will lead to a loss (an undesirable outcome).

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- Management is the act of getting people together to accomplish desired goals and objectives using available resources efficiently and effectively.
- So with risk management, getting the team together and gathering resources to minimise the chances of there being an adverse incident or outcome in our place of work and, having learned from this, prevent a recurrence.

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What risks need to consider in dental practice?

- ? Infection control
- ? Personal protective equipment (PPE)
- ? Radiological protection
- ? Health and safety, including slips and trips, fire safety, work equipment, etc
- ? Patient record keeping including updating medical history
- ? Quality assurance auditing
- ? Recording CPD
- ? Recording registration details, indemnity and eCRB appropriately
- ? Consent and Mental Capacity Act
- ? Critical or adverse incidents
- ? Violence, harassment and bullying
- ? Recruitment and staffing and appraisal.
- ? Child Protection and safeguarding vulnerable adults n CDSHH, including medical gases, hazardous substances, mercury, *Legionella*
- ? Latex and allergies
- ? Water regulations
- ? Asbestos
- ? Waste segregation, storage and disposal
- ? Pressure vessels
- ? Medical emergencies, emergency drugs and equipment
- ? Handling medicines
- ? Confidentiality and data protection, including information governance
- ? Referral both within and outside of practice
- ? Communication with patients and providing information
- ? Treatment planning and payment methods
- ? Disability discrimination and the Equality Act 2010 n Collecting and acting upon patient feedback
- ? Collecting and acting upon staff feedback
- ? Complaints handling

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Performing a risk assessment

- Four steps are required to undertake a risk assessment:
- Identify the hazard
- Assess the risk
- Control the risk
- Review your control
- 5 R's: Recognise, Rank, Respond, Report, Review

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Scenario

- **Step 1. Identify the hazard**
- Patients may have complained because they don't feel listened to by the practice.
- **Step 2. Assess the risk**
- If the staff have not been trained in complaints handling, the risk may be quite high.

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- **Step 3. Control the risk**
- Undertake all team training at a practice meeting and describe correct complaint handling. Some of the dental indemnity companies offer excellent online information on how to listen to a complaint and handle it correctly to avoid it escalating outside of the practice. Keep a log of all complaints and be able to offer the CQC examples of how well you have handled a complaint within the practice.
- **Step 4. Review your control**
- It will not provide the CQC with any confidence if you produce a policy which was signed two years ago by people who no longer work in your practice or describes equipment or procedures which are not current in your practice. Important to have a review date on the front of each policy and show that you have done this.

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SMART action plan

- SMART action plan to remedy any deficiencies. SMART is an acronym for:
- **Specific**
- Does it identify the issue, what action needs to be taken, by whom and what they want to achieve?
- **Measurable**
- Does it say how they are going to ensure improvements have been made? What measures are they going to put in place?
- **Achievable**
- Are the measures achievable and sustainable? Can you describe the resources needed to implement change and are these in place?
- **Relevant**
- Is the action proposed relevant to the concern identified?
- **Time bound**
- Is there a date by which improvements will have been made? How will this impact on patients?

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Practice based portfolio

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Daybook

- Every patient must be seen by supervisor
- Every patient must be recorded

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Daybook

Student completed | Supervisor completes

Date	Treatment				Comment	Supervisor

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Grading

The trainer will then tick the appropriate coloured box, according to how well the treatment was undertaken:

- **Green** Ticking the green box means that the student undertook the procedure perfectly and no improvements could be made
- **Orange** Ticking the orange box means that the majority of the treatment was correct, but there were small areas of improvement that could have been made.
- **Red** Ticking the red box indicates that there were a number of areas of improvement required

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Daybook completion

- Green should only be scored when everything was perfect and there is no room for improvement in any aspect of the procedure
- If red or orange are scored you MUST make a comment so the student can learn from this next time

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- Purpose of daybook is to provide learning outcomes for the student

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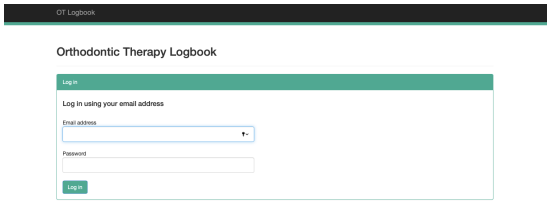
OT logbook



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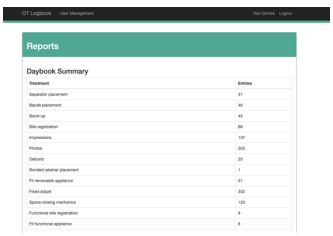
Reports



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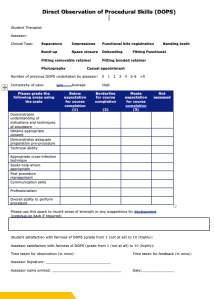

DOPS

- Direct Observation of Procedural Skills
- Use DOPS form
- Watch whole procedure
- Make a judgment on specific areas
- Grade each area
- Give immediate feedback
- Student to transfer to ePortfolio

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How the process works

- Assessor must be a specialist and have read instructions
- Process is student led

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DOPS (12)

- Separators
- Impressions
- Functional bite registration
- Banding teeth
- Bonding teeth
- Space closing mechanics

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DOPS (12)

- Debonding
- Fitting a functional appliance
- Fitting a removable retainer
- Fitting a bonded retainer
- Photographs
- Casual appointment

- Each task should be observed at least twice

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How to grade them

- Compare to standard you would expect them to reach at the end of course
- Grades 1-3
- 1= Below expectations for curse completion
- 2= Borderline for course completion
- 3= Meets expectations for course completion
- Descriptors available for every grade for skill for every procedure

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Skills assessing

Understanding
Consent
Preparation
Technical ability
Appropriate cross infection
Seeks help if required
Post-procedure care
Communication skills
Professionalism
Overall ability to perform procedure

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Other areas of form

- Number of previous assessments you have done
- Complexity of case
- Satisfaction of you and student with fairness of the process of this assessment (not a mark out of 10 for quality)
- Feedback

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DOPS

- Start early in training-to allow student to learn from them
- Grade for standard you would expect at end of course
- Provide action plan of how to improve

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Feedback

- Needs to be as soon as possible after the event
- Give student:
- Agreed areas of strength
- Areas for development
- Action plan

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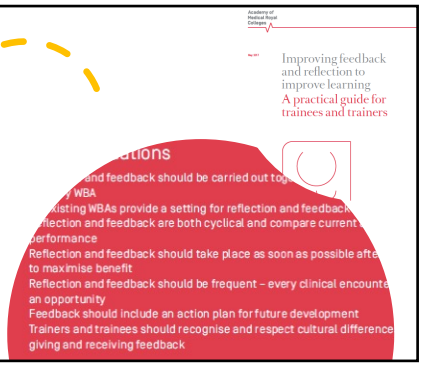
Feedback document



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Creating a positive relationship between trainer and trainee

- Demonstrate mutual respect
- Close and supportive supervision
- Welcoming approach to request for advice
- Give the trainee clinical independence within their limits
- Allowing the trainee to explore their clinical limits under supervision
- Accessible and engaged in learning process

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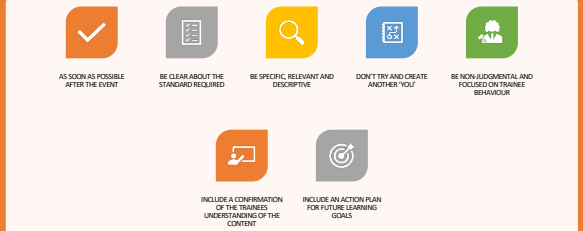
Key elements of effective feedback



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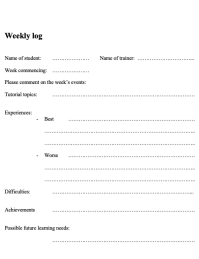
Weekly reflective log



- Encourage student to reflect on what they have done that week and learn for it
- Record tutorial topics

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Tutorial topics

1 HOUR PER WEEK

BASED ON EXPERIENCE ON CLINICS

LOOK AT HANDOUTS FROM LECTURES ON COURSE

ENCOURAGE STUDENT TO DRIVE TOPIC CHOICE

LOOK AT GDC OUTCOMES DOCUMENT

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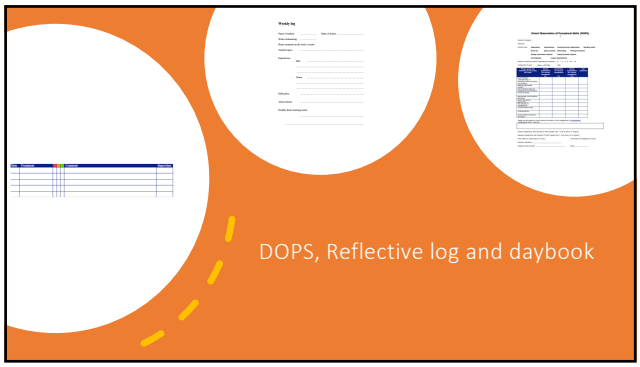

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What else is in the logbook

- Daybook
- DOPS
- Weekly reflective log
- Reflective log linked to GDC syllabus

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GDC reflective log

- Student keeps a record to demonstrate experience related to selected GDC outcomes
- They collect these 'experiences' throughout the year
- You will need to help them with this

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What else is in the logbook

- Daybook
- DOPS
- Weekly reflective log
- Reflective log linked to GDC syllabus
- Photo/Traced Cephs
- Audits/presentations
- Significant event analysis

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Significant event analysis

- From airline industry
- To learn from mistakes or 'near misses'

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Significant event analysis

What was the event	Upper and lower bond up, patient attended a couple of times due to the brackets coming off.
Describe what happened	Did an upper and lower bond up, whilst ligating the appliance 3 brackets came off then bonded back on , 2 days later another 3 brackets came off , 1 week later patient attended again as another bracket came off, rebounded that bracket whilst cinching back the 016 niti wire the Lower right 6 bracket came off.
How could the event be avoided	Checked the composite to see the date. Good moisture control Went through post op instructions with patient.
What measures could be employed to prevent the event re-occuring?	Checked the composite to see the date. Good moisture control Went through post op instructions with patient. Make sure the nurse is putting enough composite on to the brackets. Making sure the SEP is mixed properly.

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What else is in the logbook

- Daybook
- DOPS
- Weekly reflective log
- Reflective log linked to GDC syllabus
- Photo/Traced Cephs
- Audits/presentations
- Significant event analysis

- PDPs
- Appraisals

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Questions?

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