

Framework Guidance for the Dental Team

Purpose of paper	For action
Mission statement/business plan	The guidance is part of the Council's aim to protect patients and promote confidence in dental professionals.
Issues	To consider the framework guidance for consultation and approve further work
Recommendations	See paragraph 23
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Introduction

1. The Council's framework for the future regulation of the dental team is based on the following elements:
 - a) Only registrants of the GDC will be permitted to practise dentistry;
 - b) The GDC will hold two registers, one for dentists and one for PCDs;
 - c) Entry to the PCD register will be on the basis of recognised qualifications, which in future will all be based on GDC-developed curricula, or (during the transitional period for established PCD groups) on relevant, validated experience;
 - d) Titles such as dental hygienist, dental nurse, dental technician etc. will be reserved by law to those who become registered;
 - e) PCDs will be permitted to practise dentistry in respect of those responsibilities in which they are trained and for which they have received clear and mutually accepted authorisation from a registered dentist;
 - f) Every registrant will be responsible to the GDC for practising within the limits of their training and competence and for the procedures which they undertake;
 - g) Dentists will be additionally responsible to the GDC for ensuring that colleagues in the teams they lead are not asked to undertake practice beyond their competence;
 - h) PCD educational curricula will define the knowledge, skills and attitudes which a PCD must have on first registration;
 - i) PCDs will be able to expand their range of skills through recognised training and experience and a modular approach should be encouraged across PCD training;
 - j) Clear ethical guidance will be issued to all team members on their roles and responsibilities;
 - k) PCD regulation will be integrated into the work of the GDC, including the regulation of all dental education, common fitness to practise procedures and, in time, compulsory CPD.
2. The key components for the delivery of this framework are:
 - a) Legislation within which the Council can register PCD groups, recognise and assure qualifications and review the fitness to practise of all registrants;
 - b) Curricula frameworks describing the competencies required of newly qualified PCDs in each group;
 - c) Professional guidance.
3. The legislation is due for publication later this month and will be considered by Council in detail between then and September. The curricula frameworks are

already in place and include considerable detail of the range of duties that each group of PCDs will be equipped to undertake. The drafting of the final element, the ethical guidance, is a vital part of this framework and also of the review of the Council's standards guidance as a whole.

Discussion

4. *Standards for Dental Professionals* sets out the principles of ethical dental practice which the Council wishes to promote. The guidance for the dental team will be one of the supplementary guidance booklets which will sit alongside this. Its drafting poses two main challenges.

Challenge 1: promoting clarity while avoiding over-prescription

5. The first is the tension between the need for clarity and the need to avoid an over-prescriptive approach. The Council has explicitly rejected a continuation of the current system under which 'dental auxiliaries' have a list of permitted duties.
6. The new system is designed to facilitate a more flexible approach, enabling registrants to build their skills with suitable training and within a framework of authorisation led by the dentist. However, there will inevitably be considerable uncertainty, particularly in the early stages of the new system, and registrants will look to the Council for guidance. Some of this may be provided in the form of FAQs, and with structured examples, to avoid making the main guidance too detailed and inflexible.
7. The Council will also need to make clear that the new flexibility must be exercised responsibly, with the safety of patients always being the principal consideration.

Challenge 2: applying the principles in practice

8. The second challenge is posed by the fact that in some areas the application of the principles already agreed by Council is not straightforward. There are two main examples of this.
9. The first is the term 'mutually accepted authorisation' which the Council has used to describe the system within which team members would practise. Guidance will be needed on how that authority should be given, recorded and monitored within teams. The position is particularly complicated in the area of dental technology, as dental technicians usually practise remotely from the other members of the dental team and as a separate business. In addition, clinical dental technicians are likely to have a 'frontline' role in treating some patients. The practicalities of authorisation therefore need further consideration.
10. The second example relates to the extent to which PCDs will be entitled to expand their range of skills through recognised training and experience. While, to be consistent with its general policy, the Council is likely to wish to avoid being too rigid in this area, concerns may arise about registrants expanding their skills inappropriately with inadequate training (there is an analogy here with the Council's concerns about courses in implantology for dentists).

11. The Council needs to consider how it might best ensure that team members are encouraged to develop their skills while avoiding a situation in which individuals can become another kind of PCD by default. This is related to the question of how to ensure that individuals are not permitted to practise beyond the limits of their safety.

How to resolve these issues

12. It is important that these issues are resolved. It is also important that PCD groups are fully involved in the formulation of the guidance which will apply to them – the Chief Executive and colleagues have already held initial meetings with PCD groups on this subject.
13. Many of these issues cut across committee boundaries and will require full Council discussion and approval. At the same time, progress needs to be made on more straightforward areas of the drafting and on continuing discussions with the PCD groups.

Taking this forward

14. An outline of what dental team guidance might contain has been prepared and was considered by Standards Committee in May. It sets out the topics that could usefully be covered and gives an outline of what might be included in each area. The topics to be covered had already been discussed with representatives of a number of PCD organisations.

The outline is attached at **Annex A**

15. The guidance is not intended to cover all the situations that members of the dental team will encounter in the course of their work. Many of those will be dealt with elsewhere, for example in guidance on consent and confidentiality. The aim is to provide guidance to members of the dental team on working well together in the interests of patients.
16. If Council agrees the proposed guidance on consent and confidentiality as a draft for consultation, the outline of the dental team guidance could be included in that consultation for comments on the suggested topics to be covered and the outline contents.
17. In the meantime, work could continue within the Secretariat, including discussions with Committee chairs and further discussions with PCD organisations, to prepare for full Council discussion of the issues highlighted above at its meeting in December.

Equality and Diversity Implications

18. The guidance will seek to promote a culture of professional respect between all members of the dental team

Communications Implications

20. The initial consultation will be part of a wider exercise. There will then be a full consultation on the draft guidance when Council has approved it on that basis later in the year, which will need to be widely publicised.
21. It has also been suggested that we should carry out a further series of roadshows in 2005 aimed particularly at PCDs and focussing on working within an ethical framework.

Resource Implications

22. None which are not already covered in the current budget

Recommendations

23. That the Council should approve the way forward and further work set out in paragraphs 16-18 above.

Annex A

Framework for Guidance for the Dental Team

Topic	Outline of contents	Notes
Registration	All members of the team to be currently registered or undergoing a structured training programme leading to a registrable qualification, as appropriate.	More detailed information will be set out in Registration guidance
Indemnity	<p>All members of the team to be members of a defence organisation or to be sure that they are otherwise indemnified against claims arising from their treatment of patients.</p> <p>Include reference to need for periods of past practice to be covered</p>	Further information could be provided in FAQs
Roles and responsibilities	<ul style="list-style-type: none"> • All team members need to understand and have respect for the roles, skills and abilities of other members of the team • Do not carry out a task or a type of treatment unless you are confident that you have been trained and are competent to do it • Do not ask another member of the team to carry out a task or treatment unless you are sure that they are trained and competent to do it • If you employ other members of the team, do not take advantage of this situation if they say they do not feel able to undertake a task • You can expand your range of skills through recognised training and experience 	

Topic	Outline of contents	Notes
Working as a team	<ul style="list-style-type: none"> • Act in a professional manner in your dealings with colleagues and treat them all with respect • Respect the skills and abilities of all members of the team and make the best use of them in providing treatment • When treating patients, advised to have another member of the dental team in the room at all times • Anyone assisting in a clinical procedure to be registered or in training for a registrable qualification • Communicate effectively with other members of the team • Employ suitably trained and, where appropriate, qualified staff. 	Dental nurses requested clear guidance on chaperonage
Sharing treatment	<ul style="list-style-type: none"> • If you ask a colleague (inside or outside the practice) to provide treatment, a dental appliance or a second opinion for a patient, make sure that your request is clear and that the colleague has all the necessary information • If you are asked by a colleague to provide treatment or a dental appliance for a patient, be sure that you are clear about what you are being asked to do • If you do not feel that what you have been asked to do is appropriate, discuss this with the colleague who has requested the treatment and come to an agreement before proceeding • Guidance on working with non-dental colleagues 	
Mutually accepted authority	<ul style="list-style-type: none"> • All team members are responsible and accountable for their treatment/actions 	

Topic	Outline of contents	Notes
	<ul style="list-style-type: none"> • Dentist has an additional overall responsibility for the patient • All team members must be clear about who has the authority to do what • Particularly important when working on separate sites • Need an agreed understanding of clinical vs technical responsibility and clinical vs technical acceptability 	
Unregistered personnel / Quality assurance	<ul style="list-style-type: none"> • Where a registrant works with unregistered personnel, for example in a dental laboratory, registrants are responsible for work carried out by staff under their supervision. • Where a dental laboratory employs registered and unregistered staff, only a registrant may sign off work leaving the laboratory • Guidance for technicians with responsibility for quality assurance? 	<p>Technicians want the guidance to prevent registered technician just being a figurehead</p> <p>Needs further discussion with technicians</p>
Whistleblowing	<ul style="list-style-type: none"> • All team members have a responsibility to be aware and take appropriate action if they think that a colleague's conduct, health or performance are a risk to patients. • Patient safety must be the priority, not personal or professional loyalty. Discuss the situation with a colleague. • If you would find it helpful, contact defence organisation or professional association. Consider whether you need to contact the Council. 	<p>Could issue more detailed, practical guidance later.</p>
Medical Emergencies	<ul style="list-style-type: none"> • Can occur at any time in practice. 	<p>Administration of emergency drugs could</p>

Topic	Outline of contents	Notes
	<ul style="list-style-type: none"> • All team members need to be trained and prepared at all times. • Team needs to practice together in a simulated emergency so that everyone knows their role 	be covered in FAQs
Consent	Every team member who provides treatment to the patient has a responsibility to be sure that the patient understands the treatment to be provided by them and has consented to it.	Link to guidance on consent and confidentiality for more information
Commercial pressure	Do not put pressure on other members of the dental team by setting financial targets for treatment earnings or product sales.	This might be better in practice guidance
Confidentiality	Duty of patient confidentiality applies to all members of the dental team	Link to guidance on consent and confidentiality for more information
CPD	<p>Keep your knowledge and skills up to date.</p> <p>If you employ staff or head a team, make sure everyone has the opportunity to take part in CPD</p>	
Radiography		Could be covered by requirement not to delegate inappropriately but dental nurses requested it be covered separately