TRAINER HANDBOOK

CONTENTS

2 Who’s Who
3 Application to be a Trainer
4 Role of a Trainer; Obligations of a Trainer
6 Obligations of a Therapist VT
7 What Does a Therapist Do?
8 Standards for Training Practices
10 Practice Advert
13 Notes for Completion
14 Dates for your Diary
15 Practice Visit Feedback
25 Practice Visit Feedback Summary Sheet
26 Vocational Trainer Selection in NESC
29 Vocational Trainer Person Specification and Short Listing Form
## DENTAL SCHOOL DIRECTOR / POSTGRADUATE DENTAL DEAN
### Mrs Helen Falcon
MSc, BDS, FFPH, MFDS, DDPH RCS Eng

NHS Education South Central  
Dental School Office (North)  
The Triangle  
Roosevelt Drive  
Headington  
Oxford OX3 7XP  
Tel: 01865 740650

Email: [helen.falcon@nesc.nhs.uk](mailto:helen.falcon@nesc.nhs.uk)

## ASSOCIATE DENTAL SCHOOL DIRECTOR / POSTGRADUATE DENTAL DEAN / NORTHAMPTON SCHEME TVT ADVISER
### Mr Shalin Mehra
BDS DGDP RCS

Weston Favell Dental Practice  
Weston Favell  
Northampton NN8 4DW  
Tel: 01604 405611  
Home: 01604 880325  
Mobile: 07831 252122

Email: [shalin.mehra@nesc.nhs.uk](mailto:shalin.mehra@nesc.nhs.uk)

## THERAPIST TVT ADVISER
### Mrs Kira Hammond
DH, DT

NESC Dental Office  
Southern House  
Sparrowgrove  
Otterbourne  
Winchester SO21 2RU  
Tel: 01865 740616

Email: [kira.hammond@port.ac.uk](mailto:kira.hammond@port.ac.uk)

## THERAPIST TVT ADMINISTRATOR
### Mrs Angela Evans

NESC Dental Office  
The Triangle  
Roosevelt Drive  
Headington  
Oxford OX3 7XP  
Tel: 01865 740616

Email: [aevans@oxford-pgmde.co.uk](mailto:aevans@oxford-pgmde.co.uk)

---

### Application to be a Trainer

NESC (NHS Education South Central)
## Sequence of Events

<table>
<thead>
<tr>
<th>Read</th>
<th>Trainer Handbook and Trainer Application Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application</td>
<td>Complete Trainer Application Form and return to the TVT Administrator (see page 2) by <strong>Thursday 12 February 2009</strong> along with your Practice Advert. Please refer to the <strong>Paper Trail Checklist for TVT</strong> on last page of application form.</td>
</tr>
<tr>
<td>The Practice Visit</td>
<td>On receipt of your completed application form a practice visit will be arranged.</td>
</tr>
<tr>
<td></td>
<td>1. Allow 2 hours to discuss matters with visitors</td>
</tr>
<tr>
<td></td>
<td>2. You must have all required documentation readily available for verification. These will be inspected at the start of the visit. If not available the visit will be suspended.</td>
</tr>
<tr>
<td></td>
<td>3. Brief practice staff. Any areas of the practice may be visited, not just the proposed TVT surgery.</td>
</tr>
<tr>
<td>Selection</td>
<td>Usually 10 places only are available on our scheme, so selection is competitive and the Selection Committee’s decision is final. There is no right of appeal. You will be invited to a formal interview. You will be assessed on the interview, practice visit and application and at the introduction to TVT course (So you want to be a Trainer?). (Trainers’ Study Days if existing trainer.)</td>
</tr>
<tr>
<td>Appointment</td>
<td>Following interview you will be notified of your appointment or otherwise by the Postgraduate Dean.</td>
</tr>
<tr>
<td>Acceptance</td>
<td>Sign and return the contract within seven days</td>
</tr>
</tbody>
</table>
Role of a Trainer

As the title suggests, the principal duty of the trainer is to teach, both within the formal context of the one to one tutorial and in the broader framework of teaching by example.

The trainer is in the best position to assess the trainee’s needs. Through the various processes of assessments and tutorials these needs can be identified, discussed and hopefully satisfied. The best trainers will not apply the do as I do philosophy, but encourage their trainees to develop their own personal skills and attitudes. This is an active process which requires the trainer to possess certain qualifications:

i. a willingness to teach
ii. an ability to communicate successfully
iii. a self-awareness
iv. a perception of the feelings of others

In order that the trainer can fulfil these onerous roles, he or she must possess the quality of enthusiasm.

Obligations of a Trainer

- Employ a TVT as a salaried assistant under the terms of the agreed contract and before he/she starts work to deposit a copy of the signed contract of employment with the PGDD or postgraduate office and to obtain prior to and during the appointment the approval of the PGDD of any variations to the contract of employment.

- Work in the same premises as the TVT, in a surgery to which he/she has close proximity and access for the TVT, for not less than three days a week (one of which should be the study release day on a Thursday).

- Provide the TVT with adequate administrative support and the fulltime assistance of a suitably experienced dental nurse.

- Conduct an initial PDP interview to identify the trainee’s strengths and weaknesses and draw up a development plan. (PDP is the Professional Development Portfolio in Dental Vocational Training).

- Be available for guidance in both clinical and administrative matters and provide help on request or where necessary.

- Prepare and conduct regular 2-weekly tutorials within normal practice hours (such tutorials to be of at least one hour’s duration and recorded in the PDP).

- Allow and require the TVT to attend the 14-day study course programme and ensure that holidays do not lead to absence from the study course.

- Provide satisfactory facilities (including an adequate supply of hand-pieces and instruments, sufficient to allow them to be sterilized between patients).

- Provide relevant training opportunities so that a wide range of NHS practise is experienced and so that, as far as is reasonably possible, the TVT is fully occupied.

- Assess and monitor the TVT’s progress and professional development using the Professional Development Portfolio (PDP) and any other material provided for this purpose, to give feedback and to liaise with the Adviser as necessary.

- Ensure that the TVT’s PDP and the processes involved in assessment are documented and kept up-to-date.

- Participate in Trainer training when necessary to undertake the role of trainer and to undertake training in assessment through participation in educational courses prior to the employment of a TVT.
in the practice and during the training period, as required.

- Will not encourage the TVT to work additional hours for additional monies within or outside the practice whilst working within the terms of TVT Contract (pending).
- Attend trainer meetings and end-of-scheme review sessions, as required.
- Set time aside to be available for Adviser visit/s as required, including ad hoc visitations by the Deanery.
- Provide appropriate dental reference material for the use of the TVT within the practice. (Journals, CD Roms, books, Department of Health documentation, etc).
- Advise on the final certification of the TVT’s completion of Vocational Training. Inform the PGDD (in writing) if the circumstances of either yourself as the trainer, the TVT or the practice change in such a way as to alter the contract of employment between yourself and the TVT.
- Provide e-mail linking for TVT and Trainer with the Postgraduate Dental TVT Office and Dental TVT Adviser.
- To pay the TVT’s salary on the date agreed on the Contract

**Obligations of a Therapist VT**

- Work as a TVT salaried assistant for the duration of the Vocational Training year under the terms of the
nationally agreed contract.

- Take up the TVT placement once accepted, enter into the agreed contract of employment with my Trainer and abide by its terms in all respects.

- Participate in an initial PDP interview to identify my strengths and weaknesses and work with the Trainer to draw up a development plan. (PDP is the Professional Development Portfolio in Dental Vocational Training).

- Work under the direction of the Trainer and seek advice and help on clinical and administrative matters where necessary.

- In the interests of good patient care and the good management of the practice, draw the Trainer’s attention to any problems encountered immediately they become apparent.

- Attend regular fortnightly tutorials within normal practice hours (such tutorials to be of at least one hour’s duration and recorded in the PDP).

- Diligently attend the 14-day study course programme and ensure that holidays do not lead to absence from the study course.

- Cooperate with the Trainer and the practice so that I make the most of the facilities and opportunities provided, particularly training opportunities, so that a wide range of NHS practise is experienced and so that, as far as is reasonably possible, I am fully occupied.

- Work with the Trainer to ensure that my progress and professional development are assessed and monitored, using the Professional Development Portfolio (PDP) and any other material provided for this purpose; and to ensure that the relevant documentation is kept up-to-date.

- Undertake any specified activities as part of the assessment process within vocational training.

- Not work for additional monies within or outside the practice whilst working within the terms of the TVT contract.

- Act as a full and committed member of the dental practice team, participating in practice meetings, following proper practice protocols and cooperating with practice staff in all respects.

- Take out professional indemnity cover and practise according to General Dental Council and other relevant professional guidelines.

- In the event of disagreement or dispute with the Trainer, cooperate with the Deanery to resolve the matter expeditiously.

The professional relationship between trainer and trainee will be that of Provider/Performer. The Provider is both legally and professionally responsible for the trainee. The trainer also has vicarious liability for the actions of the TVT. Trainers are required to satisfy themselves of the competence and suitability of their trainees to carry out the work, by means of structured assessment.

This list of obligations may appear somewhat daunting, but at the risk of being repetitive, it has to be said that the kingpin of Vocational Training is the trainer. The duties are undoubtedly many. The most important obligation, however, which will be rewarded by a feeling of success, self-esteem, and the pleasure of seeing a young colleague achieve a goal, is commitment.

What Does A Therapist Do?

Dental therapists prove to be a valuable asset in most practices as they can carry out a wide range of routine dentistry. Therapists who graduated after 2003 are qualified to carry out the following procedures:
- Intra and Extra Oral Assessment
- Indices
- Application of medicaments to teeth, such as fluoride
- Emergency Temporary Replacement of Crowns
- Dental Health Education
- Fissure sealants
- Dental radiographs
- Impressions
- Infiltration and Inferior Dental Block Anaesthesia
- Supragingival Debridement
- Subgingival Debridement
- Restorations (not involving the pulp) in Deciduous and Permanent teeth
- Class I-V Cavity Preparations
- Use of all materials except pre cast or pinned restorations
- Pulp Therapy of Deciduous Teeth
- Placement of Pre Formed Crowns on Deciduous Teeth
- Extraction of Deciduous Teeth

A dental therapist qualified before 2003 will be required to undertake additional postgraduate training for extended duties in order to carry out all procedures listed above.

A registered dentist must first examine the patient and provide a written treatment plan which clearly states items of treatment to be carried out by the dental therapist. This treatment plan can be as prescriptive as the dentist wishes to make it.

**Standards for Training Practices**

These standards are a guide to help practitioners know what is normally expected for training practices in the NESC Deanery. The Advisers will use these criteria during practice visits. They are for guidance, please contact one of the Advisers if you require clarification.
As a general guide the standards of the BDA Good Practice Scheme or equivalent will be expected as a minimum. You must also comply with all current NHS terms of service and national legislation.

It is taken for granted that the following requirements will be met:

1. A minimum NHS commitment of the Trainer (1500 UDAs – please see pages 26 – 28)
2. Adequate supply of NHS patients for TVT
3. The TVTs surgery must be a minimum size of 3m x 2.4m.
4. The trainer should not have been found in breach of their NHS terms of service or be under investigation by the GDC within eighteen months prior to their application. The Deanery will contact the GDC, DPB, DRS and the PCTs for references.

PREMISES

The training practice will provide a dedicated surgery for use by the TVT. Ideally this should be the same surgery at any given practice. The surgery must be available during normal working hours, and also when the day release course is not being run. The surgery should be in close proximity to that of the trainer, preferably on the same floor. Premises must comply with the Disability Discrimination Act. The TVT surgery should be capable of adaptation to accommodate both left and right-handed operators.

EQUIPMENT

The TVT’s surgery will be equipped with the full range of instruments necessary to provide all routine general practice dental surgery. It is expected that there will be enough sterile instruments instantly available to provide routine examination and care, and comply with A12 Infection Control Guidelines. This will include periodontal probes and a range of scalers, a wide range of forceps, and a kit of sterile surgical instruments.

Handpieces

It is suggested that a minimum of three air-rotors and three contra-angle handpieces are available in the TVT’s surgery, these must be autoclavable.

X-ray Equipment

An intra-oral x-ray set will be permanently accessible, either in the TVT’s surgery or a dedicated x-ray room. Evidence of regular inspection and compliance with current Health & Safety Executive regulations for ionising radiation equipment will be required. Local rules must be on display. Only those entitled to be an operator in accordance with the legal person’s procedures satisfying the requirements of IRR99 & IR(ME)R2000 should be allowed to initiate the exposure.

EMERGENCY EQUIPMENT

The practice must be equipped to provide cardio-pulmonary resuscitation. Portable equipment to provide suction, positive pressure ventilation and airway maintenance for a patient anywhere in the practice must be available.

Emergency Protocol

The practice should have a written emergency drill which is understood by all members of staff. Staff will have training in CPR which is updated every year.

CROSS INFECTION CONTROL

Effective cross infection control should be practised by every member of staff, and a written policy should be available. All instruments including handpieces should be autoclaved. Non-autoclavable instruments should be single use and disposable.
Surface disinfectants should be used on contaminated surfaces between patients.
Impressions should be disinfected according to the manufacturer’s recommendations, and confirmed on the lab docket.
Practices need to comply with BDA advice sheet A12 on cross infection control.

HEALTH AND SAFETY

Each practice must have a written Health & Safety Policy. The BDA has an advice sheet which includes a model. A First Aid Kit, appropriate for the size of the practice, must be available and a record of incidents (Accident Book) must be kept and be compliant with the Data Protection Act.

Waste Disposal

The practice must comply with the current European waste disposal regulations.

Electrical Regulations
Written evidence of compliance with regulations is required.

**COSHH Assessments**  
Regularly updated assessments must be available for all substances used in the training practice.

**Pressure Vessels**  
A written schedule of examination and certificate of inspection and maintenance must be available for each autoclave and compressor in the practice that complies with current regulations.

**Publicity Liability Indemnity Insurance**  
A current certificate must be displayed in the practice.

**Fire Drill**  
Practice policy must be understood by all members of staff.

**STAFF**

The TVT must have a suitably trained Dental Nurse, with a minimum of one year’s experience, available for their exclusive use when they are working in the surgery. Appropriate reception and office staff must also be available. The training practice will comply with current employment law and GDC requirements. Written contracts for staff will be provided.

**TRAINING**

A library should be available in the practice containing current journal and other educational resources. It should contain a range of relevant books/magazines. A computer should be available in the practice to enable CAL programs/CD ROMs to be read.

**Trainer Attendance**

The trainer must be available in the practice for at least three working days per week while the TVT is present (excluding holidays which must not exceed six weeks per year). Cover arrangements must be made during any absence of the trainer and the Adviser kept informed. It is expected that the Trainer will be present/available throughout August.

**Workload**

The practice must provide enough patients for the TVT to be fully occupied and to carry out a full range of treatments. The number of patients seen will increase with experience and this should be taken into account. The TVT should not be expected to carry an excessive workload.

**Record Keeping**

Records should be clear, legible and contemporaneous. BPE/CPITN or another periodontal assessment method should be used together with regular oral cancer screening.

**Premises and Facilities**

It is prerequisite to becoming a trainer that a suitably equipped surgery will be provided for the trainee. It will be the responsibility of the Visiting Team, who will be looking for a reasonable standard of equipment, furniture and materials, to assess that suitability.

If you have any queries about the acceptability of your premises, the Regional Adviser is available to help you. An early discussion could save you a considerable amount of money and possible embarrassment!

---

**PRACTICE ADVERT FOR TVT SELECTION**

A pro-forma, example and details on pages 12 - 13, should have been emailed to you. If you have not received this please contact your TVT Administrator (see page 2).

**PRACTICE ADVERT INFORMATION**

All selected training practices will have their practice advert published on the NESC dental website at **NESC (NHS Education South Central)**
Practice Advert Requirements for the Web Site

- all text in PC text format, MS Word (.rtf or .doc but not html format) or in Adobe pdf, or text from any other program that can produce PC readable .rtf documents;
- graphic (one picture only please) in a compressed PC format i.e. jpeg;
- we cannot accept adverts in MS Publisher;
- we cannot accept adverts in MS Word that solely use ready made hyperlinks. These would not work on all computers due to the different browsers that are used around the country. Therefore these hyperlinks would need to be developed by our web site company in order for these to be read by everyone.

We aim for a standard format for all practice descriptions to make it easier for applicants to compare practices. Consequently please follow the guidelines below when writing your practice description. Remember that this will be the potential TVT’s first impression of your particular practice, and try to make the description as individual as possible so that it stands out from that of similar practices elsewhere. Give full and clear information without making it too long - about one side of A4 is usual. Please include an image/photograph to accompany your description.

Please complete the pro-forma and send it, with your graphic, by email to Angela Evans at aevans@oxford-pgmde.co.uk by Thursday 12 February 2009

PRACTICE ADVERT GUIDELINES

The Picture
Graphic (one picture only please) in a compressed PC format i.e. jpeg.
Please send your picture as a SEPARATE file in jpeg and not incorporate it in this pro-forma.

Practice Address
Address and all contact details.

The Trainer/s
Name – telephone number – fax – email. Where and when qualified – special interests – why he/she wants a TVT – previous experience of VT.
The Practice

Location of practice – easy to get to? Easy parking/public transport? When was the practice founded? Is it growing?

Description of practice – facilities and equipment – types and numbers of patients – type of work undertaken.

Any special features e.g. innovations, awards, partners with specialisms, particular organisational arrangements.

Hours of Work

TVTs particularly wish to know this.

The Practice Team

How many dentists are there? Details of your practice team.

The TVT Surgery

Description of surgery – facilities and equipment – types and numbers of patients – type of work undertaken – practice hours of the TVT’s surgery.

Can accommodation be offered? (This is a great advantage.) Is there a possibility of the TVT remaining as an associate after the year’s vocational training finishes? Any personal touch that might mark out your details from other similar description.

The Area

Description of village/town/city – amenities – recreation – culture – sporting facilities – surrounding area – access to other parts of region/London. Be poetic!

The Interview

Please specify arrangements for interviews:

- by phone – give numbers and hours to contact;
- by CV – and short-list with interview days;
- by fax or e-mail – give available contacts.
PRACTICE ADVERT PRO-FORMA

(Please complete this pro-forma in MS Word and save it prior to returning as an attachment.)

PLEASE COMPLETE EACH SECTION

The Picture

Practice Address

The Trainer/s

The Practice

Hours of Work

The Practice Team

The TVT Surgery

The Area

The Interview

Notes for Completion
These notes are to be read in conjunction with the Trainer Application Form; Part 1 and Part 2. The application form is designed to allow the Selection Committee to make their assessment of each application with the most suitable information before them. The form may seem to be long and complex, but in fact much of the information needed is straightforward.

Before you complete the form, please read it through thoroughly and carefully. Many of the questions that may arise from the application are probably dealt with at the beginning of this Application Form. However, if there are any points which do need further explanation please contact either your TVT Administrator direct, or the Adviser who is associated with the Scheme for which you apply. The relevant names, addresses and telephone numbers are given on page 2.

There are certain essential items of documentation which are required, not only for this application, but also to ensure compliance with your GDS terms of service. You must have them available for verification at the practice visit.

At the visit, the Adviser, who will be accompanied by another dental practitioner, will wish to see the practice running, and will wish to verify some aspects of your application. Thus it will be necessary for you to put aside 2 hours of your time for this visit. It will be necessary to see all areas of the practice in addition to the proposed TVT’s surgery. The visitors will also need to see some patient record cards selected at random by the visitors, some recent radiographs, and the appointment books.

**Points for Discussion**

During the visit, the Adviser will have several items of TVT policy and information to discuss with you. At this stage, if there are any queries please fee free to discuss them with the Adviser. A list of the points that the Adviser will probably bring up is as follows:

**Clinical Policy**
- Clinical Freedom, NHS treatment, Private Treatment.
- Practice Policy.
- Materials: Choice, availability.

**Workload**
- Full range of GDS treatment available to the TVT.
- Appropriate work available to the TVT.
- Where are patients to be obtained - Existing book? New book? Transfer of patients?

**Administration**
- Collection of patient charges, Private Fees, Salary.
- TVT involvement in management issues.

**Trainer Commitment**
- Open access arrangements.
- Tutorial arrangements.
- Professional Development Portfolio.
- Day Release Course.
- Discipline.

**TVT**
- Contract.
- Surgery time and surgery availability.
- Clinical supervision.

When the visit is completed, the Adviser will summarise his findings on a record form and will give you a copy. This will be put before the Selection Committee. A copy of the summary form is at the end of this book.
Dates for your Diary

If you are not currently a trainer you may wish to attend the ‘So you want to be a Trainer?’ course. Date & Venue TBC.

The closing date for the full Trainer Application Form and Practice Advert is Thursday 12 February 2009.

IMPORTANT DATES

Important dates for 2009-2010 TVT Scheme:

- TVT Scheme Trainers Selection Committee – 12 and 13 March 2009. George Pickering Education Centre, John Radcliffe Hospital, Oxford.
- Practice visit - TBC

If appointed you must be available for the following event before the Therapist TVT starts in your practice:

1. TVT Trainers Induction Day - Friday 26 June 2009, George Pickering Education Centre, John Radcliffe Hospital, Oxford

For further information on Dental Therapist Vocational Training in the Oxford Deanery please see the Trainer Handbook & Application Form – available on our website at www.nesc.nhs.uk / Dental – Oxford Deanery Postgraduate Dental Education, or contact the scheme administrator.
<table>
<thead>
<tr>
<th>Practice Name</th>
<th>Address</th>
<th>Date of Visit</th>
<th>Deanery Visitors</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>1 PRACTICE FACILITIES</th>
<th>Section Score</th>
<th>Suggested Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1 Below acceptable standard</strong></td>
<td>/6</td>
<td>Circle one</td>
</tr>
<tr>
<td><strong>2 Acceptable standard</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3 Exemplary standard</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cleanliness</th>
<th>All areas visibly clean, dust and dirt free.</th>
<th>All areas visibly clean. Evidence of frequent checks of cleaning standards.</th>
<th>Circle one</th>
</tr>
</thead>
<tbody>
<tr>
<td>Porous, unsealed flooring in clinical and toilet areas. Torn or worn flooring in any area. Non slip-proof flooring in any areas. Non-washable décor in clinical and toilet areas. Peeling, torn, chipped paint or wallpaper. Out of date or poor quality /poorly affixed posters and information leaflets. Broken /torn curtains or blinds.</td>
<td>Sealed washable flooring in clinical areas. No evidence of stained, torn or worn flooring in any area All surfaces well decorated. Clinical and toilet areas with washable surfaces. Well presented legible and current posters and information.</td>
<td>Sealed washable and slip proof flooring in clinical and toilet areas. Suitable flooring in all areas. Slip proof stair treads. Freshly decorated. Well presented, legible and current posters and information in languages appropriate to practice patient base.</td>
<td>1 2 3</td>
</tr>
</tbody>
</table>

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery.
<table>
<thead>
<tr>
<th>2 DISABILITY DISCRIMINATION ACT COMPLIANCE</th>
<th></th>
<th></th>
<th></th>
<th>/3</th>
</tr>
</thead>
<tbody>
<tr>
<td>No DDA audit completed. No arrangements for disabled patients of practice.</td>
<td>DDA Audit completed. Clear lighting and signs for visually impaired. Arrangements for access for patients in wheelchairs etc.</td>
<td>DDA Audit completed and action plan implemented. Clear lighting and signs for visually impaired. Arrangements for wheelchair access. PAT slide/hoist if in-surgery access.</td>
<td>Circle one</td>
<td>1 2 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3 CROSS INFECTION AND DECONTAMINATION</th>
<th></th>
<th></th>
<th></th>
<th>/12</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 HUMAN RESOURCES MANAGEMENT</td>
<td>Practice Development Plan and staff training programme</td>
<td>Evidence of staff training and induction programmes in place to meet statutory requirements</td>
<td>Recent Practice Development Plan and regular staff induction and training programmes in place. All dental nurses qualified or enrolled on formal training programme leading to registration.</td>
<td>Circle one</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Practice Development Plan and staff training programme</td>
<td>Practice Development Plan and staff training and induction programmes not available.</td>
<td>Evidence of staff training and induction programmes in place to meet statutory requirements</td>
<td>Recent Practice Development Plan and regular staff induction and training programmes in place. All dental nurses qualified or enrolled on formal training programme leading to registration.</td>
<td>Circle one</td>
</tr>
<tr>
<td>Appraisals and personal development plans</td>
<td>No appraisals or personal development plans available. CPD records of Trainer do not meet GDC requirements.</td>
<td>Annual appraisals for some staff in place. Current Personal Development plan for trainer available. GDC annual CPD requirements for Trainer have been met for last 5 years.</td>
<td>All staff have received training in appraisals, are appraised annually and have active personal development plans</td>
<td>Circle one</td>
</tr>
</tbody>
</table>

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery.
<table>
<thead>
<tr>
<th></th>
<th>HR Policies</th>
<th>Staff Meetings</th>
<th>5 HEALTH AND SAFETY (See List)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No written references sought when appointing clinical staff. No checks made of Dentist/PCD registration status. No contracts of employment for staff.</td>
<td>Irregular or no staff meetings take place or meetings not documented</td>
<td>All currently required documentation not available or up to date at time of visit.</td>
</tr>
<tr>
<td></td>
<td>Two written references taken when appointing clinical staff. Checks made of Dentist/PCD registration status. Written contract of employment for all staff.</td>
<td>Regular (more than every 2 months) minuted meetings take place</td>
<td>All currently required documentation available and up to date at time of visit. System in place to audit, reference, and update documentation.</td>
</tr>
<tr>
<td></td>
<td>Full range of HR Policies available. Job Descriptions and Person Specifications available for all staff. Appointment and Annual system of registration checks. Written contracts of employment Associate agreements for all staff.</td>
<td>Regular minuted staff meetings involving all staff. Agendas and minutes available to all.</td>
<td>All currently required documentation available and up to date at time of visit. System in place to audit, reference, and update documentation.</td>
</tr>
</tbody>
</table>

Page 4 of 11  
When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery
### 6 MEDICAL EMERGENCIES

| Basic Life Support | No BLS training in last 12 months. Oxygen, drugs not checked within last month. Insufficient equipment available | All staff have had verified BLS training within last 12 months. System in place to check oxygen drugs and equipment. | Qualified BLS trainer in practice. Semi-automatic defibrillator available and staff trained in use. | Circle one
|                  | All staff have had verified BLS training within last 12 months. System in place to check oxygen drugs and equipment. |                                        |                                           | 2 4 6 |

| First Aid | No named First Aider, First aid kit not adequately stocked | Named First Aider has received verified training. First Aid Kit checked | Named First Aider and Deputy have received verified training within last 12 months. | Circle one
|           | All staff have had verified BLS training within last 12 months. System in place to check oxygen drugs and equipment. |                                        |                                           | 2 4 6 |

### 7 PATIENT EXPERIENCE

| Treatment Charges | No information displayed or available on NHS or private treatment options and charges. Receipts not issued. | NHS Charges displayed in patient areas. FP17 DC used Receipts issued | Practice policy on NHS and Private charges and examples of fees displayed in patient areas. DC forms routinely given to patients requiring Band 2 or Band 3 treatment. Numbered and dated itemized receipts issued to patients. | Circle one
<table>
<thead>
<tr>
<th></th>
<th>All staff have had verified BLS training within last 12 months. System in place to check oxygen drugs and equipment.</th>
<th></th>
<th></th>
<th>1 2 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Privacy Dignity and Confidentiality</td>
<td>No private area for confidential phone calls.</td>
<td>Private area for phone calls</td>
<td>Separate private non-clinical area to discuss treatment options or confidential matters</td>
<td>Circle one</td>
</tr>
<tr>
<td>Patient Information</td>
<td>Practice Information Leaflet does not comply with NHS requirements and has not been updated for more than 12 months.</td>
<td>Practice Information Leaflet updated within 12 months and complies with NHS requirements.</td>
<td>Practice Information Leaflet clear, easy to read accurate up to date and gives all required information.</td>
<td>Circle one</td>
</tr>
<tr>
<td>Referrals</td>
<td>Referrals made without use of pro forma. Letters not copied to patients.</td>
<td>Use of (mandatory) form when making referrals including treatment plan and charges. Referral letters copied to patients.</td>
<td>Choice of specialist referrals for patients with differing needs either within practice or to convenient primary and secondary care centres.</td>
<td>Circle one</td>
</tr>
</tbody>
</table>

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery.
<table>
<thead>
<tr>
<th>8 PATIENT RECORDS MANAGEMENT</th>
<th>Clinical records</th>
<th>Radiographs</th>
<th>/6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Records do not meet FGDP guidelines. Paper records only.</td>
<td>Records comply with FGDP Guidelines</td>
<td>Practice Meets IRMER Guidelines X Ray incident Book available</td>
<td>Fully computerized patient records and linked storage of digital radiographs, photographs etc. Regular audit of records</td>
</tr>
</tbody>
</table>

Circle one

1 2 3

| 9 QUALITY ASSURANCE SYSTEMS | Certificate of compliance with NHS Quality Assurance System not displayed in patient area. | Certificate of compliance with NHS Quality Assurance System displayed in patient area. | Practice has achieved external quality award e.g. BDA Good Practice Award Investors in People ISO 9000 |
|-----------------------------|-------------------------------------------------|-----------------------------------------------------------------|

Circle one

1 2 3

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery
<table>
<thead>
<tr>
<th>10 TVT SURGERY AND SUPPORT</th>
<th>TVT Surgery size, layout and availability.</th>
<th></th>
<th>18</th>
</tr>
</thead>
<tbody>
<tr>
<td>TVT Surgery size, layout and availability.</td>
<td>Less than 80 sq feet. No access to wash basin on operator side. Unsuitable for 4-handed low-seated dentistry. Cluttered work surfaces. TVT rotates between 2 or more different surgeries on regular basis.</td>
<td>80 - 90 sq feet. Access to wash basin on operator side. Suitable for low seated 4-handed dentistry. Clear work surfaces. Same surgery for 4 days per week, excluding study days. (same surgery in 2 sites if split week).</td>
<td>90+ sq feet. Adjustable for differing operator preferences left or right-handers, differing needs. Ample low level storage on non-operator side. Same surgery available for TVT at all times.</td>
</tr>
</tbody>
</table>

| Equipment, surgery stock and ordering for TVT | Fewer than required/insufficient range of instruments. Severely limited range of materials. TVT not able to request materials. Out of date materials. No stock control system evident in TVT surgery. | Required number/range of instruments. Adequate range of materials available. TVT able to request alternative instruments and materials. | More than required number/range of instruments. Clear policy about request for stock and decisions. TVT able to request and receive feedback within specified period. Computerized stock ordering/stock control system in place. | Circle one |

Page 8 of 11

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery.
| TVT/Trainer Surgery Location and Trainer availability | TVT and Trainer’s surgery/office not in same location for 3 days per week excluding study days. No other dentist on site if Trainer absence of more than 2 days in any week during the first 3 months. No on site cover for holidays of more than 1 week. | TVT and Trainer’s surgery/office in same building as Trainer for 3 days per week excluding study days. Other dentist on site during Trainer absence of more than 2 days in any week. Telephone advice available when TVT alone. On site cover for holidays/absence. | TVT and Trainer’s surgery/office adjacent to Trainer’s surgery / on same floor at all times. At least one other dentist available on site at all times when trainer absent. | Circle one | 1 2 3 |
| TVT Patient List | Insufficient patient supply – Fewer than 500 patients Average 10 per day booked or less Next available routine appointment less than 1 week. Excessive patient supply- More than 1000 patients Average 20 per day booked or more Next available routine appointment more than 1 month | TVT Patient list of 500-800 patients new /existing / regular /occasional, Existing TVT /Associate Patient list will transfer. Most ages of patients and treatment types available. Some specific or non- generalist treatment exclusions permissible (e.g. orthodontics, sedation, non –NHS treatments) | Full range of ages and treatments. Opportunity to see specific patient groups / treatment types by internal referral. | Circle one | 1 2 3 |
### Access to study facilities and equipment

| Access to study facilities and equipment | Few / out of date textbooks and journals.  
No camera  
No separate quiet area for private study  
No access to stand alone PC and CAL/CD ROM programs in practice. | Access to clinical camera.  
Range of up to date textbooks and journals and CAL/CD ROM programs with access to stand alone PC in practice.  
Quiet area for private study available. | TVT has own email account with full internet access in surgery and in private study area.  
Practice has good range of Text Books Journals and CAL/CD ROM programs.  
Intra oral and clinical camera available to TVT. |

| Circle one | 1 | 2 | 3 |

### Dental Nurse Support

| Dental Nurse Support | Unqualified dental nurse with less than 12 months full time experience.  
More than 2 dental nurses per week for TVT. | Dental nurse with at least 12 months experience enrolled on formal DNART/ NVQ/NEBDN training programme.  
Maximum of 2 different dental nurses per week for TVT. | Single dedicated, qualified dental nurse with experience of successfully supporting a TVT. |

<p>| Circle one | 1 | 2 | 3 |</p>
<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>Areas below required standard</th>
<th>SCORE</th>
<th>Recommendations for Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 PRACTICE FACILITIES</td>
<td></td>
<td>/6</td>
<td></td>
</tr>
<tr>
<td>2 DISABILITY DISCRIMINATION ACT COMPLIANCE</td>
<td></td>
<td>/3</td>
<td></td>
</tr>
<tr>
<td>3 CROSS INFECTION AND DECONTAMINATION</td>
<td></td>
<td>/12</td>
<td></td>
</tr>
<tr>
<td>4 HUMAN RESOURCES MANAGEMENT</td>
<td></td>
<td>/12</td>
<td></td>
</tr>
<tr>
<td>5 HEALTH AND SAFETY</td>
<td></td>
<td>/12</td>
<td></td>
</tr>
<tr>
<td>6 MEDICAL EMERGENCIES</td>
<td></td>
<td>/12</td>
<td></td>
</tr>
<tr>
<td>7 PATIENT EXPERIENCE</td>
<td></td>
<td>/15</td>
<td></td>
</tr>
<tr>
<td>8 PATIENT RECORDS MANAGEMENT</td>
<td></td>
<td>/6</td>
<td></td>
</tr>
<tr>
<td>9 QUALITY ASSURANCE SYSTEMS</td>
<td></td>
<td>/3</td>
<td></td>
</tr>
<tr>
<td>10 TVT SURGERY AND SUPPORT</td>
<td></td>
<td>/18</td>
<td></td>
</tr>
<tr>
<td><strong>Total Practice Visit Score comprises 25% of marks towards trainer selection process final score.</strong></td>
<td><strong>TOTAL SCORE</strong></td>
<td>/99</td>
<td></td>
</tr>
</tbody>
</table>

When completed, copies of form to be retained by Trainer Applicant, Practice Owner (if applicable) and Deanery.
### Therapist Vocational Trainer Selection in NESC

All trainers will initially be selected by assessment of practice facilities, trainer ability and potential, assessed by CV and interview.

From March 2008 there will be 3 levels of trainer/training practices:

<table>
<thead>
<tr>
<th>CONTRACT</th>
<th>LEVEL</th>
<th>CRITERION</th>
<th>MINIMUM MEASURABLE STANDARDS</th>
<th>EVIDENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Annual</td>
<td>Entry Level</td>
<td>• NHS commitment</td>
<td>• UDAs 1500 – personal UDA commitment, no contract exclusions. Joint trainers must both reach minimum</td>
<td>• application, PCT/DRS report</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• practice facilities</td>
<td>• meet NHS requirements</td>
<td>• visit &amp; report</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• clinical governance</td>
<td>• meet NHS requirements</td>
<td>• visit &amp; report, clinical audit verification</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• professionalism</td>
<td>• demonstrates professional values, no adverse reports</td>
<td>• visit &amp; report, interview, references – PCT/BSA/GDC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• educational support/potential</td>
<td>• demonstrate understanding of TVT aims &amp; objectives/learning resources available</td>
<td>• visit &amp; report, interview, CV, references</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• lifelong learning</td>
<td>• meets GDC CPD requirements</td>
<td>• application, interview, GDC annual return, PDP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• workload &amp; variety</td>
<td>• TVT able to carry out a full range of clinical procedures for a wide range of patients</td>
<td>• TVT feedback, portfolio, practice visit report</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTRACT</th>
<th>LEVEL</th>
<th>CRITERION</th>
<th>MINIMUM MEASURABLE</th>
<th>EVIDENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Contract Level</td>
<td>Minimum Measurable Standards</td>
<td>Evidence</td>
<td></td>
</tr>
</tbody>
</table>
### STANDARDS

2. **3-yearly**

**Experienced Level**

Has been approved as a trainer with good track record for 2 years within the last 3 years. Able to demonstrate entry level standard together with evidence of having attended educator training.

- NHS commitment
- communication e.g. tutorials
- continued educational delivery
- practice management
- trainer support
- entry level criteria must also be met
- UDAs 3000 – personal UDA commitment maintained throughout period of approval as a trainer, no contract exclusions. Joint trainers must both reach minimum
- complies with current NESC guidance for trainers
- have demonstrated work place education & open door policy support for trainee, weekly tutorials & availability to trainee for support
- have demonstrated practice management system in place/designated practice manager. BDA Good Practice or IIP award. Evidence that TVT is involved in practice management
- will have attended verifiable CPD in dental education NESC entry level by 2009

### CONTRACT

<table>
<thead>
<tr>
<th>CONTRACT</th>
<th>LEVEL</th>
<th>CRITERION</th>
<th>MINIMUM MEASURABLE STANDARDS</th>
<th>EVIDENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. 3 Years</td>
<td>Enhanced Training Practice</td>
<td>NHS commitment</td>
<td>UDAs 6000 – personal UDA</td>
<td>application, PCT/DRS report</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**EVIDENCE**

- TVT Adviser report, TVT feedback, portfolio, year end report from TVT interview by Dean
- TVT feedback, portfolio, TVT Adviser, interview
- PCT reference, TVT feedback & questionnaire, portfolio, visit & report, interview
- TVT feedback, practice assessment, CPD verification, interview
Appointed for 3 years, annual report, 3-yearly review.

For trainers who have demonstrated a high standard at entry & experienced levels and have capacity to train more than 1 trainee.

Status applied to whole practice – may be multiple trainers.

- training commitment
- additional training capacity (TVT/DCP), surgeries & trainers
- training development
- leadership

Commitment of 3000 maintained throughout period of approval as a trainer, no contract exclusions. Joint trainers must both reach minimum. Practice total commitment of 6000 minimum excluding TVT UDAs for duration

- practice training places & development policies in place
- minimum 3 surgeries, 2 trainers (can be joint)
- enrolled on formal educational programme leading to Cert Ed or equivalent
- demonstrates professional leadership by involvement in Deanery/NHS/ professional committees

Recommendation from PCT, in depth practice visit

- application, visit & report, interview, references
- application, interview, references
- application, interview, references

PMETB Generic Standards for Training 2007
NHS Identity Scheme for Dental Practices DH 2007
<table>
<thead>
<tr>
<th>Specification</th>
<th>Essential (Eligibility)</th>
<th>Short Listing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Education/training</td>
<td>Current GDC practising certificate</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Complies with C.P.D. requirements from the G.D.C.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evidence of personal involvement in Clinical Audit &amp; Peer Review &amp; Quality Assessment Annual Return for the PCT for the last 3 years.</td>
<td></td>
</tr>
<tr>
<td>2. Relevant experience</td>
<td>Personal UDAs from NHS work per annum – 2006/7 reference year:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1500 (Entry Level)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3000 (Experienced Level)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6000 Practice UDAs (Enhanced)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Performer in Primary Care currently on a PCT Performer List with Primary Care NHS experience of a minimum of 4 years. If joint trainer one can be three years.</td>
<td></td>
</tr>
<tr>
<td>3. Other requirements</td>
<td>Surgery available 37.5 hours per week</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Trainer in practice 3 days minimum per week</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Satisfactory references from</td>
<td></td>
</tr>
<tr>
<td></td>
<td>GDC Yes / No / Not received</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PCT Yes / No / Not received</td>
<td></td>
</tr>
<tr>
<td></td>
<td>BSA Yes / No / Not received</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Practice within NESC boundary. No applications to other Deaneries.</td>
<td></td>
</tr>
</tbody>
</table>