

Draft Scope of Practice guidance

This guidance on Scope of Practice is split into two sections. This first section sets out how to use the guidance and is applicable to all registered dental professionals.

The second section provides separate information relevant to each of the registered dental titles and specific guidance for each of the dental professions.

Table of Contents

Section one: guidance for all dental professionals	2
1.1 What do we mean by scope of practice?	2
1.2 How to use this guidance.....	2
1.3 Make sure you are trained, competent and indemnified for everything you do.....	2
1.4 Your pre-registration training is the basis of your role	3
1.5 Developing your skills and abilities over the course of your career	3
1.6 The boundaries of each professional title.....	4
1.7 A team-based approach to patient care	4
a) What is the dental team?	4
b) Understanding your role and the role of others	4
c) Medical emergencies	5
1.8 Other sources of guidance.....	5
1.9 Guidance on training and competence	6
a) What does it mean to be competent?.....	6
b) How is competence developed?	6
c) How can competence be measured or assessed?	6
Section two: profession-specific information	7
2.1 Clinical Dental Technicians (CDTs)	7
2.2 Dental Hygienists.....	8
2.3 Dental Nurses.....	9
2.4 Dental Technicians	11
2.5 Dental Therapists	12
2.6 Dentists	13
2.7 Orthodontic Therapists	14

Section one: guidance for all dental professionals

1.1 What do we mean by scope of practice?

The General Dental Council (GDC) registers seven different dental professional titles who work together within the dental team. For the dental team to function effectively, each team member must understand the valuable role that they – and their colleagues – play in the provision of dental care to patients.

As a registered dental professional, your scope of practice is made up of the activities that you carry out as part of your professional role. These are activities that you have the knowledge, skills and abilities to perform safely and effectively.

Your scope of practice is personal to you. The activities you carry out will partly be defined by the setting in which you practice, the needs of your patients, and the knowledge and skills of yourself and your team. Your scope of practice is also likely to change over time as you develop and expand your knowledge, skills and experience (within the defined boundaries of your registered title).

The GDC has produced this guidance on scope of practice to protect patient safety by guiding dental professionals to only carry out tasks that they are trained and competent to perform safely. It describes the expected abilities for each registered title and outlines the boundaries of each.

1.2 How to use this guidance

Part of what it means to be a dental professional is being able to make decisions in the patient's best interests using your own professional judgement. As set out in the GDC's [Standards for the Dental Team](#), if you deviate from established standards and practice you should record the reasons for doing so and be able to justify why you made that decision.

This guidance should help you understand the tasks and skills that you can perform safely in your daily practice, and those that need to be done by another member of the dental team.

You must follow this guidance and use it to inform your professional decision-making. Whilst the decisions you make will be dependent on the specific context and your individual circumstances, you must adhere to the criteria set out in this guidance when forming these professional judgements.

1.3 Make sure you are trained, competent and indemnified for everything you do

The Standards for the Dental Team set out that you must work within your knowledge, skills, professional competence and abilities, and have appropriate insurance or indemnity in place.

This means you should only carry out a task or type of treatment, prescribe or plan treatment, and make decisions about a patient's care if you are sure that you have the necessary skills and are appropriately trained, competent and indemnified.

If you are unclear exactly what this means you should ask yourself the following questions:

- Have I been trained to carry out, plan or prescribe this task or treatment?
- Do I feel competent and confident to carry out, plan or prescribe this task or treatment?
- Am I appropriately indemnified to carry out, plan or prescribe this task or treatment?

You can find more information on what we mean by 'trained' and competent' in our guidance on training and competence at section 1.9 of this document.

As a registered dental professional, you are responsible for the decisions, treatment and advice that you plan and provide. You must use your own professional judgment to assess whether you are trained and competent to plan and carry out any activities that you take on. If you are unsure whether you are trained, competent or appropriately indemnified for a task, it may help to discuss this with:

- your employer
- your colleagues
- your education or training provider
- your professional association
- your indemnity provider.

If a task, treatment plan, type of treatment or decision is outside your scope or you do not feel that you are trained and competent to do it (except for when in education or on a training course where you are appropriately supervised) you must refer the patient to an appropriately trained colleague (either where you work or in an alternative setting).

1.4 Your pre-registration training is the basis of your role

As a dental professional, you will have spent a number of years training in order to gain a qualification that enables you to register with the GDC under a particular professional title.

Your core scope of practice – that is the basic skills and tasks that you should be able to do in your daily practice – is largely defined by what you learnt to do in your pre-registration training.

The learning outcomes for each of the professional titles that we register are contained in our document [Preparing for Practice](#)¹. These learning outcomes reflect the knowledge, skills, attitudes and behaviours each dental professional must have to practise safely, effectively and professionally in the relevant registration category.

1.5 Developing your skills and abilities over the course of your career

Of course, you are not limited to the skills that you learnt in your pre-registration training.

Your scope of practice is likely to change over the course of your career, whether because of changes in the technology of dentistry, or your further training and development.

¹ This is currently being reviewed and new expectations are expected to be published in late 2023.

There are likely to be new skills (within the boundaries of your registered title) that you want to develop after registration to broaden your scope of practice or you may deepen your knowledge of a particular area by choosing more specialised practice.

Your [Personal Development Plan \(PDP\)](#) can help you identify which skills within your field of practice to develop.

To carry out additional skills you will need to undertake further training. The training that you undertake must be sufficient to make you competent in the task. There are many different types of courses available, however not all of them will be sufficient to make you competent to practise safely. For example, more complex skills may require training delivered by an accredited educational provider which includes some form of formal assessment.

Our guidance on training and competence at section 1.9 of this document may help you when considering what training you need to develop competence in particular areas.

It is important to note that post-registration training such as [Continuing Professional Development \(CPD\)](#) will not let you move from one professional registration title to another, or allow you to undertake duties beyond the boundaries of your current title. To do this, you will need to undertake another GDC-approved course and register in another dental professional group.

1.6 The boundaries of each professional title

Each professional title has a specific role within the dental team and each title has defined boundaries. The boundaries of each title, or what each profession cannot do, are set out for each professional title.

If you want to expand your scope beyond these boundaries, you will need to undertake further dental training and gain a qualification which will allow you to register in a different dental professional group.

As a registered dental professional, you are responsible for ensuring that you work within the boundaries of your registered professional title/s. Any dental professional who practises outside their boundaries poses a risk to patient safety and puts their GDC registration at risk.

1.7 A team-based approach to patient care

a) What is the dental team?

The dental team is made up of seven registered dental professional titles, and some unregistered roles, that all contribute to patient care.

Whilst your team usually consists of your direct colleagues within your workplace, there will be times when you need to work collaboratively with dental professionals and other health and social care professionals, in other settings such as other practices, specialists and hospital settings.

b) Understanding your role and the role of others

[The Standards for the Dental Team](#) set out that you must work effectively with your colleagues and contribute to good teamwork. . To do this, you must know your own scope of practice and also be familiar with that of your colleagues. This is particularly important if you lead a dental team.

Working as a part of a team is vital in providing a high standard of care, where patients receive the most appropriate treatment from the most suitable dental professional.

The level and nature of this care will depend on the:

- patient's wellbeing and safety needs
- treatment needed
- type of practice or clinical setting
- team's education, experience and competence.

c) Medical emergencies

A patient could collapse on any premises at any time, whether they have received treatment or not.

All members of the dental team must know their role in the event of a medical emergency, and ensure they are sufficiently trained and competent to carry out that role. If the setting in which you work changes, your role in the event of a medical emergency may change as well.

d) Delegating and referring

In line with the [Standards for the Dental Team](#), you must delegate and refer appropriately and effectively.

It is good practice to delegate where you can and where it is safe to do so to maximise team efficiency. However, you can only delegate to colleagues who are trained, competent and confident to carry out the tasks required of them. You may need to support a colleague when carrying out a new activity.

Good communication within your team is essential for making this work.

You must also know when to refer or hand over patient care to another dental professional for an opinion or treatment. You should do this if the diagnosis or treatment is beyond your own scope of practice, training or competence.

1.8 Other sources of guidance

As set out in the [Standards for the Dental Team](#), registered dental professionals must find out about, and follow, the laws and regulations which apply to their clinical practice or affect their work.

There are other regulations, standards, guidance and legislation that limit which registered titles can perform certain tasks – these therefore affect your permitted scope of practice. They may also set out specific training and CPD requirements that are required to be able to undertake certain tasks. These are not set by the GDC, but as a registered dental professional you are required to follow them.

Any dental professional that does not comply with relevant regulations, standards, guidance and legislation puts their GDC registration at risk.

1.9 Guidance on training and competence

a) What does it mean to be competent?

Competence can be described as the combination of training, skills, experience and knowledge that a person has; and their ability to apply them to plan and/or perform an activity safely, consistently and in accordance with currently accepted professional standards.

b) How is competence developed?

Competence is not only developed through education and training, but also through experience. This can be broken down into pre and post registration training and activities.

- Pre-registration training

Prior to registration, competence is primarily developed through established training, education and workplace/clinical experience that is delivered in line with the [Standards for Education](#) and learning outcomes as set out in [Preparing for Practice](#), or by the equivalent overseas regulator.

- Post-registration training

Post-registration training can take a number of different forms. These can include:

- completing a relevant qualification or accredited course
- speciality training (dentists only)
- undertaking [CPD](#), with concise aims and objectives, anticipated learning outcomes and quality controls
- on-the-job training
- mentoring or being mentored
- gaining experience in practice, for example taking on new or different responsibilities under supervision.

The ways in which you develop your competence will vary and will depend upon considerations such as the complexity of the task, your experience, the skills available in your team and your patients' needs. The different forms of training listed above may not be sufficient on their own and you may wish to use a combination.

There are many different types of courses available, however not all of them will be sufficient to make you competent to practise safely. For example, more complex skills may require training delivered by an accredited educational provider which includes some form of formal assessment.

c) How can competence be measured or assessed?

It is always advisable to keep a record of all training undertaken and its successful completion, and a record detailing the clinical experience obtained in the process of training. This can be linked to, or form part of, your [Personal Development Plan \(PDP\)](#).

One of the key attributes of a professional is to be able to reflect and self-assess your own competence and if unsure speak to colleagues. Competency should be evidence-based and verified by an appropriate person such as your employer or training provider before work commences, using any records available.

Section two: profession-specific information

This section provides specific guidance for each of the dental professions, which are ordered alphabetically below.

2.1 Clinical Dental Technicians (CDTs)

Role within the dental team

CDTs work collaboratively with other members of the dental team – particularly Dentists – in the provision of removable dental appliances to patients. Clinical Dental Technicians (CDTs) provide removable appliances direct to edentulous patients (patients with no natural teeth or implants) and to dentate patients (patients with some natural teeth or implants) on prescription from a Dentist.

What do they do?

In particular, CDTs plan, design, manufacture, fit and carry out the clinical examinations and procedures related to providing removable dental appliances. CDTs can prescribe and provide removable dental appliances directly to edentulous patients, and on prescription to dentate patients.

CDTs also provide sports mouthguards directly to patients.

In the process of their work, CDTs may recognise abnormal oral mucosa and related underlying structures, and refer patients to other healthcare professionals where necessary, such as when a patient needs a treatment plan, prescription, or the CDT is concerned about a patient's oral health.

Further information on the specific skills and abilities that CDTs should know and be able to do when they join the register are set out in the learning outcomes as set out in [Preparing for Practice](#).

Following registration, with additional training and experience, CDTs can provide additional services within their professional boundaries.

Boundaries of the role

CDTs do not see dentate patients or patients with implants directly – a prescription from a Dentist is required to confirm that the patient is dentally fit and suitable for treatment.

2.2 Dental Hygienists

Role within the dental team

Dental Hygienists educate and support patients to attain and maintain high standards of oral health, as well as promoting wider systemic health. Dental Hygienists play a principal role in preventing and treating periodontal disease and providing oral health advice.

What do Dental Hygienists do?

Dental Hygienists work collaboratively with other dental and healthcare professionals, making referrals where appropriate. The role includes (but is not limited to):

- oral health education and promotion with a focus on prevention, underpinned by a holistic approach
- carrying out clinical examinations for the purposes of diagnosing and treatment planning within scope and competence
- maintaining and stabilising the existing dentition by preventing and managing periodontal disease, interventions for prevention of dental caries and tooth wear and care and maintenance of dental implants
- management of hard tissue diseases and soft tissue conditions and identifying soft tissue abnormalities and making appropriate referrals

Boundaries of the role

Dental Hygienists do not carry out permanent restorative procedures or extract paediatric or permanent teeth.

2.3 Dental Nurses

Role within the dental team

Dental Nurses play a broad and varied role in providing essential support in all aspects of patient care, across a range of environments. This includes oral health promotion and education with a focus on prevention, providing clinical support to colleagues and maintaining high standards of infection control.

Where do dental nurses work?

Dental Nurses work in a wide variety of different settings. These include:

- in general practice providing clinical support to colleagues, particularly Dentists, Dental Hygienists, Dental Therapists and Clinical Dental Technicians
- in specialist practice
- in hospital settings, for example in a maxillofacial department
- outside of the clinic, providing oral health and oral hygiene education and instruction – for example in schools, healthcare and family centres and domiciliary care
- in salaried dental services/ Community Dental Services
- in schools and other community settings when applying fluoride varnish, either on prescription from a dentist or direct as part of a structured dental health programme.

What do dental nurses do?

Core skills:

Dental Nurses predominantly work with other dental professionals, providing support to colleagues and patients for all aspects of dental care. The tasks that Dental Nurses will generally undertake following registration include (but is not limited to):

- supporting patients to maintain and improve their oral health
- taking the principal role in infection prevention and control in the clinical setting
- preparing the surgery and equipment for treatment and ensuring all necessary materials are ready for use
- providing clinical support during examinations and treatments
- monitoring, supporting and reassuring patients during treatments.

These skills and abilities that Dental Nurses have on registration are based on the learning outcomes as set out in [Preparing for Practice](#).

Expanding scope of practice:

There are a wide range of further skills and qualifications that Dental Nurses can go on to gain over the course of their career. The variety of clinical environments that Dental Nurses can work in may impact the skills and abilities they choose to develop in order to fulfil that role – for example they may wish to focus their practice to a particular area of dentistry which will require specific skills. [Personal Development Plans \(PDPs\)](#) can be useful in identifying the additional skills dental nurses wish to develop.

Additional skills can be gained in different ways depending on the skill that is being developed – some may be gained through in-house training and some through external courses or CPD. Some skills – specifically those relating to radiography and assisting with the treatment of patients under conscious sedation – require specific training and certification that are set by other regulatory bodies.

Given the wide range of further skills and abilities Dental Nurses can develop, it is not feasible to expect everyone to be competent in every area. Dental Nurses must be confident that they are competent (and appropriately indemnified) to undertake additional skills before putting them into practice. There should be mutual agreement between the Dental Nurse and the Dentist, employer or supervisor that they are competent to take on the additional role within the clinical setting.

Boundaries of the role

Dental Nurses predominantly work with other registered dental professionals, and other registered healthcare professionals where appropriate. Dental Nurses do not diagnose disease or plan treatment. Dental Nurses work under prescription from, or direction of, a Dentist or other registered dental or healthcare professional.

DRAFT

2.4 Dental Technicians

Role within the dental team

Dental Technicians make custom-made dental devices to the prescription of a Dentist or Clinical Dental Technician (CDT) and to Medicines and Healthcare products Regulatory Agency (MHRA) requirements. They also repair dentures direct to members of the public.

Where do Dental Technicians work?

Dental Technicians can work in a dental laboratory as part of a team manufacturing dental appliances, and in clinic as part of a multi-disciplinary dental team designing, developing, manufacturing, fitting and providing advice to patients on dental appliances.

What do Dental Technicians do?

Dental Technicians manufacture custom-made dental appliances to the prescription of a Dentist or Clinical Dental Technician (CDT). Tasks that Dental Technicians undertake include (but are not limited to):

- designing and making a range of custom-made dental appliances to meet MHRA requirements
- working with dentists and clinical dental technicians on treatment planning
- verifying and taking responsibility for the quality and safety of devices leaving a dental laboratory.

Further information on the specific skills and abilities that dental technicians should know and be able to do when they join the register are set out in the learning outcomes as set out in [Preparing for Practice](#). With further training, Dental Technicians who work directly with patients, as part of a multidisciplinary team, in a clinic can also undertake further tasks, including:

- taking impressions and measurements for the purpose of making dental appliances
- carrying out implant frame assessments
- recording occlusal registrations.

Dental Technicians can see patients directly for denture repairs and shade taking.

Boundaries of the role

Dental Technicians do not treat patients directly without the prescription from a Dentist or Clinical Dental Technician (CDT), except for denture repairs and shade taking.

2.5 Dental Therapists

Role within the dental team

Dental Therapists educate and support patients to maintain high standards of oral health, as well as promotion of wider systemic health, by preventing and treating periodontal disease and providing oral health advice. Dental Therapists also deliver a range of direct restorative treatments to all age group patients and extract paediatric teeth.

What do Dental Therapists do?

Dental Therapists work collaboratively with other dental and healthcare professionals, making referrals where appropriate. The role includes (but is not limited to):

- oral health education and promotion with a focus on prevention, underpinned by a holistic approach
- carrying out clinical examinations for the purposes of diagnosing and treatment planning within scope and competence
- maintaining and stabilising the existing dentition by prevention and management of dental caries, periodontal disease, tooth wear and care and maintenance of implants
- management of hard tissue diseases and soft tissue conditions, identifying soft tissue abnormalities and making appropriate referrals
- carrying out direct restorations on the primary and secondary dentition
- undertaking pulpotomies, extractions and placing pre-formed crowns on the primary dentition.

Boundaries of the role

Dental Therapists do not undertake complex restorative treatment or procedures associated with the pulp in the adult dentition.

2.6 Dentists

Role within the dental team

Dentists usually lead the dental team and can carry out the full range of dentistry if they are trained, competent and appropriately indemnified.

What do dentists do?

Full information on the specific skills and abilities that Dentists should know and be able to do when they join the register are set out in the learning outcomes as set out in [Preparing for Practice](#).

Further education

In line with the principles of lifelong learning and [CPD](#), Dentists will expand their skills and abilities over the course of their career.

Dentists can go on to undertake further education in specific clinical areas of dentistry in which they have a special interest.

The education and training undertaken must be sufficient to develop competence in the area of practice, particularly in order to practise in a specialist area. Dentists should carefully in our guidance on training and competence at section 1.9 of this document may be useful in determining what training and experience is necessary.

Further education and training will also include non-clinical areas of practice which are essential to the role of the dentist within the dental team, for example leadership.

Delegation and team working

As Dentists often lead the dental team in the clinical setting, they will often take responsibility for ensuring collaborative working across the team. Effective and efficient delegation is an important part of collaborative working – delegating where safe and possible and considering the experience of the team.

When delegating, Dentists must understand their colleagues' scope of practice, and the tasks that colleagues are trained, competent, confident and indemnified to do. Dentists must not delegate tasks that are outside of a colleague's scope and competence. There should be mutual agreement between Dentist and colleague regarding tasks that are delegated.

The boundaries of the role

In order to undertake skills that were not covered in pre-registration training, dentists must undertake further training and ensure they are competent and appropriately indemnified before they start to practise.

2.7 Orthodontic Therapists

Role within the dental team

Orthodontic Therapists carry out certain parts of orthodontic treatment under prescription from a Dentist or specialist orthodontist and support the patient through the clinical journey of orthodontic treatment.

What do Orthodontic Therapists do?

Tasks that Orthodontic Therapists undertake include (but is not limited to):

- preparing tooth surfaces for orthodontic treatment
- taking patient measurements and impressions to be used to produce orthodontic appliances
- inserting, adjusting (but not activating) and removing fixed and removable orthodontic appliances to the prescription of a dentist/orthodontist
- providing emergency care to make a patient comfortable between scheduled appointments with the dentist/orthodontist
- identifying and referring treatment issues or concerns to the prescribing dentist or orthodontist
- carrying out Index of Orthodontic Treatment Need (IOTN) screening

Further information on the specific skills and abilities that Orthodontic Therapists should know and be able to do when they join the register are set out in the learning outcomes as set out in [Preparing for Practice](#).

Boundaries of the role

Orthodontic Therapists can only work under the prescription of a Dentist or orthodontist and do not take responsibility for the progress of treatment. Orthodontic Therapists do not undertake dental treatments that are not related to the provision of orthodontic treatment or carry out interproximal reduction.