

# Guidance on Scope of Practice

## This guidance on dental professionals' scope of practice is split into two sections:

- Section One sets out how to use the guidance to help you understand your own scope of practice. This section is applicable to all dental professionals.
- Section Two provides information that is specific to each of the seven dental professional titles the General Dental Council (GDC) regulates.

## Contents

<b>Section One: guidance for all dental professionals</b>	<b>3</b>
1.1 What do we mean by scope of practice?	3
1.2 How to use this guidance	4
1.3 Make sure you are trained, competent and indemnified or insured for everything you do	4
1.4 Your pre-registration training is the basis of your role	5
1.5 Developing and maintaining your skills and abilities over the course of your career	5
1.6 The boundaries of each professional title	6
1.7 A team-based approach to patient care	6
a) What is the dental team?	6
b) Understanding your role and the role of others	6
c) Medical emergencies	7
d) Delegating, referring and working in a team	7
e) Direct Access	7
1.8 Other sources of guidance	8
1.9 Guidance on training and competence	8
a) What does it mean to be competent?	8
b) How is competence developed and maintained?	8
c) How can competence be measured or assessed?	9
<b>Section Two: profession-specific information</b>	<b>10</b>
2.1 Clinical dental technicians	10
2.2 Dental hygienists	11
2.3 Dental nurses	12
2.4 Dental technicians	14
2.5 Dental therapists	15
2.6 Dentists	16
2.7 Orthodontic therapists	17

# Section One: guidance for all dental professionals

## 1.1 What do we mean by scope of practice?

The General Dental Council (GDC) registers dental professionals who work together within the dental team under seven different titles. 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.

Section One of this guidance provides information about how to understand your personal scope of practice.

Section Two describes the scope of practice and boundaries of each professional title or group.

The activities you carry out will partly be defined by the setting in which you practise, the needs of your patients, and the knowledge and skills of you and the team you work with. Your scope of practice is likely to change over time as you develop and expand your knowledge and skills, and gain experience (within the defined boundaries of your registered title). Your personal scope of practice may also change if you do not work in a specific area, or you do not undertake a particular task or activity for some time.

The GDC has produced this guidance to help ensure patient safety is maintained by guiding dental professionals to only carry out tasks that they are trained, competent and indemnified or insured to perform safely. It describes the expected abilities for dental professionals registered under each of the seven titles or groups, and it outlines the boundaries of each.

As a dental professional you should read the guidance carefully and make sure that you understand your scope of practice and the scope of practice of others you may work with, to ensure that you are working within role boundaries and delegating and referring to colleagues appropriately.

You should also read our **Guidance on indemnity and insurance** and ensure that you have appropriate cover for the full scope of your practice and any other aspects associated with your role (e.g. supervising or training).

## 1.2 How to use this guidance

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

You must follow this guidance and use it to inform your professional decision-making. While the decisions you make will be dependent on the specific context, situation and your individual circumstances, you must follow the guidance set out in Section 1.3 below, when making professional judgements.

Part of what it means to be a dental professional is being able to use your professional judgement to make decisions that ensure patient safety and align with the patient's best interests. 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.

In this guidance, specific tasks are sometimes referenced in relation to the boundaries of a profession because they are especially relevant to the practice of that professional group. The absence of a specific task under a professional group does not necessarily mean that they cannot perform that task, unless it falls outside the boundaries of that title, or the individual is not trained, competent, and indemnified or insured to provide it.

Similarly, just because a task is mentioned in relation to a professional group, it does not always mean that an individual will be trained, competent and indemnified or insured to undertake that task.

## 1.3 Make sure you are trained, competent and indemnified or insured 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 or insured.

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?
- Am I competent to carry out, plan, prescribe, or delegate this task or treatment?
- Am I appropriately indemnified or insured to carry out, plan or prescribe this task or treatment?

You can find more information on what we mean by 'trained' and 'competent' in Section 1.9 of this guidance, under 'Guidance on training and competence'.

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 or insured for a task, it may help to discuss this with:

- your indemnity or insurance provider
- your professional organisation, society, or association
- your education or training provider
- your manager, employer, or mentor
- your colleagues.

If a task, treatment plan, type of treatment or decision is outside your scope or you do not feel that you are trained and/or competent, or you are unsure whether you are indemnified or insured to do it (except when in education or on a training course where you are practising under supervision and indemnity/insurance is in place), you must refer the patient to an appropriately trained colleague (either where you work or in an alternative setting). Depending on the context, this referral may be a formal referral to an appropriate healthcare professional within or outside dentistry or it may be advice to the patient that they need to see another healthcare professional (e.g. an orthodontist).

If you refer or delegate a task to another member of the team who does not feel that they are trained or competent to carry it out, you must not take advantage of your position to pressurise them into accepting the task.

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

As a dental professional, you will have completed your primary training in order to become a dental professional with a qualification that enables you to apply for registration 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 the learning outcomes and behaviours in the **Safe Practitioner** framework for the title(s) under which you are registered. These reflect the knowledge, skills, and behaviours each dental professional must possess to practise safely, effectively, and professionally within each dental professional group.

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

You can develop new skills over the course of your career, and your personal scope of practice is likely to change over time. This change may be in response to changes in practice and technology, or you may choose to undertake further training and development that allow you to develop new skills (within the boundaries of your registered title) to broaden your own scope of practice. You may also wish to deepen your expertise within a specific or specialist area of practice.

As you progress through your career, you might find that you do not undertake some tasks and activities for an extended period. This can change your personal scope of practice because your knowledge and skills in an area may become diminished or out of date. This could mean that you are no longer competent to carry out a particular task or activity and require additional training to restore competence.

Your **Personal Development Plan (PDP)** can help you identify which skills within your field of practice to develop and which skills you need to maintain.

To carry out additional skills within the boundaries of your professional scope of practice you will need to undertake further training. The training that you undertake must be sufficient to make you competent in the task. Some skills may be suitable for development through on-the-job training. Other skills may be best gained through quality assured training delivered by an established or reputable educational provider and include a formal assessment component. There are many different types of courses available, however not all courses will be of sufficient quality or depth to make you competent to practise safely in that area.

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

## 1.6 The boundaries of each professional title

Each professional title has a specific role within the dental team with defined boundaries. The boundaries of each title, or what each profession cannot do, are set out for each professional title under Section Two. Dental professionals should always seek further advice if they are unsure, for example when new technologies are introduced. Some boundaries may arise from guidance and legislation upheld by other organisations, and you need to abide by these.

One area with clear boundaries across dental professional roles is tooth whitening. Dental therapists, dental hygienists and clinical dental technicians can provide tooth whitening under the prescription of a dentist. Dental nurses can assist with tooth whitening. Orthodontic therapists and dental technicians cannot provide tooth whitening.

If you want to expand your scope beyond the boundaries of your professional title, you will need to undertake further dental training and gain a formal qualification which will allow you to register under a different dental professional title. 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.

As a registered dental professional, you are responsible for ensuring that you work within the boundaries of your registered professional title/s, as well as within your own personal scope of practice. Any dental professional who practises outside these 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 dental professionals registered with the GDC under seven titles, and some unregistered roles, who all contribute to patient care. You may work in one or more of a number of settings, for example, in general dental practice, in a hospital, or within specialist health centres operated by community dental services.

While your team may normally consist of your direct colleagues within your workplace, there will be times when you need to work collaboratively with dental professionals, other health and social care professionals, and in other settings such as different practices, specialist care 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 understand 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, providing patients with the most appropriate care from the most suitable dental professional.

The level and nature of this care will depend on:

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

## c) Medical emergencies

A patient could experience a medical emergency 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, referring and working in a team

In line with the **Standards for the Dental Team**, you must delegate and refer appropriately and effectively.

If you lead the team in the clinical setting, you must also take responsibility for ensuring collaborative working across the team. Effective and efficient delegation is an important part of collaborative working.

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 indemnified or insured to carry out the tasks required. You may need to support a colleague when they carry out a new activity.

When delegating, you must understand your colleagues' scope of practice, and the tasks that they are trained, competent, and indemnified or insured to do. You must not delegate tasks that are outside your colleague's scope and competence, and you should ensure that someone registered in that profession is legally permitted to carry out the task. There should be mutual agreement between you and your colleague regarding tasks that are delegated, and you should encourage them to ask questions.

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

You must also know when and how 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.

## e) Direct Access

Direct Access allows some dental care professionals, including dental hygienists, dental therapists, and clinical dental technicians to see patients without a referral from a dentist, where it is safe and appropriate to do so.

If you practise under Direct Access, you must work within your scope of practice, ensure you are trained, competent, and indemnified or insured to carry out the care you provide, and refer appropriately when a patient's needs are beyond your personal scope or professional scope.

Further details on what you can do under direct access can be found in the GDC's **Direct Access guidance**.

## 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 or permit those holding specific registered titles to perform certain tasks, and these affect your scope of practice. They may set out specific training and development requirements 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. For example, there are legal requirements relating to the manufacture of custom-made dental devices. There are also legal frameworks, such as medicines legislation, which set out the circumstances in which different types of medicines can be supplied or administered by different members of the dental team.

This guidance is not applicable to any roles that registered dental professionals may have which are not related to the practice of dentistry. However, if you work in a role outside dentistry, you should still ensure that your levels of professionalism and standards of conduct are compatible with those of a registered dental professional.

Any dental professional who 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 in order to plan and/or perform an activity safely, consistently and in accordance with currently accepted professional standards.

### b) How is competence developed and maintained?

Competence is developed and maintained through education and training, gaining experience, and receiving and acting on feedback.

This can be broken down into pre and post registration training and activities.

- Pre-registration training

Prior to registration, competence is primarily developed and demonstrated through established education and training programmes and assessments leading to registration.

Education and training programmes in the UK are delivered in line with the **Standards for Education** and learning outcomes and behaviours as set out in **the Safe Practitioner framework**. For those qualified outside the UK, the GDC determines that an individual has the required level of competence through alternative mechanisms such as requiring them to pass an examination or an individual evaluation of their knowledge and skills.

- Post-registration training

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

- Completing a relevant qualification or established and reputable course.
- Specialty training (dentists only).
- Undertaking **CPD**, with 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 and maintain your competence will vary and will depend upon considerations such as how complex the task is in relation to 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 need to use a combination of these to develop the required level of competence.

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 a programme of training delivered by an educational provider which includes close supervision and quality assured formal assessment.

Further education and training through formal routes and schemes are an option available to some dental professionals seeking to develop their career. This may include training in non-clinical areas of practice which are essential to the wider role the dental professional holds within the dental team, for example leadership.

### **c) How can competence be measured or assessed?**

There is no single approach to measuring competence that can be applied to every skill that you could acquire as a dental professional. You need to use your professional judgement and exercise good decision making to determine if you are competent in an area of practice and competent to perform a specific task. However, you should not solely rely on your own assessment, and should regularly seek feedback from colleagues, supervisors, mentors and trainers.

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)**.

## Section Two: profession-specific information

This section provides specific guidance for each of the seven dental professions we regulate, which are set out in alphabetical order below.

### 2.1 Clinical dental technicians

#### Role within the dental team

Clinical dental technicians work collaboratively with other members of the dental team, particularly dentists, in the provision of removable dental appliances to patients. Clinical dental technicians can provide removable appliances direct to edentulous patients (patients with no natural teeth, roots or implants) under **Direct Access** and on referral or prescription from a dentist or an oral and maxillofacial surgeon to dentate patients (patients with some natural teeth or implants). Clinical dental technicians must work in compliance with all relevant rules and regulations associated with their role, as outlined in Section 1.8 of this guidance.

Clinical dental technicians must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

#### What do clinical dental technicians do?

Clinical dental technicians plan, design, manufacture, fit and carry out the clinical examinations and procedures related to providing removable dental appliances. Clinical dental technicians can prescribe, undertake and interpret radiographs within their scope and competence.

Clinical dental technicians can prescribe and provide removable dental appliances directly to edentulous patients, and on referral to dentate patients.

Clinical dental technicians can provide sports mouthguards directly to patients.

Clinical dental technicians work collaboratively with other dental and healthcare professionals, making appropriate referrals. In the process of their work, clinical dental technicians may recognise abnormal oral mucosa and related underlying structures, and refer patients to other healthcare professionals where necessary, such as when a patient needs an updated care plan, prescription, or the clinical dental technician is concerned about a patient's oral health.

With additional training and experience, clinical dental technicians can provide additional services within their professional boundaries.

#### Description of boundaries of the role

Clinical dental technicians do not provide dental appliances (other than sports mouthguards) for dentate patients or patients with implants without a referral from a dentist confirming that the patient is dentally suitable for the treatment.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a clinical dental technician if they are trained, competent and indemnified or insured.

## 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 key role in preventing oral diseases, treating periodontal disease and providing oral health advice.

Dental hygienists must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### What do dental hygienists do?

Dental hygienists work collaboratively with other dental and healthcare professionals, making appropriate referrals. Below are some examples of the tasks that dental hygienists will generally undertake following registration:

- Providing oral health education, promotion, and screening, with a focus on prevention, underpinned by a holistic approach to oral and general healthcare.
- Carrying out clinical examinations within scope and competence and referring patients to other healthcare professionals if necessary.
- Diagnosing and care planning within scope and competence, and referring patients to other healthcare professionals if necessary.
- Appropriately prescribing taking and interpreting radiographs within scope and competence.
- Supplying and administering specified prescription only medicines directly to patients upon completion of appropriate training.
- Maintaining and stabilising the dentition by:
  - managing periodontal disease
  - managing and providing interventions for the prevention of dental caries including fissure sealants
  - providing advice on the prevention of tooth surface loss
  - providing care and maintenance of dental implants.
- Identifying soft and hard tissue abnormalities and conditions, providing treatment when in scope, and making appropriate referrals when out of scope.

With additional training and experience, dental hygienists can provide additional services within their professional boundaries.

### Description of the boundaries of the role:

Dental hygienists do not carry out indirect restorations, permanent direct restorations, or orthodontic treatment. They do not make or fit bite raising appliances (e.g. splints) and they do not extract teeth.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a dental hygienist if they are trained, competent and indemnified or insured.

## 2.3 Dental nurses

### Role within the dental team

Dental nurses play a broad and varied role in providing essential support to the dental team in all aspects of patient care, across a range of environments. This includes providing oral health advice, guidance and support with a focus on prevention. Dental nurses' responsibilities also include providing clinical support to colleagues and maintaining and managing high standards of infection prevention and control.

Dental nurses must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### Where do dental nurses work?

Dental nurses work in a wide variety of settings. Below are some examples of these settings:

- In general and specialist practice.
- In hospital settings, for example in dental hospitals or in a maxillofacial department.
- In schools healthcare and family centres.
- In domiciliary services, nursing and residential homes.
- In salaried or community dental services.
- In military and secure services.

### What do dental nurses do?

Dental nurses work collaboratively with other dental and healthcare professionals, making appropriate referrals and providing support to colleagues and patients in all aspects of dental care. Below are some examples of the tasks that dental nurses generally undertake following registration:

- Providing clinical support during dental examinations and treatments.
- Monitoring, supporting and reassuring patients during and after treatments.
- Working with other dental and healthcare professionals to manage medical emergencies.
- Maintaining high standards of infection prevention and control.
- Preparing the clinical area and equipment for treatment and ensuring all necessary materials are ready for use.
- Advising, supporting, and motivating patients to maintain and improve their oral health and prevent oral disease.
- Recording and maintaining accurate patient records.
- Monitoring and processing digital images and dental radiographs.
- Monitoring, auditing, and contributing to clinical governance requirements.

There are a wide range of additional skills and qualifications that dental nurses can gain over the course of their career. The variety of clinical environments that dental nurses can work in may influence 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.

Dental nurses can also gain additional skills relating to fluoride varnish application. If appropriately trained, competent, and indemnified or insured, dental nurses may apply fluoride varnish under the prescription (or patient specific direction) of a dentist, often as part of a community oral health programme. 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 others through formal courses. Certain skills – in particular those relating to taking radiographs 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 additional skills and abilities dental nurses can develop, it is not expected that everyone will be competent in every area. Dental nurses must be confident that they are appropriately trained, competent and indemnified or insured 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. If the dental nurse is assigned a task that they do not feel adequately trained or competent to perform, they should not be pressured to accept it.

## **Description of the 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 the direction or delegation of, a dentist or other registered dental or healthcare professional.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a dental nurse if they are trained, competent and indemnified or insured.

## 2.4 Dental technicians

### Role within the dental team

Dental technicians construct custom-made dental devices to the prescription of a dentist or clinical dental technician. Dental technicians must work in compliance with all relevant rules and regulations associated with their role, as outlined in Section 1.8 of this guidance.

Dental technicians must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### Where do dental technicians work?

Dental technicians work in dental laboratories as part of a team manufacturing dental appliances. They also work in clinical settings as part of a multi-disciplinary dental team that designs, develops, manufactures, and fits dental appliances and provides advice to patients.

### What do dental technicians do?

Dental technicians work collaboratively with other dental and healthcare professionals, making appropriate referrals. Below are some examples of the tasks that dental technicians will generally undertake following registration:

- Providing advice and guidance to the clinical team on dental appliance design.
- Constructing a range of custom-made dental appliances which comply with relevant regulatory requirements.
- Working with dentists and clinical dental technicians on care planning.
- Verifying and taking responsibility for the quality and safety of devices leaving a dental laboratory.

With further training, dental technicians can work with patients under supervision as part of a multidisciplinary team in a clinical setting undertaking further tasks, including:

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

Dental technicians can only see patients directly, outside a multi-disciplinary team setting, for denture repairs and shade taking.

### Description of the boundaries of the role

Dental technicians do not provide dental appliances for patients without a prescription from a dentist or clinical dental technician or provide dental appliances directly to the public.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a dental technician if they are trained, competent and indemnified or insured.

## 2.5 Dental therapists

### Role within the dental team

Dental therapists educate and support patients to attain and maintain high standards of oral health, as well as promoting wider systemic health. Dental therapists play a key role in preventing caries and other oral diseases, treating periodontal disease, and providing oral health advice. Dental therapists also deliver a range of direct restorative treatments to patients of all age groups and extract primary teeth.

Dental therapists must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### What do dental therapists do?

Dental therapists work collaboratively with other dental and healthcare professionals, making appropriate referrals. Below are some examples of the tasks that dental therapists will generally undertake following registration:

- Providing oral health education, promotion, and screening, with a focus on prevention, underpinned by a holistic approach to oral and general healthcare.
- Carrying out clinical examinations within scope and competence and referring patients to other healthcare professionals if necessary.
- Diagnosing and care planning within scope and competence and referring patients to other healthcare professionals if necessary.
- Appropriately prescribing, taking, and interpreting radiographs within scope and competence.
- Supplying and administering specified medicines directly to patients upon completion of appropriate training.
- Maintaining and stabilising the dentition by:
  - managing periodontal disease
  - managing and providing interventions for prevention of dental caries including fissure sealants
  - providing advice on the prevention of tooth surface loss
  - providing care and maintenance of dental implants.
- Identifying and treating hard tissue diseases, and soft tissue abnormalities and conditions, making appropriate referrals when out of scope.
- Carrying out direct restorations on the primary and secondary dentition.
- Undertaking pulpotomies, extractions and placing pre-formed crowns on the primary dentition.

With additional training and experience, dental therapists can provide additional services within their professional boundaries.

### Description of the boundaries of the role

Dental therapists do not undertake indirect restorative treatment, procedures associated with the pulp in the adult dentition or orthodontic procedures. They do not extract permanent teeth, and they do not make or fit bite raising appliances (e.g. splints).

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a dental therapist if they are trained, competent and indemnified or insured.

## 2.6 Dentists

### Role within the dental team

Dentists usually lead the dental team and can carry out the full range of dentistry.

Dentists must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### What do dentists do?

Dentists work collaboratively with other dental and healthcare professionals, making appropriate referrals. Information on the specific skills and abilities that dentists should have and be able to do when they join the register are set out in **the Safe Practitioner framework**.

Dentists must work in compliance with all relevant rules and regulations associated with their role, as outlined in Section 1.8 of this guidance.

### Further education and speciality training

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. This can include formal training which leads to entry onto a specialist list.

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

### Description of 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 or insured before they start to practise.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of a dentist if they are trained, competent and indemnified or insured.

## 2.7 Orthodontic therapists

### Role within the dental team

Orthodontic therapists carry out certain parts of orthodontic treatment under prescription from an orthodontist or a dentist who is trained and competent in the provision of orthodontic treatment. Orthodontic therapists support the patient through the clinical journey of orthodontic treatment.

Orthodontic therapists must only perform tasks for which they are trained, competent, and indemnified or insured to do, as outlined in Section 1.3.

### What do orthodontic therapists do?

Orthodontic therapists work collaboratively with other dental and healthcare professionals, making appropriate referrals. Below are some examples of the tasks that orthodontic therapists will generally undertake following registration:

- Preparing tooth surfaces for orthodontic treatment.
- Taking patient measurements and impressions to be used to produce orthodontic appliances.
- Preparation, insertion, and removal of fixed appliance components previously prescribed or, where necessary, activated by a dentist.
- Insertion and removal of removable appliances previously prescribed or, where necessary, activated by a dentist.
- Providing emergency care to make a patient comfortable between scheduled appointments with the dentist.
- Identifying and referring treatment issues or concerns to the prescribing dentist.
- Carrying out Index of Orthodontic Treatment Need (IOTN) screening.

With additional training and experience, orthodontic therapists can provide additional services within their professional boundaries.

### Description of the boundaries of the role

Orthodontic therapists can only work under the prescription of an orthodontist or suitably qualified dentist, with appropriate supervision, 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 undertake procedures involving the removal of enamel, for example interproximal reduction.

The **Safe Practitioner framework** sets out the learning outcomes and behaviours expected for each dental professional group at registration. This is a useful resource for identifying skills which are within the scope of practice of an orthodontic therapist if they are trained, competent and indemnified or insured.

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