

Level 2 Technical Certificate in Working in Dental Settings (3134-20)

|  |
| --- |
| **Synoptic assignment 3134-021****Recording forms** |
|  |

**About this document**

This document contains the mandatory recording forms for the synoptic assignment within the Level 2 Technical Certificate in Working in Dental Settings (3134-20).

* Declaration of authenticity form.
* Task 1 simulation recording form.
* Task 2 simulation recording form.
* Task 3 pro-forma.
* Candidate record form.
* Practical observation form.

**Declaration of authenticity**

**Technical qualifications**

|  |  |
| --- | --- |
| **Assessment ID** | **Qualification number** |
|  |  |
| **Candidate name** | **Candidate number** |
|  |  |
|  **Centre name** | **Centre number** |
|  |  |

**Candidate:**

*I confirm that all work submitted is my own, and that I have acknowledged all sources I have used.*

|  |  |
| --- | --- |
| **Candidate signature** | **Date**  |
|  |  |

**Tutor:**

*I confirm that all work was conducted under conditions designed to assure the authenticity of the candidate’s work, and am satisfied that, to the best of my knowledge, the work produced is solely that of the candidate.*

|  |  |
| --- | --- |
| **Tutor signature** | **Date**  |
|  |  |

**Additional Support**

Has the candidate received any additional support in the production of this work?

**No  Yes ** (Please tick appropriate)

If yes, give details below (and on a separate sheet if necessary).

|  |  |
| --- | --- |
|  |  |

Note: Where the candidate and/or tutor is unable to, or does not confirm authenticity through signing this declaration form, the work will not be accepted at moderation and a mark of zero will be given. If any question

of authenticity arises, the tutor may be contacted for justification of authentication.

**Task 1 simulation recording form**

**Technical qualifications**

|  |  |
| --- | --- |
| **Candidate name** | **Candidate number** |
|  |  |
| **Centre name** | **Centre number** |
|  |  |

| **Question** | **Expected answers** | **Notes** |
| --- | --- | --- |
| He told me something about a silver or white filling, I don’t know what the difference is; can you tell me more about them?”  | * Silver/amalgam filling is available on the NHS
* white/composite is available privately
* Costs
* Materials used
* amalgam is longer lasting
* a composite is more aesthetically pleasing
 |  |
| Is there a difference in cost? | * Bands 1 and 2 and the associated NHS fees
* Treatments that can be carried out under each band – filling, examination, and x-rays
* Regardless of the number of fillings (or other treatments in band 2) the patient will be required to only pay a one-off Band 2 fee if selecting the NHS option. The same applies for bands 1 or 3
* If the patient moves up the band, the most expensive treatment option cost will only be need to be paid.
* Establishing if they are a paying patient or have a suitable exemption from payment on the NHS
* Private treatment and costs – composite £100
 |  |
| He also told me something about x-rays, why do I need them?  | * Will look at areas the dentist cannot see with a mirror
* Identifies the depth of the suspected cavity of the tooth
* Identify if any other treatments are required
 |  |
| **Additional information that may be provided** | **Question 1** – cues to look for - does not discuss patient-specific information compromising confidentiality, refers to the patient’s clinical notes, clear and confident in speech, good eye contact, obviously looking at the patient’s facial expression/ smiling appropriately// responding in a unrushed pace/good pitch and flow, checking patient understanding**Question 2** – cues to look for – clear and non-jargon speech, providing direct information, good eye contact, checking the patient understands**Question 3** –Other cues to look for - Minimal jargon/covering points and checking the patient understands these (Candidate can use simple terms like x-rays instead of radiographs) |  |

|  |  |
| --- | --- |
| **Tutor signature** | **Date**  |
|  |  |

**Task 1 simulation recording form**

**Technical qualifications**

|  |  |
| --- | --- |
| **Candidate name** | **Candidate number** |
|  |  |
| **Centre name** | **Centre number** |
|  |  |

| **Question** | **Expected answers** | **Notes** |
| --- | --- | --- |
| “Will any more of my teeth become loose and need taking out? | * Poor toothbrushing techniques will increase the chance of more tooth loss
* Gingivitis which shows as red, swollen bleeding gums which may lead to periodontitis which leads to bone loss resulting in loose teeth
* Not brushing gums can lead to tooth loss
* Build-up of plaque causing the gum to become inflamed

**Prompt question:** “How can I stop this happening again? * Use antibacterial mouthwash
* Do not use a mouthwash immediately after tooth brushing
* Stop smoking
* Brush a minimum of twice a day for two minutes.
* Use of interproximal aids could be used to remove plaque between teeth.
 |  |
| “How is my smoking affecting my teeth and gums?” | * It increases the risk of periodontal disease
* Offer smoking cessation advice

**Prompt question:** I am pregnant**,** does this make a difference?* Yes, it is also further increases the risk of periodontal disease
* There will be an imbalance of hormones
* There will be increased bleeding gums.
 |  |
| **Additional information that may be provided** | * Minimal jargon/covering the points and checking the patient understands these/confident presentation coupled with positive body language/ good eye contact/ smiling etc.
* Must be sympathetic to the patient and show empathy
* Must not apportion blame or be judgemental
* Asks questions rather than passing on information as statements, engages with the patient and makes the advice patient-focused

Candidates must realise the importance of the patient understanding all of the information and how they must build up a picture, so they would be expected to check the patient understands this to a minimum level, so they may include comments like “Is that ok?”, “Have you any further questions?”, “Are you happy with what I have said?”, or other suitable closed questions to involve the patient.  |  |

|  |  |
| --- | --- |
| **Tutor signature** | **Date**  |
|  |  |

**Task 3 Risk assessment pro-forma**

**Technical qualifications**

|  |  |
| --- | --- |
| **Candidate name** | **Candidate number** |
|  |  |

|  |  |
| --- | --- |
| **Start time:**  | **End time:** |
| **Risk assessment:** |

**Candidate Record Form**

**Technical qualifications**

**Level 2 Technical Certificate in Working in Dental Settings (3134-20)**

**Level 2 Dental Settings - Synoptic assignment (3134-021)**

|  |  |
| --- | --- |
| **Candidate name** | **Candidate number** |
|  |  |
| **Centre name** | **Centre number** |
|  |  |

***Marker Notes*** *– Please always refer to the relevant marking grid for guidance on allocating marks and make notes that describe the quality of the evidence and justification of marks. Expand boxes as required.*

|  |
| --- |
| **AO1 – Recall -** Breadth, depth, accuracy  |
| 20% | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
| AO1 Mark | Notes & justification  |
| **AO2 – Understanding -** Security of concepts, causal links  |
| 20% | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
| AO2 Mark | Notes & justification |
| **AO3 - Practical skill -** Dexterity, fluidity, confidence, ease of application  |
| 25% | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** |  |
| AO3 Mark | Notes & justification |
| **AO4 – Bringing it together -** use of knowledge to apply skills in new context |
| 20% | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
| AO4 Mark | Notes & justification |
| **AO5 - Attending to detail / perfecting -** Repeated checking, perfecting, noticing, engaged |
| 15% | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** |
| AO5 Mark | Notes & justification |

|  |  |  |  |
| --- | --- | --- | --- |
| **Tutor signature** | **Date**  |  | **Total** |
|  |  |  |  |

**Technical qualifications – Task 1 Practical Observation Form**

|  |  |
| --- | --- |
| **Assessment ID** | **Qualification number** |
|  |  |
| **Candidate name** | **Candidate number** |
|  |  |
|  **Centre name** | **Centre number** |
|  |  |

Complete the table below referring to the relevant marking grid found in the assessment pack. Do not allocate marks at this stage.

| **Assessment Objective (AO)** | **Notes *–*** *detailed, accurate and differentiating notes that identify areas of strength and weakness are necessary to distinguish between different qualities of performance and to facilitate accurate allocation of marks once all evidence has been submitted.* |
| --- | --- |
| **AO1**Describe how well the candidate shows **recall** of knowledge e.g. stating facts without explanation / simple descriptions of what they are carrying out / showing aspects of straightforward knowledge through logical sequencing and application of skill etc. |  |
| **AO2** Describe how well the candidate shows **understanding** when carrying out practical tasks e.g. their explanation of why they are completing a process or how they may change their course of action / are they able to justify their actions etc.  |  |
| **AO3**Describe how well the candidate demonstrated their **practical** **skills**. e.g. how practiced/fluid is hand eye coordination and dexterity / how confident are they / how accurate or ‘polished’ is the outcome / safe working etc. |  |
| **AO4** Describe how well the candidate **brings it all together** – e.g. how **coherent** are their actions / how well do they draw from the breadth of their knowledge and skills / reflection on theory when solving practical problems / How well can they work out solutions to new contexts/ problems on their own / time management etc. |  |
| **AO5** Describe how well the candidate **attended to detail** e.g. professionalism / perfecting / accuracy / checking / taking care / methodical working e*tc*. |  |

|  |  |
| --- | --- |
| **Tutor signature** | **Date**  |
|  |  |

**Technical qualifications – Task 2 Practical Observation Form**

|  |  |
| --- | --- |
| **Assessment ID** | **Qualification number** |
|  |  |
| **Candidate name** | **Candidate number** |
|  |  |
|  **Centre name** | **Centre number** |
|  |  |

Complete the table below referring to the relevant marking grid found in the assessment pack. Do not allocate marks at this stage.

| **Assessment Objective (AO)** | **Notes *–*** *detailed, accurate and differentiating notes that identify areas of strength and weakness are necessary to distinguish between different qualities of performance and to facilitate accurate allocation of marks once all evidence has been submitted.* |
| --- | --- |
| **AO1**Describe how well the candidate shows **recall** of knowledge e.g. stating facts without explanation / simple descriptions of what they are carrying out / showing aspects of straightforward knowledge through logical sequencing and application of skill etc. |  |
| **AO2** Describe how well the candidate shows **understanding** when carrying out practical tasks e.g. their explanation of why they are completing a process or how they may change their course of action / are they able to justify their actions etc.  |  |
| **AO3**Describe how well the candidate demonstrated their **practical** **skills**. e.g. how practiced/fluid is hand eye coordination and dexterity / how confident are they / how accurate or ‘polished’ is the outcome / safe working etc. |  |
| **AO4** Describe how well the candidate **brings it all together** – e.g. how **coherent** are their actions / how well do they draw from the breadth of their knowledge and skills / reflection on theory when solving practical problems / How well can they work out solutions to new contexts/ problems on their own / time management etc. |  |
| **AO5** Describe how well the candidate **attended to detail** e.g. professionalism / perfecting / accuracy / checking / taking care / methodical working e*tc*. |  |

|  |  |
| --- | --- |
| **Tutor signature** | **Date**  |
|  |  |