



Draft Outline Curriculum Framework for Education Programmes to prepare Dental Hygienists and Dental Therapists to use Exemptions

DRAFT

This is not a live document and requires legislative change before it can have effect

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2 INTRODUCTION

2.1 Introduction

This draft outline curriculum is subject to changes in legislation and is aimed at education providers intending to develop education programmes and individuals interested in education programmes for dental hygienists and dental therapists to fulfil the requirements as qualified to use exemptions within the Human Medicines Regulations 2012 to supply and administer medicines.

This outline curriculum framework for education programmes is to prepare dental hygienists and dental therapists to use exemptions. It has been developed from the experience of the use of medicines, in particular the use of exemptions, by other health professionals including orthoptists, paramedics and podiatrists. This curriculum reflects the differences associated with the supply and administration of medicines via exemptions from Patient Group Directions (PGDs) and Patient Specific Directions (PSDs). The change in professional autonomy, responsibility and associated legal and ethical implications, form the basis of this programme.

2.2 Background

The supply and administration of medicines via exemptions by dental hygienists and dental therapists is intended to provide patients with quicker and more efficient access to care by supporting service redesign, making the best use of the skill set of dental hygienists and dental therapists and offering patient's choice.

This draft outline curriculum framework has been prepared to support the NHS England public consultation on proposals to introduce exemptions for dental hygienists and dental therapists by providing information on the education programmes that would be in place to train dental hygienists and dental therapists in the use of exemptions.

Following public consultation, the proposed changes to medicines legislation and the findings of the consultation will be presented to the Commission on Human Medicines who make recommendations regarding changes to the Human Medicines Regulations 2012 to Ministers who are responsible for decisions regarding any changes to medicines legislation.

Subject to the agreement of Ministers, MHRA will then make the necessary amendments to the Human Medicines Regulations. If all elements of the proposal are approved and all relevant organisations are in a position to complete their elements of the work at the earliest possible point without delay, the proposed changes to legislation could come into force in 2021.

2.3 Context

The use of exemptions by dental hygienists and dental therapists supports the achievement of ambitions set out in the NHS Five Year Forward View.^{1 2} It provides mechanisms to ensure that services can be delivered via new ways of working to improve the clinical outcomes for patients by;

- improving access to services and
- enabling early intervention to improve outcomes for service users

The use of exemptions by dental hygienists and dental therapists supports new ways of working to improve quality of services – delivering safe, effective services focused on the patient experience. It will ensure that dental hygienists and dental therapists are able to treat patients in a timely manner. This will have a positive impact on the patient experience and the patient's access to dental services. It facilitates partnership working across professional and organisational boundaries and within the commissioning/provider landscape to redesign care pathways that are cost-effective and sustainable. It can enhance choice, maximising the benefits for patients and the taxpayer. It also creates opportunity for dental clinical leaders to innovate and to inform commissioning decisions.

2.4 Legal Framework

Exemptions from restrictions of medicines legislation allow certain named medicines to be supplied and administered to a patient without the need for a prescription. Exemptions may be used by paramedics, podiatrists, optometrists, orthoptists, and midwives and, subject to changes in legislation, by dental hygienists and dental therapists.

The lists of medicines that can be supplied and administered by designated professions under exemptions are set out in schedule 17 of the Human Medicines Regulations 2012. The lists are profession-specific; medicines from the lists must only be supplied or administered by the profession to which the list pertains.

Medicines for administration only:

- lidocaine with adrenaline
- articaine hydrochloride with adrenaline
- mepivacaine hydrochloride
- prilocaine with felypressin
- lidocaine and prilocaine (periodontal gel)
- sodium fluoride (varnish)
- minocycline periodontal gel

Medicines for supply:

- sodium fluoride (dental paste)
- nystatin oral suspension

¹NHS England <https://www.england.nhs.uk/five-year-forward-view/>

²Welsh Government <http://gov.wales/topics/health/nhswales/plans/oral-plan/?lang=en>

2.5 Underpinning Framework of the Outline Curriculum

The education programme will teach participants the general principles of supply and administration of medicines via exemptions and how to apply these principles safely within their relevant scope of practice.

The development of an outline curriculum framework for education programmes to prepare dental hygienists and dental therapists to use exemptions does not mean that all members of the profession are necessarily to be trained to use them (see Entry Requirements section on [page 5](#)).

The development of an outline curriculum framework for education programmes to prepare dental hygienists and dental therapists to use exemptions does not require that they are necessarily to be trained separately from other professions. The decision on how an education programme will be delivered is determined locally.

Multi-professional education programmes must be able to distinguish, via learning outcomes and assessment strategies, the differences that may exist between professions in respect to medicines use.

There is normally no automatic entitlement to exemption from any part of the programme although Higher Education Institutions (HEIs) may use established mechanisms for considering exemption from parts of the programme. However, students must satisfy all assessment requirements.

The education programme is at post-registration level. The baseline for the programme is judged to be at Level 6, to develop safe independent supply and administration of medicines working within the legal framework. If offered by a Higher Education Institution at Masters Level 7, the programme will still need to be able to map to the minimum required for Level 6. It is intended that this curriculum will be incorporated into the undergraduate dental therapy and dental hygiene programmes through inclusion in the GDC '*preparing for practice*³' document.

Programmes will include sufficient emphasis on clinical decision making, including a decision not to supply or administer medicines.

2.6 Current Knowledge Base/Professional Context

As part of their pre-registration courses all dental hygienists/dental therapists will have:

- good clinical reasoning skills and application in a range of settings
- good decision-making skills related to a range of clinical settings
- good reflective practice skills
- experience of critically evaluating literature
- a basic knowledge of pharmacology relating to the list of medicines relating to their scope of practice

Dental hygienists and dental therapists supply and administer the specified medicines via PSDs; and since 2010, PGDs have been available to all dental hygienists and dental therapists depending on local guidance and implementation.

³General Dental Council (2015) <https://www.gdc-uk.org/professionals/students-and-trainees/learning-outcome>

2.6.1 Proposed scope of use of exemptions

Subject to the outcome of the public consultation and changes to medicines legislation, and provided it is in the course of their professional practice, dental hygienists and dental therapists qualified to use exemptions will be able to supply and administer medicines containing substances on the approved list for any condition within their scope of practice and competence.

3 ENTRY REQUIREMENTS

In order to gain entry onto an Education Programme for the safe use of exemptions, applicants must meet each of the following criteria:

- Be registered with the General Dental Council as a dental hygienist or a dental therapist.
- Be professionally practising in an environment where there is an identified need for the individual to regularly use exemptions.
- Be able to demonstrate support from their employer or contractor*.
- Be able to demonstrate medicines and clinical governance arrangements are in place to support the safe and effective use of exemptions.
- Be able to demonstrate how they reflect on their own performance and take responsibility for their own Continuing Professional Development (CPD) including development of networks for support, reflection and learning.

In England and Wales, provide satisfactory evidence of a Disclosure and Barring Service (DBS) or in Northern Ireland, an Access NI check within the last three years or, in Scotland, be a current member of the Protection of Vulnerable Groups (PVG) scheme.

*If self-employed, must be able to demonstrate an identified need for use of exemptions and that all appropriate governance arrangements are in place

3.1 Employers and the self employed

Employers should undertake an appraisal of a registrant's suitability to use exemptions before they apply for a training place. Employers must also have the necessary clinical governance infrastructure in place (including relevant protection of vulnerable people check) to enable the registrant to use exemptions once they are qualified to do so. Those who are self-employed must comply with practice and regulatory bodies' requirement for a Personal Development Plan and conduct a self-assessment in line with that of an appraisal and assess their suitability and practice setting before they apply for a training place.

3.2 Programme Providers

Programme providers must ensure through pre-programme assessment and clearly documented evidence that:

- a) All entry requirements are met.
- b) Candidates have appropriate background knowledge and experience.
- c) Candidates are able to study at academic level 6.

4 AIM AND OBJECTIVE OF THE EDUCATION PROGRAMME

4.1 Aim

The aim of the programmes developed from this outline framework is to develop the knowledge and skills required by a dental hygienist and dental therapist to be qualified to use exemptions.

4.2 Objective

The objective of the outline curriculum framework is that on successful completion of programmes developed from this framework, dental hygienists and dental therapists will be able to demonstrate how they will use exemptions safely, effectively and competently.

5 COMPETENCIES

Although exemptions are a supply and administration mechanism, many of the core competencies for prescribing apply. The learning outcomes have therefore been aligned to the Royal Pharmaceutical Society *Competency Framework for all Prescribers*⁴

The competency framework comprises ten domains, for each of which there are competency statements which have been interpreted to apply to the use of exemptions. The learning outcomes and indicative content are listed for each of the competency statements in the table below.

Domain	Details
Patient consultation	Assess the patient Consider the options Reach a shared decision Use of the exemption mechanism Provide information Monitor and review

⁴ Royal Pharmaceutical Society (2016) [A competency framework for all prescribers](#)

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Exemptions Governance	Use exemptions safely Use exemptions professionally Improve the use of the exemptions' mechanism Use exemptions as part of a team
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6 THE CURRICULUM FRAMEWORK

1. Assess the patient

	Competency statement	Learning Outcomes	Indicative Contents
1.1	Takes an appropriate medical, social and medication history (this includes current and previously prescribed and non-prescribed medicines, on-line medicines, supplements, complementary remedies, illicit drugs and vaccines) including allergies and intolerances	<p>Able to conduct relevant clinical assessment/examination using appropriate equipment and techniques.</p> <p>Able to undertake a thorough medical and medication history, including alternative and complementary health therapies.</p>	<p>When and how to apply the range of models of consultation.</p> <p>Accurate assessment, history taking and effective communication and consultation with patients and their parents/carers.</p>
1.2	Undertakes appropriate clinical assessment	<p>Understands the process of effective decision making. Evaluates and interprets information gathered during history taking to develop a (working) diagnosis</p>	<p>Impact of co-morbidity and other treatments on the use of exemptions and patient's management.</p>
1.3	Accesses and interprets relevant patient records to ensure knowledge of the patient's management to date	<p>Understands the importance of accessing and interpreting relevant patient records as part of the clinical assessment.</p>	<p>Interpretation of documentation including medical records, clinical notes and electronic health records.</p>
1.4	Requests and interprets relevant investigations necessary to inform treatment options	<p>Able to evaluate each potential treatment option based on relevant investigation outcomes with respect to an individual patient and reach a decision about the most appropriate option(s) for an individual patient – considering patient factors (e.g. allergies), co-morbidities and other medicines taken</p>	<p>Relevant physical examination skills</p> <p>Confirmation of diagnosis/differential diagnosis – further examination, investigation and referral for diagnosis</p>
1.5	Makes, confirms or understands, the working or final diagnosis by systematically considering possibilities (differential diagnosis)	<p>Understands the condition being treated, the natural progression and how to assess the severity, deterioration and anticipated response to treatment</p>	<p>Impact of co-morbidity</p>
1.6	Understands the condition being treated, the natural progression and how to assess the severity, deterioration and anticipated response to treatment	<p>Understands the importance of maintaining current knowledge of the effectiveness of current medicines within the</p>	<p>Regularly reviews of the medicines that are supplied and administered via exemptions</p>
1.7	Reviews adherence to and effectiveness of current medicines		

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		exemptions' framework	
1.8	Refers to or seeks guidance from another member of the team, a dentist or an exemption information source when necessary	Able to communicate effectively with other members of the dental and medical team in the best interest of the patient	The role and function of other team members including effective communication and team working with other members of the healthcare team

2. Consider the options

	Competency statement	Learning Outcomes	Indicative Contents
2.1	Considers both non-pharmacological (including non-treatment) and pharmacological approaches to modifying disease and promoting health	Is able to explain the mode of action of medicines used within the dental hygienists/dental therapist's scope of practice. Is able to describe the pharmacokinetics and pharmacodynamics of medicines used within the dental hygienists/dental therapist's scope of practice and how these may be altered e.g. by age. Is able to list the up-to date information about cautions, contraindications, side-effects, interactions of medicines used within the dental hygienists or dental therapists' scope of practice	Principles of pharmacokinetics, pharmacodynamics and drug handling – absorption, distribution, metabolism and excretion of drugs. Selection of drug regimen. Adverse drug reactions, interactions with drugs (including over-the counter (OTC) products, alcohol and 'recreational' drugs, prescription-only medicines (POMs), and Complementary Medicines) and interactions with other diseases. Impact of physiological state on drug response and safety, e.g. in elderly people, neonates, children and
2.2	Considers all pharmacological treatment options including doses as well as stopping treatment		
2.3	Assesses the risks and benefits to the patient of taking or not taking the treatment or medicine		
2.4	Applies understanding of the mode of action and pharmacokinetics of medicines and how these may be altered (e.g. by age, renal impairment, pregnancy, genetics)		
2.5	Assesses how co-morbidities, existing medication, allergies, contraindications and quality of life impact on management options		
2.6	Takes into account any		

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	relevant patient factors (e.g. religion) and the potential route of administration and formulation of medicines	Understands the principles of evidence-based practice. Is able to list the different information sources available and explain their advantages and limitations.	young people, pregnant or breast-feeding women and inherited disorders. Knowledge of source of evidence-based medicines use including national and local guidelines, protocols, policies, decision support systems and formularies – including rationale for, adherence to and deviation from such practice
2.7	Identifies, accesses and uses reliable and validated sources of information and critically evaluates other information	Can describe the therapeutic evidence base underpinning the therapeutic area within the dental hygienists and dental therapist's scope of practice	Audit, monitoring and evaluating systems and practice including the use of outcome measures
2.8	Stays up to date in own area of practice and applies the principles of evidence based practice, including clinical and cost effectiveness	Can demonstrate an understanding of antimicrobial resistance and stewardship	Public health issues and policies, particularly the use of antimicrobials and resistance to them
2.9	Takes into account the wider perspective including the public health issues related to medicines and their use in promoting health		
2.10	Understands antimicrobial resistance and the roles of infection prevention, control and antimicrobial stewardship measures (see also Expert Advisory Committee on Antimicrobial Resistance and Healthcare Associated Infections (ARHAI) and Public Health England Prescribing Competencies)		

3. Reach a shared decision

	Competency statement	Learning Outcomes	Indicative Contents
3.1	Works with the patient/carer in partnership to make informed choices, agreeing a plan that respects patient	Demonstrates an ability to take account of patients' wishes, values, ethnicity and the choices they may	Strategy for managing patient demand Patient demand versus patient need, the

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	preferences including their right to refuse or limit treatment	wish to make in their treatment	partnership in medicines supply, the patient choice agenda and an awareness of cultural and ethnic needs
3.2	Identifies and respects the patient in relation to diversity, values, beliefs and expectations about their health and treatment with medicines	Works with the patient to engender concordance and self-care, with the patient taking responsibility for their own medicines administration.	
3.4	Routinely assesses adherence in a non-judgemental way, understands the different reasons non-adherence can occur (intentional or non-intention) and how best to support patient/carers	Demonstrates an understanding of concordance and non-adherence	Personal attitudes and their influences on practice
3.5	Builds a relationship which encourages appropriate use of exemptions		
3.6	Explores the patient/carers understanding of the consultation and aims for a satisfactory outcome for the patient /carer and the dental hygienist or dental therapist	Demonstrates an understanding of the importance of, and risks associated with shared decision making	How to build and maintain an effective relationship with patients and carers taking into account their values and beliefs

4. Use of Exemptions

	Competency statement	Learning Outcomes	Indicative Contents
4.1	Administer or supply medicines under the exemptions mechanism with adequate, up-to-date awareness of actions, indications, dose, contraindications, interactions, cautions and unwanted effects	Demonstrates the knowledge of safe medicines use including numeracy and drug	Yellow Card reporting to the committee of Safety on Medicines (CSM) and reporting patient/client safety incidents to the National Reporting and Learning Services (NRLS)

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4.2	Understands the potential for adverse effects and take steps to avoid/minimise, recognise and manage them.	calculations. Is able to demonstrate safe use of medicines	Numeracy and drug calculations
4.3	Uses exemptions mechanism within relevant frameworks for medicines use as appropriate (e.g. local formularies, care pathways, protocols, guidelines)	Understands when to use exemptions, and when not to use exemptions, referral for treatment including non-pharmaceutical treatment and discontinuation of medicines	When to use exemptions, not to use exemptions, alter current medicines, non-drug treatment or referral for treatment
4.4	Uses generic medicines where practical and safe for patient and knows when medicines should be used by branded product	Is able to list the up-to-date information about cautions, contra-indications, side-effects, interactions medicines used within the dental hygienists and dental therapists scope of practice	Development of a treatment plan, including lifestyle and public health service
4.5	Understands and applies relevant national frameworks for medicines e.g. NICE, SMC, AWMSJ and medicines management/optimisation) to own use of exemptions mechanism practice	Demonstrates knowledge of the safe medicines use including numeracy and drug calculations	Record keeping, documentation and professional responsibility
4.6	Accurately completes and routinely checks calculations relevant to use of exemptions and practical dosing	Is able to list the up-to-date information such as BNF or Patient Information Leaflets about the medicines used within the dental hygienists and dental therapists' scope of practice	IT developments and their impact including patients records
4.7	Considers the potential for misuse of medicines	Able to make use of recording systems	
4.8	Uses the up to date information about medicines within the exemption framework (e.g. availability, pack sizes, storage conditions, costs)	Is able to produce clear legible records	
4.9	Effectively uses the systems necessary use the exemptions		

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	mechanism		
4.10	Makes accurate legible and contemporaneous records and clinical notes of the decisions to use the exemptions mechanism		
4.11	Communicates information about medicines and what they are being used for when sharing or transferring information		

5 Provide information

	Competency statement	Learning Outcomes	Indicative Contents
5.1	Checks the patients/carer's understanding of and commitment to the patient's management, monitoring and follow up.		
5.2	Gives the patient/carer clear, understandable and accessible information about their medicines (e.g. what it is for, how to use it, possible unwanted effects and how to report them, expected duration of treatment)	Demonstrates an understanding of clear care plans including follow up Able to describe barriers to communication and methods to address these.	Strategies to develop accurate and effective communication with the patient and their carers
5.3	Guides patient to reliable sources of information about the medicines and treatments	Demonstrates the ability to communicate with patients and their careers in an effective manner.	
5.4	Ensures that the patient/carer knows what to do if there are any concerns about the management of their condition, if the condition deteriorates or if there is	Able to provide clear accessible information	

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	no improvement in a specific time frame	about their medicines	
5.5	When possible, encourages and supports patients/carers to take responsibility for their medicines and self-manage their conditions.	Demonstrates an understanding of concordance and non-adherence	

6 Monitor and review

	Competency statement	Learning Outcomes	Indicative Contents
6.1	Establishes and maintains a plan for reviewing the patient's treatment.	<p>Demonstrates an understanding of clear care plans including follow up</p> <p>Demonstrates the ability to monitor response to medicines and modify treatment or refer as appropriate.</p> <p>Demonstrates ability to detect and report adverse drug reactions</p> <p>Demonstrates ability to detect and manage adverse drug reactions including anaphylaxis</p>	<p>Methods of monitoring the patients including interpretation of radiographs and corresponding examination</p> <p>Yellow Card reporting to the Committee of Safety on Medicines (CSM) and reporting patient/client safety incidents to the National Reporting and Learning Services (NRLS)</p>
6.2	Ensures that the effectiveness of treatment and potential unwanted effects are monitored		
6.3	Detects and reports suspected adverse drug reactions using appropriate reporting systems		
6.4	Adapts the management plan in response to on-going monitoring and review of the patient's condition and preferences		

7 Exemptions governance

	Competency statement	Learning Outcomes	Indicative Contents
7.1	Uses exemptions within own scope of practice and recognises the limits of own knowledge and skill	Demonstrates an understanding of the differences between prescribing mechanisms	

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7.2	Knows about common types and causes of medication errors and how to prevent, avoid and detect them	and supply/administration mechanisms Able to demonstrate an understanding of current	Medicines regulatory framework including Marketing Authorisation and the use of unlicensed and “off-label” use Risk assessment and risk management, safe storage and handling and disposal of medicines
7.3	Minimises risks to patients by using or developing processes that support safe use of exemptions mechanism particularly in areas of high risk (e.g. transfer of information about medicines, prescribing of repeat medicines)	local and national healthcare policy concerning medicines Able to demonstrate an understanding of the duty to patients and society. An overview of the financial considerations including national and local	
7.4	Keeps up to date with emerging safety concerns related to using the exemptions mechanism	policy/guidance/governance. Demonstrates an understanding of the importance of record	
7.5	Reports use of exemptions mechanisms errors, near misses and critical incidents, and reviews practice to prevent recurrence	keeping in the context of medicines management including; Sharing information with the primary/main record holder Accurate recording in patient’s notes Reporting of near misses Adverse reactions	

8 Use the exemptions framework professionally

	Competency statement	Learning Outcomes	Indicative Contents
8.1	Ensures confidence and competence to use the exemptions mechanism are maintained.		

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8.2	Accepts personal responsibility for using exemptions and understands the legal and ethical implications.		
8.3	Knows and works within legal and regulatory frameworks affecting exemptions mechanism practice (e.g. regulators' guidance)	Demonstrates an understanding of the law as it pertains to the relevant profession with regard to supply and administration of medicines using exemptions	Legal basis for dispensing and disposal of medicines Legal implications of advice to self-medicate including the use of complementary therapy and over the counter (OTC) medicines
8.4	Makes decisions based on the needs of patients and not the dental hygienists' and dental therapists' personal considerations.	Demonstrates strategies to recognise and deal with pressures that might result in inappropriate use of exemptions	Application of the law in practice, professional judgement, liability.
8.5	Recognises and deals with factors that might unduly influence use of exemptions mechanism (e.g. pharmaceutical industry, media, patient, colleagues).	Able to demonstrate an understanding of the duty to patients and society. An overview of the financial considerations including national and local policy/guidance/governance	Accountability and responsibility to the employer or commissioning organisation in the context of supply and administrations
8.6	Works within the NHS/organisational/regulatory/Good Practice Guidance and other codes of conduct when interacting with the pharmaceutical industry.		Professional judgement in the context of the GDC Standards for Professionals

9 Improves use of exemptions mechanism process

	Competency statement	Learning Outcomes	Indicative Contents
9.1	Reflects on own and others use of exemptions mechanism practice, and acts upon feedback and discussion.		Reflective practice/peer review, critical appraisal skills
9.2	Acts upon colleagues' inappropriate or unsafe prescribing practice using	Demonstrates the ability	Inappropriate use of medicines including

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	appropriate mechanisms.	to reflect on practice and implement necessary changes	misuse, under and over use
9.3	Understands and uses available tools to improve the use of the exemptions mechanisms (e.g. patient and peer review feedback, prescribing data analysis and audit).		Audit, monitoring and evaluation systems and practice including the use of outcome measures

10 Use of the exemptions mechanism as part of a team

	Competency statement	Learning Outcomes	Indicative Contents
10.1	Acts as part of a multidisciplinary team to ensure that continuity of care across care settings is developed and not compromised.	Demonstrates effective partnership working and communication skills with other healthcare professionals, prescribers and the wider team	The professional relationship between all those supplying medicines involved in the patient's care and the patient's general dental practitioner
10.2	Establishes relationships with other professionals based on understanding, trust and respect for each other's roles in relation to using POM mechanisms.	Demonstrate ability to communicate information about medicines and what they are being used for when sharing information.	The role and the function of other team members including effective communication and team working with other members of the dental team
10.3	Provides support and advice to other users of the exemptions mechanism or those involved in administration of medicines where appropriate.		

7 LEARNING AND TEACHING STRATEGIES

7.1 Strategies

A programme's learning and teaching strategies should do the following:

- Enable students to develop their learning in line with the programme learning outcomes (and therefore the aims, objectives and outcomes of this curriculum framework)
- Promote equality of opportunity and inclusion in how individuals are enabled to access and progress through a programme, underpinned by providers' established processes and systems, whilst upholding patient safety in all aspects of delivery.
- Ensure that programmes delivered in Wales comply with any legislation which supports the use of the Welsh language
- Achieve coherence with how students' fulfilment of the learning outcomes is assessed
- Blend learning and teaching approaches that include a mix of sessions and remotely supported and self-directed learning
- Provide opportunities for students to develop their learning in safe, staged ways and to engage critically in their knowledge and skills development.

More specifically, the strategies should be designed to do the following:

- Promote patient safety and minimisation of risk as the primary aim
- Build on students' existing professional knowledge, skills, behaviours and experience
- Enable students to develop a greater familiarity with medicines used in treating the specific conditions within their scope of practice
- Enable students to develop their understanding of the appropriate integration of exemptions within their scope of practice to meet patient and service delivery needs
- Optimise opportunities for inter-professional learning.

Programmes should also do the following, within the specific context of developing students' competence in the supply and administration of medicines:

- Develop students' critical thinking about how they safely and appropriately integrate the use of exemptions into their clinical practice
- Develop students' critical engagement with, and critical application of, the available evidence base
- Develop students' understanding, sensitivity and responsiveness to issues of equality and inclusion in how they integrate the use of exemptions within their delivery of care to patients
- Enhance students' understanding of their competence and scope of practice, professionalism and professional responsibilities
- Encourage a reflective approach to students' on-going learning in how they apply and develop their supply and administration skills on successful completion of the programme.

8 ASSESSMENT STRATEGIES

8.1 Approach

The aim of the programmes developed from this outline curriculum framework is to develop the knowledge and skills required by the dental therapist and dental hygienist in order to supply or administer medicines using exemptions. The objective is that the practitioner will be able to demonstrate how they will supply and administer medicines safely, effectively and competently using exemptions. Therefore, there is an expectation that a range of appropriate assessment strategies are employed to allow students to successfully demonstrate they can fulfil the learning outcomes of the programmes. The assessment requirements must be made explicit, in particular the criteria for pass/fail and the details of the marking scheme.

Assessment strategy must ensure that all the learning outcomes for the programme are able to be tested. The learning outcomes should be assessed by a combination of methods to test knowledge, skills and a reflective approach to learning.

Programmes, learning outcomes and associated assessment strategies must be designed to confirm that the dental therapist and dental hygienist can safely and effectively supply and administer medicines via exemptions and that a major failure to identify a serious problem or an answer that would cause a patient harm should result in overall failure. It is accepted that higher education providers will design their own programmes within the outline curriculum framework, in line with their institutional format, but also to reflect the expectation of an integrated and research-led approach to programme delivery and assessment, involving a range of strategies to test knowledge, skills, and behaviours, with a reflective approach to learning.

Students must be successful in each assessment element, with no compensation permitted between elements, and no discretionary zone. Within the plan of assessment, it must be clear how all learning outcomes are tested.

8.2 Professional Behaviours

The objective of the programme is for the student to demonstrate that they are safe, effective, and competent to supply and administer medicines via exemptions. In some situations, it may be possible for a student to meet the learning outcomes, but also generate concerns in relation to any element(s) of the assessment plan.

The programme provider should have a mechanism in place to identify such cases and a pathway to pursue the issue(s) involved before a student can complete the programme and have their registration with FGDP (UK). If the student is unable to address the issue(s) satisfactorily, they should not be allowed to complete the programme. Students should be made aware that this mechanism is in place before they commence the programme.

9 LENGTH OF PROGRAMME

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The programme must produce a competent clinician in the use of exemptions, with assessment to ensure competency. The programme will be expected to contain a range of delivery methods, for example flexibility offered by blended learning delivery. In finalising programme requirements for this curriculum, the following factors will be taken into account:

- The views of education providers on a realistic programme to deliver the curriculum over a period of normally three months to achieve the learning outcomes.
- The compatibility of education programmes from other disciplines provides opportunity to consider shared learning experiences.
- The education programmes should contain an element of additional directed private study on the defined conditions and medicines for which they will be expected to use exemptions.
- In line with standard university contact time for a 20-credit module at level 6, it is expected that dental hygienists and dental therapists will receive a minimum of 36 hours contact time. It is expected that further non-contact time, which could include portfolio development, reflective practice and preparation for assessment, could equate up to a further 100 hours.

It is not necessary for all programmes to be university-accredited modules but they must meet the requirements of this outline curriculum framework.

10 REGISTER

The Faculty of General Dental Practice (UK) (FGDP(UK)) will approve the education programmes for dental hygienists and dental therapists and will do this against the requirements of the OCF. The FGDP(UK) will also maintain a register of those dental hygienists and dental therapists who have successfully completed the education programme and are therefore qualified to use exemptions in their clinical roles. The register will be publicly available in order that patients and the public can readily seek assurance.

11 APPENDIX

MEMBERSHIP OF THE EXEMPTIONS PROJECT WORKING GROUP

Name	Organisation	Role
Janet Clarke (Chair) Until 10.2019)	NHS England	Deputy Chief Dental Officer
Nick Barker from 10.2109	East Suffolk & North Essex NHS Foundation Trust	Project SRO
Helen Marriott (Until 1 .2019)	NHS England	Programme Lead
Lois Quale(From 9.2019)	NHS England	Programme Lead
Dianne Hogg (Until 9.2019)	NHS England	Programme Manager
Fiona Sandom	British Association of Dental Therapists	Past President and Professional Body Representative
Michaela O'Neill	British Society of Dental Hygiene and Therapy	Past President and Professional Body Representative
Janet Collins (until 7.18)	General Dental Council	Head of Standards
Hannah Winter	General Dental Council	Programme Manager
Christopher Walker	NHS England	Patient & Public Representative
Debs Smith (until 6.18)	NHS England	Patient & Public Representative
Eva Caley	NHS England	Consultation and Engagement Manager
Steven Sims (until 3.2020)	NHS England	Programme Coordinator
Chris Harris (From 6.2020	NHS England	Programme Coordinator
Victoria Ryan	NHS England	Programme Administrator