

Registration as a Dental Care Professional with  
the General Dental Council

Assessment of Learning Outcomes

Orthodontic Therapist Form

Last name:

First names:

**ALL NON-UK QUALIFIED ORTHODONTIC THERAPISTS APPLYING FOR AN ASSESSMENT OF THEIR QUALIFICATIONS, KNOWLEDGE AND SKILLS MUST COMPLETE THIS FORM.**

## **HOW TO COMPLETE THE FORM**

**Only complete this form if you are applying to register as an orthodontic therapist.**

The learning outcomes on this form may not be numbered in chronological order because only the ones that apply to orthodontic therapist (according to the GDC's Preparing for Practice curricula) will be listed.

### **PLEASE NOTE:**

- You must type in all information on a computer and print out the fully completed form. If not possible, you must complete this form in block capitals only, using black ink.
- You must not alter this form in any way or it will not be accepted by the GDC.
- You must have the English translation of your syllabus and all your professional reference letters when completing this form.
- Please ensure that the English translation of your syllabus is clearly paginated / numbered. If this is not the case, you must paginate/ number the English translation yourself before submitting your application.
- If this form is not completed correctly or is illegible, it will not be processed and will be returned to you along with your application and any supporting documents submitted.

## **SECTION 1**

You will need the full and detailed syllabus that you used and studied during your training in order to complete this section. This document must be issued by your training institution. Please see the application form guidance for further instructions.

You will also need to have the detailed references from previous employer(s) and/or references from dental professionals who have worked with you to complete this section.

You must complete Column B and Column C as stated below.

<b>Column A</b>	<b>Column B</b>	<b>Column C</b>
<p>In Column A are the learning outcomes that an orthodontic therapist is expected to have successfully completed by the end of their training in the UK in order to register with the GDC.</p>	<p>If this learning outcome was covered during your training please indicate in Column B where this can be found in your syllabus.</p> <p>Write the following information in this column:</p> <ul style="list-style-type: none"> <li>• All subject(s) or topic name(s) where the learning outcome is mentioned or covered in the English translation of your syllabus.</li> <li>• Page number where the subject or topic can be found in the English translation of your syllabus.</li> </ul>	<p>If this learning outcome was not covered during your training but you gained the knowledge and experience after you qualified, through additional training or whilst at work, please indicate in Column C where this is evidenced in your application;</p> <p>Please refer to the training certificate or work reference where the subject is mentioned or covered and include this evidence with your application.</p>

**Examples**

Below is an example of how to complete Section 1 if the applicant has been taught the subject during their orthodontic therapy training.

	<b>COLUMN A</b>	<b>COLUMN B</b>	<b>COLUMN C</b>
<b>OTHER-1.7</b>	<b>Patient management</b>	<b>Where in your English translated syllabus can this evidence be found?</b>	<b>Where is this covered in your additional training or work experience?</b>
OTHER-1.7.1	Treat all patients with equality, respect and dignity	<ul style="list-style-type: none"> <li>• <i>Communication pg. 37</i></li> <li>• <i>Sociology, pg. 54</i></li> <li>• <i>General Psychology, pg. 83</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Not covered</i></li> </ul>

Below is an example of how to complete Section 1 if the applicant has gained experience of the subject after they qualified.

	<b>COLUMN A</b>	<b>COLUMN B</b>	<b>COLUMN C</b>
<b>OTHER-1.7</b>	<b>Patient management</b>	<b>Where in your English translated syllabus can this evidence be found?</b>	<b>Where is this covered in your additional training or work experience?</b>
OTHER-1.7.1	Treat all patients with equality, respect and dignity	<ul style="list-style-type: none"> <li>• <i>Not covered</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Reference from Mr Dentist, dated dd-mm-yy</i></li> <li>• <i>Reference from Ms Orthodontic Therapist, dated dd-mm-yy</i></li> <li>• <i>**CPD, titled Communicating with patients, issued May 2013</i></li> <li>• <i>**CPD, titled Equality and Diversity, issued Aug 2014</i></li> </ul>

\*Please number the pages of the English translation of your syllabus

\*\*Continuing Professional Development

## **ORTHODONTIC THERAPIST LEARNING OUTCOMES**

There are seven overarching outcomes which should be demonstrated throughout education and training. These form the key principles of effective and professional practice, running through all the domains (Clinical, Communication, Professionalism, Management and Leadership), and apply to all of the registration categories. Upon registration with the GDC the registrant will be able to:

- Practise safely and effectively, making the high quality long term care of patients the first concern
- Recognise the role and responsibility of being a registrant and demonstrate professionalism through their education, training and practice in accordance with GDC guidance
- Demonstrate effective clinical decision making
- Describe the principles of good research, how to access research and interpret it for use as part of an evidence based approach to practice
- Apply an evidence-based approach to learning, practice, clinical judgment and decision making and utilise critical thinking and problem solving skills
- Accurately assess their own capabilities and limitations, demonstrating reflective practice, in the interest of high quality patient care and act within these boundaries
- Recognise the importance of lifelong learning and apply it to practice

**CLINICAL - Upon registration with the GDC the Registrant will be able to demonstrate the outcomes as relevant to the practice of orthodontic therapy and patient care.**

The registrant will be able to apply to the practice of orthodontic therapy principles that derive from the biomedical, behavioural and materials sciences. The registrant will recognise and take account of the needs of different patient groups including children, adults, older people, and those with special care requirements throughout the patient care process.

<b>Other-1.1</b>	<b>Foundations of practice</b>	<b>Where in your English translated syllabus can this evidence be found? *</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.1.1	Describe the principles of an evidence-based approach to learning, clinical and professional practice and decision making		
Other-1.1.2	Explain the range of normal human structures and functions with particular reference to oral disease and treatment		
Other-1.1.3	Explain the aetiology and pathogenesis of oral disease		
Other-1.1.4	Describe relevant dental, craniofacial and oral anatomy and explain their application to patient management		

\*Please number the pages of the English translation of your syllabus

		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-1.1.5	Describe relevant physiology and explain its application to patient management		
Other - 1.1.6	Explain the potential routes of transmission of infectious agents in dental practice, mechanisms for the prevention of infection, the scientific principles of decontamination and disinfection and their relevance to health and safety		
Other-1.1.7	Describe the scientific principles underpinning the use of biomaterials and discuss their limitations with emphasis on those used in dentistry		
Other-1.1.8	Explain the scientific principles of medical ionizing radiation and statutory regulations		
Other-1.1.9	Describe psychological and sociological aspects of health, illness, behavioural change and disease		

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	<b>Foundations of practice</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.1.10	Explain the scientific principles of medical ionizing radiation and statutory regulations		
Other-1.1.11	Recognise psychological and sociological factors that contribute to poor oral health, the course of diseases and the success of treatment		

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<b>Other-1.2</b>	<b>Contribution to patient assessment</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.2.1	Explain the need for an accurate and contemporaneous patient history		
Other-1.2.2	Recognise the significance of changes in the patient's reported oral health status and take appropriate action		

\*Please number the pages of the English translation of your syllabus



		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
OTher-1.2.3	Recognise the early stages of mucosal abnormality and the importance of appropriate and timely referral		
OTher-1.2.4	Assess patients' levels of anxiety, experience and expectations in respect of dental care		
OTher-1.2.5	Contribute to relevant special investigations and diagnostic procedures, including radiography		
OThder-1.2.6	Discuss the importance of each component of the patient assessment process		

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<b>Other-1.5</b>	<b>Responding to the treatment plan</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.5.1	Explain the principles of obtaining valid consent		
Other-1.5.2	Obtain valid consent from the patient before starting treatment, explaining all the relevant options and possible costs		
Other-1.5.3	Carry out care as prescribed by the dentist and plan the delivery in the most appropriate way for the patient		
Other-1.5.4	Identify where patients' needs may differ from the treatment plan or prescription and refer patients for advice where appropriate		
Other -1.5.5	Discuss the role of the orthodontic therapist and other members of the dental team in the treatment plan		

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<b>Other-1.7</b>	<b>Patient management</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.7.1	Treat all patients with equality, respect and dignity		
Other-1.7.2	Explain the impact of medical and psychological conditions in the patient		
Other-1.7.3	Recognise the need to monitor and review treatment outcomes		
Other-1.7.4	Manage patient anxiety through effective communication, reassurance and relevant behavioural techniques		
Other-1.7.5	Recognise the need for appropriate follow-up care		

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		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-1.7.6	Recognise the management and organisation of local referral networks, local clinical guidelines and policies		
Other-1.7.7	Describe the role of the orthodontic therapist and other members of the dental team in the patient management process		

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Other-1.8	Patient and public safety	Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-1.8.1	Recognise the risks around the clinical environment and manage these in a safe and efficient manner		
Other-1.8.2	Implement and perform effective decontamination and infection control procedures		

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		<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.8.3	Take responsibility for ensuring compliance with current best practice guidelines		
Other-1.8.4	Recognise and manage medical emergencies		
Other-1.8.5	Explain the importance of and maintain contemporaneous, complete and accurate patient records in accordance with legal and statutory requirements and best practice		
Other-1.8.6	Recognise the signs of abuse or neglect and describe local and national systems and raise concerns where appropriate		

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<b>Other-1.9</b>	<b>Treatment of acute oral conditions</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.9.1	Recognise and manage patients with acute oral conditions ensuring involvement of appropriate dental team members		

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<b>Other-1.10</b>	<b>Health promotion and disease prevention</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-1.10.1	Describe the principles of preventive care		
Other-1.10.2	Provide patients with comprehensive and accurate preventive education and instruction in a manner which encourages self-care and motivation		
Other-1.10.3	Underpin all patient care with a preventive approach that contributes to the patient's long-term oral and general health		

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		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-1.10.4	Describe the health risks of diet, drugs and substance misuse, and substances such as tobacco and alcohol on oral and general health and provide appropriate advice, referral and support		

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Other-1.13	Management of the developing and developed dentition	Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-1.13.1	Identify normal and abnormal facial growth, physical, mental and dental development and explain their significance		
Other-1.13.2	Explain the aetiology of malocclusion		
Other-1.13.3	Describe how to undertake an orthodontic assessment and explain how treatment need is assessed		

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		<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
OTher-1.13.4	Recognise and explain to patients the range of contemporary orthodontic treatment options, their impact, outcomes, limitations and risks		
OTher-1.13.5	Recognise common problems related to orthodontic treatment and take appropriate action		
OTher-1.13.6	Undertake orthodontic procedures as prescribed by the referring practitioner		

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<b>OTher-2</b>	<b>Population-based health and care</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
OTher-2.1	Describe the basic principles of a population health approach including demographic and social trends, UK and international oral health trends, determinants of health and inequalities in health, the ways in which these are measured and current patterns		

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		<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-2.2	Describe the dental and wider healthcare systems dental professionals work within including health policy and organisation, delivery of healthcare and equity		
Other-2.3	Describe and evaluate the role of health promotion in terms of the changing environment and community and individual behaviours to deliver health gain		
Other-2.4	Describe evidence-based prevention and apply appropriately		
Other-2.5	Describe the principles of planning oral health care for communities to meet needs and demands		

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**Clinical Learning Outcomes – OTher (optional information)**

Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional.  
*(For example: further explanation of how you achieved the clinical learning outcomes)*

	<b>Communication</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-3.0	<p>Communicate effectively and sensitively at all times with and about patients, their representatives and the general public and in relation to:</p> <ul style="list-style-type: none"> <li>· patients with anxious or challenging behaviour</li> <li>· referring patients to colleagues, particularly where patients are from diverse backgrounds or there are barriers to patient communication</li> <li>· difficult circumstances, such as when breaking bad news, and when discussing issues, such as alcohol consumption, smoking or diet.</li> <li>· Obtain valid consent.</li> </ul>		
Other-4.0	<p>Communicate effectively with colleagues from dental and other healthcare professions in relation to the direct care of individual patients, including oral health promotion</p>		
Other-5.0	<p>Communicate appropriately, effectively and sensitively by spoken, written and electronic methods and maintain and develop these skills. Explain the importance of and maintain accurate, contemporaneous and comprehensive patient records in accordance with legal requirements and best practice.</p>		

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**Non- clinical Learning Outcomes – OTher – Communication (optional information)**

Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional.  
*(For example: further explanation of how you achieved the clinical learning outcomes)*

	<b>Professionalism</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-6.0	<b>Patients and the public</b> Put patients' interests, dignity and choice first and act to protect them, be honest and act with integrity to protect them and respect patients' choices. Maintain and protect patients' information.		

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<b>Non- clinical Learning Outcomes – OTher – 6.0 Patients and the public (optional information)</b>
<p>Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional.            (For example: further explanation of how you achieved the clinical learning outcomes)</p>



		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-8.0	<p><b>Teamwork</b> Explain the contribution that team members and effective team working makes to the delivery of safe and effective high quality care.</p>		

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Non- clinical Learning Outcomes – Other – 8.0 Teamwork (optional information)
<p>Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional. (For example: further explanation of how you achieved the clinical learning outcomes)</p>

		Where in your English translated syllabus can this evidence be found?*	Where is this covered in your additional training or work experience?
Other-9.0	<p><b>Development of self and others</b> Recognise and demonstrate own professional responsibility in the development of self and the rest of the team. Explain the range of learning and teaching methods and the importance of assessment, feedback, critical reflection, identification of learning needs and appraisal in personal development planning.</p>		

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Non- clinical Learning Outcomes – Other – 9.0 Development of self and others (optional information)
<p>Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional. (For example: further explanation of how you achieved the clinical learning outcomes)</p>



	<b>Management and Leadership</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-10.0	<b>Managing self</b> Recognise the impact of personal behaviour on the healthcare environment and on wider society and manage this professionally. Recognise the significance of own management and leadership role and the range of skills and knowledge required to do this effectively.		

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<b>Non- clinical Learning Outcomes – Other – 10.0 Managing self (optional information)</b>
Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional. <i>(For example: further explanation of how you achieved the clinical learning outcomes)</i>



	<b>Management and Leadership</b>	<b>Where in your English translated syllabus can this evidence be found?*</b>	<b>Where is this covered in your additional training or work experience?</b>
Other-12.0	<b>Managing the clinical and working environment</b> Recognise and comply with systems and processes to support safe patient care. Recognise and demonstrate the effective handling of complaints as described in the <i>Standards for the Dental Team Principle 5 Have a clear and effective complaints procedure.</i> Recognise and comply with national and local clinical governance and health and safety requirements		

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<b>Non- clinical Learning Outcomes – Other – 12.0 Managing the clinical and working environment (optional information)</b>
Any additional information you wish to provide (maximum 2000 characters). Please note that the completion of this box is optional. <i>(For example: further explanation of how you achieved the clinical learning outcomes)</i>

## SECTION 2

**PLEASE NOTE:** You must **type in** any information on a computer **and print out the fully completed form**. If this is not possible, you must complete this form in block capitals only, using black ink. Do not alter this form in any way or it will not be accepted. If this form is not completed correctly or is illegible, it will be returned to you.

### APPLICANT'S QUALIFICATIONS

*I have been awarded with the following qualification(s)*

**Primary Qualification (the qualification which allows you to practice as an orthodontic therapist in the country where you qualified)**

<b>Title of qualification:</b>		<b>Start date (M/Y):</b>	<b>End date (M/Y):</b>
<b>Name of awarding institution:</b>			
<b>Address of awarding institution:</b>			
<b>Length of training course:</b>	<b>Years</b>		<b>Months</b>
<b>Was the course Part-time or Full-time:</b>	<input type="checkbox"/> <b>Part-time (hours per week)</b> <input type="text"/>		<input type="checkbox"/> <b>Full-time (hours per week)</b> <input type="text"/>

**Dental School(s), Hospital(s), College(s) or other learning environments where professional experience was pursued leading to your qualification (Please continue on a separate sheet if required):**

Name of School, Hospital, College or other learning environment	From (M/Y)	To (M/Y)

**Additional Qualifications (relevant to dentistry)**

Title of Qualification	Name and address of awarding institution	Date the qualification was completed (MM/YY)	Length of course and is it Full-time or Part-time?
			<input type="checkbox"/> part time <input type="checkbox"/> full time
			<input type="checkbox"/> part time <input type="checkbox"/> full time

### SECTION 3

#### APPLICANT'S PROFESSIONAL EXPERIENCE

Please provide information regarding your professional experience and the dates of employment below.  
(Please continue on a separate sheet if required).

Name and address of employers	From (MM/YY)	To (MM/YY)	Reference letter enclosed
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**You must enclose references from your previous employer(s) and/or references from dental professionals who have worked with you. Please note that all references should be typed.**

These must provide the following information (please tick)

- When and where you worked
- A full list of the procedures you carried out
- Your level of skill when undertaking your work within your role
- The knowledge and experience you gained
- The levels of supervision you worked under
- Any additional training you undertook during this employment

**PLEASE NOTE: References that do not have the relevant information as listed above and/or are not legible/typed will NOT be used during the assessment of your application.**

## SECTION 4

### APPLICANT'S CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

Please provide information regarding any Continuing Professional Development activity you have undertaken  
(Please continue on a separate sheet if required).

CPD is any activity which contributes to your professional development. A CPD activity can be anything from private study time to attending training courses you may have done throughout your dental career.

Name of activity	Number of hours	Date	Certificate enclosed
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO

## SECTION 5

This section must be completed and signed by the applicant:

**I certify that I have achieved the learning outcomes indicated in this form and that all the information given is, to the best of my knowledge and belief, correct.**

\_\_\_\_\_  
Applicant's full name

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date