

PERFORMERS LIST VALIDATION BY EXPERIENCE

VALIDATION SUPERVISOR (VS) PRACTICE: LIST OF ESSENTIAL AND DESIRABLE REQUIREMENTS FORM

PRACTICE ADDRESS:

NAME OF VED APPLICANT:

NAME OF VS APPLICANT(S):

NAMES OF DIRECTORATE ASSESSORS:

Date of self-assessment:

/ / dd/mm/yy

Date of HEE assessment:

/ / dd/mm/yy

NB Throughout this document 'VED' refers to Validation by Experience Dentist (i.e. the dentist who is applying to undertake PLVE)

All requirements below must be met and must be evident on the date of the assessment

ESSENTIAL REQUIREMENTS			
		Self assessment	HEE LO assessment
	Certification, registration, insurance & policies	✓	✓
1	Applicant and all other clinicians have current GDC annual practising certificates		
2	All DCPs have current GDC registration or are in recognised training schemes		
3	Applicant and all other clinicians in the practice have current defence organisation membership or professional indemnity insurance		
4	Applicant has been subject to an enhanced DBS check which revealed nothing which should prevent the applicant from working with vulnerable adults and children.		
5	Employer's Liability/Public Liability Insurance certificate valid and on display		
6	CQC Certificate of registration for registered manager. (Essential for partnerships, LLPs & corporate bodies, not required for sole traders.)		
7	CQC Certificate of registration for diagnostic & screening services, surgical procedures and treatment of disease, disorder & injury		
8	Development plan for areas of CQC registration that are not fully compliant		
9	Certification of last training in CPR and medical emergencies for all staff employed/listed within last year		
10	Child protection and vulnerable adults level 2 training for all clinical staff within the last 3 years		
11	All clinicians exposing radiographs should have certification demonstrating attendance in a recognised IRMER course within the last 5 years		
12	Applicant can evidence annual infection control training for all clinical staff		
13	Applicant has full inclusion in relevant dental performers list		
14	Equal Opportunities/anti discrimination policies in place and up to date		
15	Data protection certificate in place (where applicable)		
16	Freedom of Information Act – publication scheme registered		
17	Autoclave maintenance/insurance in place		
18	Compressor maintenance/insurance in place		
19	Health & safety policy in place		
20	Infection control policy in place		
21	Radiology policy in place and RPA and RPS appointed		

22	Written plan for practice in case of force majeure (including how to manage the situation if one/all VSSs included in the application should be incapacitated long term/ permanently)		
	Patient care/record keeping	Self assessment	HEE LO assessment
		✓	✓
1	Complaints procedure in place and nominated officer appointed		
2	Evidence of NHS patients currently treated (BSA monitoring report and vital signs)		
3	Appropriate recording of medical histories		
4	Evidence of significant events recorded and used for staff training		
5	Suitable arrangements in place for dental emergency patients		

Staff training & development		Self assessment	HEE LO assessment
		✓	✓
1	Reference library (including recent material) or evidence of online researches		
2	Periodicals (evidence of regular subscriptions)		
3	Staff handbook (or equivalent)		
4	Staff appraisal system in place (examples shown)		
5	Evidence of regular team meetings (eg copy of minutes)		
6	Evidence of fire safety training		
7	Core CPD for DCPs monitored		
8	Regular peer review or audit (minutes available)		
Health & safety, COSHH, infection control		Self assessment	HEE LO assessment
		✓	✓
1	Health and Safety Executive – current version poster on display, details completed		
2	Fire extinguishers available – evidence of regular servicing		
3	Accident book and RIDDOR report forms available		
4	First aid kit available, first aider appointed		
5	COSHH and risk assessments in place		
6	Portable and fixed electrical safety checks in place, qualified inspector		
7	Evidence of QA process in radiology		
8	Compliance with the core requirements of HTM 01-05 (infection control)		
9	Evidence of six monthly audits of decontamination processes		
10	Magnifying light available for use in decontamination area		
11	Suitable clinical clothing and PPE to meet HTM 01-05 requirements		
12	Clinical waste is disposed of in accordance with recommendations plus transfer notes and contract seen		
13	Special waste is disposed of in accordance with recommendations plus transfer notes and contract seen		
14	Quality assurance policy in place and displayed		
15	AED available in practice, with evidence of appropriate staff training in use		
16	Appropriate disposal of single-use instruments, e.g. 3-in-1 tips		
17	Full emergency drug kit in place and checked regularly		
18	Secure storage of drugs and prescription pads		
19	Portable oxygen available and checked regularly		
20	Portable self-powered aspirator available		
21	Airways and ventilation devices available		
22	Gas cylinders – correct storage, correct maintenance/inspection		
23	Mercury spillage kit present		
24	Complies with current requirements regarding waste separation		
25	Evidence of planned programme for renewal of equipment		
26	Practice is equipped for NiTi rotary endodontic treatment and available for VED to use		
27	Evidence of beam-aiming devices and rectangular collimation for radiography		
28	Compliant with a current approved code of practice for legionnaires' disease		
29	Impervious floor covering in treatment areas		
30	Needle resheather or safety syringes		
VED's facilities, support and ability to deliver Educational Requirements		Self assessment	HEE LO assessment
		✓	✓
1	VED's appointed nurse is GDC registered and qualified. The same nurse will be allocated for the first three months		
2	Evidence of sufficient patient numbers to allow VED to achieve a broad range of treatment experience		
3	Practice can demonstrate that the VED and Mentor surgeries are in close proximity		

4	VED to work maximum of 4 hr session without planned break and no more than 8 hours in a working day		
5	Endodontic system available including rubber dam		
6	Sufficient instruments and handpieces available to allow appropriate treatment		
7	Availability of apex locator		
8	Availability of clinical photographic equipment		
9	Suitable equipment for performing minor oral surgery		
VED's Surgery/ies		Self assessment	HEE LO assessment
		✓	✓
1	Minimum 3 metre's square		
2	Suitable for both left and right handed operators		
3	X-ray facility in surgery (Non hand-held)		
4	Closed aspiration system with exhaust outside building		
5	Amalgam separation installed		
6	Encapsulated amalgam production		
7	Ultrasonic scaler or equivalent		
8	Composite curing lamp and light meter for testing		

I/we confirm that following the visit today by the HEE Local Office assessors to verify the self assessment I/we completed on, I/we agree that the HEE Local Office record is a true and accurate reflection of the practice assessment.

Signature :

Date:

(Practitioner/s to sign at the time of the visit)

Signature :

Date:

(Practitioner/s to sign at the time of the visit)

Signature :

Date:

(HEE LO assessor to sign at the time of the visit)

Signature :

Date:

(HEE LO assessor to sign at the time of the visit)