

Witness Toolkit





Contents page

	Page
What is a Witness?	Page 3
Who can be a Witness?	Page 3
The Role of the Witness	Page 3
Key element of the Witness role	Page 3
How does a Witness sign off Learner Performance	Page 4
Witness information and training tools	Page 4
Video 1 – Relates to PERS Unit 4 Section 4 of the RoE	Page 4
Video 2 – Relates to PERS Unit 5 Section 2 of the RoE	Page 4
Assessment of Competence	Page 5
Providing feedback	Page 6
Examples of good feedback	Page 6
Examples of Inadequate feedback	Page 7
Top Tips for Effective Feedback	Page 7
Further Resources	Page 7
Appendix A	Page 8
Appendix B	Page 10



What is a Witness?

A Witness is an individual who holds the specific qualification, and is registered with the appropriate regulatory body, relevant to the qualification the Learner is undertaking.

Who can be a Witness?

All Witnesses must meet all the following requirements:

- Understand their role within the Learner's training programme
- Be occupationally competent in the area of expertise this should be credible and clearly demonstrable through continued professional development
- Must be registered with an appropriate professional body, for example the GDC, GMC, HCP (for certain post-registration qualifications)
- Must have completed an induction with the Centre, this can be face-to-face, by phone or other suitable means of communications, prior to the commencement of the programme
- The Witness is not required to hold an assessor qualification.

The Role of the Witness

The role of a Witness is to provide confirmation and testimony of the Learner's competence in the relevant clinical procedure or activity, all of which are clearly mapped to GDC Learning Outcomes set out in the qualification content. The testimony must relate directly to the Learner's performance in the workplace and can only be signed off by the Witness who has directly observed the task.

A key part of the training for Learners is their Record of Experience (RoE) or Record of Competence (RoC), it documents their development over the course of the programme and the Witness must ensure the Witness asset is completed within 14 days from the date of the clinical date of activity, this details the Learner's competencies in the specific clinical procedure.

Key element of the witness role

• Observing practice and performance, providing constructive feedback, both verbally and within the witness asset, accordingly

Depending on the Learner's placement, they may have multiple Witnesses, this could mean that a Witness may only support the Learner with one clinical assessment or multiple assessments. Regardless of this, the key responsibilities and expectations are the same.

It is important to note that the registration of any Witness is at risk if they knowingly make a false declaration within the RoE or RoC. By stating a Learner is competent, the Witness is confirming that the Learner has demonstrated the clinical skills to assure the Witness that the Learner will be able to complete the task independently.

Should a Learner's performance be questioned by the professional body in the future, the Witness may be called upon to justify their decision.



It is the Centre's responsibility to assess the Learner's overall performance against the set criteria provided by NEBDN, to ensure a standardised learning programme has been followed. Therefore, the final decision relating to the Learner's RoE/RoC is still the responsibility of the Centre.

How does a Witness sign off Learner Performance?

The Witness will provide feedback on the Learner's activity on the witness asset, either via the PebblePocket app on a mobile device or on a computer using NEBDN's educational platform PebblePad. The Witness will not have an account with PebblePad, the entry is completed via the Learner's account.

Once the entry is completed it must be instantly saved and locked down by the Witness at the time of entry so that it cannot be changed or amended by the Learner, with a valid email address which has been validated by the Centre, and a signature. This must be completed within a maximum of 14 days of the clinical activity taking place.

Click here for a step-by-step guide as to how a Witness validates a procedure or activity.

Witness information and training tools

Each clinical activity within the RoE/RoC is designed to demonstrate evidence of the Learner's level of competence during the treatment of patients. There is the potential that multiple competencies may be demonstrated during the treatment of one patient.

NEBDN has provided two training videos, which can be found on YouTube at:

https://www.youtube.com/watch?v=diA3mWGFYOAhttps://www.youtube.com/watch?v=Uib5Qkt_tsI

It is important to note that the training videos available specifically relate to The National Diploma in Dental Nursing Qualification only.

Video 1 - Relates to PERS Unit 4 Section 4 of the RoE

This provides a simulation of a Learner undertaking the Removable Prosthesis Procedure. This will enable the Witness to test their skills to provide feedback and complete the grading process. Please refer to Appendix A for an example of the criteria and assessment process.

Video 2 – Relates to PERS Unit 5 Section 2 of the RoE

This provides a simulation of a Learner undertaking the Local Anaesthetic Procedure. This will enable the Witness to test their skills to provide feedback and complete the grading process. Please refer to Appendix B for an example of the criteria and assessment process.



Assessment of Competence

For each case, the Learner's competency must be assessed in line with the GDC domains of professional practice:

1. Clinical

The Learner demonstrated knowledge and clinical skills appropriate for the patient's condition and the type of sedation being used.

2. Professional

The Learner demonstrated professionalism in his/her duties and effective team working towards the delivery of safe, effective care.

3. Communication

The Learner communicated appropriately, effectively and sensitively with patients, their relatives or carers and colleagues.

4. Management and Leadership

The Learner managed themselves and the clinical environment in line with current standards and guidelines.

For each area the performance in the domain should be graded as:

PERS/PCAS Grade	Criteria
Not yet competent	In the view of the Witness, the Learner's skills are not yet adequate in this area to a level you expect.
Competent	In the view of the Witness, the Learner's skills meet or exceed the level you would expect.
DOCS Grade (RoC)	Criteria
Unsafe	In the view of the Witness, the Learner demonstrated unsafe clinical practice relating to the requirements expected.
Below Expectations	In the view of the Witness, the Learner demonstrated below the expected standards of clinical practice.
Meets Expectations	In the view of the Witness, the Learner was able to meet the expected standards of clinical practice.
Above Expectations	In the view of the Witness, the Learner exceeded the expected standards of clinical practice.
Unable to Comment	The Witness is unable to comment.

It is essential for all Witnesses to note that only PERS/PCAS/DOCS which demonstrate **FULL** competence will count towards the requirements of the RoE/RoC. However, Learners may wish to retain any PERS/PCAS/DOCS that do not meet the expected requirements within their individual PDP to demonstrate the development of their clinical skills throughout their learning journey.



Providing feedback

To ensure feedback is appropriate and fit for purpose, Witnesses must follow the guidance below:

- Witnesses are required to give feedback on each PERS/PCAS/DOCS of the RoE/RoC submitted by the Learner
- All feedback must be constructive highlighting areas of good performance whilst also giving advice where and specifically how improvement is needed
- Avoid the use of the word 'but' because this negates the previous comment, however positive it was, and often gives the impression that the Learner should 'expect the worst' (substitute with the word 'and' instead)
- Refer to the relevant assessment criteria so that feedback is specific to that clinical procedure
- Provide feedback at the time of completion, or within 14 days of the clinical procedure. Any PERS/PCAS/DOCS of the RoE/RoC signed outside the 14 days of the activity will be deemed invalid (unless accompanied by explanatory statement).

Examples of good feedback

Example 1 — Wilma fully understood the aim of the procedure and was well prepared. They were able to demonstrate each element of the criteria within the 3 key areas decontamination, sterilisation, and professionalism.

Wilma wore appropriate PPE and showed a good level of understanding of the dirty and clean zones and the significance of each. They were able to talk me through the sterilisation process and clear awareness of the national guidelines.

Wilma maintained full awareness of their clinical environment and displayed professionalism throughout and effective decision making. I am confident that Wilma is fully competent in the area.

Example 2 — Fred fully understood the aim of the procedure, they were able to demonstrate each element of the criteria within the 4 key areas preparation, during the procedure, after procedure and professionalism.

Fred was well prepared and had all the equipment required for the procedure including PPE for themselves and the patient. Fred confirmed the procedure with me as the treating clinician and they implemented the appropriate disinfectant methods, which demonstrated a good level of knowledge and understanding.

The patient's needs were met, and they were treated with dignity and respect before and after the procedure. I am confident that Fred is fully competent in the area.



Example 3 — Betty fully understood the aim of the procedure, they were able to demonstrate each element of the criteria within the 8 key areas of preparation, during the procedure for digital processing, equipment maintenance, waste disposal and professionalism.

Betty was well prepared and had all the equipment required for the procedure including PPE, disinfectant methods, and disposable covers. This demonstrated a good level of awareness and understanding of the clean and dirty zones. Betty was also wearing their radiation monitoring badge and was able to articulate its purpose. Betty supported the patient appropriately, safely and reassured them throughout the procedure.

I am confident that Betty is fully competent in the area and managed themselves in a professional and safe way.

Examples of inadequate feedback

Example 1 - Learner carried out procedure satisfactorily

Example 2 - This PERS has been signed off to satisfactory, well done

Example 3 - Learner Performed well

Top Tips for Effective Feedback

1. Learner feedback.

Feedback must help the Learner to develop their performance in the workplace. Providing feedback means giving Learners an explanation of what they are doing correctly and how, what, where and by when the area(s) of improvement could be made.

It is most productive for learning when provided with an explanation and example as to what is good practice/best practice. Feedback should be specific, descriptive, helpful and soon after the activity that was observed

2. Be sensitive to the individual needs of the Learner.

It is vital that we take into consideration each individual when giving Learner feedback. Some Learners need to be encouraged to achieve at a higher level and other needs to be handled very gently so as not to discourage learning and damage self-esteem. Some may prefer to be coaxed into saying what they felt went well or did not, in the first instance.

3. Learner feedback can be given verbally or in written form.

If the Witness deems the Learner not to be at a satisfactory level, feedback can be given verbally or in a written form. If the performance is satisfactory then the feedback must be in a written form.

Further Resources

www.dummies.com/how-to/content/giving-constructive-feedback.html



Appendix A

PERS 4.4 refers to the simulation shown in video 1 - Unit 4 Section 4: Removable Prosthesis Procedure is an example of a Learners account of the completed procedure and outlines the competency framework expected of the Learner.

Witness Checklist to be used in conjunction with training video 1. Witnesses must ensure they consider each element. If there are specific reasons that some of the elements above within preparation, during procedure, for impression stage, for bite stage, for try in stage, for fit stage and professionalism remain unchecked please include extra information below, as a witness, which would justify any unchecked boxes against the competency requirements.

UNIT 4.4 Removable Prosthesis Procedure

Activity	Competent	Not Yet Competent	Not Applicable
Chairside Support			
Learner greeted patient appropriately			
Learner provided the patient with a bib and safety glasses			
Learner aspirated and retracted soft tissues when appropriate			
Learner followed safe practice procedures throughout			
Learner monitored the patient throughout			
Learner reassured the patient during the treatment			
Learner ensured lab work was made available			
Learner gave after care instructions			
Learner arranged follow up appointment			
Professionalism			
Learner demonstrated professionalism in their duties and effective team working towards the delivery of safe and effective care			



Learner demonstrated effective clinical decision making throughout the task		
Learner managed themselves and the clinical environment in line with current standards and guidelines		
Learner demonstrated knowledge and clinical skills appropriate to the patient's condition		
Learner communicated appropriately, effectively and sensitively with the patient, their relatives or carers and colleagues		
Witness Feedback:		
Witness Registration Number:		
Witness Signature:		



Appendix B

PERS 5.2 refers to the simulation shown in video 2 - Unit 5 Section 2: Local Anaesthetic Procedure is an example of a Learners account of the completed procedure and outlines the competency framework expected of the Learner.

Witness Checklist to be used in conjunction with training video 1. Witnesses must ensure they consider each element. If there are specific reasons that some of the elements above within preparation, during procedure, for impression stage, for bite stage, for try in stage, for fit stage and professionalism remain unchecked please include extra information below, as a witness, which would justify any unchecked boxes against the competency requirements.

UNIT 5.2 - Local Anaesthetic Procedure

Activity	Competent	Not Yet Competent	Not Applicable
Chairside Support			
Learner greeted patient appropriately			
Learner provided the patient with a bib and safety glasses			
Learner aspirated and retracted soft tissues when appropriate			
Learner followed safe practice procedures throughout			
Learner monitored the patient throughout			
Learner reassured the patient during the treatment			
Learner ensured the patient was clean prior to leaving			
Professionalism			
Learner demonstrated professionalism in their duties and effective team working towards the delivery of safe, effective care			
Learner demonstrated effective clinical decision making throughout the task			
Learner managed themselves and the clinical environment in line with current standards and guidelines			



Learner demonstrated knowledge and clinical skills appropriate to the patient's condition		
Learner communicated appropriately, effectively and sensitively with the patient, their relatives or carers and colleagues		
Witness Feedback:		
Witness Registration Number:		
Witness Signature:		