

**NEBDN DENTAL SEDATION  
NURSING: immediate start,  
exam date: March 5th 2027  
(Friday)**



Thank you for expressing an interest in **Dental Sedation Courses**: Conscious Sedation Training course for Dental Nurses assisting with dental sedation, THE NEBDN DENTAL SEDATION NURSING CERTIFICATE

Our course aims to provide the practical and theoretical knowledge and skills needed to competently assist during routine conscious sedation procedures and follows the NEBDN Dental Sedation Nursing Curriculum. Find out more about this on the NEBDN website [here](https://www.nebdn.org/qualifications/post-registration-qualifications/dental-sedation-nursing/)

<https://www.nebdn.org/qualifications/post-registration-qualifications/dental-sedation-nursing/>

**The venue:**

THE COURSE CONTENT, RECORD OF COMPETENCE AND FINAL EXAMS ARE COMPLETED ENTIRELY **ONLINE** AND YOU WILL REQUIRE A WINDOWS OR MAC COMPUTER TO DO THE EXAM AT THE END OF THIS COURSE. THE PRACTICAL ASPECTS WILL BE UNDERTAKEN ALONGSIDE YOUR MENTOR AND WITNESSES AS ARRANGED BY YOURSELF. YOU WILL ALSO NEED A WEBCAM ON THE EXAM DAY SO PLEASE ARRANGE TO HAVE ACCESS TO A COMPUTER WITH A WEBCAM IN PLENTY OF TIME BEFORE THE EXAM DAY.

**Course Dates are as follows.**

Start Date: **ANYTIME UPTO 1ST JULY 2026**

Record of Competence start date: **28 DAYS AFTER ENROLMENT**

Record of Competence due date: **14TH JANUARY 2027**

Mock exam date: **W/C 25th JANUARY 2027 (can be completed anytime this week on-line)**

Written final exam date: **5th MARCH 2027**

**The NEBDN qualifications** are still regarded as the gold standard for a dental nurse to be recognised as the second appropriately trained person assisting in the care of patients receiving dental treatment under conscious sedation.

All NEBDN dental sedation qualifications will require you to achieve a balanced mixture of knowledge and practical skills, as well as demonstrating an appropriate professional attitude. To ensure the dental sedation qualifications reflect the areas of practice the dental nurse works in, they offer the following three options:

- Certificate in Dental Sedation Nursing covers all aspects of conscious sedation, IV as well as IHS
- Award in Inhalation Sedation Dental Nursing
- Award in Intravenous Sedation Dental Nursing

All three qualifications are at the same level. The titles 'Award' and 'Certificate' indicate the difference in the number of learning hours required to complete each qualification.

**A Record of Competence (RoC)** must be completed for all qualifications. It documents your assistance with sedation. The responsibilities in the Record of Competence will reflect your chosen pathway and will require evidence of you working within the type(s) of sedation with which you assist. YOU WILL COMPLETE THE RECORD OF COMPETENCE ONLINE VIA A PLATFORM CALLED PEBBLE-PAD AND WE WILL SEND YOU THE TUTORIAL VIDEOS FOR THIS ONCE YOU HAVE YOUR LOGIN INFORMATION, AFTER ENROLMENT IT CAN TAKE UP TO 28 DAYS FOR NEBDN TO SET UP YOUR RECORD OF COMPETENCE ACCOUNT

There are four sections to the RoC

- Practical Competence Assessment Sheets (PCAS) (SEE BREAKDOWN ON SMA DOCUMENT)
- Case studies (1 per sedation technique, 2200 words each)
- Directly Observed Clinical Skills (DOCS) Assessments
- Supplementary Outcomes

Everything you document in your RoC must be witnessed by a supervising dentist or a sedation qualified dental nurse. In addition to this your supervisor **must give you supportive and reflective comments on your performance of various clinical skills associated with sedation**, D.O.C.S., (Directly Observed Clinical Skills) and PCAS (Practical Competence Assessment Sheets). They will do this via the PebblePad Platform or App.

As a training organisation, Dental Sedation Courses have to sample and moderate (check for accuracy) the Records of Competence at least twice throughout the course but at time it will be more often than this.

Completion of a satisfactory Record of Competence is a requirement for entry to the examination. If the Record of Competence is not completed and witnessed correctly then you will not be eligible for entry to the examination and may have to defer exam entry (see notes below)

**If you work in an environment where you only regularly assist in one type of sedation, we strongly recommend that you should consider the Award qualifications (IV or IHS) rather than the full Certificate**, as our experience has shown that candidates in this situation have difficulty getting the number of suitable cases to consider the full Certificate.

Irrespective of which qualification you are striving for, **the theoretical teaching on the course will cover both forms of sedation. In the exam you will be tested through**

**Multiple Choice Questions and Extended Matching Questions in both IS and IV sedation theory.**

The course and examination therefore is only suitable for candidates engaged in either inhalation and/or intravenous sedation on a regular basis. **We would recommend that you need to do at least a case a week, and because you only have 6-12 months to complete the Record of Competence typically, we would recommend that you speak to your dentist and start booking suitable cases in your appointment books in advance of the start of the course.**

Applicants **MUST** be **registered** with the General Dental Council or Irish Dental Council **at the time of application**, since the Record of Competence can only be obtained with this evidence.

Early application is recommended to give you as much time as possible; the lecture content of the course qualifies for verifiable CPD.

**The course fee is £999 and includes the exam entry fee and course textbook; Applications MUST close on 1st July 2026 for the March 2027 exam entry.**

You will need to email us the following documents as part of your application so please have these ready:

- A copy of your GDC or Irish Dental Council Certificate.
- A completed NEBDN candidate registration form. (CRF form)
- A Copy of your Identification document e.g. passport or driving licence
- A completed SMA form

You will be asked for payment by credit card/debit card or invoice depending on preference.

Please note once accepted on the course, if you defer your entry for your exam there will be a **£100 deferral fee** for NEBDN administrative costs associated with the exam and ROC checking. You have 18 months from when you receive your ROC to complete the course in full including the written examination. If you need to resit the examination there is a resit fee of **£230** and you will have access to all of the online content until the exam is passed. You have 3 attempts in total at the exam if required.

Please sign to confirm that you have read and understood this document.

Student Sign here.....

Print Name..... DATE.....

Kind regards,

Dr Andrew Jones (Course Coordinator)

## **NATIONAL EXAMINING BOARD FOR DENTAL NURSES**

### **NEBDN APPLICATION FORM - POST REGISTRATION QUALIFICATIONS**

Please use this form to register your candidate with us for their target qualification and to provisionally enter them for their target examination date.

**Please use the Notes for Completion at the end of the form to help.**

#### **Section 1: Examination details**

Target qualification

(Please specify either  
Sedation certificate/IV  
sedation award/Inhalation  
sedation award

Target examination  
date:

If you wish to apply for a Reasonable Adjustments during the exam for reasons such as learning difficulty/dyslexia etc please let us know.

**Examination Location:** All examinations are taken online and your centre can give you advice on computer requirements.

#### **Section 2: Candidate details:**

Title (please  
circle)

Mr / Mrs / Miss / Ms / Other (specify)

First name(s)

Surname

Date of Birth

Practice  
Address

Email  
Address

Mobile  
Number

|                                                                                                                                 |  |         |      |
|---------------------------------------------------------------------------------------------------------------------------------|--|---------|------|
| NEBDN No. If known:                                                                                                             |  | GDC No: |      |
| Please then indicate your preferred method of communication from<br>NEBDN:                      Post                      Email |  |         |      |
| Candidate<br>signature                                                                                                          |  |         | Date |

**Section 3: Course Provider details** (to be completed by the course provider)

|                                                                                               |                         |                       |      |
|-----------------------------------------------------------------------------------------------|-------------------------|-----------------------|------|
| Centre<br>number                                                                              | OL07214                 |                       |      |
| Course<br>provider<br>name                                                                    | Dental Sedation Courses |                       |      |
| Contact<br>name                                                                               | Andrew Jones            | Position: Course Lead |      |
| Email: <a href="mailto:info@dentalsedationcourses.co.uk">info@dentalsedationcourses.co.uk</a> |                         |                       |      |
| Signature                                                                                     |                         | GDC No: 211631        | Date |

# Service and Monitoring Agreement

## Purpose

The purpose of the Service and Monitoring Agreement (SMA) is to formalise the roles and responsibilities of all parties involved in the delivery of training and assessment for Dental Nurses working towards the post registration qualifications; Employer, Centre and NEBDN and to ensure that Learners have continued access to a suitable clinical learning environment. It is the Centre's responsibility to ensure effective provision of clinical training is provided by Employers/Clinical Placements.

This SMA sets out the guiding principles necessary for the establishment of an effective training and working environment consistent with health and safety legislation, NEBDN mandated documentation and current GDC guidelines.

## Process

- The SMA must be completed prior to the Centre accepting a Learner onto the training course. Failure of any party to complete and sign the SMA may result in the Learner not being accepted onto the post registration qualification
- Evidence must be seen of the Learner's Dental Nurse Qualification certificate and current GDC registration certificate
- Photographic ID checks must be completed prior to accepting a Learner onto the training course (e.g. passport, photographic driving licence (including provisional licence), Citizen card, Workplace issued identity card)
- If more than one Learner from a practice is undertaking training with the same Centre, one form must be completed for each Learner
- As part of the process, Centres must ensure that they check there are sufficient witnesses to support a Learner to complete each element of the Record of Competence (RoC)
- It is the Centre's responsibility to ensure that witnesses have the appropriate skills, knowledge and training to support the Learner, and that professional registration is checked, validated and recorded by the Learner within the Witness Status List located within the RoC
- Guidance and training tools to support Centres and Witnesses is found at [Witness-Toolkit-v1.0-PDF-2021.pdf \(nebdn.org\)](https://www.nebdn.org/Witness-Toolkit-v1.0-PDF-2021.pdf)
- The Centre and Employer must keep a copy of the completed SMA for their own records. These will be reviewed for each Learner as part of NEBDN's Quality Audit process and could be requested by NEBDN at any point.

## Names of Learners covered under this Agreement:

| Name | Employment Status (employed full time, employed part time, full time student) |
|------|-------------------------------------------------------------------------------|
|      |                                                                               |
|      |                                                                               |
|      |                                                                               |

## Services and Requirements to be provided under this agreement by:

### Employer

..... (Insert Employer/ placement name) is/are committed to providing continual support to the Learner whilst training towards the NEBDN post-registration qualification provided by the Centre and will commit to the following:

- The Employer and/or witness(es) must attend the Centre induction at the beginning of the programme, which will explain the course content, assessment methods and Record of Competence requirements
- Allow the Learner to attend training according to the pre-notified timetable
- Ensure that all Witnesses are registered healthcare professionals with the appropriate qualification in the relevant subject matter and can commit the time needed to support the learner appropriately by observing practice and performance, providing constructive feedback, both verbally and within the witness asset, accordingly. Consideration must be given if the registrant has any conditions in place i.e., would the learner be at risk.
- Ensure that the Learner will receive appropriate workplace training and supervision
- Employers must ensure that quarterly progress reports are compiled and shared with the Centre and Learner which include attendance, development of clinical skills, professionalism, clinical decision making, attitude, communication skills with the dental team and the patients, team working and identification of any concerns or risks that may affect the Learner's ability to complete the qualification, as a minimum
- Ensure all witness assets are signed, ideally at the time of completion, or within 14 days of the date of activity otherwise the asset will be deemed invalid
- Ensure that all patients are made aware that they are being treated by Learners and give consent:
  - Patients must be provided with information about the Learner's and Supervisor's roles, what standards they can expect from Learner dental nurse, what they should do if they wish to provide feedback
  - Ensure that there is a suitable method to clearly identify the Learner to patients and other Dental Care Professionals within the clinical environment
  - Inform the Centre of any Learner Fitness to Practise/Fitness to Practise issues.

The requirements for the Learner to complete the RoC are as follows:

### Sedation Dental Nursing

| Black sections - to be completed all candidates | White sections - to be completed by Inhalation Sedation candidates | Grey sections - to be completed by Intravenous Sedation candidates |
|-------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------|
|-------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------|

|                                              |                                                        |
|----------------------------------------------|--------------------------------------------------------|
| Practical Competence Assessment Sheets       | <b>10 of:</b><br>Inhalation Sedation                   |
|                                              | <b>20 of:</b><br>Intravenous Sedation - procedure      |
|                                              | <b>5 of:</b><br>Intravenous Sedation - Recovery        |
| Case Studies                                 | <b>1 required of:</b><br>Inhalation Sedation Procedure |
|                                              | <b>1 required of:</b><br>Intravenous Sedation          |
| Directly Observed Clinical Skills Assessment | <b>5 of each:</b>                                      |
|                                              | Automatic blood Pressure                               |
|                                              | Pulse Oximeter                                         |
|                                              | Patient Instructions - IH Sedation                     |
|                                              | Patient Instructions - IV Sedation                     |
|                                              | IH Sedation - machine checks                           |
|                                              | Prepare IV equipment                                   |
|                                              | Drawing up Drugs                                       |
|                                              | Assist during cannulation                              |
|                                              | Removal of cannula                                     |
|                                              | Clear IV equipment                                     |
|                                              | IH machine shutdown and clean                          |
|                                              | Medical emergency scenario (3 required)                |

### Supplementary Outcomes

- Life Support Skills certificate(s)
- List of equipment
- List of emergency drugs
- National guidance
- Ethical dilemma
- Audit and Patient satisfaction
- Advantages and Disadvantages
- Anxiety management options
- Reflective practice
- CPD record and Personal Development Plan

### Post Registration Dental Sedation Nursing

The Centre must ensure that they have indicated the correct qualification on the CRM (TheHub) that the learner is completing i.e.:

- Certificate in Dental Sedation Nursing
- Award in Inhalation Sedation Dental Nursing
- Award in Intravenous Sedation Dental Nursing

**Once the Learner has been registered with NEBDN, changes cannot be made except for a learner who wishes to upgrade from an Award to a full Certificate on successful completion of the NEBDN Dental Sedation Nursing examination.**

By signing this SMA you are permitting the Centre to monitor the Employer/clinical placement induction to ensure Learners have access to a suitable clinical learning environment for the respective qualification, and that all requirements detailed above will be met.

**Employer Details:**

|                                                                                   |
|-----------------------------------------------------------------------------------|
| Practice Address:                                                                 |
| Type of Practice e.g. GDP, Private, Hospital or Specialist (please give details): |
| Named Contact:                                                                    |
| Named Contact phone number:                                                       |
| Learner Mentor name:                                                              |
| Learner Mentor GDC No:                                                            |
| Witness(es) Name(s):                                                              |
| Witness(es) GDC Registration Number(s):                                           |
| Employer name:                                                                    |
| Employer GDC Registration No.:                                                    |
| Employer Email address:                                                           |
| Signed:                                                                           |
| Date:                                                                             |

## Centre

All Centres are required to go through an approval process with the NEBDN to ensure their qualification delivery meets the NEBDN Standards for Accreditation. Centres must ensure all Employers and Learners are made aware of the qualification requirements, and that if full accreditation status is not met, Learners will be unable to sit the final examination.

**...DENTAL SEDATION COURSES.....**is committed to providing education, training and support to the Learner for as long as training towards the post-registration course is being provided on behalf of the Employer and will ensure compliance with the NEBDN Standards for Accreditation.

It is the Centre's responsibility to ensure that information relating to all witnesses must be documented, verified and monitored by the Centre.

The Centre must validate each witness email address to ensure authenticity.

The Internal Verifier must check each Witness against the relevant register and confirm that they are current registrants, at each verification session, in accordance with the NEBDN Toolkit to Support Centres with the RoE/RoC.

As part of the final process for the RoC sign off, the Internal Verifier must complete the checks on the RoE to ensure that it has satisfactorily met all NEBDN requirements and record this check on the Witness Status List.

**All witnesses must be made aware that their registration is at risk if they knowingly make false declarations within the RoC.**

Centres must ensure that quarterly progress reports are compiled and shared with the Employer and Learner. The report must include detail on attendance, theoretical progress, assessment results, attitude, communication skills, identification of any concerns or risks that may affect the Learner's ability to complete the qualification and RoC progress, as a minimum.

|                                                                                                              |
|--------------------------------------------------------------------------------------------------------------|
| Centre Named representative: ANDREW JONES                                                                    |
| Centre Name: DENTAL SEDATION COURSES                                                                         |
| Centre Address: 3 STATION COURT, PORTSTEWART, COUNTY LONDONDERRY, BT55 7UB                                   |
| Centre Contact Telephone Number: 07932313858                                                                 |
| Centre Email Address: <a href="mailto:info@dentalsedationcourses.co.uk">info@dentalsedationcourses.co.uk</a> |
| Date of when Employer/Clinical Placement Induction documentation seen:                                       |
| Date of when Proposed Witness(es) checks completed by Centre:                                                |

Signed:

Date:

### Centre Risk Monitoring:

A named person within the Centre must complete a check of the most recent CQC inspection and highlight any concerns below before enrolling the Learner onto the course.

|                                                            |                              |                             |
|------------------------------------------------------------|------------------------------|-----------------------------|
| CQC certificate number and date of verification:           |                              |                             |
| Any risk (s) identified:                                   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, please give details:                               |                              |                             |
| Actions Agreed, including timescales:                      |                              |                             |
| Name of the Centre Representative completing these checks: |                              |                             |
| GDC Registration No:                                       |                              |                             |
| Date completed:                                            |                              |                             |
| Signature:                                                 |                              |                             |

## **General Terms and Conditions:**

### **Centre**

Should any issue arise in relation to the quality, amount and type of support being offered by the Employer, attempts should be made to resolve them directly with the Employer. If there is no resolution, or if the Centre has serious concerns and/or a risk has been identified, NEBDN must be informed.

### **Employer**

Should any issue arise regarding the quality of the education being offered by the Centre, attempts should be made to resolve them directly with the Centre in the first instance, following the Centre's documented complaints procedure. Only then if the issue is not resolved can the employer contact NEBDN.