

Dental nurse education and training review

Table of contents

Executive summary	3
Why we reviewed dental nurse training	3
What we examined and how we did it	4
Quality assurance of dental nurse education and training	5
What we found: Inconsistencies in training and support	6
Disparity in student experience	6
Education and training	6
Assessment	7
Role within the dental team	8
Professionalism	9
Recruitment and retention	10
Impact of the revised Standards for Education	10
What we can do as a regulator	10
Quality assurance	11
Engagement	11
What we need others to do	11
What this means for the future of dental nurse education and training	12
Conclusion	12

Executive summary

This report presents the findings of a review into dental nurse education and training across the UK. The review draws on a wide range of evidence, including Education Quality Assurance (EQA) inspection data, internal and external research and stakeholder engagement conducted between 2023 and 2025.

Overall, the findings indicate that the current system continues to produce safe and competent practitioners. EQA data shows that the majority of standards are being met.¹

Differences in scope of practice, autonomy, and the nature of concerns that typically lead to interim orders mean that dental nurses are not necessarily expected to be represented proportionally to their numbers on the register.

The system is not broken but challenges and inconsistencies do remain. The review identified significant variation in student experience, inconsistencies in assessment practices, and concerns relating to professionalism and workforce retention. Professionalism issues remain the most common cause of Fitness to Practise (FtP) proceedings for dental nurses.²

The review concludes that while the system is functioning, it is not consistently delivering the same quality of experience for all trainees. This report makes recommendations for improvements, though many of the challenges identified lie outside the direct remit of the General Dental Council (GDC) and we support coordinated action across the sector.

Why we reviewed dental nurse training

The GDC has a statutory duty to promote high standards of education. Ensuring that pre-registration training is delivered in a way which ensures that people admitted to the dental registers are suitably qualified is an essential part of the GDC's role. One of the GDC's current five strategic objectives is to maintain high standards for registration and register those who meet them in a timely and effective way.

The GDC supports high standards of education by setting learning outcomes through:

- The Safe Practitioner - which sets the learning outcomes and behaviours required of students and trainees to meet the requirements for registration.
- The Standards for Education – which set requirements for education providers and assessment providers which ensure that training is delivered to an appropriate standard.

For most dental professional groups, the GDC directly quality assures education providers and assesses courses individually against the Standards for Education. Dental nurse training operates very differently and the GDC's approach to quality assurance reflects that difference. Dental nurse

¹ The GDC published 11 inspection reports for qualifications that led to registration as a dental nurse between 2021 and 2025. Of the possible 221 requirements, 160 were assessed at inspection: 3% were "Not Met", 31% were "Partly Met", and 66% were "Met"

² 23% of cases between 2018 and 2023 relating to "behaviour not justifying public trust in the registrant or profession" and 14% relating to "driving under the influence of alcohol".

education is characterised by multiple training routes, workplace-based learning, and a large number of dispersed training sites. There are over 110 provider delivery sites across the UK and more than 50 organisations offering apprenticeships. Approximately 9,600 dental nurse students are currently in training. For dental nurse training, the GDC's primary focus is on the quality assurance of assessment providers, who in turn are required to oversee the quality of training provision for the students they are to assess.

This approach means that the GDC has less direct visibility of the experience of trainee dental nurses and of the quality of their training than it does for the other dental professional groups. Over time, we have received anecdotal concerns and informal feedback from stakeholders about dental nurse education and training. These concerns have focused on variation in the quality and consistency of education, differences in student experience, and issues relating to professionalism and scope of practice as well as workforce challenges.

In 2023, the GDC committed to undertaking a review to better understand these concerns and identify opportunities for improvement. The review also responds to the need to “work collaboratively to speak up on, influence, and address issues that affect patients and the public,” including through research and evidence gathering. The aim was to evaluate dental nurse education, engage with stakeholders, and support improvements in quality assurance and delivery.

What we examined and how we did it

The review was conducted between 2023 and 2025 using a multi-method approach. It included analysis of internal and external data, stakeholder engagement, and cross-organisational collaboration within the GDC.

Internal research included inspection outcomes for dental nurse programmes over the preceding five years, FtP data, and registration data relating to both new registrants and those leaving the profession. Key internal reports included [Unlocking the potential of GDC Fitness to Practise Data \(2023\)](#) and [Experiences of GDC fitness to practise participants 2015–2021: A realist study](#).

External research included [Evaluating Enhanced Continuing Professional Development – Cardiff University, 2023](#), [Dental Nurse UK Retention Survey – British Association of Dental Nurses, 2023](#), [How does access to NHS dentistry compare across areas in England? – House of Commons Library, 2025](#), and [Dental Workforce Statistics – NHS England, 2024](#).

Surveys were distributed to awarding organisations, education providers, and students, with 58 responses received over a four-week period. Engagement activities included an August 2024 workshop with Education Associates and an October 2024 stakeholder workshop involving awarding organisations, providers, and professional bodies. A further round of student engagement sessions took place in January 2025, although participation was limited.

In addition, the review drew on the GDC's [Fitness to Practise Statistical Report 2025](#) and [Registration Statistical Report 2025](#) and other GDC publications, including:

- [Safe Practitioner \(2023\)](#)
- [Standards for Education \(2025\)](#)
- [Scope of Practice \(2025\)](#)
- [Employing Trainees \(2025\)](#)
- [Trusted and Effective: A strategy for dental regulation 2026-2028](#)

The review also involved collaboration across multiple GDC teams, including Education Quality Assurance, Policy, Research, Communications, Registration, and Fitness to Practise. Anecdotal evidence was included alongside formal data to provide a comprehensive picture of stakeholder experiences.

Six themes were identified through our research and are broken down in this report.

Quality assurance of dental nurse education and training

The distinctive model of dental nurse education means that an awarding organisation designs, develops, and ultimately awards the qualification, but the programme is taught and assessed by delivery centres or providers. This model can create distance between the regulator and delivery sites, making oversight more complex. While this structure provides flexibility and accessibility, it also creates a risk of variability in training quality. The GDC's QA process relies on robust quality management of dental nursing education and training overseen and managed by the awarding organisations. In this way they differ to the other education providers that the GDC assures. For a number of years, the GDC's EQA team has sought to build stronger working relations with awarding organisations to support this. This continued close engagement is important for further improvements.

A balanced approach to quality assurance is required, ensuring that standards are maintained without placing disproportionate burden on awarding organisations.

While our current approach provides a structured framework for assuring dental nurse programmes, recent inspections suggest that it may not always be sufficient to identify risks inherent in work-based delivery models. Limited opportunities for direct learner engagement, reduced visibility of day-to-day supervision, and variable understanding of regulatory expectations among awarding organisations prompt the question of whether our existing methods consistently generate the depth of assurance required for a registrable qualification.

We are confident from recent inspection and monitoring data that the current approach does not put patient safety at risk. But the question remains as to whether it strikes the right balance between the need for regulatory rigour and consistency and the need to ensure that regulation is no more burdensome than it needs to be. Some of the factors which need to be considered in striking that balance are explored in the following sections of this review.

In the longer term, it may be appropriate to explore more radical changes to our approach to the quality assurance of dental nurse education, including considering whether there should be more direct oversight of training providers, as is the case for other dental professional groups.

More radically still, the increasing professionalisation of dental nursing over time may lead to there being less reliance on workplace-based training and an increase in more structured learning to bring dental nurse education more into line with the other dental professional groups.

These issues are beyond the scope of this review, which is focused on more immediate incremental changes.

What we found: Inconsistencies in training and support

The review identified six key themes.

Disparity in student experience

There are multiple routes to registration as a dental nurse, including apprenticeships, diplomas, and higher education qualifications. Many programmes are delivered primarily in the workplace, where the quality of supervision, learning culture, and access to peer support can vary widely. This creates significant variation in the day-to-day experience of trainees, even where programmes meet the GDC's learning outcomes.

EQA inspection data indicates that programmes generally meet the required standards. Between 2021 and 2025, the GDC published 11 inspection reports for qualifications leading to registration as a dental nurse, assessing 160 requirements. Of these, 3% were "Not Met", 31% "Partly Met", and 66% "Met". This suggests that despite variation in experience, programmes are producing safe practitioners.

However, inspection data also highlights recurring concerns in areas such as internal and external quality assurance, feedback processes, and the robustness of assessment governance. These issues appear to stem from the administrative distance between awarding organisations and delivery centres, and from the inherent challenges of assuring work-based learning.

Dental nurse learners are also more remote from the quality assurance process than other dental professional groups. Work-based delivery limits opportunities for direct observation of learners' practice and reduces the regulator's ability to triangulate evidence through student interviews, clinical observation, and peer comparison. This structural distance increases the importance of strong oversight by awarding organisations and consistent supervision in practice settings.

Stakeholders also reported that dental nurses often experience lower status within the dental team, which can affect their confidence, access to support, and willingness to raise concerns. Contributing factors include the lower qualification level relative to other registrant groups, limited career progression, gendered workforce dynamics, and the junior position many trainees occupy when entering the profession. These factors can heighten vulnerability and reduce the informal support networks that typically help early-career professionals develop safe practice.

Education and training

Dental nurse training relies heavily on workplace-based learning, which can create tension between service delivery and educational needs. Stakeholders reported that some practices are

reluctant to release staff for mentor training or protected learning time, affecting the quality of supervision.

Inspection data shows that supervision requirements are generally met, with only two “Partly Met” outcomes for Requirement 5 (supervisor qualifications and training) between 2021 and 2023. However, concerns about feedback are more pronounced: five of seven programmes “Partly Met” Requirement 17 and two “Partly Met” Requirement 18, both relating to the quality and timeliness of feedback.

Remote learning, increasingly used since the Covid-19 pandemic, offers flexibility but also raises concerns about engagement, assessment quality, and reduced opportunities for hands-on experience. The growing use of artificial intelligence in education presents similar opportunities and risks.

Stakeholders also raised concerns about the two-year period during which trainees can work before enrolling in formal training. From 1 June 2026, all new trainee dental nurses must start a recognised training programme within 12 months of beginning work. This change is intended to strengthen professionalism, improve early learning, and reduce risks associated with prolonged unstructured practice.³

Protected learning time is another area of concern. Although apprenticeship guidance suggests an average of six hours per week (approximately 20% of working time) should be allocated to off-the-job training, stakeholders reported that this is not always achieved in practice.

Student wellbeing is inconsistently supported. While larger organisations may offer structured support, smaller practices often lack formal systems, and access to support frequently depends on students initiating contact.

Assessment

Assessment practices rely heavily on workplace-based evaluation, which can introduce inconsistency and potential bias. Placement staff often sign off competences, blurring the line between employment and educational responsibilities. The GDC’s updated policy on employing trainees provides clearer expectations, but implementation remains variable.

Recruitment of assessors is challenging due to workload and pay constraints. Nevertheless, inspection data suggests that assessor standards are largely met: six of seven providers met the relevant requirement between 2021 and 2023, with one “Partly Met”.

Requirement 12 (patient feedback) was “Not Met” once and “Partly Met” once across seven inspections, indicating inconsistent approaches to securing patient input. This challenge is not unique to dental nursing and is seen across other dental professional groups.

A further concern relates to the prioritisation of dental nursing within awarding organisations offering a broad suite of qualifications. Inspections have highlighted inconsistent understanding of the regulatory implications of awarding a qualification that leads directly to GDC registration. Issues

³ [Trainee dental nurses to start formal training sooner under new GDC requirements](#)

include the independence and role of external examiners and the level of oversight appropriate for patient-safety-critical training. Despite additional meetings with awarding organisations to clarify expectations, recurring issues suggest that further work is needed to embed regulatory requirements consistently.

There is also no formal limit on resit attempts. Requirement 21 requires that assessment be fair and based on clear criteria, but responsibility for defining resit policies lies with providers. Setting a fixed resit limit would pull the GDC into operational design of assessment which would be outside of our regulatory role. It also allows for a focus on competence rather than attempts, but there may also be a financial impact on dental nurse students and trainees.

Our inspections indicate that, within some awarding organisations offering a broad suite of qualifications, dental nursing does not receive the level of prioritisation required for a registrable profession. This has become apparent through inspection activity, with several conversations taking place with awarding organisations around the requirement of an external examiner, and what this looks like in practice. The gravity and regulatory implications of awarding a qualification that leads directly to GDC registration have not always appeared to be fully recognised, and this is reflected in the robustness of their quality assurance arrangements. The requirements of the standards of education including the role and independence of external examiners and the level of oversight appropriate for patient-safety-critical training are not consistently met. This creates avoidable risks for learners, centres, and ultimately for patient safety.

Recent inspections have required us to convene additional meetings with awarding organisations' teaching and quality leads to clarify regulatory expectations and illustrate what these look like in practice. Despite these discussions, the same issues have continued to arise, indicating that the expectations associated with delivering a registrable qualification are not yet fully understood or embedded within organisational processes. Further work is therefore needed to ensure that requirements are consistently met.

Role within the dental team

Stakeholders reported that dental nurses are sometimes perceived as having lower status within the dental team, which can affect workplace dynamics and contribute to feelings of being undervalued. Concerns have also been raised about dental nurses being pressured to work outside their scope of practice. There is some evidence of this in FtP data, with a small number of cases related to working outside scope and to working outside training or competence, but that data provides only a very limited indication of the extent of out of scope working. It is likely that there is very significant underreporting, as the structure of dental nurse employment means that:

- breaches may be less visible to supervisors
- concerns may be less likely to be escalated
- those aware of breaches may have limited incentive to raise them.

Professionalism

Professionalism was a key area of concern among our dental nurse stakeholders. FtP data shows that the most common issues relate to behaviour rather than clinical competence. Between 2018 and 2023, 23% of cases involved behaviour not justifying public trust, and 14% involved driving under the influence. However, FtP data cannot be taken at face value when comparing registrant groups. Dental nurses' workplace structures mean that breaches may be less visible to supervisors, and concerns may be less likely to be escalated. Therefore, FtP data should not be interpreted as evidence of low prevalence of out-of-scope working, but rather as limited visibility of such concerns.

Research by SQW (2024) found that 90% of dental nurse respondents had a positive or neutral view of the GDC, compared to 48% of dentists. However, only 6% of early career dental professionals reported attending a GDC student engagement session, suggesting limited engagement. Improving engagement with the GDC will promote professionalism among both dental nurse trainees and students and registration.

Stakeholders consistently raised professionalism as a key concern. Given that only a small proportion of trainee dental nurses have direct exposure to the GDC during training, reliance on engagement sessions alone is insufficient. A broader, system-wide approach is required. This includes:

- clearer expectations for employers about their role in modelling and reinforcing professional behaviours
- strengthened induction processes that embed professionalism from the outset
- consistent supervision and structured feedback mechanisms
- improved support for learners in workplace settings
- closer collaboration with awarding organisations and providers to ensure that professionalism is explicitly taught, assessed, and reinforced.

Professionalism must be understood as a shared responsibility across the sector. The GDC will continue to support this through its standards, engagement activity, and quality assurance processes, but meaningful improvement will depend on coordinated action across employers, providers, awarding organisations, and professional bodies.

In June 2026, the GDC launched a consultation on introducing a new Framework for Professionalism, which is designed to be more effective in supporting dental professionals to maintain professional standards. The new framework will include supporting materials in a range of formats designed to be more engaging and to be directly relevant to issues dental professionals come across in practice. It is likely to be of particular benefit to dental nurses, given the more diffuse nature of their training in professionalism, compared with the other dental professional groups.

Recruitment and retention

The review identified multiple factors influencing recruitment, including early exposure to dentistry, the practical nature of the role, apprenticeship opportunities, and job security.

However, retention remains a significant challenge. The Dental Nurse UK Retention Survey (British Association of Dental Nurses, 2023) identified key reasons for leaving, including low pay, limited career progression, childcare responsibilities, lack of part-time opportunities, and lack of recognition.

Workforce planning often overlooks dental nurses, despite their essential role. This is particularly significant given the reliance of dentists on dental nurses and the need for workforce expansion.

The GDC has revised and published updated policy guidance on [employing trainees](#), which addresses some of the issues identified and gives clear guidance regarding those who are in training, the specific responsibilities and day-to-day practice of their employers.

Impact of the revised Standards for Education

The revised Standards for Education, published in September 2025, strengthen expectations around supervision, professionalism, and student support. New requirements include explicit expectations for supporting student and staff wellbeing throughout the training journey. As well as the requirements we revised the structure of the standards to ensure that they can be effectively and clearly utilised to quality assure awarding organisations. They will be implemented across education providers and awarding organisations from the 2026/7 academic year.

The transition to the Safe Practitioner Framework, published in November 2023, places greater emphasis on teamwork, communication, and professional behaviours. We continue to work closely with education providers and awarding organisations to embed these.

The effectiveness of these reforms will be monitored and be reported through the GDC's review of education that is published on an annual basis.

What we can do as a regulator

The GDC is responsible for setting the standards for dental education and training and assuring that programmes leading to registration meet those standards. The findings of this review show that while the system produces safe practitioners, the consistency of training, the quality of workplace learning, and the professionalism environment experienced by trainees vary significantly. Our regulatory approach must therefore respond to the specific risks inherent in work-based training and the structural vulnerabilities identified throughout this review.

We will strengthen our EQA activity by focusing more explicitly on the areas where variation is most likely to affect patient safety and learner experience. This includes assessment governance, placement quality, supervision, and the embedding of professional behaviours. We will also analyse variation across programmes to help drive up consistency and support awarding organisations and providers to meet the Standards for Education.

Additionally, we will review our current quality assurance approach and take steps that would enable the GDC to gather improved oversight and assurance of the quality of training that is being delivered:

Quality assurance

- Adjust inspection methods to reflect the specific risks of work based dental nurse training.
- Strengthen guidance on centre oversight, assessment governance, and external examining.
- Build in structured mechanisms for direct learner engagement and evidence review.
- Broaden the evidence base through supervisor interviews, assessment sampling, and progression data.
- We will continue to monitor the impact of remote learning and artificial intelligence, as well as to review policies such as the timing of enrolment in training programmes. Identify clearer triggers for enhanced monitoring or follow-up where issues recur.

Engagement

- Create a cross-sector working group, that brings together awarding organisations, employers, and professional bodies to identify and address systemic issues.
- Work with awarding organisations and support them to fully understand the regulatory requirements and how this translates into their qualification management.
- We will continue to engage with key stakeholders, including students, aiming to explore how we can leverage relationships to engage with as many future new registrants as possible.

What we need others to do

We want to continue to work together to make a concerted effort to improve the consistency of dental nurse education and training and see this as a key area of focus going forward. We are keen to support and facilitate this coordination across and between stakeholders.

Responsibility for quality of training and its assessment rests firmly with awarding organisations and providers. They need to strengthen placement oversight and ensure consistent supervision and feedback. They must also ensure that employers provide protected learning time and support high-quality mentorship. Awarding organisations and providers will have to demonstrate that they are ensuring that learners are receiving this protected time as part of the monitoring and inspection process. We will work with dental nurse education and delivery stakeholders, through our quality assurance framework, to ensure they continue to meet the requirements of the Standards for Education. Professional bodies should promote professional identity and career development.

In terms of learner wellbeing and support, awarding organisations and providers must demonstrate evidence of how this is built into their work placement agreements and regularly reviewed and checked to ensure that learner wellbeing is being given appropriate attention and value by training centres.

But it is also important to look beyond these specific measures. Pre-registration training is critically important, but the broader issues affecting dental nurses as a professional group also need to be recognised and addressed. It is for the dental sector as a whole to address systemic issues such as workforce shortages, pay, and retention.

What this means for the future of dental nurse education and training

The current education and training system does produce safe and competent dental nurses. It is not broken but it is inconsistent and challenges remain. We want to support the quality of education and training delivered to trainees and ensure that individuals joining the register meet our requirements and are safe to care and treat patients. Key risks include variation in student experience, inconsistencies in assessment, professionalism concerns, and workforce challenges.

With targeted improvements and collaboration, dental nurse education can become more consistent, better supported, and more sustainable and we are keen to work closely with stakeholders to develop this.

Conclusion

Dental nurse education and training continue to produce safe and competent practitioners, but the evidence gathered through this review shows that the system is at risk of not delivering a consistently high-quality experience for all learners. Variation in training quality, inconsistencies in assessment, and the particular vulnerabilities associated with predominantly work-based delivery mean that the current model requires targeted improvement.

These challenges do not indicate a system in crisis, but they do highlight areas where the sector must work together to strengthen oversight, support learners more effectively, and ensure that the expectations attached to a registrable qualification are fully understood and embedded. The revised Standards for Education and the Safe Practitioner Framework provide a strong foundation, but their impact will depend on how well they are implemented and monitored.

As a regulator, we are committed to refining our approach so that it remains proportionate, risk based and responsive to the realities of dental nurse training. We will continue to build constructive relationships with awarding organisations, support providers to meet regulatory expectations, and ensure that our quality assurance activity focuses on the areas of greatest impact on patient safety and learner experience.

With coordinated action across the sector, from awarding organisations, employers, professional bodies and educators, dental nurse education can become more consistent, better supported and more sustainable. The GDC stands ready to play its part in driving this improvement, ensuring that dental nurses enter the profession with the skills, confidence and professional identity needed to deliver high-quality care for patients. Our approach will be cross functional and in collaboration with our stakeholders, with a focus on increasing engagement with learners.

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