

1. [Performers List Validation by Experience \(PLVE\)](#)

2. [Reflections](#)

3. Edit

Reflections [Click to toggle additional information]

What should I record?



Use this reflection to record your learning experiences, thoughts, feelings and reflections as an analytical assessment of your progression. The events you record can be situations where things went well, or situations where things have gone not as you would have wished (e.g. critical events). Anonymise all details.

Describe the event or situation clearly (including surrounding circumstances), the outcome, and its context to your knowledge and general practice. Describe changes to improve or extend your performance. If you've identified a training need, add this too.

Discuss this with your Validation Supervisor who will guide you to develop your reflective skills and help you understand better your learning needs and performance.

How many and when?

You must complete at least 8 reflections during your first eight weeks as this is when your learning needs are likely to be greatest. From then on you must complete at least one reflection each month. You are required to have completed a minimum of eleven by the end of Month 5 and fifteen by the end of Month 9.

Workflow	VED VS TPD Send Forward
Reasons for writing the reflection <i>What were the most important things that happened/did not happen?</i> <i>Did anything go differently than expected?</i> <i>What have you learnt about yourself, knowledge or skills?</i>	
Next Steps: <i>How has this changed your perspective?</i> <i>How will you apply what you have learnt?</i> <i>What learning could you share with colleagues?</i>	

Please select the evidence this provides for areas within the Professionalism, Management and Leadership Domains. This information will carry through to the PMLD item on your dashboard.

Professionalism	
<input type="checkbox"/>	Appraisal
<input type="checkbox"/>	Clinical audit and peer review
<input type="checkbox"/>	Confidentiality
<input type="checkbox"/>	Ethical behaviour
<input type="checkbox"/>	Critical evaluation
<input type="checkbox"/>	Decision making
<input type="checkbox"/>	GDC Scope of Practice
<input type="checkbox"/>	Whistleblowing
<input type="checkbox"/>	Management of difficult patients
<input type="checkbox"/>	Patient safety
<input type="checkbox"/>	Self-awareness
Professionalism and Management	
<input type="checkbox"/>	Basic Life Support training
<input type="checkbox"/>	Consent
<input type="checkbox"/>	Equality & Diversity
<input type="checkbox"/>	GDC Standards
<input type="checkbox"/>	NHS complaints procedure
<input type="checkbox"/>	Referring patients
Management	
<input type="checkbox"/>	COSHH regulations
<input type="checkbox"/>	Dental equipment selection, care and maintenance
<input type="checkbox"/>	Data Protection
<input type="checkbox"/>	Employment contracts/associate agreements for dentists
<input type="checkbox"/>	Employment Law basics
<input type="checkbox"/>	Finance
<input type="checkbox"/>	Health & Safety requirements in dentistry

<input type="checkbox"/>	Infection control procedures
<input type="checkbox"/>	NHS prescribing
<input type="checkbox"/>	NHS Rules & Regulations in Dentistry
<input type="checkbox"/>	Prescribing, directing, taking, processing and interpreting radiographs
<input type="checkbox"/>	Range and scope of NHS dental care
<input type="checkbox"/>	Record keeping
<input type="checkbox"/>	Use of emergency drugs
<input type="checkbox"/>	Information Governance
<input type="checkbox"/>	Safeguarding Children and Adults

Leadership

<input type="checkbox"/>	Facilitating learning in others
<input type="checkbox"/>	Quality management and improvement
<input type="checkbox"/>	Role model
<input type="checkbox"/>	Teamwork

Please identify the Clinical Category(ies) that this covers

Clinical Categories

<input type="checkbox"/>	1. Examination of Adults
<input type="checkbox"/>	2. Examination of Children
<input type="checkbox"/>	3. Radiography
<input type="checkbox"/>	4. Diagnosis and treatment of caries
<input type="checkbox"/>	5. Diagnosis and treatment of periodontal disease
<input type="checkbox"/>	6. Diagnosis and treatment of Tooth Surface loss
<input type="checkbox"/>	7. Exodontia
<input type="checkbox"/>	8. Endodontics
<input type="checkbox"/>	9. Indirect restorations
<input type="checkbox"/>	10. Replacement of missing teeth
<input type="checkbox"/>	11. Dental Emergencies
<input type="checkbox"/>	12. Diagnosis and treatment of oral pathology

VS comments	
TPD comments	

[Click here to save your changes \(DRAFT\)](#)

Learning / Development Needs

No existing Learning / Development Needs found, you can add one using the 'Add Learning / Development Needs' button.

[Add Learning / Development Needs](#)