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# DENTAL CLINIC/DEPARTMENT STAFF ROLES AND SCOPE-OF-RESPONSIBILITY POLICY

**POLICY ON ROLES, RESPONSIBILITIES AND SCOPE OF STAFF IN DENTAL CLINICS AND DENTAL DEPARTMENTS IN KENYA**

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**Policy Owner:** Kenya Dental Association,
**Approved By:** Kenya Dental Association

This policy is designed for adoption by a dental clinic, hospital dental department, county facility, teaching institution, or professional association. It distinguishes clinical accountability from supportive, preventive, laboratory, and administrative functions.

The framework should be read together with the applicable Kenyan legislation, Kenya Medical Practitioners and Dentists Council (KMPDC) licensing requirements, recognised specialist requirements, facility licensing standards, and the current scopes of practice.

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## 1. POLICY STATEMENT

A dental clinic or dental department shall operate through a clearly defined multidisciplinary team in which every employee and professional performs duties consistent with their **education, training, registration, licensure, competence and lawful scope of practice**.

The principal objective of this policy is to:

1. protect patients from unqualified or unauthorised practice;
2. ensure that patients receive care from appropriately qualified professionals;
3. establish clear lines of clinical responsibility and accountability;
4. prevent inappropriate delegation of clinical duties;

5. distinguish the roles of Dentists, Dental Specialists, Dental Assistants, Dental Nurses, Community Oral Health Officers and Dental Technicians;
6. establish appropriate referral and escalation arrangements; and
7. support safe, ethical and efficient delivery of dental services.

KMPDC directs that scopes of practice identify the procedures, actions and processes that the respective cadres are lawfully permitted to undertake, and that proper documentation and safe continuity of patient care are general professional expectations.

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**2. LEGAL AND REGULATORY BASIS**

This policy shall be implemented subject to the Constitution of Kenya and applicable legislation, regulations, professional standards and regulatory directions, including:

- Medical Practitioners and Dentists Act, Cap. 253;
- Health Act, 2017;
- applicable KMPDC regulations and guidelines;
- KMPDC scopes of practice;
- KMPDC recognised specialties and subspecialties;
- facility registration and licensing requirements;
- applicable employment and occupational health and safety legislation;
- applicable data protection and patient confidentiality requirements; and
- any other applicable Kenyan law.

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**3. GUIDING PRINCIPLES**

Every dental facility shall apply the following principles:

**3.1 Patient-first principle**

Patient safety, dignity, informed decision-making, confidentiality and continuity of care shall take priority.

**3.2 Competence principle**

No employee shall undertake a clinical procedure merely because they have been instructed to do so. The individual must have the appropriate training, competence, registration/licensure where required, and authority to perform the activity.

**3.3 Professional accountability**

Delegation does not automatically transfer ultimate professional accountability from the person responsible for the patient's clinical care.

**3.4 Scope-of-practice principle**

Each cadre shall operate within its lawful and professionally recognised scope.

**3.5 Referral principle**

Where a patient's condition exceeds the competence, resources or scope of the attending practitioner, the patient shall be appropriately referred.

**3.6 Teamwork principle**

Different cadres shall work collaboratively while maintaining clearly defined professional boundaries.

**3.7 Documentation principle**

Clinical assessment, diagnosis, treatment, consent, referrals, procedures, laboratory instructions and follow-up shall be appropriately documented.

**4. STAFF CATEGORIES**

A dental clinic or department may include:

1. Dental Specialist;
2. General Dentist/Dental Practitioner;
3. Dental Intern/Registrar where applicable;
4. Community Oral Health Officer;
5. Dental Nurse;
6. Dental Assistant;
7. Dental Technician/Dental Technologist;
8. Dental Reception/Records Staff;
9. Clinic/Facility Manager;
10. other support personnel.

This policy shall focus particularly on the following six professional/clinical categories -Dental Specialist, General Dentist, Community Oral Health Officer, Dental Nurse, Dental Assistant and Dental Technician/Dental Technologist

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**5. DENTAL SPECIALIST**

**5.1 Definition**

A Dental Specialist is a dentist who has obtained an approved postgraduate qualification and has been recognised by the appropriate regulatory authority as a specialist in the relevant dental specialty.

KMPDC states that it may recognise dental practitioners as specialists in recognised specialties and subspecialties where the practitioner meets the applicable requirements.

**5.2 Principal role**

The Dental Specialist shall provide advanced clinical care within the specialist's recognised field and shall contribute to diagnosis, treatment planning, specialist intervention, supervision, consultation, referral and professional development.

**5.3 Responsibilities**

A specialist may:

- undertake specialist assessment;
- diagnose conditions within the specialist field;
- develop complex treatment plans;
- perform specialist procedures within the recognised specialty;
- manage complicated cases;
- provide specialist consultation to general dentists;
- receive referrals from general dentists and other authorised health professionals;
- determine when multidisciplinary care is required;
- participate in hospital and multidisciplinary teams;
- supervise appropriately delegated specialist activities;
- provide specialist opinion;
- participate in teaching and mentorship;
- participate in clinical audit and quality improvement;
- contribute to development of clinical protocols; and
- refer cases beyond the specialist's competence or available resources.

### 5.4 Specialist accountability

A specialist remains professionally accountable for specialist clinical decisions and procedures undertaken personally or appropriately delegated under their supervision.

A specialist shall not represent themselves as practising in a specialty or subspecialty unless appropriately recognised under the applicable regulatory framework.

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## 6. GENERAL DENTIST / DENTAL PRACTITIONER

### 6.1 Principal role

The General Dentist is the **primary clinical dental practitioner** responsible for the assessment, diagnosis, treatment planning and management of patients requiring general dental care, subject to the practitioner's competence, resources and lawful scope.

The Medical Practitioners and Dentists Act defines a dental practitioner/dentist as a person registered under the Act as a dentist, and defines dentistry/dental services broadly in relation to treatment, advice, attendance and procedures ordinarily performed by dentists.

### 6.2 Core responsibilities

The General Dentist shall:

- obtain the patient's history;
- undertake appropriate clinical examination;
- establish or formulate a clinical diagnosis;
- request and interpret appropriate investigations;
- formulate treatment plans;
- obtain appropriate consent;
- undertake general dental procedures within competence;
- prescribe and administer treatment within lawful authority;

- provide preventive, restorative and other appropriate general dental care;
- manage dental emergencies within competence;
- identify cases requiring specialist referral;
- make appropriate referrals;
- provide post-treatment review;
- maintain complete patient records;
- communicate treatment options, risks and benefits;
- maintain patient confidentiality;
- supervise appropriate members of the dental team;
- participate in infection prevention and control;
- participate in clinical audit and quality improvement; and
- ensure continuity and coordination of care.

KMPDC's published scope framework emphasises appropriate history-taking, examination, documentation and advocacy for patients as general professional expectations.

**6.3 Clinical leadership**

Where a General Dentist is the designated clinician responsible for a patient, the dentist shall retain responsibility for:

**assessment → diagnosis → treatment plan → consent → treatment → review/referral.**

Support personnel may assist with appropriately delegated tasks but shall not independently assume functions reserved to the dentist.

## 7. COMMUNITY ORAL HEALTH OFFICER (COHO)

### 7.1 Regulatory position

Community Oral Health Officers are a recognised cadre regulated by KMPDC. KMPDC currently maintains a separate COHO register and separate COHO licensing category.

The Medical Practitioners and Dentists Act defines community oral health and provides for persons trained and qualified in community oral health.

### 7.2 Principal role

The COHO's principal role shall be understood within the **community oral health framework and the specific scope authorised by the applicable regulatory framework**.

Functions may include, as permitted by the applicable scope:

- oral health education;
- community oral health promotion;
- prevention activities;
- oral health screening;
- community mobilisation;
- oral health outreach;
- school oral health programmes;
- public health education;
- identification of persons requiring dental assessment;
- appropriate referral;
- participation in oral health surveillance; and
- health promotion activities;

### 7.3 Relationship with the dentist

A COHO shall not be used by a facility as a substitute for a dentist where the service requires the professional judgment, diagnosis, treatment or specialist competence reserved to a dentist.

Where a patient's condition exceeds the COHO's authorised scope or competence, the patient shall be referred to a dentist or appropriate specialist.

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## 8. DENTAL NURSE

### 8.1 Principal role

A Dental Nurse provides nursing and clinical support to the dental team according to their professional qualification, employment designation and lawful scope.

### 8.2 Responsibilities

Subject to the applicable nursing regulatory framework and competence, the Dental Nurse may:

- prepare patients for treatment;
- assist with patient positioning and comfort;
- monitor patients as appropriately assigned;
- support infection prevention and control;
- prepare and maintain clinical areas;
- assist with dental procedures within authorised nursing/support functions;
- provide appropriate nursing care;
- support emergency preparedness;
- monitor and report changes in patient condition;
- maintain nursing documentation;

- assist with patient education;
- support postoperative care;
- maintain supplies and equipment;
- assist with sterilisation processes;
- participate in infection-control audits; and
- perform other lawful nursing functions within competence.

**8.3 Limitation**

A Dental Nurse shall not independently undertake a dental procedure reserved to a dentist or specialist merely because the nurse has experience assisting with that procedure.

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**9. DENTAL ASSISTANT**

**9.1 Principal role**

The Dental Assistant is a member of the dental team whose primary responsibility is to support the dentist and other authorised clinical personnel in the safe and efficient delivery of dental services.

**9.2 Responsibilities**

Depending on training and facility policy, the Dental Assistant may:

- prepare the treatment room;
- prepare instruments and materials;
- assist during dental procedures;
- provide chairside assistance;
- maintain dental equipment;
- prepare treatment materials under appropriate instruction;
- support infection prevention and control;

- undertake cleaning and decontamination processes according to facility protocols;
- assist in instrument processing and sterilisation;
- maintain stock;
- prepare patients for treatment;
- provide basic patient instructions authorised by the responsible clinician;
- maintain treatment-room readiness;
- assist with records and administrative documentation; and
- report equipment faults, incidents and safety concerns.

**9.3 Prohibition**

A Dental Assistant shall **not independently**:

- diagnose a dental disease;
- formulate a dental treatment plan;
- prescribe dental treatment;
- independently perform procedures reserved for a dentist;
- represent themselves as a dentist;
- issue a specialist opinion;
- independently provide specialist dental treatment; or
- make clinical decisions outside their training and authorised duties.

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**10. DENTAL TECHNICIAN / DENTAL TECHNOLOGIST**

**10.1 Principal role**

The Dental Technician/Dental Technologist is responsible for the **laboratory fabrication, modification, repair and technical production of dental appliances and prosthetic devices** according to the applicable qualification, regulatory framework and lawful scope.

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**10.2 Responsibilities**

The Dental Technician/Technologist may, according to training and applicable regulation:

- receive authorised laboratory prescriptions/work orders;
- interpret laboratory instructions;
- fabricate dental prostheses and appliances;
- construct laboratory components;
- process dental models;
- undertake laboratory procedures;
- modify and repair dental appliances;
- undertake quality control of laboratory work;
- maintain laboratory equipment;
- maintain laboratory records;
- observe laboratory infection-control requirements;
- communicate technical matters to the prescribing dentist;
- identify laboratory limitations or errors;
- return appliances requiring clinical modification to the prescribing dentist; and
- maintain appropriate laboratory safety standards.

**10.3 Clinical boundary**

The Dental Technician/Technologist shall not independently:

- diagnose a patient's dental condition;
- prescribe treatment;
- independently determine a patient's clinical treatment plan;

- perform procedures reserved to dentists;
- independently fit or clinically adjust an appliance where that activity requires a dentist's clinical assessment;
- represent themselves as a dentist; or
- provide a dental diagnosis or treatment plan to the public.

The clinical relationship should therefore ordinarily operate as:

**Patient → Dentist → Laboratory Prescription → Dental Technician → Finished Appliance → Dentist → Patient.**

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**11. ROLE SEPARATION MATRIX**

| Function | Specialist | General Dentist | COHO | Dental Nurse | Dental Assistant | Dental Technician |
|---|---|---|---|---|---|---|
| Clinical diagnosis | ✓ within specialty | ✓ | Only as expressly authorised by scope | ✗ | ✗ | ✗ |
| General dental treatment | Within competence | ✓ | Only within lawful scope | ✗ | ✗ | ✗ |
| Specialist treatment | ✓ | Refer | ✗ | Assist | Assist | Laboratory support |
| Treatment planning | ✓ | ✓ | Within authorised scope | ✗ | ✗ | Laboratory technical input |

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| **Function** | **Specialist** | **General Dentist** | **COHO** | **Dental Nurse** | **Dental Assistant** | **Dental Technician** |
|---|---|---|---|---|---|---|
| Specialist referral | ✓ | ✓ | ✓ | Escalate | Escalate | Refer through prescribing clinician |
| Oral-health education | ✓ | ✓ | ✓ | ✓ | ✓ | Limited/technical |
| Community outreach | ✓ | ✓ | ✓ | ✓ | Where authorised | ✗ |
| Chairside assistance | ✓ where applicable | ✓ | Where authorised | ✓ | ✓ | ✗ |
| Infection control | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ laboratory |
| Laboratory fabrication | Prescription/clinical input | Prescription | ✗ | ✗ | ✗ | ✓ |
| Patient clinical records | ✓ | ✓ | ✓ within role | ✓ | Support | Laboratory records |
| Clinical accountability | ✓ | ✓ | Within scope | Nursing role | Support role | Laboratory role |

**Note:** "✓" means the function may be performed subject to qualification, competence, registration/licensing and the applicable scope. It should not be interpreted as an independent legal authorisation where the relevant regulator requires additional conditions.

**12. DELEGATION OF DUTIES**

Delegation shall follow five principles:

**A. Right task**

The task must be appropriate for delegation.

**B. Right person**

The recipient must possess the required training and competence.

**C. Right circumstances**

The patient's condition and clinical environment must make delegation safe.

**D. Right supervision**

The responsible professional must provide appropriate supervision.

**E. Right accountability**

The facility must maintain clear records identifying who assessed, decided, performed, supervised and reviewed the care.

**Delegation shall never be used to circumvent a statutory scope of practice.**

Employers should not permit persons who are not duly registered/licensed to practise as medical practitioners, dental practitioners or COHOs within their institutions.

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**13. REFERRAL FRAMEWORK**

A patient shall be referred when:

1. the condition exceeds the practitioner's competence;
2. specialist intervention is required;
3. the facility lacks necessary equipment;
4. the patient requires hospital admission;

5. the patient presents with a significant medical emergency;
6. diagnostic uncertainty remains after appropriate assessment;
7. treatment has failed or complications have developed; or
8. another professional has the appropriate expertise.

**Referral pathway**

**Basic identification by Dental Assistant/Nurse/COHO → General Dentist → Dental Specialist → Hospital/Multidisciplinary Team**

The pathway may move directly to a higher level where clinical circumstances require.

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**14. EMPLOYER RESPONSIBILITIES**

Every dental facility shall:

- verify qualifications before employment;
- verify professional registration where applicable;
- verify professional society membership where applicable;
- verify current practising licences;
- maintain staff credentialing records;
- maintain job descriptions;
- define reporting lines;
- ensure adequate staffing;
- provide appropriate equipment;
- provide infection-control systems;
- provide emergency preparedness;
- maintain patient-record systems;

- ensure continuing professional development;
- conduct competency assessments where appropriate;
- prevent unauthorised practice;
- ensure proper identification/name badges;
- maintain incident-reporting systems;
- undertake clinical audits;
- investigate patient complaints;
- ensure appropriate referral systems; and
- cooperate with regulatory inspections.

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**15. PROFESSIONAL IDENTIFICATION**

Every staff member providing services within a dental facility shall be identifiable by:

- full name;
- professional designation;
- relevant cadre;
- registration number where applicable; and
- role within the facility.

No employee shall use a professional title that implies a qualification, registration or specialist status that the person does not possess.

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**16. PATIENT COMMUNICATION**

The facility shall ensure that patients can readily distinguish between:

**Dentist → Specialist → COHO → Dental Nurse → Dental Assistant → Dental Technician.**

Patients should be informed, where relevant, of the professional responsible for their diagnosis and treatment.

This is particularly important because KMPDC maintains separate practitioner registers and licensing categories, including dentists and COHOs https://registers.kmpdc.go.ke

The list of qualified dental practitioners and specialists is further published on the professional society www.kda.or.ke pages on find a dentist https://kda.or.ke/find-a-dentist/

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**17. CLINICAL ACCOUNTABILITY STRUCTURE**

A dental department should preferably have the following hierarchy:

**Head of Dental Department / Clinical Lead**
↓
**Dental Specialists / Consultants**
↓
**General Dentists**
↓
**COHOs / Dental Nurses / Dental Assistants / Other authorised clinical support staff**
↓
**Dental Laboratory / Dental Technicians**
↓
**Administrative and support staff**

The exact organisational structure may vary according to whether the facility is a hospital, county facility, private clinic, teaching institution or specialised centre.

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**18. QUALITY AND PATIENT SAFETY**

The dental facility shall establish:

- infection prevention and control protocols;
- sterilisation and instrument-processing protocols;
- dental radiography safety procedures;

- medical emergency protocols;
- referral protocols;
- incident reporting;
- adverse-event review;
- clinical audit;
- complaints management;
- patient identification procedures;
- informed-consent procedures;
- record-keeping standards;
- equipment maintenance;
- waste-management procedures; and
- continuing professional development.

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**19. UNAUTHORISED PRACTICE**

No person shall:

1. provide services outside their lawful professional scope;
2. use another professional's registration or licence;
3. allow an unqualified person to provide professional dental services;
4. misrepresent their professional designation;
5. advertise themselves as a dentist or specialist when they are not;
6. undertake clinical procedures merely because they have observed or assisted with them;
7. delegate a task solely for convenience where the recipient lacks the necessary competence or authority; or

8. permit commercial or staffing arrangements to override professional and patient-safety requirements.

The courts have previously considered disputes concerning the distinction between dentists and auxiliary/paradental cadres and the need for clarity regarding different professional duties and roles.

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**20. STAFF CREDENTIALING**

Before commencing clinical work, the facility shall establish a credentialing file containing, as applicable:

- academic certificates;
- professional registration;
- current practising licence;
- specialist recognition;
- professional indemnity cover where required;
- CPD evidence;
- employment contract;
- job description;
- identification documents required for employment;
- competency assessments;
- immunisation/occupational-health documentation where applicable; and
- other regulatory requirements.

Credentialing shall be reviewed periodically.

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**21. PROPOSED STANDARD JOB-DESCRIPTION CLAUSE**

Every employment contract for dental clinical staff should contain:

**"The employee shall perform only those duties for which the employee is appropriately qualified, competent, registered/licensed where required, and authorised under the applicable laws, regulations, professional standards and policies of the facility. Nothing in this job description shall authorise the employee to undertake any activity outside the employee's lawful professional scope."**

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**22. FACILITY COMPLIANCE CHECKLIST**

Before employing or deploying any dental staff member, management should confirm:

**Dentist**

☐ Registered with KMPDC
☐ Current practising licence
☐ Current professional society membership status
☐ Appropriate facility privileges
☐ Competence verified

**Dental Specialist**

☐ Registered dentist
☐ Specialist recognition verified
☐ Current professional society membership status
☐ Current practising licence
☐ Specialty privileges defined

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**COHO**

☐ Registered with KMPDC
☐ Current COHO licence
☐ Current scope verified
☐ Appropriate deployment

**Dental Nurse**

☐ Appropriate professional registration/licensing where applicable
☐ Qualification verified
☐ Nursing scope confirmed

**Dental Assistant**

☐ Qualification/training verified
☐ Job description issued
☐ Competencies documented
☐ Works under appropriate clinical supervision

**Dental Technician**

☐ Relevant qualification verified
☐ Registration/licensing under applicable regulatory framework verified
☐ Laboratory scope defined
☐ Laboratory work linked to authorised clinical prescription/work order

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**23. PROPOSED POLICY POSITION ON PROFESSIONAL BOUNDARIES**

For purposes of patient safety and professional accountability:

**The dentist shall remain the principal clinical professional responsible for diagnosis and treatment planning in general dental practice, while recognised dental specialists shall provide specialist care within their recognised specialties. Other members of the dental team shall perform supportive, preventive, nursing, community oral-health or laboratory functions according to their respective qualifications, competence, registration and lawful scope of practice.**

This formulation also recognises that the precise scope of a cadre must ultimately be determined by the applicable law and valid regulatory instruments rather than by an employer's job description.

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**24. REVIEW AND GOVERNANCE**

This policy shall be reviewed:

- every three years; or
- whenever legislation changes;
- whenever KMPDC publishes or revises a scope of practice;
- following a significant court decision;
- following a major patient-safety incident; or
- when professional standards materially change.

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**25. CONCLUSION**

A modern dental facility requires **clear professional boundaries, defined accountability and coordinated teamwork**.

The fundamental distinction should be:

**Dentists and recognised dental specialists — clinical diagnosis, treatment planning and dental treatment within their respective scopes.**

**COHOs — community oral-health functions within their applicable regulatory scope.**

**Dental nurses and dental assistants — nursing and clinical support functions within their respective qualifications and scopes.**

**Dental technicians/technologists — laboratory and technical functions associated with dental appliances and prostheses, within their applicable regulatory scope.**

This policy should be used as a **staffing, credentialing, job-description, supervision and patient-safety framework**, while each cadre's precise legal scope should be cross-checked against the latest applicable Kenyan legislation, regulatory and professional society practice guidance instruments, policy documents and regulations.

**Level of Dental Clinical Care in Kenya**

**1. Community Oral Health Clinics (Level 2)**

**2. General Dentistry Clinics (Level 3A and Level 3B)**

**3. Specialist Dentistry Clinics (Level 4A and Level 4B)**

**4. Referral and Tertiary Institutions (Level 5 and 6)**