To whom it may concern,

I just wanted to provide information on how we have been trying to prepare and plan for how the CYP Act might work in practice within the public Dental service in our health board.

In the public dental service in our health board we have been working with partners in Education to develop a protocol for dental patients who have a significant dental need and are not engaging with dental services (e.g. are not being brought to appointments).

Prior to liaising with the ‘Named Person’ or other relevant colleagues a number of steps are taken to contact the family (by letter and telephone) and arrange a suitable appointment.

Only when these measures are not successful do we then make contact with the ‘named person’ to discuss how we can work together in successfully completing dental work required for the child and secure dental health.

I have enclosed copies of our proposed protocols regarding this as well as a copy of ‘case review’ paperwork completed as part of this process prior to making contact with the ‘named person’.

Kind regards,

Paediatric Dentistry
Forth Valley Public Dental Service
August 2017
Protocol for Lack of Engagement for Routine Dental Care - Treatment Outstanding – School Age Children > 5 yr

Patient fails to attend 1st appointment

Dental receptionist confirms patient details on CHI 24 and sends out another appointment with covering letter.

Patient attends 2nd appointment

Yes → No further action required

No →

Dental practitioner completes the first section of the case review paperwork and emails this to the generic mailbox

FV-UHB.pds-childwellbeing@nhs.net

Yes → Contact PDS dentist to complete a discharge letter to GDP

No →

The Dental Administrator will confirm patient details on CHI 24 and check with the referring GDP if the patient has returned to their practice (record on R4 and case review paperwork)

Yes →

Contact PDS dentist to complete a discharge letter to GDP

No →

Letter (1) to parent to contact within 14 days and up to 2 attempts made to contact by telephone (different times and days). This will be recorded on CR paperwork and R4. Contact Successful?

Yes →

Check contact details and arrange further appointment

FTA 3rd appointment

GIRFEC
5 Key Questions
1. Is anything getting in the way of this child's well-being?
2. Do I have all the information I need to help this child?
3. What can I do to help this child?
4. What can my agency do to help this child?
5. What additional help (if any) may be needed from others?

No →

The final section of the case review paperwork will be completed by the patient's dentist within PDS (with help as required from senior colleagues). This will be submitted to the clinical director (or SDO in Paediatric Dentistry in their absence) for review.

Dental Nurse relating to Paediatric Dentistry contacts Named Person for discussion and support

Using the GIRFEC 5 Key Questions the Named Person and dental nurse relating to paediatrics consider possible courses of action.

Named person uses professional judgement to determine what is written within the child's chronology of significant events.

Named person considers sharing relevant information with School Nurse.

Yes → Matter resolved

Named Person/School Nurse communicates progress/relevant information to Dental Nurse

No →

Possible courses of action
Dental Nurse relating to Paediatric Dentistry discusses case with PDS dentist and agrees with named person that CP1 is the next step. Raise CP1 if appropriate. Consider contacting Child Protection Nurse Advisor for advice prior to submitting CP1.

Child Protection

When a child or young person is identified as being at risk of significant harm through abuse or neglect Child Protection procedures should be followed immediately.

Note that all responses must be appropriate, proportionate and timely. All electronic communication is to be shared securely.
Protocol for: Lack of Engagement for Routine Dental care – Treatment Outstanding - Pre School Children < 5

- **Patient fails to attend 1st appointment**
  - Dental receptionist confirms patient details on CHI 24 and sends out another appointment with covering letter.
  - **Patient attends 2nd appointment**
    - Yes: No further action required
    - No: Dental practitioner completes the first section of the case review paperwork and emails this to the generic mailbox FV-UHB.pds-childwellbeing@nhs.net.

- If the patient attends the 2nd appointment, no further action is required. If not, the dental practitioner completes the case review paperwork and emails it to the generic mailbox.

- The Dental Administrator will confirm patient details on CHI 24 and check with the referring GDP if the patient has returned to their practice (and record on R4 and case review paperwork).
  - Yes: Contact PDS dentist to complete a discharge letter to GDP.
  - No: Letter (1) to parent to contact within 14 days and up to 2 attempts made to contact by telephone (different times and days). This will be recorded on CR paperwork and R4. Contact Successful?
    - Yes: Check contact details and arrange further appointment.
    - No: FTA 3rd appointment.

- **GIRFEC 5 Key Questions**
  1. Is anything getting in the way of this child’s well-being?
  2. Do I have all the information I need to help this child?
  3. What can I do to help this child?
  4. What can my agency do to help this child?
  5. What additional help (if any) may be needed from others?

- **Possible courses of action**
  - Discussion takes place with child/young person and parent/carer to identify relevant avenues of support.
  - Following above discussion Dental Nurse related to Paediatrics requests Childsmile HCSW to become involved.
  - Lead Professional is contacted to agree an appropriate course of action. Matter is considered at a Team Around the Child Meeting to which the Dental Nurse related to Paediatrics is invited. A report is submitted (using relevant Forth Valley Single Child’s Plan Paperwork) if attendance is not possible.
  - Named Person calls a Team Around the Child Meeting.

- **Child Protection**
  - When a child or young person is identified as being at risk of significant harm through abuse or neglect Child Protection procedures should be followed immediately.

- **Using the GIRFEC 5 Key Questions**
  - The Named Person and dental nurse relating to paediatrics consider possible courses of action.
  - Named person uses professional judgement to determine what is written within the child’s chronology of significant events.
  - Matter resolved.

- **Possible courses of action**
  - Dental Nurse relating to Paediatric Dentistry discusses case with PDS dentist and agrees with named person that CP1 is the next step. Raise CP1 if appropriate. Consider contacting Child Protection Nurse Advisor for advice prior to submitting CP1.
# Public Dental Service Child Wellbeing Case Review

## Date of review:

<table>
<thead>
<tr>
<th>Childs Name</th>
<th>DOB</th>
<th>Referring GDP</th>
<th>Date of Referral</th>
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## Failed or Cancelled Appointment History

<table>
<thead>
<tr>
<th>Date</th>
<th>Clinic</th>
<th>Dentist</th>
<th>FTA/Cancelled</th>
<th>Action Taken</th>
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## Referral to Child Wellbeing

<table>
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<tr>
<th>Date</th>
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<th>Dentist</th>
<th>Action Required</th>
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</table>

## Child Wellbeing Failed Follow Up Progress

<table>
<thead>
<tr>
<th>Contacted GDP by telephone call to confirm patient not attended since referral</th>
<th>Date</th>
<th>Initials</th>
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<tbody>
<tr>
<td>Letter(1) sent to parent – no response</td>
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<tr>
<td>Telephone contact made after 14 days (1)- no response</td>
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<tr>
<td>Telephone contact (2)- no response</td>
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<td>Other:</td>
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<td>Other:</td>
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## Outstanding Treatment Concerns

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<th>Details(tooth/location)</th>
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<tbody>
<tr>
<td>Swelling</td>
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<td>Pain</td>
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<td>Caries</td>
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<td>Other:</td>
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Review Outcome

In this particular case the child/young person/parent/carer has not consented for information to be shared due to failure to respond to contact.

Outcome Option 1 Information to be shared:

On reviewing the case the decision has been made to share the information due to the child/young person’s safety, health development or behaviour is impaired or likely to be affected unless services are provided. A letter informing the child/young person/parent/carer of information sharing has/will be sent.

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<th>Signatory 1:</th>
<th>Signatory 2</th>
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Outcome Option 2 Information NOT to be shared at this time:

On reviewing the case the decision has been made not to share the information at this time with the following action being taken as an alternative:

This outcome will be reviewed on the following date:

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<th>Signatory 1:</th>
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