# **Directorate of Healthcare Quality & Strategy**

Chief Dental Officer & Dentistry Division



To all Dentists

Dear Colleague

# IMPACT OF CHILDREN &YOUNG PEOPLE ACT: WHAT IT CAN MEAN FOR A CHILD'S DENTAL CARE

This letter gives a brief description of the current and future provision for ensuring that the wellbeing of children is safeguarded. Attached is a scenario highlighting the implications of a case where a child needs dental care but doesn't receive it.

The UK Government is a signatory to the United Nations Convention on the Rights of a Child (UNCRC), the Convention is an international law that recognises that young people have rights.

The Scottish Government is clear in its commitment to children's rights and has established the post of Commissioner for Children and Young People. The Commissioner's job is to help children understand their rights and to make sure those rights are respected.

The Scottish Government has developed the **Getting It Right For Every Child (GIRFEC) approach** as a consistent way for people to work with all children and young people. It's the bedrock for all children's services. The approach helps practitioners focus on what makes a positive difference for children and young people – and how they can act to deliver these improvements. GIRFEC is being threaded through all existing policy, practice, strategy and legislation affecting children, young people and their families.

Finally, the Children & Young People (Scotland) Act, 2014 has been passed, to further the Scottish Government's ambition for Scotland to be the best place to grow up in, by putting children and young people at the heart of planning services and ensuring their rights are respected across the public sector.

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The Act will have specific impacts on how dental teams deal with their child patients in future, primarily in how they relate to the Named Person for the child.

More specific information for dental teams will be released in the lead up to August 2016, which is the date by when all elements of the Act should be in place. In the meantime, it may be helpful if dental teams could acquaint themselves with UNCRC, GIRFEC and Children & Young People (Scotland) Act. These can be found at: <a href="http://www.gov.scot/Topics/People/Young-People">http://www.gov.scot/Topics/People/Young-People</a>.

NHS Boards are asked to issue this letter and accompanying Annex to all dentists (including hospital dentists) and dental bodies corporate in their area.

Yours sincerely

MARGIE TAYLOR
Chief Dental Officer

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### WHAT DOES THE ACT MEAN FOR THE DENTAL TEAM?

# **Scenario from Dental Practice at Present**

The mother of a four-year-old child requests an emergency appointment because the child has toothache. Mother is a not a registered patient of the practice and this is the child's first dental visit, he has an abscess and is distressed and uncooperative. A referral for assessment prior to a general anaesthetic for extractions is made, analgesia and an antibiotic prescribed and a follow-up return appointment is arranged. The mother does not take the child to the pre-GA assessment nor the follow up appointment. The practice is informed that the child wasn't taken to the assessment appointment. Since the family failed the follow up appointment and is not registered with the practice; the practice takes no further action.

Four months later, the child is taken to another dental practice in the town for another emergency appointment. The cycle repeats and this practice also draws a line under the episode. The child remains with carious teeth, some with associated infection – the child's dental need is never met.

# Outcome following Implementation of the Act

By implementing the areas for action for dentistry in response to the Children & Young People (Scotland) Act, 2014; what differences would result?

- When the child is not taken to the GA assessment nor the follow-up appointment at the practice; Practice One would notify the Named Person of its concerns. The Named Person would be the Health Visitor (HV) for a 4 year old child.
- The HV could attempt to make contact with the family to identify barriers to attendance for dental treatment or; could ask the local Childsmile Team to make contact with the family to provide tailored oral health advice and support to attend dental appointments.
- Practice Two would similarly notify the HV as Named Person of its concern.
- The HV now has two clear expressions of concern from dental practitioners
- If no progress is being made the HV will determine what additional information and action is required to ensure that the child receives the care and treatment required.