Tees Valley dental access care pathway for children having child protection medicals and “children in our care” health assessments (Initial and Review Health Assessments)

Child has NOT attended an identified practice/CDS for a dental check-up within the previous 6 months. Record details of past dental history, parent/carer/CYP identified needs/concerns, and record any clinician observed obvious signs of dental decay

within the previous 6 months

Child has attended an identified practice/Community Dental Service (CDS) for a dental check-up within the previous 6 months.

Record details of attendance and parent/carer identified needs/concerns

No dental need identified

Dental need identified by Parent/Carer/CYP/clinician

Dental need identified by Parent/Carer/CYP/clinician

No dental need identified

Dental pain or infection

No dental pain or infection

Parent/Carer advised to continue care with own dental team and attend regular check-ups

Paediatrician/nurse to complete and send AGREED referral form “Request for dental assessment” for **URGENT** follow-up care to named referral dental practice.

OR Paediatrician/nurse undertaking the health assessment sends **URGENT** referral directly to CDS for children who meet referral criteria \*\*

Paediatrician/nurse to complete and send AGREED referral form “Request for dental assessment” for follow-up care by **identified** GDP/CDS

Paediatrician/nurse to complete and send AGREED referral form “Request for dental assessment” for follow-up care to family preferred/ named referral dental practice. A list of NHS dental practices will be provided and a list of named referral practices

OR

Paediatrician/nurse undertaking the health assessment can refer directly to CDS for any CYP who meets the below referral criteria\*\*

Named Referral Dental Practices by Local Authority Areas (List to be provided by NHS England)

Named referral dental practice to send dental report of attendance/ planned treatment/completed treatment or failure to attend to the referring clinician and social worker.

\*\*Referral criteria for Tees Community Dental Service

* Patients with special needs relating to:
* Learning difficulties
* Challenging behaviours requiring multidisciplinary teams
* From special schools/resource centres/group homes
* From the child development centre
* Patients with a medical condition that can affect oral health and dental treatment (medically compromised)
* Severely physically disabled children
* “Children in our care” with complex needs, or referred from child protection teams
* Children with complex dental anomalies including cleft lip and palate or complex dental trauma