

**Managed Clinical Network in Special Care Dentistry**  
**South West Wales**  
**ABMU and Hywel Dda Health Boards**

**Referral Pathway for Special Care Dentistry Patients**

**Introduction**

In accordance with the Special Care Dentistry in Wales Implementation Plan (2011), a Managed Clinical Network (MCN) has been established in ABMU and Hywel Dda Health Boards to promote and develop Special Care Dentistry (SCD) across South West Wales.

**Aims of the Referral Pathway**

This pathway aims to provide clear guidance for General Dental Practitioners (GDP's) in ABMU and Hywel Dda Health Boards on the definition of a SCD patient and the patient groups that can be referred, together with a structured referral pathway including the role of the various SCD providers involved in each stage of the pathway.

The pathway also aims to develop good working relations between the General Dental Services, Community Dental Services and Hospital Dental Services in ABMU and Hywel Dda Health Boards, to co-ordinate the local provision of SCD in South West Wales and to ensure that the SCD patient journey is as effective and efficient as possible.

Clear referral mechanisms and contact details will be provided.

**The SCD patient**

**Adults**

Referrals can be made for adults who are unable to receive SCD treatment via the General Dental Services. These patients will have some form of disability including but not limited to:

- Learning disability
- Autistic spectrum disorder

- Severely compromised medical history
- Mental health disorder
- Cognitive impairment and/or dementia
- Severe physical disability
- Movement disorders such as Cerebral Palsy, Multiple Sclerosis, Parkinson's disease or Cerebral Palsy
- Severe disproportionate dental anxiety
- Complex social problems including homelessness and/or drug and alcohol abuse
- People who are unable to leave their homes and without a general dental practitioner who is able to care for them
- People in rehabilitation and secure units
- A combination of these factors.

### ***Children***

Referrals can be made for children who are unable to be treated in the GDS due to some form of disability as listed above and are unsuitable for treatment at Parkway Clinic.

Children considered suitable for treatment at Parkway Clinic should not be referred onto this pathway.

### **Referrals**

Referrals may be made for SCD treatment options that could reasonably be expected in a primary care dental setting. They should not be made just due to the complexity of any dental treatment required but because of difficulties a dental practitioner had experienced in providing care due to a patient's disability.

Referrals may be made for SCD treatment using local anaesthesia alone, treatment using conscious sedation or for treatment under general anaesthesia.

The referring GDP may request more complex restorative treatments but must be aware that treatment options for SCD patients may be limited due to the nature of the patient's disability.

## **The Role of the Referring GDP**

Wherever possible, prior to referral, GDP's are expected to consider the use of conventional dental treatment methods, including behavioural management and anxiety-controlling techniques, to treat patients without the need for sedation or general anaesthesia.

Prior to referral, a discussion should be had with the patient regarding all available treatment options, together with their associated risks and benefits, in accordance with guidance provided by the General Dental Council.

Only after such steps have been undertaken should a SCD patient be referred for treatment.

Once a referral has been agreed, the patient and/or their carer or parent must be informed that the first visit following the referral will involve assessment only and not treatment. A clear and concise referral form must be completed for each SCD referral and all relevant details should be included.

Inadequate or incomplete referral forms will not be accepted and will be returned to the referrer.

## **The Referral Pathway**

The referring GDP should direct the initial patient referral to the Community Dental Service (CDS) in their own Health Board using the appropriate referral form (**Appendix 1 or 2**).

All relevant details must be entered including details of relevant medical history and medication, social history and details of care and support teams and any specific patient requirements such as the need for physical support, communication difficulties and behavioural problems.

The dental treatment required should also be clearly noted. Copies of available radiographs should be attached to the referral form where possible.

## **ABMU Health Board CDS**

Completed referral forms should be sent to the CDS Appointments/Waiting List Coordinators whose contact address is:  
Dental Department, Central Clinic, Orchard Street, Swansea, SA1 5AT  
Telephone: 01792 517838.

### ***Hywel Dda Health Board CDS***

Completed referral forms should be sent to the CDS Senior Dental Nurse whose contact address is:  
Dental Department, Elizabeth Williams Clinic, Mill Lane, Llanelli, SA15 3SE  
Tel. 01554 784700.

### **Receipt of Referrals**

Upon receipt, referrals will be triaged to ensure that they conform to the acceptance criteria. Inappropriate referrals will not be accepted.

The acceptance of a referral will be acknowledged and an estimate will be provided of the time the patient may have to wait before being seen for assessment.

### **Initial Assessment and Treatment within the CDS**

Patients will be assessed for their suitability to receive care within the CDS and wherever possible, arrangements will be made for care to be provided at a CDS clinic as close as possible to the patient's home.

Patients who have significant disabilities and require dedicated support such as a hoist or a wheelchair platform will be directed to a suitably equipped CDS clinic.

Patients who require treatment using conscious sedation will be directed to a CDS clinic where such treatment is provided and appropriately trained staff members are available.

Only patient who are assessed as falling into Groups 1 or 2 in the American Society of Anesthesiologists Physical Classification Scale (ASAPCS) will be accepted for treatment using conscious sedation within the CDS. In some cases it may be necessary to arrange treatment at a more distant CDS clinic if more suitable facilities and more appropriately experienced clinicians are located there.

### **More Urgent SCD Referrals**

A referral for a SCD patient who requires urgent treatment can be made by telephoning the appropriate CDS department above. A completed referral form should follow the telephone referral.

CDS reception staff will triage the request for an emergency appointment and may seek advice from CDS clinicians on the urgency of a particular referral.

### ***Routine Dental Problems***

These would normally be restricted to:

- Mild dental pain that does not require urgent intervention. Toothache is not normally classed as a dental emergency
- Loose or displaced crowns, bridges or veneers
- Fractured or loose fitting dentures or other appliances
- Removal of fractured posts
- Fractured, loose or displaced fillings
- Treatments normally associated with routine dental care.

An appointment will be made within 7 days wherever possible at a suitable CDS clinic with an appropriately experienced CDS clinician.

### ***Urgent Dental Problems***

These should be restricted to SCD patients with:

- Dental and/or soft tissue infection not having a systemic effect
- Severe dental and/or facial pain not controlled by over the counter preparations

An appointment will be arranged as soon as possible. If no appointment slot is free, the patient will be asked to go to the nearest CDS clinic and wait. Patients will be advised that there may be a delay.

### **Emergency SCD Referrals**

Toothache is not an emergency and emergency referrals would normally be restricted to:

- Trauma including facial/oral laceration and/or dento-alveolar injuries
- Significant and worsening oro- facial swelling and swelling around the eye
- Swelling resulting in difficulties in breathing or swallowing

- Dental bleeding which is not controlled by the patient by normal local measures
- Dental conditions which have resulted in acute systemic illness or raised temperature due to infection of dental origin
- Severe trismus and inability to open the mouth normally
- Oro-dental symptoms which are likely to significantly exacerbate systemic medical conditions

Emergency referrals should be directed to the on-call Maxillofacial Team at Morriston Hospital by telephoning 01792 702222 and asking for the on-call Maxillofacial SHO.

### **Completion of Treatment**

On completion of treatment, an outcome letter will be sent to the referrer. Wherever possible, the patient will be discharged back to the referrer for continuing care.

### **Complex Patients**

If following the initial assessment, a CDS clinician does not think that it is possible or appropriate for the patient to receive treatment within the CDS department, the patient should be referred to the Joint Restorative Dentistry/CDS SCD Assessment Clinic led by a Consultant in Restorative Dentistry located in the Princess of Wales Hospital in Bridgend. Patients will then be allocated to an appropriate care pathway.

An outcome letter will be sent to the original referrer.

### **The SCD Assessment Clinic**

Patients referred to this clinic will be assessed by a Specialist in Special Care Dentistry and allocated to an appropriate care pathway. This may involve treatment using conscious sedation or general anaesthesia.

Patients assessed as ASAPCS Groups 1 or 2 who need treatment using conscious sedation will be treated by a Specialist in Special Care Dentistry within ABMU or Hywel Dda Health Board CDS. Patients assessed as ASAPCS Groups 3 or above who need treatment using conscious sedation

will be treated by a Specialist in Special Care Dentistry in Morriston Hospital in Swansea.

Patients who are suitable for day case general anaesthesia will be treated at the Princess of Wales Hospital in Bridgend and will remain under the care of Mr James Owens, Consultant in Restorative Dentistry and Oral Rehabilitation.

A small number of patients may be assessed as unsuitable for day case general anaesthesia. In this case, these patients will be referred to appropriate Consultants in the OMFS Department in Morriston Hospital, Swansea for assessment for care on an in-patient general anaesthetic list.

When cases are referred to the OMFS Department due to patient complexity or urgency, the Department of Restorative Dentistry will provide restorative dentistry during patient care.

An outcome letter will be sent to the original referrer after assessment.

### **Continuing Care**

On completion of treatment, patients will be referred back to the original referrer and an outcome letter provided.

If a referring GDP is unable to provide care for a patient due to complexity of care outside the remit of the GDS, shared care arrangements can be considered.

A referring GDP may wish to enter a shared care arrangement whereby care is provided jointly by themselves and the CDS or HDS. In this case, GDP's are encouraged to express their interest in shared care when completing the initial referral.

## **Help and Advice**

A referring GDP may wish to contact a Specialist in Special Care Dentistry for advice prior to making a SCD referral.

The contact details for the two Specialists in Special Care Dentistry in ABMU Health Board are:

- Akhila Muthukrishnan
  - Akhila.muthukrishnan@wales.nhs.uk
  - 01792 703101
- David Davies
  - david.davies15@wales.nhs.uk
  - 01792 517838

Wherever possible, the Specialists will provide help and advice to GDP's on cases or matters of interest regarding SCD.



## Appendix 1 – ABMUHB CDS

Date of Referral:



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board

Dental Clinic:

# Community Dental Service (CDS) Referral Form

Please complete **ALL** sections of the form  
**Incomplete forms will be returned**

### Patient Details

Name: DOB:  
Gender:  
Address:  
  
Postcode:  
Tel No:  
NHS No:

### General Medical Practitioner

Name:  
Address:  
  
Postcode  
Tel No:

### Next of Kin/ Carer

Name:  
Address:  
  
Postcode:  
Tel No:  
Relationship to patient:

### Referred by

Name:  
Position/ relationship:  
Address:  
  
Postcode:  
Tel No:

### Medical History

Medical conditions/ allergies/ disabilities:

Medications:

### Relevant Dental History

Please include information about the current dental treatment and any required treatment at CDS. If a General Dental Practitioner, please enclose any available radiographs.

Vulnerable Adult

Vulnerable Child

### Indicators for a referral to CDS (please tick all that apply)

- Learning disabilities
- Mental health problems
- Physical disabilities: adapted wheelchair user
- Complex medical history (please expand in medical history section)
- Disproportionate dental anxiety/ dental phobia
- Person in rehabilitation, secure unit, homeless
- Inability to leave the home to seek care due to a form of disability
- Other, please state:

***This box must be completed or the referral will be returned***

### Special Care requirements

e.g.

- Need for a hoist
- Language line

Has the patient been seen by the CDS before: Yes

No

**Please return form to:** Community Dental Service  
Waiting List co-ordinator  
Central Clinic  
21 Orchard Street  
Swansea  
SA1 5AT  
Telephone: 01792 517838