



Department of
**Health, Social Services
and Public Safety**

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AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

Minimum Standards for Dental Care and Treatment

**Supporting Good Governance
in Dental Practice**

Minimum Standards for Dental Care and Treatment

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Minimum Standards for Dental Care and Treatment

Introduction

These standards apply to you, and anyone attending with you for treatment, including a parent, guardian or carer. They set out what you can expect from the dental team who provides your care and treatment.

Local Standards - Local Care

The standards outlined in this booklet describe what you can expect from the following dental service providers in Northern Ireland:

- Primary Care Health Service dental services, including those provided by the Community Dental Service¹; and
- Primary Care private dental services, including private treatments provided along side Health Service treatments in mixed practices.

The term **Primary Care** refers to the local dental services available directly to patients, such as those services from High Street dentists, High Street specialists² and Health Centres.

The term **Secondary Care** refers to hospital or specialist care, to which you may be referred from Primary Care.

Throughout the standards, these Primary Care dental service providers are referred to as the **dental service**

These standards are your standards

The standards have been established following a process which involved seeking the views and advice from a working group and a reference group to identify all dental standards in Primary Care. They have been adopted from the **Scottish Executive National Standards for Dentistry**³.

We are deeply grateful to Stephen Wilson, Neil O'Shaunaghsey, Marjorie Varquis and their colleagues from NHS QIS and the National Care Standards Commission who shared their learned views with us and, indeed, allowed us to adapt the Scottish standards for Northern Ireland needs.

We, in Northern Ireland, have been seeking consistency with dental care standards across the United Kingdom and to ensure alignment with the **Quality Standards for Health and Social Care**⁴.

The standards focus on you using local dental services, and describe what you can expect as a result of using them. The standards are addressed to **you**, as the user of the service. They also apply to children, or vulnerable adults, in your care as a parent, guardian or carer. We are attempting to address individuality of care, and the dignity that expectation brings, when visiting a dentist in Northern Ireland.

¹ The primary remit of the CDS is to provide oral care to patients with special needs. The role of the CDS is defined in Appendix B

² High Street specialists include oral surgeons and orthodontists

³ National Standards for Dental Services, NHS Quality Improvement Scotland (Scottish Executive), December 2006

⁴ Quality Standards for Health and Social Care, Department of Health, Social Services and Public Safety, March 2006

Minimum Standards for Dental Care and Treatment

These standards deliberately differ in format from other independent healthcare standards. There are several reasons for this. The standards are targeted at patients, the profession and regulators. They also cover both Health Service and private dental care. With almost one million courses of dental treatment undertaken per year, it is important that the standards are presented in a format and language that are readily understood by patients, yet are still relevant to the profession and regulators.

General information on dentistry and oral health can be found in Appendix A on page 21.

Further information regarding the various dental services in Northern Ireland is in Appendix B on page 24.

Dentistry - expectations, yours and ours

These standards are to be adopted by all dentists in Primary Care, whether Health Service or private setting, in Northern Ireland. Their purpose is to ensure that you receive consistently high quality care and treatment from Northern Ireland dental services. The standards can be used to help you decide which dental service to choose.

We outline the quality of service you can expect, and we believe you can also use this booklet when discussing the service you require, raising concerns or making a complaint.

These standards seek to achieve a commonality of good dental practice for both Health Service and private dentistry driven from patient perceptions and expectations. They set out what can be expected of the people who provide dental services and they will be used to assess the performance of dental services in Northern Ireland. The standards do not deal with availability of Health Service dental services in Northern Ireland.

The delivery of dentistry in Northern Ireland will be monitored against these standards by the Regulation and Quality Improvement Authority (RQIA)¹ and the Health and Social Care Board.

¹ The role of the HSCB and RQIA is detailed in Appendices C & D (from page 26)

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The Quality Standards for Health and Social Care.

In producing these dental standards, we aim to maintain consistency with *The Quality Standards for Health and Social Care*, which were issued by the DHSSPS in March 2006. These standards apply to the entire Health and Social Care (HSC) sector and have five key quality themes:

Accessible, flexible and responsive services
Safe and effective care
Effective communication and information
Promoting, protecting and improving health and social well being
Corporate leadership and accountability.

In developing the 15 dental standards we have categorised each one under the corresponding quality theme:

Accessible, flexible and responsive services Standard 1 - Choosing your dental service Standard 2 - Before your appointment Standard 3 - Your visits
Safe and effective care Standard 4 - Assessing your needs Standard 8 - The quality of your care and treatment Standard 12 - Medical and other emergencies Standard 13 - Control of infection Standard 14 - Your care environment
Effective communication and information Standard 5 - Deciding and agreeing your care and treatment Standard 6 - Receiving your care and treatment Standard 9 - Expressing your views Standard 10 - Confidentiality and information about you
Promoting, protecting and improving health and social well being Standard 7 - Ongoing care Standard 15 - Children, young people and vulnerable adults
Corporate leadership and accountability Standard 11 - The dental team and service management

The relevant theme is shown in parenthesis after the standard title on the following pages.

Minimum Standards for Dental Care and Treatment

Standard 1 - Choosing your dental service

[Accessible, flexible and responsive services]

You have access to accurate, clear and easy to understand information that is easily available to help you choose the dental service that best meets your needs.

1. You know if the dental service is accepting new patients.
2. You can get the information about the dental service, which may be in the form of a leaflet, including the following:
 - a guide to the services provided and whether these services are provided under the Health Service or privately;
 - opening hours of the service;
 - where the dental service is located and how to get there;
 - a contact number for any questions about the services or facilities;
 - how the service meets any special needs, including the need for an interpreter or treatment in your own home;
 - how long your registration with the dental service will last, where appropriate;
 - where fees apply, there will be:
 - a guide to the range of charges for the services provided - in particular, initial consultation, treatments, investigations and prescriptions;
 - a guide to the method and time of payment, and any charges for failing to attend an appointment;
 - how your emergency care is provided outside of normal opening times (out-of-hours) or if your dentist is not available; and
 - a contact number for any questions you may have about dental provision in your area.
3. The service provides information in a form that you can understand; or advice on how to get the information in a language or format that you understand.
4. You may request, from your dental service, its latest inspection or review report measured against these standards. If an inspection report has been provided by RQIA, this report must be held on the practice premises and accessible to patients, on request.

Minimum Standards for Dental Care and Treatment

Standard 2 - Before your appointment

[Accessible, flexible and responsive services]

You receive all the information you need in advance, to help you when you attend your appointment.

1. Your appointment is agreed for a time that suits both you and the dental service and that recognises the urgency of your oral healthcare needs. You will be made aware of the arrangements for urgent appointments.
2. Before your appointment, you will receive adequate information about it, including:
 - who the appointment is with and how long it is likely to last;
 - what you need to bring with you; and
 - contact details, in case of cancellation either by you or by the dental service.
3. If you cannot attend, or need to change your appointment, you must let your dentist know as soon as possible. Your dentist may charge you if you do not attend, or notify them on time, without a reasonable explanation.
4. If English is not your first language, or if you have any other communication needs, you will receive, on request, advice and information on how interpreting services, adaptations and equipment for communication can be provided for you.

Minimum Standards for Dental Care and Treatment

Standard 3 - Your visits

[Accessible, flexible and responsive services]

You are treated with dignity and respect by the dental team throughout your visits.

1. The dental team treats you with respect as an individual. Your age, gender, race, religion or belief, disability and sexual orientation will not influence the quality of the service you receive.
2. If the facilities are not accessible to you for reasons of disability or special needs, the dental team will refer you for care to somewhere else that is suitable.
3. The dental team confirms your personal details in a manner which is sensitive to your privacy and dignity. Your consultation and treatment take place in an environment that allows privacy.
4. You are made aware of the names of the dental team involved in your care. You are made familiar with the facilities.
5. You receive an explanation if you are kept waiting beyond your appointment time and can discuss alternative arrangements.
6. There should always be a third person present during your treatment. This is usually the dental nurse. In some circumstances, you may be asked to bring someone with you to be there during your treatment.
7. You receive explanations about your care and treatment in terms that you can easily understand, and you have an opportunity to ask questions during your appointment.

Minimum Standards for Dental Care and Treatment

Standard 4 - Assessing your needs

[Safe and effective care]

All decisions on your dental care, including preventive care, will be based on a full assessment of your needs.

1. Before your treatment begins, a member of the dental team checks your medical history, to make sure, as far as possible, that the treatment is safe for you. This includes asking about your current, and previous, state of health and recording any current medication and relevant lifestyle habits. Medication may include prescribed drugs, as well as over-the-counter preparations.
2. It is important that you let the dental team know of any change in your health, however minor. This includes any change to your medication.
3. If, at any time, your dentist needs to contact your own doctor for information about you that is relevant to your dental care and treatment, you will be asked to give permission for this.
4. You are asked about your dental history. This is followed by a dental and oral examination, which includes looking for any signs of possible serious disease in your mouth and surrounding areas that may need to be investigated further.
5. You are offered any investigations that your history and examination show that you need.
6. You receive timely information on the results of any assessment and investigations.
7. If you are assessed as needing an urgent referral, the dental service has a system in place for this referral to be made as a matter of priority.
8. If your dentist decides that you need specialist treatment, this is explained to you. This explanation will include what specialist services are available to you and the appropriate referral path for these services. Your dentist will arrange for you to be referred to a High Street specialist or to hospital services, as appropriate.

Minimum Standards for Dental Care and Treatment

Standard 5 - Deciding and agreeing your care and treatment

[Effective communication and information]

Your decisions on any care and treatment provided to you by the dental team are based on you being fully informed by your dentist of the risks, benefits and costs involved.

1. Your dentist gives you clear information about the range of treatments that are available, and are relevant to your needs and preferences. This includes an explanation of the advantages, disadvantages, prognosis and costs of any treatment, as well as what may happen if you choose not to proceed. You will be made aware of your own responsibilities for maintaining your oral health.
2. The dental team obtains your consent to treatment in line with current best practice guidelines and legislation¹.
3. You will be given a verbal estimate of treatment costs before you decide to undergo treatment. You may request this estimate in writing. You are clear which treatment is provided under the Health Service and which is provided privately.
4. You have the opportunity to ask questions or receive further advice from the dentist or from an appropriate member of the dental team (or both). You can have a member of your family, or another person of your choice, ask questions on your behalf.
5. You have the time you need to consider, and agree, the treatment.
6. Your treatment plan is recorded and you have access to it. You are informed if any changes need to be made to this plan, and the reasons and costs, when they arise.
7. You are told how long your appointments are likely to last and the estimated timescale of the proposed treatment.
8. If you need treatment after an examination, you are offered an appointment within a timescale agreed by you and the dental team.
9. If you want to, you can discuss any aspect of your proposed care at a later date.
10. You are involved in making decisions about your care and treatment.
11. If you are unable to express your own wishes or views, decisions about your care and consent to it will be in line with current best practice guidelines and legislation¹.

¹ These are published by the Department of Health, Social Services and Public Safety and the General Dental Council.

Minimum Standards for Dental Care and Treatment

Standard 6 - Receiving your care and treatment

[Effective communication and information]

You receive safe and competent care and treatment in a manner designed to put you at ease.

1. Any examination, investigation or treatment is only carried out after you have been advised about what will happen and you have given your agreement.
2. Any concerns you might have about treatment, including pain control or anxieties, are discussed. You are offered a range of pain and anxiety control options to help, as appropriate.
3. If medication is needed as part of your treatment, this is fully explained to you, including:
 - the reasons for taking the medication;
 - the consequences of not taking the medication;
 - any common side effects; and
 - how to get your medication.
4. If you need to be referred to another dentist, dental service or hospital for your continuing care and treatment, the dental service makes suitable arrangements for this, and you are told where you will be referred to, and the likely waiting times.
5. If you are assessed as needing an urgent referral, the dental service has a system in place to refer you, with your agreement.

Minimum Standards for Dental Care and Treatment

Standard 7 - Ongoing care

[Promoting, protecting and improving health and social well-being]

Having received initial care and treatment, the arrangements for your ongoing care needs, including who will provide it, are discussed and agreed.

1. The dental team explains your ongoing care to you and, agrees with you, the plan for how it will be provided, taking account of your oral healthcare needs and preferences.
2. You are provided with clear information and an explanation about what your responsibilities are in the ongoing care of your mouth and teeth.
3. As part of your ongoing care you will be offered routine check-ups at a frequency that reflects your oral health needs.
4. If any changes need to be made to your treatment plan, the dentist discusses and agrees these with you and any changes will be recorded.
5. You receive advice, tailored to your needs, about maintaining or improving your oral health and preventing problems. You have access to oral health improvement information.
6. You are informed of any potential long-term treatment needs you may have.
7. You receive information on how to get advice and emergency care out-of-hours.
8. You will be told if information about your care and treatment will be shared between your dental team and any service that you are referred to. If you do not agree to this, the team will respect this and explain any implications for your care.
9. You will be informed of arrangements for your continuing care if your dental service ceases to provide a service.
10. If your dental service is no longer able or willing to treat you, you are given reasons in writing.

Minimum Standards for Dental Care and Treatment

Standard 8 - The quality of your care and treatment

[Safe and effective care]

Your care and treatment is provided according to recognised current best practice and guidelines.

1. Your dental service reviews its performance of clinical treatment and care against current best practice guidelines. All relevant members of the dental team are involved in the review.
2. The ongoing process of review helps to inform improvements in practice and the standard of care and treatment that you receive.
3. The dental team adheres to radiation guidance and legislation to ensure that radiographs (x-rays) are taken safely and are appropriate.
4. Your dental team meets the General Dental Council's continuing professional development recommendations in relation to radiography and radiation protection¹.
5. The care and treatment you receive from the dental team takes account of all relevant guidance, regulations and legislation, including that from Department of Health, Social Services and Public Safety and General Dental Council standards and guidance and regulations.
6. If conscious sedation² services are provided, your team will be appropriately trained and equipped to provide this care and will deliver conscious sedation services according to recognised best practice and current guidelines.

¹ This applies to clinical members of the dental team: e.g. dentist, nurse or hygienist.

² Conscious Sedation is defined as:

A technique in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, but during which verbal contact with the patient is maintained throughout the period of sedation. The drugs and techniques used to provide conscious sedation for dental treatment should carry a margin of safety wide enough to render loss of consciousness unlikely.

[Source: *Conscious Sedation In The Provision Of Dental Care*, Department of Health, 2003]

Standard 9 - Expressing your views

[Effective communication and information]

The dental service welcomes, and actively seeks, your views to help it continuously improve the quality of care it provides.

1. You are made aware of the dental service's policy for handling any concerns or complaints you may have. The policy includes how long it will take to reply to any formal concerns or complaints raised.
2. You have the opportunity to make your views known on any aspect of the service and your care. You can do this confidentially, if you choose to.
3. In the first instance, concerns and complaints are handled at the practice level. You are made aware of how to raise concerns or complaints about your dental service with the service itself. You are also made aware of other organisations who may be involved in the complaints process, including the Health and Social Care Board, the Regulation and Quality Improvement Authority and the General Dental Council.
4. Your views and feedback, whether constructive or critical, are used by the service to improve it, as appropriate.
5. If you are unable, or feel unable, to express your views yourself, you can have a representative of your choice to help you.

Standard 10 - Confidentiality and information about you

[Effective communication and information]

The dental service/dental team keeps an accurate, full and up-to-date record of all aspects of your care. It uses, and stores, it in a manner that ensures your confidentiality, and is in line with current legislation and standards.

1. Your patient care record:
 - is confidential;
 - is used by members of your dental team to make sure there is continuity in your care and treatment;
 - contains up-to-date information recorded by members of the dental team about every aspect of your care on each visit; and
 - is kept in line with best practice guidelines.
2. All your personal information is stored securely.
3. Only you, and the people involved in your care, or other people agreed by you, have access to information held about you, unless there is a lawful basis for disclosure¹. Your dental service may charge for providing copies of this information.
4. If you are unclear about any part of your patient care record, you can ask for, and get, an explanation.
5. There is clear and effective communication about your care within your dental team and with other healthcare professionals involved in your care.
6. You are made aware of the statutory arrangements for the safe storage and retrieval of your patient care record if the dental service closes.

¹ Further information can be found in the *Code of Practice on Protecting the Confidentiality of Service User Information, DHSSPS, January 2009*.

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Standard 11 - The dental team and service management

[Corporate leadership and accountability of organisations]

Your care and treatment will be provided by a dental team that is appropriately qualified, skilled and registered to carry out its duties.

1. The dental service's recruitment and selection procedures comply with all relevant legislation including checks to ensure qualifications, registrations and references are bona fide.
2. You receive care and treatment from a dental team (including temporary members) who have undergone appropriate checks before they start work in the service. This includes checking:
 - The registration of professional staff with the General Dental Council, as appropriate;
 - Professional indemnity insurance, where relevant;
 - The lists of individuals barred from work with children and/or vulnerable adults. This will be done by way of an Enhanced Disclosure Check from AccessNI (Northern Ireland's Criminal History Disclosure Body); and
 - Health clearance, if required under Department of Health, Social Services and Public Safety guidance.
3. Each member of your dental team has received induction training, appropriate to their role, upon joining the service.
4. Your dental team takes part in continuing professional development and training to update knowledge and improve skills. Members of the dental team who are registered with the General Dental Council will meet the General Dental Council's continuing professional development requirements.
5. You receive care and treatment from members of the dental team who are able to raise concerns, in confidence, about any aspect of service delivery that they feel may harm patient care or the quality of the service. The service keeps a confidential record of all concerns raised and the action taken in response¹.
6. Your dental service has effective team working, including communication between dentists, dental nurses, hygienists, therapists, and other medical and social care professionals.
7. The first responsibility of the dental service is to ensure patient safety. Your dental service identifies any member of the dental team who is performing poorly and provides him or her with support. The service will operate in an open and fair way which will facilitate identifying poor performance and addressing these concerns appropriately.
8. Your dental team regularly reviews its performance and makes any necessary improvements.

¹ The GDC's document *Principles of Raising Concerns* is a useful reference document for the dental team

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Standard 12 - Medical and other emergencies

[Safe and effective care]

If there is an emergency while you are attending the dental service, the dental team is trained to deal with it.

1. Your dental service has an up-to-date written protocol for dealing with recognised medical and dental emergencies.
2. The whole team is suitably trained in dealing with emergencies and knows how to respond at any time.
3. Your dental team keeps its resuscitation and emergency care skills up-to-date and meets the General Dental Council's continuing professional development recommendations in relation to medical emergencies.
4. Your dental service has the appropriate equipment and drugs for treating medical emergencies. The equipment is kept in working order. All drugs kept by the service are within their expiry date and are stored safely.
5. The dental team is trained and will know what to do if there is a fire, or if the premises need to be evacuated.

Standard 13 - Prevention and Control of infection

[Safe and effective care]

The dental service takes every reasonable precaution to make sure you are not exposed to risk of infection.

1. Your dental service's premises are clean.
2. Your dental service adheres to the appropriate infection control policies and procedures, in line with current best practice and legislation.
3. Your dental service has systems in place, including induction and ongoing training, to make sure these policies and procedures are known, and are being appropriately applied to the service at all times.
4. Your dental service meets current best practice guidance on the decontamination of reusable dental and medical instruments.
5. Where required, you are informed about the need for procedures designed to prevent and control infection.
6. Your dental team will meet the General Dental Council's continuing professional development recommendations in relation to disinfection and decontamination.

Minimum Standards for Dental Care and Treatment

Standard 14 - Your care environment

[Safe and effective care]

The design, layout and facilities of the dental service will support the safe and effective delivery of your care and treatment.

1. You receive care and treatment in an environment that is suitable for your needs, gives you privacy and ensures your comfort.
2. The buildings, facilities and grounds of the dental service are maintained and reviewed in line with health and safety regulations and other relevant regulations and legislation.
3. The dental premises are equipped with instruments and materials appropriate to the clinical treatment provided.
4. All equipment used in support of your care and treatment is installed, checked and maintained in line with the manufacturer's instructions, current best practice guidelines and legislation.
5. Dental materials and drugs are stored and used safely.
6. If there is a failure in any major service¹, your dental service provides either back-up systems to allow your care to continue safely or postpone treatment until it is appropriate to continue.
7. The dental service has an ongoing risk management programme to ensure your safety. Any adverse incidents or near misses are reported through the appropriate route and followed through.

¹ e.g. a power cut

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Standard 15 - Children, young people and vulnerable adults

[Promoting, protecting and improving health and social well-being]

The care and treatment that children, young people and vulnerable adults receive from their dental service takes account of their special physical, psychological and social needs, and is provided in partnership with parents, guardians and carers.

1. The dental team is aware of the law on children, young people and vulnerable adults giving valid consent. The team understands the consequences if children, young people and vulnerable adults agree or refuse treatment.
2. Dental care provided for children and young people takes account of their different stages of development.
3. The dental team has procedures in place for child and adult protection which take account of regional child and adult protection guidance and established best practice. The dental team receives training in, and engages, these procedures when required. Refresher training on the protection of children and vulnerable adults should be provided for the dental team at least every two years.
4. All team members providing care for, or supervision of, or any form of treatment to children, young people or vulnerable adults should comply with the appropriate legislation for this group of patients.

Minimum Standards for Dental Care and Treatment

Appendix A

General information about dentistry

Health Service and private dental services provided in Northern Ireland

A range of options for treatment may be possible to address your oral health needs. These may be provided under the Health Service or a private care arrangement. Irrespective of whether care is provided under the Health Service or privately, your treatment should meet these Minimum Standards for Dental Care and Treatment.

Private care may offer a wider range of treatment choices and some treatment options that are not available within the Health Service, particularly cosmetic type dentistry.

Dentists are only required to provide treatment that they are competent to carry out. In certain cases, they may need to refer you to another dentist or specialist practice to meet your treatment needs.

How to get Primary Care dentistry

The Health and Social Care Board is responsible for commissioning Health Service dental services in your area. You can approach whichever dentist, either Health Service or private, that you would like to attend for your regular dental visits. You can also choose to move to another dental service. However the decision to accept new patients either Health Service or private is at the discretion of that dental service¹.

If your existing Health Service dental service closes down, the Health and Social Care Board will provide you with a list of Health Service dental practices in your area or may, in some cases, advise you where alternative arrangements are available.

The relationship between Primary Dental Care, Secondary Care and specialist services

Primary Care dentists will provide routine dental care and treatment. Some Primary Care dentists develop particular skills so that they can perform a wider range of treatments within the service. For some more complex or specialist treatments that your own dentist does not carry out (for example, orthodontics), you may be referred to a specialist in another dental service or a hospital (Secondary Care). Dentists who advertise their services as a specialist must be registered as a specialist with the General Dental Council.

¹ At the time of printing, a new Health Service dental contract is being negotiated between the DHSSPS and the British Dental Association (BDA), which, it is expected, will improve access for patients to Health Service dentistry.

Minimum Standards for Dental Care and Treatment

Looking after your own oral health - What are your responsibilities?

- You should take an active role in developing a treatment plan that you are happy with. Sometimes the preferred treatment option is not possible, due to health, special needs, co-operation difficulties or costs. To understand this, the people involved must know and agree when the preferred treatment option is not possible.
- Good treatment will depend on your co-operation in attending appointments, having necessary treatment carried out, following advice and maintaining your oral hygiene to the best of your ability.
- It is important that you let your dentist know of any changes to your general state of health or medication that may affect the treatment you receive.
- Dental diseases such as tooth decay and gum disease are largely preventable. With advice and encouragement from the dental team, you have an important role in improving your own oral and dental health.
- It is important that you understand, and follow, any advice and instructions the dental team gives you in relation to managing acute or painful infections.
- For patients who are very young or who have special needs, a carer may need to be responsible for home care routines such as tooth brushing or denture hygiene.

Preventing oral health problems

- **Dental decay** is a process which starts with food debris and bacteria gathering on teeth to form *plaque*. Bacteria in the plaque use sugar from the diet to produce acid that damages teeth. This results in dental decay (dental caries). You can reduce the disease by twice-daily tooth brushing with fluoride toothpaste and consuming less sugar, less often. Limiting intake of acidic drinks is also important to prevent erosion (excessive wear) of the teeth.
- **Gum disease** is the process where plaque bacteria cause damage to the gums and bone that support the teeth. There are two main gum diseases, called gingivitis and periodontitis. Some people are more likely than others to suffer from these diseases, but good tooth brushing, cleaning between the teeth with floss or other devices, visits to the dentist or hygienist for scaling, and not smoking will help to prevent them.
- **Oral cancer** is cancer of the mouth, jaws or surrounding areas. The dental team has an important role in finding problems early and improving the outcome for patients. They will also give advice on stopping smoking and cutting down on alcohol, which are the main causes of oral cancer.
- In Northern Ireland almost half of all 65-74 year olds and over half of all those 75 years, and over, have no natural teeth. The majority of those wear dentures to replace their missing teeth and some have implants to help improve stability of dentures or to support replacement teeth. For this group of patients, it is important to have regular check-ups as determined by their dentist to check for oral cancer, signs of infection and other diseases and conditions which can affect patients who have no natural teeth.
- Epidemiological data has demonstrated the poor health of Northern Ireland's school children. Over half of 5 year-olds have some dental disease. Dental disease can also be one of the signs of more general poor health and well-being.

Minimum Standards for Dental Care and Treatment

- The Oral Health Strategy¹ aims to close the oral health gap with our neighbours in the rest of the United Kingdom and to improve the quality of life for all our people by:
 - Improving the oral health of the Northern Ireland population;
 - Reducing the inequalities in oral health within our society.
- The strategy sets out a series of interlinked recommendations to achieve these aims. Oral health professionals are required to focus more on prevention, to link with other complementary health promotion programmes in order to maximise efficiency and to further develop partnerships with those outside the health sector such as schools, local councils and community groups.
- For more information on oral health, and the work going on to improve it, visit the Dental Branch section of the Department of Health, Social Services and Public Safety website:
<http://www.dhsspsni.gov.uk/index/dental/dental-whatsnew.htm>

¹ Oral Health Strategy for Northern Ireland, DHSSPS, June 2007

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Appendix B

Information about different types of dental services

Health Service Primary Care services

Service	Location	Types of care
General Dental Service	90% of dental care takes place in general dental practices. These practices may also be 'mixed practices', offering varying amounts of private dental care. Some services are provided in the patient's home.	Health Service dental care across Northern Ireland to patients registered with the service. Approximately half of the Northern Ireland population is registered with a dentist. There are 357 Health Service practices in Northern Ireland. <i>(Source: Business Services Organisation, March 2010)</i>
Community Dental Service	Health centres, Community Dental Service clinics or in the patient's own home. There are also dental surgeries within the prisons and Young Offenders Centre.	Health Service dental care for patients with medical problems, or special needs (including children, people with learning disabilities and elderly people in residential care), and other disadvantaged groups who cannot use an Health Service general dental practice. ¹
Salaried Dental Service	Dental practices, dental access centres, health centres, the patient's own home.	Access to Health Service General Dental Services where there is a local shortage of dentists to provide Health Service treatment.
Primary Care specialist services	High Street specialist practices.	Specific types of care not normally available from General Dental Practitioners, e.g. oral surgeons, orthodontists and endodontists.
Secondary Care dental services	Selected hospital sites.	A range of specialist care to treat more complex cases that are not appropriate for Primary Care. Access is via a referral from a General Dental Practitioner or General Medical Practitioner.

¹ This is detailed in the Community Dental Service Corporate Plan, DHSSPS, October 2006

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Private dental services

Service	Location	Types of care
Private Primary Care dental services	Wholly private dental practices or clinics. Health service general dental practices that also provide private treatment.	A broad range of private dental care and treatment, some of which is not available under the Health Service.
Private Secondary Care dental services	Wholly private dental practices or clinics.	A broad range of private dental care and treatment, some of which is not available under the Health Service. You may be referred from your own Health Service or private dentist.

Appendix C

Organisations involved in developing the standards

Dental Branch, Department of Health, Social Services and Public Safety (DHSSPS)

Dental Branch within the DHSSPS provides professional advice to the Minister, other professional and policy groups within the Department and to the wider Health and Social Care Sector on all policy matters related to dentistry. It has a key role in developing policy, guidance and legislation relevant to dentistry.

Safety, Quality and Standards Directorate (DHSSPS)

Safety, Quality and Standards Directorate (SQSD) is responsible for developing, publishing and reviewing care standards for regulated health and social care services with the aim of facilitating the delivery of safe, quality services.

These standards are designed to address unacceptable variations in the standard of care across Northern Ireland and to raise the quality of services across the statutory and independent sectors.

They will be used by the Regulation and Quality Improvement Authority in registering and inspecting establishments and agencies that deliver regulated services.

The *Quality Standards for Health and Social Care* were published in March 2006 to support good governance and best practice in the Health and Social Care organisations and help service users understand the quality of services they are entitled to. They also enable formal assessment, by the RQIA, of the quality of care commissioned or provided by Health and Social Care organisations.

SQSD also provides advice on the development of advisory standards by the Department.

Regulation and Quality Improvement Authority (RQIA)

The RQIA was established by the *Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003* and began work on 1 April 2005. It is the independent public body, sponsored by the Department of Health, Social Services and Public Safety, with overall responsibility for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland and encouraging improvements in the quality of those services.

In delivering on its responsibilities, RQIA exercises two main functions.

Firstly, it inspects the quality of health and social care services provided by Health and Social Care Services (HSC) bodies in Northern Ireland. These inspections take the form of reviews of clinical and social care governance arrangements within these bodies.

Secondly, RQIA regulates (registers and inspects) a wide range of health and social care services delivered by statutory bodies and by the independent sector. The regulation of services is based on minimum care standards which are being introduced for Northern Ireland to ensure that service users know what quality of services they can expect to receive. In addition, service providers have a benchmark against which to measure the quality of their services.

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Registration, inspection, complaints investigation and enforcement are carried out to consistent standards across Northern Ireland with the regulated services provided by both the statutory and independent sectors being treated in the same way.

RQIA is established with powers granted under the *Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003*. For more information please go to www.rqia.org.uk

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Appendix D

Organisations responsible for regulation, setting guidance & standards and monitoring of dental services in Northern Ireland

There are a number of statutory and regulatory bodies that monitor aspects of Health Service and/or private dentistry in Northern Ireland. This includes monitoring the quality of dental treatment, educational provision for newly-qualified dentists and the quality of dental practices. Key regulatory bodies are listed below, along with contact information, should you wish to know more about their individual roles and remits.

General Dental Council

The General Dental Council:

- registers all clinical members of the dental team in the United Kingdom;
- investigates misconduct;
- will operate a revalidation scheme.
- Private dental patients' complaints scheme.

GDC • [020 7887 3800](tel:02078873800) • www.gdc-uk.org

Private dental patients' complaints • www.dentalcomplaints.org.uk

Complaints • [0845 222 4141](tel:08452224141) • fitnesstopractise@gdc-uk.org

Department of Health, Social Services and Public Safety

- Sets overall policy for provision of dental services.
- Responsible for the development, and implementation, of legislation.
- Issues guidance and standards.

Dental Branch • [028 90 765633](tel:02890765633) • www.dhsspsni.gov.uk/pgroups/dental/dental.asp

Health and Social Care Board

- Commissions general dental practitioners (independent sector) and the Community Dental Service (Trusts).
- Admits new dentists onto the dental list and informs them of their responsibilities as a Health Service dentist.
- Ensures such dentists are indemnified and registered with the General Dental Council.
- Dental Advisers can inspect Health Service practices to ensure compliance with the relevant legislation and guidance.
- Dental Advisers carry out probity work on behalf of the Board, checking the financial appropriateness of Health Service claims.
- Dental Advisers carry out post treatment examinations of patients to assure the quality and probity of Health Service dental work.

Health and Social Care Board • [028 9032 1313](tel:02890321313) • www.hscboard.hscni.net

Health & Social Care in Northern Ireland • www.n-i.nhs.uk

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Regulation and Quality Improvement Authority (RQIA)

- The RQIA has a general duty to encourage improvements in the quality of services commissioned and provided by the HSC and other organisations. It promotes a culture of continuous improvement and best practice through inspection and review of clinical and social care governance arrangements.
- The RQIA is responsible for the regulation of the private dental sector.
- The RQIA is responsible for ensuring compliance with the Ionising Radiation (Medical Exposure) Regulations 2000 (IR(ME)R) as they apply to the dental profession.

028 90 517500 • www.rqia.org.uk

Business Services Organisation (BSO)

- The BSO administers the operational aspects of the General Dental Service including payments and prescriptions on behalf of the Health and Social Care Board.
- Dental officers at the BSO carry out pre-treatment checks and prior approval on larger clinical cases.
- BSO administers the Clinical Audit & Peer Review scheme which dentists are required to undertake.
- BSO generate practice profiles to monitor and compare practices in Northern Ireland.

Business Services Organisation • 028 9032 4431 • www.hscbusiness.hscni.net

Northern Ireland Medical & Dental Training Agency (NIMDTA)

- NIMDTA runs a wide range of postgraduate and Continuing Professional Development activities, largely aimed at primary dental care professionals.
- NIMDTA also runs the vocational training (VT) scheme and the general professional training (GPT) scheme for new dental graduates. These schemes are mandatory for graduates from UK dental schools who wish to hold a dental contract number in the future.
- Dentists who wish to become trainers on the VT or GPT scheme have their practices inspected and must attend preparatory courses.
- Checks on previous professional performance are also run with the DHSSPS, Health and Social Care Board and BSO.
- The Health and Social Care Board works together with NIMDTA to develop programmes aimed at helping with remedial training for underperforming dentists.

028 90 400000 • www.nimdta.gov.uk

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Appendix E

Membership of the development groups

Working Group

The following members make up the working group:

Mr Donncha O'Carolan	Acting Chief Dental Officer, Dental Branch, DHSSPS
Heather Clarke	Consultant, Dental Public Health, SHSSB
Hall Graham	Head of Primary Care Review RQIA
Professor Michael Deighan	NHS Clinical Governance Support Team
Anne O'Brien	Clinical & Social Care Governance Support Team

The following people were also invited to join the working group to represent the organisation indicated, but were unable to do so:

Gerard Collins	Standards and Guidelines Unit, DHSSPS
Rosemary Girvan	Tutor & Course Coordinator Belfast Institute of Further and Higher Education
Maggie Reilly	Health & Social Services Council

Reference Group

The following members comprise the reference group:

Mr Donncha O'Carolan	Acting Chief Dental Officer, Dental Branch (chair)
Dr David Hussey	Postgraduate Dental Dean Northern Ireland Medical & Dental Training Agency
Dr Chris Johnston	Consultant Orthodontist / Senior Lecturer, School of Dentistry
Ms Solveig Noble	Clinical Director of the Community Dental Service, Homefirst Healthcare Trust ¹
Mrs Aideen Sweeney	Clinical Director of the Community Dental Service, South & East Belfast HSS Trust

The following people were also invited to join the reference group to represent the organisation indicated, but were unable to do so:

Dr Ian Carson	Regulation, Quality and Improvement Authority
Lorna McGrath	Dental Care Professional

¹ Nominated to the group by the British Dental Association, Northern Ireland to represent their membership

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Glossary

BSO	Business Services Organisation
DHSSPS	Department of Health, Social Services and Public Safety
GDC	General Dental Council
HSC	Health and Social Care
HSCB	Health and Social Care Board
NHS	National Health Service
NIMDTA	Northern Ireland Medical & Dental Training Agency
QIS	Quality Improvement Scotland
RQIA	Regulation and Quality Improvement Authority
SHSSB	Southern Health and Social Services Board [one of the legacy Health Boards]
SQSD	Safety, Quality and Standards Directorate

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