

Dental Academy Clinical Criteria and Thresholds

1. Introduction

The Dental Academy now operates a mixed model of patient recruitment, where the Dental Academy accepts some referrals from GDPs for a defined range of activities, whilst maintaining a stable patient case load, by directly recruiting its own patients for comprehensive dental care. Referrals are restricted to mandatory services only rather than introducing advanced mandatory, specialist or additional services.

2. General Criteria

Referred patients will be accepted for specific rather than comprehensive care. Their treatment needs must be suitable and able to be provided by 5th year undergraduate dentists or hygiene/therapy students. A triage will take place on receipt of the referral and referrals may be returned at this stage if it is obvious that the referral is not appropriate. Referral criteria will be web based and referral pro forma will be electronic.

Patients will be assessed at their first appointment and if they are suitable for treatment at the Dental Academy, they will be offered treatment. If not they will be referred back with an outline treatment plan or recommendation (e.g. referral to specialist). Information on treatment carried out at the Academy and a future treatment plan, where appropriate, will be provided on discharge.

If patients require treatment post referral but prior to their first appointment this will be the responsibility of the referrer. Once the patient has had their initial appointment and been accepted, treatment for the care referred will be the responsibility of the Dental Academy. Comprehensive care will continue to be the responsibility of the referring dentist.

Direct referrals from GDPs will be accepted. The referrals will be jointly audited by the Dental Academy and NHS England Wessex Area Team.

Draft criteria and thresholds for the following specific treatments are set out below:

Periodontics/Gingivitis; Endodontics; Extractions; Paediatrics.

3. Periodontics/Gingivitis

Service Description

A minimum of one course of treatment and a maximum of two courses will be offered with the aim of leading to stabilisation of disease.

Courses of treatment will include:

- a) Assessment, diagnosis, and radiographs where necessary.
- b) Oral Health Education.
- c) Routine periodontal treatment (supragingival scaling).
- d) RSD by quadrant under local anaesthetic where needed.
- e) Reassessment.

The patients will then be referred back, with a treatment summary, to the referring GDP for ongoing care and maintenance.

Details of the patient's smoking history and current level of oral hygiene must be included on referral.

Acceptance criteria:

- **BPE score of 2, 2*, 3*, 4 or 4* in at least 2 sextants.**

Exclusions:

- **BPE score of 1**

Capacity

Once the waiting list reaches 3 months, the web page will indicate its temporary closure and referrals will be returned without the patient being seen.

4. Endodontics

Service Description

Patients will attend for assessment and treatment planning including radiographs if appropriate. Patients will then attend for root canal treatment and be discharged once treatment is complete. A treatment summary will be sent to the referring GDP.

If the tooth is unrestorable, the patient may have the tooth extracted at the appointment, or will be referred back with extraction recommended.

Acceptance criteria:

- Conventional endodontics on all teeth if appropriate (i.e. restorable or of strategic value to the restorative care of the patient).

Exclusions:

- Teeth requiring retreatment, removal of posts or apicectomy are outside the scope of treatment at the Dental Academy.

Capacity

2 referrals per week over the 36 week clinical academic year, managed by dedicated appointment slots.

The waiting list will be temporarily closed once there are 8 patients waiting and referrals will be returned without the patient being seen. This is to ensure waiting times, on average, do not exceed 1 month. The web page will indicate the waiting list status.

5. Extractions

Service Description

Patients will attend for assessment and treatment planning including radiographs if appropriate. Patients will attend a further appointment for extraction and will be discharged with post-operative instructions. A treatment summary will be sent to the referring GDP.

Acceptance criteria

Extractions which are appropriate for primary care and do not require hospital facilities.

Exclusions:

- Surgical or potential surgical extractions of 8s.
- Patients receiving bisphosphonate therapy/patients considered to be at high risk of developing bisphosphonate associated osteonecrosis of the jaw (BONJ).
- Patients with a highly complex medical history or anatomy.
- Patients who are very anxious/require sedation.

Capacity

1 referral per week over the 36 week clinical academic year, managed by dedicated appointment slots.

The waiting list will be temporarily closed once there are 12 patients waiting and referrals will be returned without the patient being seen. This is to ensure waiting times, on average, do not exceed 1 month. The web page will indicate the waiting list status.

6. Paediatrics

Service description

Patients will attend for assessment and treatment planning if suitable. Patients will then attend for treatment and discharged back to referring GDP once treatment is complete. A treatment summary will be sent to the referring GDP.

Acceptance criteria:

- Patients requiring one or more restorations which are appropriate for primary care.
- Patient can tolerate treatment under local anaesthesia.
- ALL referrals must have recent good quality intraoral radiographs (within last 6 months) of teeth requiring treatment.

Exclusions:

- Patients who are very anxious/require sedation.
- Patients with special needs or complex medical history.
- Orthodontic assessment or orthodontic extractions.
- Patients requiring GA extraction.

Capacity

3 referrals per week over the 36 week clinical academic year, managed by dedicated appointment slots.

The waiting list will be temporarily closed once there are 12 patients waiting and referrals will be returned without the patient being seen. This is to ensure waiting times, on average, do not exceed 1 month. The web page will indicate the waiting list status.