Referrals to Derbyshire Community Dental Services

We are pleased to receive referrals from:

Hospital Doctors
Specialist Nurses
Care Homes
Health Visitors
Social Care Teams
School Nurses
General Dental Practitioners (GDP)
General Medical Practitioners
Community Learning Disability Teams
Community Mental Health Teams
Practice Nurses

Referrals eligibility:

The CDS will provide services to the eligible population resident in Derbyshire. Eligible residents will have patient choice and may access the CDS most convenient to them in Derbyshire and Nottinghamshire (excluding Bassetlaw) and will not be confined to their local Provider.

Referrals must be made on grounds of clinical need, NOT for example:

- Patient / Parent's request
- If requirement for Wheelchair access or an interpreter is the sole reason for referral

Referrals can be made regarding any of the following client groups whose needs significantly affect the provision of dental care and who cannot be treated in General Dental Practice. This may mean that clients move in and out of eligibility (and as such would be shared care cases) or are only eligible once they reach a certain stage in the progress of their condition.

Acceptance Criteria

Client Group	Details
Children with complex dental anomalies including complex dental trauma	Severe molar incisal hypomineralisation, suspected amelogenesis or dentinogenesis imperfecta, hypodontia, cleft lip and palate causing long-term sequelae. Trauma to teeth involving avulsion / luxation / pulpal involvement
Adult/Child with complex medical conditions	For example: Multiple Sclerosis, Motor Neurone Disease, Parkinson's, Blood Dyscrasia, Autistic Spectrum Disorder Patients due to start haematological oncology treatment
Adult/Child Moderate to Severe learning disabilities	Significantly affecting ability to attend appointments and to co-operate. Would need at least one designated carer / family member to accompany to appointments Needing additional communication skills such as Makaton – specific holding skills and adjuncts to achieve dental treatment.
Adult/Child Mental Health (under mental health team or with moderate to severe dementia)	Must significantly affect provision of dental care. Patients will be under the current care of a registered mental health care practitioner.
Adult Unable to Leave Home	For example patient is confined to bed, on home oxygen, or for whom leaving the home would be too distressing- eg very advanced dementia or severe agoraphobia. Patients who can transfer to a wheelchair using a rotunda / hoist would preferably be seen in clinic- using EMAS transport if required.
Child Behavioural/Anxiety (single course of treatment)	Single course of treatment only Up to the age of 16 yrs: • Referrals will be accepted for a single course of treatment for those who require treatment but are unable to cope with local anaesthetic alone and who fall into the following groups: pre-school

	children AND children with behavioural issues, moderate anxiety or phobia • LA must have been considered. • Details of treatment already attempted must be included in the referral. • All patients will be assessed, and care will be offered in the way considered most appropriate; this may be behaviour management, inhalation sedation or general anaesthesia. • Following specific treatment, the patient will be returned to the referring GDP or supported to find a GDP for routine care including provision of dentures if needed. We will not accept these patients for regular care in the service. • General anaesthetic is not offered for orthodontic extractions
Adults with severe dental phobia or dental anxiety	All patients will be triaged to assess their eligibility to access care within CDS-CIC.
Children involved with children's services eg looked after children	Whilst the children are in care and until we can support them to find a family dentist. Please provide details of their social care team / specific worker
Other vulnerable groups eg substance misuse/homeless	Cases will be assessed on an individual basis and we will place services where these patients can access us directly
Adult/Child with moderate/severe physical and/or communication impairment	Would require a hoist / rotunda for transfer Use a personal moulded wheelchair Require a specific carer to help them to communicate
Severely obese with complex co-morbidities	Please include weight, height and details of compounding factors
Severe frailty (scoring 8 or 9 on the Clinical Frailty Scale) https://www.england.nhs.uk/ourwork/clinical-policy/older-people/frailty/frailty-risk-identification/	8 : Very Severely Frail – Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness. 9: Terminally Ill - Approaching the end of life. This category applies to people with a life expectancy <6 months, who are not otherwise evidently frail.

Referral / Patient Journey

1. Referral Received at Tapton Park Innovation Centre, SPA Team

2. Referral Assessed by Clinician

If fits criteria patient will be sent an invite for assessment	Referral doesn't fit criteria- referrer and patient notified

If the patient doesn't respond to the invite within 4 weeks the referrer will be notified and a subsequent referral will be required should care still be needed

3. Assessment visit

Assessments are carried out in local clinics. However some services are only available at specific locations and patients will need to travel to access this	If the patient is deemed manageable within General Dental Practice (ie not requiring our specialist services) they will be returned with appropriate advice and/or a treatment plan. Patients without a dentist will be advised how to access care.

4. Treatment

If patients are accepted for treatment, it is on the understanding (of the patient and/or parent/carer and the referring dentist) that a single item of treatment or a complete course of treatment will be undertaken and then the patient will be discharged back to their referring GDP for review and continuing care.

For some patients, at the discretion of CDS-CIC, it may be appropriate for continuing care to be provided within CDS-CIC because of the patient's additional needs.

It is recognised that patients' needs do change with time, and the appropriateness of their care within CDS-CIC will be reviewed. Patients may be discharged after receiving care from CDS-CIC for a period of time if their ongoing dental needs can be provided by a GDP.

A shared care model may also be adopted whereby routine examination, oral health assessment and preventative care is provided by a GDP whilst clinical interventions are provided by CDS-CIC.

5. Patients that fail to attend/ are not brought to appointments

Patients who fail to attend their initial assessment appointment will not normally be offered a further appointment. The referrer will be informed that they have not attended and be asked to re-refer them if they still require treatment. Subsequent to the initial assessment patients will be discharged following either two missed appointments or two short notice cancellations. Such patients will not be offered further appointments without re-referral and reassessment against the acceptance criteria. Safeguarding concerns will be managed in accordance with CDS-CIC policies

Accessibility

If a patient cannot manage stairs at an existing GDP practice, and does not have any other special needs requiring specialist care, the patient should be directed to call NHS England's Customer Contact Centre on 0300 311 2233 or visit the NHS England website (www.england.nhs.uk/contact-us/) to find a more accessible GDP.

Referrals should be made to: cdsderbyshire.referrals@nhs.net

All General Dental Practitioners must refer via this route and it is mandatory that this referral is made via nhsmail.

Paper referrals are acceptable from non-dental referrers please send to:
Community Dental Services
SPA Team
Tapton Park Innovation Centre
Brimington
Chesterfield
S41 0TZ

If you are unsure if a patient is a suitable candidate for referral to the Community Dental Service or would like some advice on a particular issue, please ring the office on 0333 207 9958 and one of our senior clinicians will contact you to discuss the case.

NHS Dental Patient Charges when referred from a GDP

Referrals for courses of treatment that include IV sedation, GA, inhalation sedation and domiciliaries are defined as 'additional service contracts'. In this case, all treatment is carried out as two separate courses of treatment.

The referring dentist carries out the work they are doing e.g. exam, completes the course of treatment at that point and only charges the patient for what they have done. They will receive the appropriate number of UDA's for the work they have carried out.

As the second dentist carrying out treatment under 'additional services', we would then charge the patient separately for the treatment we carry out and receive the appropriate number of UDA's for this work.

See NHS BSA Dental Division home page, click on 'Ask Us', type in 'additional services' in the search criteria box and then click on 'Additional services referral-what is this and how do I claim for it?', or the web address is as follows:

https://nhsuk.epticahosting.com/selfnhsukokb/template.do?name=Additional+services+referral+-+what+is+this+and+how+do+I+claim+for+it%3F&id=16363

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