Remobilisation of dental services

On 20 May 2020 the Chief Dental Officer for Scotland (CDO) sent a letter describing the first steps for the remobilisation of NHS dental services in Scotland. He later issued notice that the dental phases would be aligned with the wider route map framework in the COVID-19 – A Framework for Decision Making. On 30 July 2020 he provided an update on his views regarding aerosol generating procedures (AGPs) and the ability for practices wishing to provide a limited range of AGPs for NHS patients in need of urgent oral health care in practice from 17 August 2020.

Following the cessation of dental services on 23 March 2020:

- Three Urgent Dental Care Centres (UDCCs) opened on 24 March 2020 – one for symptomatic patients and two for non-symptomatic patients.
- A further three UDCCs were operational by 14 May 2020.
- The UDCCs had a phased reduction from 22 June 2020 when practices started re-opening and on 29 July 2020 there were one AGP UDCC and three UDCCs for unregistered patients.
- The UDCCs had received 3780 referrals as on 29 July 2020 – the highest daily total of referrals received was 107 on 15 June 2020.
- General dental practitioners (GDPs) and public dental officers (PDOs) have been working together from the start. In response to COVID, GDPs and PDOs joined ranks to provide emergency dental care at public dental service UDCC facilities.
- Practices complied with official requests for business continuity plans; ensuring premises were fit and ready for patients at each phase.

This article highlights the partnership work and sterling efforts of both services; not just clinical teams but also triage nurses and the administration team, who helped to co-ordinate urgent dental care. This ensured dental services were available to those most in need during the pandemic in Lanarkshire.

Dental teams in the general and public services have come together to ensure that our patients received the urgent treatment they needed during the most worrying and uncertain time imaginable. The service also relied on the administrative support given by the public dental service and primary care services teams.

Through the regular updates the Scottish Government have provided guidance to help practices prepare and express the gratitude for the work being undertaken. It is the measure of the ‘can do’ Lanarkshire attitude that has helped to navigate the way safely. When the going gets tough, dentistry in Lanarkshire works hard together to make things happen.
NHS inform has continued to provide information to the general public during the COVID-19 pandemic. The Scottish Dental Clinical Effectiveness Programme has developed several resources for use during the COVID-19 pandemic including information for the Management of Acute Dental Problems and guidance for the dental team.

NHS Education for Scotland are also developing a range of educational and induction resources for all health and social care staff. This currently includes mouth care advice and supporting online resources to enable practitioners to continue to provide mouth care during the pandemic in a variety of health and social care settings.

It is available via NHS Education for Scotland TURAS Learn and particularly useful for health and social care staff deployed or redeployed to support services in response to COVID-19.

Mouth care is part of everyday personal care therefore should be undertaken at the same time. Although independence should be encouraged, those who are unable to maintain a clean mouth should be given assistance and support.

Information is available for those providing care and support in care homes, at home and in hospital settings and covers the following:

- Appropriate Personal Protective Equipment
- People with natural teeth
- People with dentures
- All hospitalised patients including critically ill and ventilated patients
- End of life.

Guidance, standard operational procedures and protocols should be readily available for all staff providing care in each setting.

High quality mouth care should be a routine part of standard care provided and all health and social care staff should be aware that looking after the oral tissues is just as important as looking after teeth.

This is due to the increased risk of associated aspiration pneumonia caused by a build-up of plaque bacteria and oral secretions which still forms in the mouths of patients who have no natural teeth, are nil by mouth, tube fed or receiving oxygen therapy.

Effective oral hygiene is especially important for ventilated patients in intensive care to reduce ventilator-associated bacterial pneumonia. Cleaning of the teeth and gums with chlorhexidine mouthwash or gel, using wet non-fraying gauze can be effective.

Therefore mouth care is essential for those who are critically ill and should continue during end of life as long as it is not causing distress to the patient or resident.

Many common oral conditions can be managed if oral health assessment is carried out, the level of support is identified and mouth care and comfort is maintained.

The resources are available at:


Monklands Women’s Aid
Children and Young Persons Services – Oral Health Project

The Health Improvement Department have funded a variety of oral health improvement community projects this year. One such project was undertaken by Monklands Women’s Aid Children and Young Persons Services. Children and young people (CYP) they support are affected by domestic abuse. For some, brushing their teeth, taking regular baths and showers are not a priority. At times the non-abusing parent can suffer from mental health issues so that simple tasks such as supervising toothbrushing, implementing bed time routines, and making healthy meals are challenging. Some CYP do not have a dentist or doctor due to moving to different areas.

CYP who attended the youth service were consulted about the oral health fund. The CYP worked together and agreed that self-care packs would be something every CYP who accessed the service would receive. These packs contained a water bottle, face flannel, deodorant, soap/shower gel, toothbrush and toothpaste. The CYP also came up with the idea of producing a booklet to provide information regarding oral health and improving their physical and mental wellbeing.

Thirteen CYP participated in the planning and design of the booklet. CYP also took part in fun activities that promoted personal hygiene and oral health; including a toothbrushing exercise, activities that promoted their confidence and self-esteem, and they researched facts about healthy eating.

As a result of the project CYP have a better understanding of healthy eating and can identify which food and drinks are good for their teeth. They also report having a better understanding of the adverse effects of not brushing their teeth can have including losing teeth, and low self-esteem. CYP are now aware of the importance of visiting a dentist regularly.

At the time of the project, 2 out of 13 children did not have a dentist. For those two children, a dentist was put in place and both children required fillings and braces.

To date 55 CYP in the service have accessed the self-care packs and booklets. They are hoping to reach over 163 CYP in a 12-month period.

To promote further learning the CYP will now be supported to develop their knowledge on tobacco. In particular they will look at the impact that smoking has on their oral health regarding tooth staining, gum disease, tooth loss and mouth cancer.

The draft version of the booklet is available at: www.monklandwomensaid.co.uk/children-young-person-services/health-and-wellbeing
Marieke Brands is NHS Lanarkshire’s newest consultant in oral and maxillofacial surgery. Originally from the Netherlands, Marieke joined the health board in May 2020 and is based at University Hospital Monklands.

Marieke specialises in head and neck cancer. She studied medicine in her native country the Netherlands before taking up a fellowship in Portsmouth. From there, she moved to Glasgow where she worked as a fellow in trauma and head and neck oncology before taking up a job as a locum consultant in head and neck oncology at Queen Elizabeth University Hospital in April 2019.

Marieke said: “It is great being part of the team at University Hospital Monklands. There is a great ‘can do’ attitude and team spirit throughout the hospital, everyone really works together. The patients in Lanarkshire are lovely. They are very cooperative and grateful. Also, there have been a lot of new head and neck cancer cases for me to manage since I joined.”

“Clearly I joined the team during the most challenging time that the NHS has ever faced, right in the midst of the Covid-19 pandemic. However, clinical and managerial staff have been really accommodating and helped us to still see cancer patients.”

Marieke has a combined role with the Queen Elizabeth University Hospital in Glasgow, where she will operate on the patients that require free tissue transfer.

Patricia Thomson recently becomes president of the West of Scotland Branch of the British Dental Association (BDA). She is a general dental practitioner (GDP) in Cumbernauld and Faculty of General Dental Practice (FGDP) National Board Member for the North and West of Scotland. She is also the Chair of the Membership Affairs Committee of the FGDP (UK).

Patricia has served on the Board of the FGDP (UK) for the past four years, and this is her second term of office. She has previously been involved in education, membership and professional affairs committees. After 32 years of practice ownership, Patricia is currently working as an associate dentist. She was actively involved in vocational training for many years and continues to present study sessions on the role of the GDP in orthodontics.

Patricia is an active member of the West of Scotland division of FGDP (UK) as an MJDF (Membership of the Joint Dental Faculties) tutor, preparing candidates for various examinations.

Patricia said: “In the FGDP’s West of Scotland division, we are about to embark on virtual tutoring for the MJDF exam and intend to open this resource to new graduates and vocational dental practitioners (VDPs) (foundation training) who are finishing their training year unsure of future employment. We want to keep them involved in the community of dental practice.”

Patricia added: “The blended learning model of teaching will be the only vehicle for delivery of educational programmes for some time; however, this may deliver unexpected benefits.”

Patricia gained an MSc in primary dental care with an interest in orthodontics from Glasgow University in 2013, MJDF RCS Eng in 2014 and became a member of the Royal College of Physicians and Surgeons of Glasgow in 2015. She was admitted as a Fellow of the International College of Dentists in 2017.