

Direct access

PJS Care Ltd

In 2013 the GDC removed its barrier to Direct Access for some dental care professionals in the best interest for patients.

'Direct access' means giving patients the option to see a dental care professional (DCP) without having to see a dentist first and without a prescription from a dentist.

Dental hygienists and therapists

Dental hygienists and dental therapists can carry out their full scope of practice (except tooth whitening) without needing a prescription from a dentist.

Our dental hygienist and therapists work along-side our dentists, providing joint-care for our patients.

There are very rare circumstances when they cannot start treatment, and before they prepare to continue, they may require a dentist to assess you.

This may relate to your medical history and general health or condition of your mouth which gives them concern.

Our dental hygienist is Patricia Rimmer.

Our dental therapist is James Kinsey.

Clinical dental technician

A Clinical dental technician can directly treat, create and fit a complete set of dentures to patients who have experienced total tooth loss.

Any treatment provided for patients with teeth or implants is done on prescription from a dentist.

Our clinical dental technician is Andrew Lindley.

Dental nurses

Dental Nurses can participate in preventative programmes without the patient having to see a Dentist. (Eg. Fluoride application)

Treatment provided under Direct Access can only be provided if Dental Care Professionals (DCPs) are trained, competent, and indemnified to do so.

Consent

Consent is obtained from all patients undertaking treatment and for any referral to other members of the dental team.

Diagnosis

Hygienists and therapists practising under direct access are not expected to make a diagnosis beyond their scope of practice.

They should refer to a dentist (or other relevant healthcare practitioner) when they identify areas of concern or when treatment is required that is out of their scope of practice.

Referral to a dentist

In some cases, a patient may require a referral to a dentist.

In all cases, the need for referral will be explained to the patient and their consent obtained.

Tooth Whitening

The GDC state that Dental Hygienists and Dental Therapists can be trained in tooth whitening as an additional skill. However, even with Direct Access, tooth whitening still needs to be carried out on prescription by a Dentist. This is due to the Cosmetic Products (Safety) Amendment Regulations 2012, which implement EU Directive 2011/84 EU.

The regulations state that tooth whitening can only be carried out on the prescription of a Dentist, and tooth whitening products containing or releasing between 0.1% and 6% hydrogen peroxide (or its equivalent) can only be sold to dental practitioners.

The first use of each cycle can be carried out by Dental Hygienists and Dental Therapists under the direct supervision of a Dentist (that is, with a Dentist on the premises)

The Dentist needs to be assured that the Dental Hygienist and Dental Therapist is trained and competent to carry out this treatment on the patient. After this, the products can be provided to the patient to complete the cycle of use.

Radiography

Under the terms of the Ionising Radiation (Medical Exposure) Regulations 2000 or IR(ME)R (and further update in 2006), registered Dental Hygienists and Therapists are able to take on the roles of 'operator', 'practitioner' and 'referrer'.

Dentists remain the only member of the team who can 'report' on all aspects of a radiograph.

Local Anaesthesia

The GDC state that local anaesthetic is a prescription-only medicine (POM) which means that under the Medicines Act 1968 it can only be prescribed by a suitably qualified prescriber – usually a Dentist. However, it can be administered by both Dental Hygienists and Dental Therapists either under a written, patient-specific prescription or under a Patient Group Direction (PGD).

A PGD is a written instruction which allows listed healthcare professionals to sell, supply, or administer named medicines in an identified clinical situation without the need for a written, patient-specific prescription from an approved prescriber. PGDs can be used by Dental Hygienists and Dental Therapists.

Patient Group Direct

The dentists responsible for the patients care and referral to the therapist agree as a team that local anaesthetic can be provided without an explicit detail in the referral, following these requirements:

- The patient is willing to receive LA
- The therapist feels it is appropriate to offer LA
- LA is used within maximum doses and usually well below
- LA is used with full awareness of potential allergies/drug interactions
- LA is used with training on how to respond to adverse reactions, e.g. faint

This also includes the use of topical anaesthetic.

The following are routinely available for use:

- Lignocaine 2% + adrenaline 1:80,000
- Articaine 4% + adrenaline 1:100,000
- Mepivacaine 3% + plain [no adrenaline]