

## Wales De-escalation Pandemic Plan for Dentistry

### Aim

The aim will be to implement a phased, risk-based re-establishment of dental services to meet population needs.

### Objectives:

- Prioritise dental care for at risk groups, and people with symptoms/ more urgent routine dental problems;
- Increase practice-based care dental provision to meet population oral health needs.
- Maintain emergency/urgent dental care provision (COVID and non-COVID) to meet requirements;
- Re introduction of routine dental care and dental prevention activities based on risk.

This will run within a process of **Restoration** of dental care services.<sup>1</sup>

This approach will be based on risk to minimise the possibility of transmission of COVID to patients and the dental team within the dental care setting or during dental care procedures.

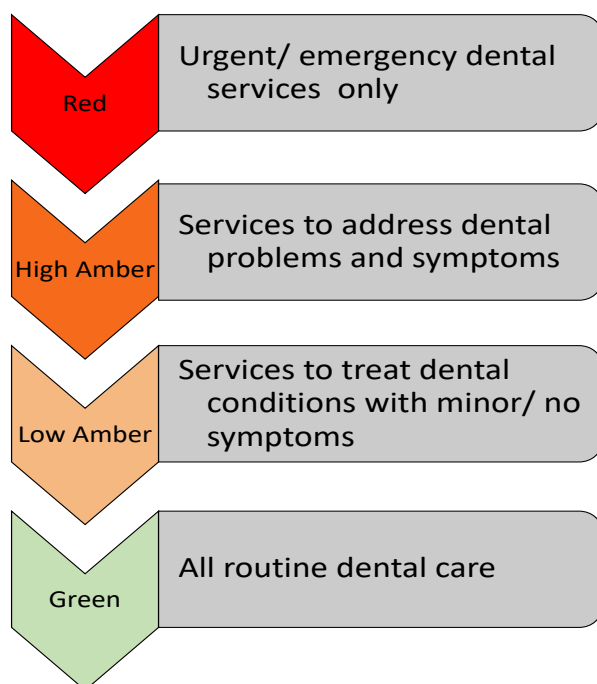
### De-escalation principles

This approach aims to deliver dental services in a way that prioritises dental care services for those most at risk of serious complications. A staged process will reintroduce dental care procedures.

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<sup>1</sup> RESTORATION OF DENTAL SERVICES POST COVID-19: DE-ESCALATION OF RED ALERT PANDEMIC PLAN

### De-Escalation Alert Levels and Dental Services



During de-escalation, services in Primary dental care services (GDS and CDS) will be extended for patients without symptoms of COVID 19 from emergency and urgent only to dental cases with dental symptoms (e.g. dental pain but not meeting criteria for urgent), then to cases with a need for treatment without dental symptoms then to routine dental care for all. Aligned to this, the range of treatments offered will be increased, with priority given to treatments to address more severe issues first.

### Decisions about de-escalation status

The move to High Amber, Low Amber and Green de-escalation will be announced by the Chief Dental Officer for Wales. Decisions will be based on emerging evidence relating to community transmission and risks of transmission and prevention of transmission within the dental environment.

There may be requirements for local variation during de-escalation, depending on a number of factors including:

- Local disease epidemiology and community disease transmission;
- Levels of immunity in the population;
- Practices may be asked to return to Escalated Red Alert if they are operating in areas identified as having high levels of circulating disease. De-escalation will then be reintroduced when the area returns to a state of low community transmission.

### Criteria for delivery of dental care in general dental practice

- Low risk of transmission (Patients should not have symptoms of/suspected/ confirmed COVID-19 or low/ no community spread, known immunity/ vaccination);
- Procedures offered should be based on risk (Appendix 1);
- Safe systems of work to include PPE (De-Escalation Standard Operating Procedures).

## **General Dental Practice**

### **During High Amber**

- Increase availability of dental care in general dental practice to include non-AGP treatments for dental conditions causing pain and other dental symptoms for patients who do not have symptoms of COVID-19;
- Increase availability of treatment to include non-AGP care for patients who are currently being treated for orthodontic or who are in the middle of a course of dental treatment to manage/address issues or potential issues arising from their care;
- Minimise unnecessary clinical contact and maintain social/physical distancing in accordance with guidance to reduce the risk of person to person spread;
- To avoid unnecessary public health risks, aerosol generating procedures will continue to be limited to Health Board designated Urgent dental centres (U/EDDCs). These will continue to treat people with symptoms of COVID who need Urgent/ Emergency treatment and all patients who require aerosol generating procedures.

## **Dental Procedures and Care**

### **During Low Amber**

- Increase availability of non-AGP dental care for patients who do not have symptoms of COVID-19 in general dental practice to include treatments for dental conditions which may cause pain and other dental symptoms;
- Increase availability of treatment to include non-AGP care for patients who are currently being treated for orthodontics or who are in the middle of a course of treatment to manage their care;
- U/EDDCs will continue to treat people with symptoms of COVID who need Urgent/ Emergency treatment and all patients who require aerosol generating procedures;
- It is possible that during this phase, there may be evidence to support the reintroduction of some procedures which are currently deemed as AGP into primary dental care. The reintroduction of any procedure currently deemed as AGP to primary dental care settings will require approval by the CDO and agreement with public health teams/ health board leads/ HIW. This will only apply to situations they have all agreed that there is evidence to indicate that transmission risk is low or can be significantly reduced and all procedures and resources are in place for this to be managed safely.

### **Transition to Green**

A full range of dental services will be re-established in general dental practice during the green phase.

### **Urgent/ Emergency Dental Care**

- The range of AGPs offered in U/EDDCs will be maintained and services will continue until the point where centres are no longer necessary (due to reduced/ managed risks for care in practice). During the amber phase, it is likely that acceptance criteria may be expanded to include situations where there is a justification for the risks of an AGP, where risks can be managed and where there is capacity to do so;

- The number of sites providing AGPs may be extended to meet local urgent/emergency dental treatment need. If required, Local Health Boards will identify sites with capacity for enhanced cross-infection, donning doffing areas, training and sufficient personal protective equipment and specialist/ highly experienced staff and all sites will be subject to local inspections.

### **Additional considerations**

There are a range of issues that will affect this process:

#### *Capacity to deliver services*

- The delivery of care will be affected by transmission risk;
- Lowering the urgent/ emergency threshold criteria for dental care will increase the numbers of patients eligible for dental care and careful management will be needed to meet this need;
- Managing the numbers of patients with oral health issues that have not been resolved/developed during the period of urgent/emergency only dental care;
- Wider issues beyond the control of dental teams i.e. social distancing requirements, availability of PPE.

#### *Workforce, practices and laboratories*

- Some of the workforce may be unable to work in dental practice for some time due to health conditions / risk of complications;
- Risk assessments will be required for dental team members who may be at risk and further occupational health guidance may also be necessary;
- Activity levels will be significantly affected during de-escalation which will affect all practices;
- Dental laboratory services will need to be considered in detail alongside safe systems of work.

#### *Dental training*

- Undergraduate and postgraduate training, to include further training for dental nurses in non-AGP procedures and cross infection processes;
- Skills maintenance and training for newly/recently qualified dentists, hygienists, therapists and nurses due to reduced activity and inexperience;
- Dental training for dentists, hygienists, therapists and nurses will involve much less clinical activity during these phases which will need to be considered.

## Appendix 1

### Red

Provider	<b>General Dental Practice (face-to-face care)</b>	<b>Urgent Designated Dental Centres (face-to-face care)</b>	<p><b>Delay all routine dental treatment</b></p> <p>Including all non-urgent/ non-emergency including procedures using:</p> <ul style="list-style-type: none"> <li>• high-speed handpieces</li> <li>• ultrasonic scalers</li> <li>• surgical handpieces</li> <li>• 3 in 1</li> </ul>
Patient	<b>Patients with NO symptoms of COVID who need Urgent/ Emergency only Care people</b>	<b>People with symptoms of COVID who need Urgent/ Emergency treatment and all patients who require aerosol generating procedures</b>	
What	<b>Urgent/ Emergency</b> procedures with low risk of aerosol generation	<b>Urgent/ Emergency treatment</b> procedure involving any of the following: <ul style="list-style-type: none"> <li>• A need for aerosol generation</li> <li>• A high risk of aerosol generation</li> <li>• A high-risk patient</li> </ul>	
Which procedures?	<ul style="list-style-type: none"> <li>• Dental Examination</li> <li>• Assessment of soft tissue lesions</li> <li>• Radiographs</li> <li>• Temporary Dressings</li> <li>• Local anaesthetic</li> <li>• Minimally invasive restorative procedures</li> <li>• Simple extractions</li> <li>• Incise and drain abscess</li> </ul> <p>*procedures should NOT involve the use of 3 in 1, high speed handpiece or ultrasonic devices (<i>treatment offered should be based on risk assessment of patient, operator, time and difficulty of procedure</i>)</p>	<ul style="list-style-type: none"> <li>• Restorative procedures including initial endodontic care for anterior and premolar teeth** using high-speed handpieces and</li> <li>• Use of surgical handpieces/ surgical/ difficult extractions</li> <li>• Use of ultrasonic scalers</li> <li>• Procedures involving the 3 in 1</li> </ul> <p>(<i>treatments offered will depend on risk assessment to include: patient, operator, time and difficulty of procedure</i>)</p> <p>** where the tooth is predictably restorable and will be well maintained.</p>	

Patients who are shielded or who require domiciliary dental care will be managed by the community dental services using agreed pathways.

## High Amber De-escalation

Provider	<b>General Dental Practice (face-to-face)</b>	<b>Urgent Designated Dental Centres (face-to-face)</b>	<p><b>Delay routine dental care</b></p> <p>Delay all non-urgent/ non-emergency treatment procedures using:</p> <ul style="list-style-type: none"> <li>• high-speed handpieces</li> <li>• ultrasonic scalers</li> <li>• surgical handpieces</li> <li>• 3 in 1</li> </ul> <p>for all people with and without COVID-19.</p> <p>Advanced/ complex procedures involving aerosol i.e. advanced restorative and implants should also be delayed.</p>
Patient	<b>People with NO symptoms of COVID who have Urgent/ Emergency dental care needs who require care to alleviate dental symptoms/ manage oral health conditions</b>	<b>People with symptoms of COVID who need Urgent/ Emergency treatment and all patients who require aerosol generating procedures</b>	
What	Necessary treatment with low risk of aerosol generation	<p><b>Urgent/ Emergency treatment</b> procedure involving any of the following:</p> <ul style="list-style-type: none"> <li>• A need for aerosol generation</li> <li>• A high risk of aerosol generation</li> <li>• A high-risk patient</li> </ul>	
Which procedures?	<ul style="list-style-type: none"> <li>• Dental Examination</li> <li>• Assessment of soft tissue lesions</li> <li>• Radiographs</li> <li>• Temporary Dressings</li> <li>• Local anaesthetic</li> <li>• Minimally invasive restorative procedures</li> <li>• Fitting of previously constructed crown/ bridgework</li> <li>• Simple extractions</li> <li>• Incise and drain abscess</li> <li>• Denture treatment care</li> <li>• Periodontal care with hand scalers</li> <li>• Orthodontic treatment</li> </ul> <p>*procedures should NOT involve the use of 3 in 1, high speed handpiece or ultrasonic devices (treatment offered should be based on risk assessment of patient, operator, time and difficulty of procedure)</p>	<ul style="list-style-type: none"> <li>• Restorative procedures including initial endodontic care for anterior and premolar** teeth using high-speed handpieces</li> <li>• Use of surgical handpieces/ surgical/ difficult extractions</li> <li>• Use of ultrasonic scalers</li> <li>• Procedures involving the 3 in 1</li> </ul> <p>(treatments offered will depend on risk assessment to include: patient, operator, time and difficulty of procedure)</p> <p>** where the tooth is predictably restorable and will be well maintained.</p>	

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## Low Amber De-escalation

Provider	General Dental Practice (face-to-face)	Urgent Designated Dental Centres (face-to-face)	
Patient	<b>Urgent/ Emergency dental care and limited routine care for patients with NO symptoms of COVID</b>	<b>People with symptoms of COVID who need Urgent/ Emergency treatment and all patients who require aerosol generating procedures</b>	<b>Delay routine dental care for people with symptoms of/ confirmed COVID</b>
What	Dental procedures with low risk of aerosol generation	<b>Urgent/ Emergency</b> Procedure with a low risk of aerosol generation with a high-risk patient <b>Urgent/ Emergency</b> Procedures with a high risk of aerosol generation	
	<ul style="list-style-type: none"> <li>• Dental Examination</li> <li>• Assessment of soft tissue lesions</li> <li>• Radiographs</li> <li>• Temporary Dressings</li> <li>• Local anaesthetic</li> <li>• Minimally invasive restorative procedures</li> <li>• Restorative procedures without high speed handpieces</li> <li>• Simple extractions</li> <li>• Incise and drain abscess</li> <li>• Management of soft tissue lesions</li> <li>• Denture treatment care</li> <li>• Fitting of previously constructed crown/ bridgework</li> <li>• Periodontal care with hand scalers</li> <li>• Orthodontic care</li> <li>• Application of fluoride varnish</li> <li>• Orthodontic treatment</li> </ul> <p>*procedures should NOT involve the use of 3 in 1, high speed handpiece or ultrasonic devices (<i>treatment offered should be based on risk assessment of patient, operator, time and difficulty of procedure</i>)</p>	<ul style="list-style-type: none"> <li>• Restorative procedures including initial endodontic care for anterior and premolar teeth ** using high-speed handpieces</li> <li>• Use of surgical handpieces/ surgical/ difficult extractions</li> <li>• Use of ultrasonic scalers</li> <li>• Procedures involving the 3 in 1</li> </ul> <p>(<i>treatments offered will depend on risk assessment to include: patient, operator, time and difficulty of procedure</i>)</p> <p>** where the tooth is predictably restorable and will be well maintained.</p>	<p>Delay all non-urgent/ non- emergency treatment procedures using:</p> <ul style="list-style-type: none"> <li>• high-speed handpieces</li> <li>• ultrasonic scalers</li> <li>• surgical handpieces</li> <li>• 3 in 1</li> </ul> <p>for all people with and without COVID-19.</p> <p>Advanced/ complex procedures involving aerosol i.e. advanced restorative and implants should also be delayed.</p>

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Green De-escalation

Provider	<b>General Dental Practice (face-to-face)</b>	<b>Urgent Dental Centres (face-to-face)</b>	<p><b>Delay all routine dental care for patients with symptoms of COVID Including:</b> Non-urgent/ non- emergency procedures using</p> <ul style="list-style-type: none"> <li>• high-speed handpieces</li> <li>• ultrasonic scalers</li> <li>• surgical handpieces</li> <li>• 3 in 1 air water</li> </ul>
Patient	<b>All patients with NO symptoms of COVID</b>	<b>People with symptoms of COVID</b>	
What	<b>Routine, Urgent and Emergency procedures</b>	<b>Urgent/ Emergency</b> Dental procedures with/ without a high risk of aerosol generation	
	<b>All routine dental care.</b>	<ul style="list-style-type: none"> <li>• Restorative procedures including initial endodontic care for anterior and premolar teeth** using high-speed handpieces and</li> <li>• Use of surgical handpieces/ surgical/ difficult extractions</li> <li>• Use of ultrasonic scalers</li> <li>• Procedures involving the 3 in 1</li> </ul> <p><i>(treatments offered will depend on risk assessment to include e patient, operator, time and difficulty of procedure)</i>            ** where the tooth is predictably restorable and will be well maintained.</p>	

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