

**From the Chief Dental Officer
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**To all dental practitioners in Northern Ireland
(For cascading to all dental team members)**

Dear Colleagues

Endorsement of SDCEP Conscious Sedation in Dentistry: Dental Clinical Guidance (Third Edition)

The Department of Health convened a short life working group to review the two most recent UK publications regarding the safe and effective use of conscious sedation in Dentistry.

Membership of this group included clinicians from general dental practice, community and hospital dental services, as well as high street oral surgery and the former HSCB (now SPPG).

Many of you will already be aware of the Scottish Dental Clinical Effectiveness Programme (SDCEP), whose key aim is to evaluate the best available information that is relevant to dentistry and present it as user-friendly, evidence-based guidance to support dental teams in providing clinical care and treatment.

The Department of Health in Northern Ireland has now endorsed the third edition of SDCEP ***Conscious Sedation in Dentistry***. This guidance aims to promote good clinical practice through recommendations for the safe and effective provision of conscious sedation for dental care. For the third edition, the guidance has been subject to a thorough update using SDCEP's NICE accredited methodology taking into account specific developments, including communication with the Intercollegiate Advisory Committee for Sedation in Dentistry (IACSD) regarding the IACSD Report, published in 2015.

The dental faculties of the Royal Colleges of the UK and Ireland have all formally endorsed the SDCEP guidance and the Royal College of Anaesthetists has expressed its support of it.

Please note that this guidance applies to both inhalation sedation and intravenous sedation techniques.

The guidance is not available in print, but as a downloadable online resource available at <https://www.sdcep.org.uk/published-guidance/conscious-sedation/>

I am very grateful to the working group, chaired by Michael Donaldson, for their valuable time and contributions, and thank the SDCEP for the opportunity to formally endorse this important guidance.

It is important to note that for many aspects of the provision of conscious sedation for dentistry, despite thorough searching, little research evidence to inform the recommendations was found. In such cases, recommendations have been informed by recent guidelines through considered judgements made by the guidance development group at SDCEP.

Please find enclosed a short 'Frequently Asked Questions' to assist with common queries.

In order to provide time for practitioners to familiarise themselves, the guidance will be effective from **1st November 2022**. It has been agreed that RQIA will amend their inspection methodology to reflect the guidance and will be used for relevant practice inspections from 1st December 2022 onwards.

HSC Trusts will need to amend their quality assurance processes to reflect this endorsement for conscious sedation provided by the CDS and HDS.

I trust this guidance will support you and the wider dental team in providing safe and effective care to your patients.

Yours sincerely

Caroline Lappin .

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Chief Dental Officer

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Stephen O'Connor, RQIA
Clinical Directors, Community Dental Services, HSC Trusts
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Enc Frequently asked questions.pdf

Frequently Asked Questions

1) Can I use conscious sedation to put my patient to sleep?

General anaesthesia is not permitted in the primary dental care setting in the UK.

Conscious sedation is a technique in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, but during which verbal contact with the patient is maintained throughout the period of sedation. Conscious sedation can be delivered via inhalation sedation and by i.v. sedation.

Any technique resulting in the loss of consciousness is defined as general anaesthesia, and in the UK deep sedation requires the same level of care

It is important that a wide margin of safety is maintained between conscious sedation and the unconscious state provided by general anaesthesia

Verbal contact should be maintained at all times during a conscious sedation procedure.

2) Do I need any extra Life Support training to carry out conscious sedation in my practice?

You should ensure that the facilities, your knowledge, and skills required for the prompt recognition and immediate management of sedation-related complications and medical emergencies are in place. Immediate Life Support training as laid down by the Resuscitation Council (UK) must be undertaken.

Life support courses that cover the main elements of Resuscitation Council (UK) defined Immediate Life Support (ILS) and Paediatric Immediate Life Support (PILS), and which are adapted to the needs of dental practice, are acceptable. It is not necessary to undertake a Resuscitation Council (UK) accredited ILS or PILS course.

3) Where can I obtain training to allow me to practice on patients with conscious sedation?

All healthcare professionals new to sedation (i.e., who cannot demonstrate existing experience and maintenance of knowledge, skills and competency) are expected to undertake validated training, relevant for their role and the techniques to be used, before practising. Validated training is training delivered by a number of recognised providers.

4) Can I refer my patients to be treated under conscious sedation?

Yes, patients can be referred for treatment under conscious sedation, but the referring practitioner must assess that treatment under conscious sedation is appropriate and absolutely necessary. Referring practitioners should also assess the patient is within the guidelines regarding age and medical fitness before referring.

Referrers are reminded of their responsibilities as stated in the GDC *Standards for the Dental Team* Standard 4.1.6i and Standard 6.3.1ii

You should only delegate or refer to another member of the team if you are confident that they have been trained and are both competent and indemnified to do what you are asking.

5) If I refer my patient for dental treatment under conscious sedation, what details should I forward?

Besides the patient's details, a reason why conscious sedation is required, that other treatment adjuncts have failed, and a full and comprehensive medical history should be forwarded. For further information please see Section 3.1 of the SDCEP guidance.

6) Does conscious sedation work in every patient?

Conscious sedation is not effective for every patient, but operators should still adopt the principle of minimal intervention, using the simplest and safest effective technique, based on patient assessment and clinical need

7) Can verbal consent be used for treatment under conscious sedation?

It is a requirement of GDC standards (Standard 3.1.6) iii that written consent is obtained where dental treatment involves conscious sedation.

As conscious sedation includes IV sedation and relative analgesia, contemporaneous consent is required when either technique is administered.

The consent process should begin at a separate appointment prior to treatment unless there are exceptional circumstances (e.g., acute pain). Where written consent was obtained at a prior visit, this should be reconfirmed, at least verbally, on the day of the procedure.

8) If my patient has taken or being given a premedication, can they give valid consent?

A patient who has already taken or been given a premedication cannot give valid consent for treatment.

9) Are there any templates available for recording treatment under IV sedation?

Dentists can use their own recording methods for treatment under IV Sedation, but this should be comprehensive. Examples are widely available.

10) Do I need a specific room to be used as a recovery room?

Any suitable area can be used as a recovery room even if that area has other purposes during times where conscious sedation is not being carried out. This area should be easily accessible by the trained staff and suitable for recovery purposes.

Other frequently asked Questions regarding Conscious sedation are available by the following link:

[Standards for Conscious Sedation FAQ — Royal College of Surgeons \(rcseng.ac.uk\)](http://rcseng.ac.uk)

References

i GDC Standards for the Dental Team. Standard 4.1.6 If you refer a patient to another dental professional or other health professional, you must make an accurate record of this referral in the patients notes and include a written prescription when necessary.

ii GDC Standards for the Dental Team. Standard 6.3.1 You can delegate the responsibility for a task but not the accountability. This means that, although you can ask someone to carry out the task for you, you could still be held accountable if something goes wrong. You should only delegate or refer to another member of the team if you are confident that they have been trained and are both competent and indemnified to do what you are asking.

iii GDC Standards for the Dental Team. Standard 3.1.6 You must obtain written consent where treatment involves conscious sedation or general anaesthetic.

With thanks to the members of the conscious sedation short life working group:

- Michael Donaldson (Chair), Head of Dental Services HSCB*
- Martin Curran, Specialist in Oral Surgery, Oral Surgery Practice
- Victoria Adams, Specialist in Oral Surgery, School of Dentistry, BHSCT

- Julie Kelly, Specialist in Paediatric Dentistry, Dental Advisor HSCB*
- Grainne Quinn, Clinical Director CDS, Specialist in Paediatric Dentistry WHSCT

*HSCB closed on 31st March 2022 and its functions transferred to the Department of Health as the Strategic Planning and Performance Group (SPPG)

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