



Department of
**Health, Social Services
and Public Safety**
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Letter from the offices of the Chief Dental Officers, England, Northern Ireland, Scotland and Wales

For circulation to all dentists in the UK

Dear Colleague

Standards for Conscious Sedation in the Provision of Dental Care

Our purpose in writing is to clarify the way forward for the consideration of the findings of the *Standards for Conscious Sedation in the Provision of Dental Care* Report. The four CDOs have met with representatives from the Intercollegiate Advisory Committee for Sedation in Dentistry (IACSD) with a view to addressing this.

We have asked The Scottish Dental Clinical Effectiveness Programme (SDCEP) to apply their rigorous methodology to consider the IACSD Report and how best it might be taken forward; particularly taking account of risk to patients, the practicalities of implementation, and potential impact on current services and training. In the first instance we have asked SDCEP to consider how the report's findings might relate to dental primary care and the dental team. It is important to recognise that the systems are different in the various countries of the United Kingdom. Whilst the potential implications in terms of service delivery, training, and regulation will consequently be different; there will also be common issues. SDCEP has considered this topic fairly recently (in 2012) and aims to provide user-friendly, evidence-based guidance to support dental teams to provide high quality healthcare that is safe, effective and person centred. They have recently been liaising with the other United Kingdom countries with the potential to formally endorse reviews of guidance, and participate in the development of new guidance.

We recognise, as does the IACSD, that the evidence in many areas is sparse, but the recommendations in the document are far reaching. When the SDCEP process is complete, and the CDOs have considered its findings, we will write to you again to set out our guidance to dental teams.

We will also be considering, as a separate issue, protocols for developing any such guidance documents in the future, and additional processes whereby formal standards might be applied by the United Kingdom governments and statutory

regulatory bodies. We would hope that that this would make matters less confusing for report writers and practitioners alike. We anticipate that there will be a formal commissioning process accompanied by an agreed methodology by which guidance is developed.

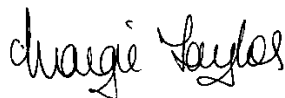
Yours sincerely,



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