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**Private & Confidential**

Date: 27<sup>th</sup> August 2020  
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Dear Colleagues,

I am writing to provide you with details about our modified referral acceptance criteria that it has been necessary to introduce within secondary care dental services in the wake of the Covid-19 pandemic.

This change is in response to the COVID-19 pandemic during which routine secondary care services pausing of these services at Glasgow Dental Hospital and other sites for repurposing as UDCCs and staff redeployment internally and externally to help manage the pandemic. This has led to a review of what secondary care specialist services will be able to provide in a reduced capacity in the short to medium term and has been undertaken in conjunction with stakeholders including the Local Dental Committee.

As the spread of COVID-19 slows, we are beginning to restart our services in line with Scottish Government guidance. This will be a gradual process and it is unclear at this time when we will be able to return to full capacity as patient and staff safety and wellbeing is foremost.

To ensure that the most clinically urgent patients are seen first, all new referrals and patients on waiting lists will be carefully reviewed by the clinical teams and prioritised accordingly. This will result in some patients having to wait longer for treatment. In order to manage our existing patients and the demand moving forward we have reviewed and rewritten our referral acceptance criteria which are attached. Some patients will fall out with the revised scope of secondary care and will therefore require to be managed in primary care, with additional guidance from specialised services if appropriate. The exception to this being where a patient's oral/ general condition becomes acute or significantly debilitating.

Changes are also being made to the way services are delivered and some of your patients will likely be offered a telephone or video appointment (Attend Anywhere) where appropriate, as an alternative to or instead of a face to face appointment. Furthermore, we may write to you with advice you can follow to allow you to provide the patient's care in your practice. These are processes, which have already been successfully used during COVID-19 by the clinical teams. We may also ask your patient to attend for radiographs or other diagnostic investigations prior to consultation.

These new pathways form part of the Active Clinical Referral Triage (ACRT) process adopted within NHSGGC. This process means the clinician will have better quality information available to them regarding your patient's condition at triage and will allow decisions on the most appropriate method of providing care if deemed necessary or alternatively returning the patient to your care with the relevant advice for your onward management.



Mr Alan Donaldson  
Clinical Director