

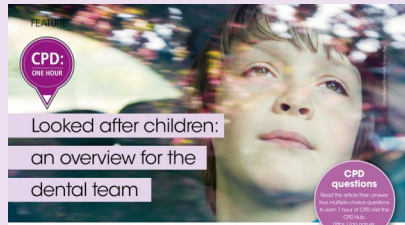
# BDJ Team CPD



## CPD questions March 2023

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### Article: Looked after children: an overview for the dental team

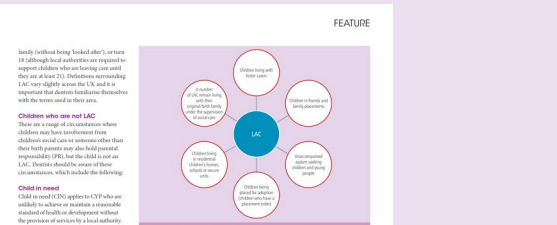


**CPD: ONE HOUR**

**Looked after children: an overview for the dental team**

This BDU paper by **Lucy Riddale, Laura Johnston, Nadia Jones and Richard Balmer** addresses specific issues of consent for looked after children (LAC) and includes a flowchart as a working tool to determine who has consent in a variety of circumstances.

**Author information**  
 Lucie Riddale is a paediatric dentist at South Essex Health NHS Foundation Trust, South Essex, UK. Laura Johnston is a paediatric dentist at Birmingham Children's Hospital, Birmingham, UK. Nadia Jones is a paediatric dentist at Birmingham Children's Hospital, Birmingham, UK. Richard Balmer is a paediatric dentist at Birmingham Children's Hospital, Birmingham, UK.



**FEATURE**

**Child in need**  
 Child in need (CIN) refers to a child who is unable to achieve or maintain a reasonable standard of health or development without the provision of services by local authority. This can be due to disabilities, safeguarding concerns and other factors (Children Act 2004).

**Child protection**  
 Child protection refers to the actions taken to prevent a child from being harmed or abused. This can be done through a range of measures, including child protection orders, child protection conferences, and child protection plans.

**Consent for dental treatment**  
 The dental team must ensure that they have the appropriate consent for dental treatment. This can be obtained from the child's parent or guardian, or from the local authority if the child is a looked after child.

**FEATURE**

**Oral health needs and a plan for ongoing dental care provision form part of the health plan and report\***

**Being informed - caring for LAC**  
 LAC are often in care for a significant period of their lives. It is important that they are given the opportunity to be involved in decisions about their care, including their dental care.

**Consent for dental treatment**  
 The dental team must ensure that they have the appropriate consent for dental treatment. This can be obtained from the child's parent or guardian, or from the local authority if the child is a looked after child.

### 1. LAC:

- A. stands for Local Authority Children
- B. are all children or young people
- C. are at lower risk of dental caries and pain
- D. have been under the continuous care of the local authority for more than two months

### 2. What question is recommended to ask of a child to establish the relationship of the adult who accompanies them to a dental appointment?

- A. who is this?
- B. is this your birth parent?
- C. who have you brought with you today?
- D. have you ever felt insecure in this person's company?

### 3. LAC are:

- A. almost four times less likely to have special educational needs than children who are not care experienced
- B. easy to care for on a regular basis as they rarely move address
- C. likely to have distinctly different health issues from their peers
- D. almost four times more likely to have special educational needs than children who are not care experienced

### 4. In relation to consent and LAC:

- A. once a child reaches the age of 16, they can consent for their own dental care, providing they have capacity
- B. LAC cannot give consent as, by definition, they are looked after
- C. the child can give consent at any age in conjunction with who holds parental responsibility
- D. children under the age of 16 cannot consent even if they are considered to be 'Gillick competent'

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