

Level 1	Level 2	Level 3	Level 4
<p><b>Dental</b></p> <p>It needs to be acknowledged that there are current difficulties in accessing a NHS dentist; complications of addressing oral health needs in relation to special educational needs (self-restrictive diets and oral aversion); children who have additional vulnerabilities such as children in care; and developmental defects of teeth and/or oral health</p> <p>Child(ren) have good oral health. Child(ren) is registered with a dentist and/or have access to dental treatment when they need it. They have frequent dental checkups.</p> <p>Parents are aware of the impact of high sugar food and drink, and move away from the use of bottles to free flow cups at the appropriate age.</p>	<p>Oral health routines inconsistent e.g. frequency of tooth brushing twice daily is not routinely followed; parents use inappropriate bottles with teats.</p> <p>Diet mainly consisting of processed food/ high sugar content.</p> <p>Registered with a dentist and/or taken only when treatment is needed.</p>	<p>Parent/carer does not meet the oral health/dental needs of child(ren) despite support from early help support services.</p> <p>Delay in addressing oral health needs impacting child's health and wellbeing e.g. pain, infection, impact on eating, sleeping and play/education.</p> <p>Child(ren) have poor oral health and are not registered or taken to the dentist when required e.g. dental treatment is delayed if needed.</p> <p>Child(ren) referred to special care dental service and parent/ carers refuse or persistently cancel / do not take child(ren) to appointments/follow plan or advice.</p>	<p>Parent/carer persistently unable to meet child(ren)'s oral health/ dental needs, which has serious impairment on the child's health, wellbeing, development and activities of daily living e.g. pain, infection, impact on eating, sleeping and play/education.</p> <p>Child(ren)'s teeth are decayed, they have or are at risk of infection due to parental refusal or non-engagement to support good oral health.</p> <p>Child(ren) require multiple teeth extracted due to persistent dental decay due to parental refusal or nonengagement to support good oral health.</p> <p>Wilful delay in accessing care for dental trauma (no attempt made to access dental care for dental injuries) and inconsistency in history and pattern of injury.</p> <p>No medical/dental care is sought by the parents/caregiver where there is oral health issues, to include dental trauma and repeated occurrences of pain/ infection.</p> <p>No change to poor oral health despite professional support and interventions.</p>