

Compass COVID-19 triage form for Mandatory Dental Services - England only

FAQs – Updated 27 November 2020

This document has been prepared to provide additional information for questions not covered in the COVID-19 triage form guidance document.

NHSBSA has been working with dental system suppliers to allow COVID-19 triage forms to be transmitted directly from your practice management system (PMS).

The Compass changes are due to be live on 1 December 2020 and NHSBSA will be able to accept COVID-19 triage submissions from PMS systems from this date.

If the PMS supplier software you currently use for transmitting your dental submissions has not yet provided their triage update for you, please continue to use the Compass eForm.

For contracts not using PMS software please continue to use the Compass eForm for triage submissions.

When should I complete a COVID-19 triage form?

If a practice is open for face to face appointments a triage form must be completed either electronically via PMS or using the original Compass eForm in the following situations:

- When an NHS patient is given remote advice either by a Dentist or DCP.
- When an NHS patient is referred to a UDC for treatment after being assessed by a Dentist or DCP.
- If an NHS patient fails to attend for a face to face appointment made following remote advice given by either a Dentist or DCP.

NOTE: A triage form is not needed if a patient calls to make a routine appointment and then fails to attend this appointment.

How should I capture the patient COVID-19 risk assessment data?

A triage form does not need to be completed for the remote COVID-19 risk assessment that is required before a patient is seen in the practice. This risk assessment should be recorded in the patient record.

PMS suppliers have been asked to update their software to include fields to capture patient COVID-19 status with the FP17 transmissions.

For contracts not using PMS software there will be a period of transition until this data can be transmitted using the Compass on-line FP17.

Please refer to section 1.1 on patient management in [Issue 5, Preparedness letter for primary dental care - 13 July 2020](#)

If my practice is closed should a COVID-19 triage form be submitted for both NHS and private patients when giving remote management?

If a practice needs to close due to:

- Local tiered lockdown
- Track and Trace lockdown
- COVID-19 isolation issues

A triage form needs to be completed in every circumstance when a patient (NHS or private) is given remote advice.

Who can provide patient advice to record on a COVID-19 triage form?

Advice can be given by any Performer who is registered on the [Dental Performers List for England](#) and is associated with any open NHS dental contract in Compass.

A Dental Care Professional (DCP) can give out appropriate advice to the patient as long as it is within their [scope of practice](#).

If I am a DCP providing advice within my scope of practice – how do I record this on compass?

The new changes will include an indicator to reflect when the triage has been completed by a DCP. However, all records must include a Dental Performer's personal number.

Who has access to create a COVID-19 triage form in Compass?

The COVID-19 triage reporting form is available, and data can be entered by the following users:

- Performer
- Business Owner
- Practice Manager/Administrator
- Activity Manager

What is the guidance for patient charges and when to submit an FP17?

Existing Regulations have not changed and still apply.

If a Performer has face to face contact with a patient to carry out only Urgent treatment as detailed in Schedule Four of the NHS Dental Charges Regulations, then an FP17 should be submitted for the Urgent treatment provided.

If however the Performer has face to face contact with a patient, completes an examination and provides temporary treatment to stabilise a tooth or teeth with a view to providing the definitive treatment once the decision has been made within the practice to re-commence routine dental care, then it would be appropriate to open a Banded course of treatment which should remain open until such time as the proposed treatment is definitively completed – there is no limit to the length of time a course of treatment may remain open.

I have completed a COVID-19 triage form incorrectly what do I need to do?

Once a Compass eForm has been submitted it is not possible to amend or delete the record therefore make a note on the patient's clinical record.

However, if triage data is included on a FP17 record the submission can be amended using the same process as you would use to amend any other field on the FP17.

What data should be collected from a COVID-19 triage call?

Please refer to the [Dental standard operating procedure: Transition to recovery](#) document for more information.

Details of the data to be collected to complete the Compass triage form has been included as an appendix in the user guidance.

Will the Urgent Dental Care hubs have a different data collection form for face to face treatment?

FP17s should be completed for all patients who are physically treated in an Urgent Dental Care (UDC) hub (if the UDC has an open Compass contract).

If only telephone triage advice is provided at the UDC, you should complete a COVID-19 triage form. If this results in a referral and subsequent physical treatment then an FP17 should also be submitted.

Do I continue to write actual clinical notes in the patient record?

Dentists are expected to maintain clinical records as per the [Dental Record Keeping Standards document](#) following remote triage. This should include information on

assessment, necessary self-care advice and appropriate prescriptions for analgesics and/or antimicrobials by telephone.

Does the patient have to sign the PR form or Medical History form?

In order to avoid any risk of infection, the receptionist or dental nurse should inform the patient that the forms are being signed on their behalf. The receptionist or dental nurse must sign the form and state '*Signed on behalf of the patient due to COVID 19*'. This will ensure that if the patient records are reviewed in the future it will not be questioned why the patient did not sign the forms.