

**Code of Practice relating to:**

# Professional Behaviour and Ethical Conduct

Promoting transparency and enhancing public  
confidence in the dental profession

March 2022

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### 1

## Guiding principle of the Code

### About the Dental Council

The main role of the Dental Council is to protect the public. By law, the Dental Council must guide the dental profession on all aspects of ethical conduct and behaviour. (Section 66 of the Dentists Act 1985.)

### About this Code

The bond of trust between a dentist and a patient is at the centre of dentistry. This code was prepared with this in mind. We expect that this code will be read by your patients also. For this reason, it is written in plain English to help all your patients to understand the high standards expected of you as their dentist.

### Guiding standards

We expect you, as a practising dentist, to meet high standards of practice and behaviour. We also expect you to uphold the good reputation of the profession in the community.

It is important that you comply with our guidance. If you do not comply with this guidance, it may result in Fitness to Practise proceedings against you under the Dentists Act 1985.

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## General principle of the Code

To promote confidence and trust between you, your patients and the wider community, you are expected to:

- safeguard the health, safety and welfare of your patients;
- promote the dental and oral welfare of your patients and the community;
- uphold an appropriate standard of conduct – both personal and professional – to make sure the public’s trust and confidence in the dental profession is maintained, and to protect the good reputation of the profession;
- keep your clinical and professional skills and knowledge up to date through continuing professional development;
- know when to refer to a colleague or other professional, and know when it is correct to delegate to other members of your dental team;
- be fair and honest in your dealings with patients, colleagues and staff, and never knowingly give false, incorrect or misleading information to a patient, the Dental Council or any third party;
- uphold the reputation of the profession by acting with honesty and integrity, as patients should be able to trust you and expect you to act in their best interests at all times;
- work continuously to promote a culture of respect, trust and a focus on the individual person to ensure the patient receives person-centred care; and
- comply with all codes of practice issued by the Dental Council.

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## Your responsibility to your patients

### Patient welfare

- 3.1 Your duty is to ensure the safety, welfare, dignity and human rights of your patients by upholding the provisions of the Equal Status Acts 2000–2018. Under these Acts, all patients are entitled to be treated equally, no matter their:
- race;
  - gender;
  - marital status;
  - family status;
  - sexual orientation;
  - religion;
  - age;
  - disability or health status; or
  - ethnicity, including membership of the Travelling community.
- 3.2 You must always do your best to care for and treat all patients and always act in their best interest.
- 3.3 You must show courtesy and respect in all your dealings with patients, parents, guardians and carers.

## Emergency care

### Reasonable access to emergency arrangements

- 3.4 You are expected to make reasonable arrangements that are appropriate to your practice to give your patients access to emergency out-of-hours advice and care.

You should take reasonable steps to ensure that your patients know about these arrangements – for example, recording the information on your voice-message service, or posting it on your website.

### Respond to an emergency

- 3.5 You must always respond to a dental emergency – even if the emergency involves patients who do not normally attend your practice. When responding to an emergency, your professional judgement is very important, and you should only carry out treatment if it is safe to do so for everyone – both patients and the dental team.

A dental emergency usually involves symptoms suggesting that urgent treatment may be required – for example, trauma, bleeding, or sepsis (a life-threatening response to infection).

You should follow your professional judgement and assess all risks when deciding how to care for patients.

### Ensure you have adequate insurance and indemnity

- 3.6 You must hold appropriate professional indemnity cover (insurance).

### Have the necessary knowledge and skills

- 3.7 You must keep yourself up to date with current thinking and developments

appropriate to the range and level of your practice and responsibilities. You should be able to provide evidence that you have undertaken sufficient continuing professional development and personal development to keep your clinical knowledge and skills up to date, and to support your professional obligations.

## 4

### Treating your patients A patient's best interest

- 4.1 You must not encourage a patient to undergo any treatment that is not in their best interest.
- 4.2 Your patient is entitled to refuse treatment. If your patient refuses treatment, you must record your advice and the patient's refusal to undergo the treatment in the patient's records.

### Carry out justified treatment in line with patient's wishes

- 4.3 You must only carry out treatment that you can justify.
- 4.4 You must not carry out treatment that is against your patient's wishes. For a dependent patient (for example, a child), you must respect the wishes of the patient and consider the wishes of their parent or guardian (or any other party holding guardianship responsibilities for the patient).

### **Your competence**

- 4.5 You must only offer to undertake treatments that you are trained and competent to complete safely and to a satisfactory standard.
- 4.6 If you do not have the necessary skills to carry out a recommended treatment safely and to a satisfactory standard, you must offer to refer the patient to another dental healthcare professional who has the skills and competence required to treat your patient.

### **Treatment must be completed**

- 4.7 If you accept a patient for treatment, you must do your best to complete the agreed course of treatment safely and to a satisfactory standard.
- 4.8 If you start an agreed course of treatment and find that you are unable to complete it, you must offer to refer your patient to another suitably competent dental healthcare professional. Explain your reasons for doing this to the patient and note your reasons in their records.

### **Before starting treatment**

- 4.9 Before starting any treatment, you must give your patient a realistic expectation about the benefits and possible outcomes (results) of treatment.

- 4.10 Before starting any treatment, you must give your patient information on the main risks of the treatments they are to receive. You must give them this information in a clear and concise way, using language and terms they will understand. You must check that the patient understands the risks, and you should keep a note of this conversation in your patient's records.  
You must allow your patient to ask any questions that will help them to decide whether or not to go ahead with treatment.

- 4.11 Before starting any complex treatment, it may be helpful to give your patient time to think about their decision before starting treatment.

### **Patients are entitled to a second opinion**

- 4.12 Patients are entitled to a second opinion. If a patient requests it, you must refer them to another suitably trained and competent dental healthcare professional.

## Manage remote consultations and treatment

This section is about providing remote dental care, advice or treatment using information technology (including the telephone) rather than by direct personal contact with the patient. You are still obliged to obtain informed consent when providing remote dental care.

### Choose direct and face-to-face consultations where possible

4.13 Direct, face-to-face patient consultations must remain your normal practice. You must only do remote consultations in emergency situations or exceptional circumstances. You should record your reasons for undertaking a remote consultation in your patient's records. In addition to obtaining consent for treatment, you must also obtain consent for the remote consultation. The standard of care provided by remote consultation must be in keeping with the care provided to patients who attend in person at your practice.

### Ensure you can adequately assess a patient remotely

4.14 When a direct consultation is not possible, you must be satisfied that you can adequately assess the patient remotely, bearing in mind the limitations of the method of communication being used. If you have doubts, then you should recommend that the patient attend a

dentist in person. You must document in the clinical records that you have made this recommendation based on your considered opinion.

### Provide remote consultations mainly to patients you know

4.15 Generally, you should only provide remote consultations to patients you already know and where you have access to their up-to-date dental records. You must be able to reliably identify your patient.

### Ensure patients understand the limits of remote consultations

4.16 You must ensure that your patient understands the limitations of remote consultation and knows that you have taken reasonable steps to ensure that their right to privacy and confidentiality is respected during the consultation.

4.17 You must examine the patient in person before you start a complex course of treatment, or if the patient has or could have a high-risk condition.

4.18 If you feel able to provide advice, you should make a reasoned decision before you give that advice as to whether it is the safest course of action for the patient. You should advise your patient to attend a dentist in person if you have any doubt about your capacity to make a decision during a remote consultation.

## Ensure you have adequate indemnity or insurance cover

- 4.19 You must be adequately insured or indemnified to provide remote consultations.

## 5

## Communicating with your patients

- 5.1 It is essential that you form and maintain good communication with your patients. Before you begin any treatment, you must take all reasonable steps to ensure that your patient understands the:

- diagnosis;
- treatment plan;
- benefits and expected outcomes of treatment;
- possible risks;
- benefits and risks associated with no treatment; and
- the expected costs.

This is particularly important if your patient has communication or language difficulties. You must confirm your patient's understanding of these points and note it in their records before proceeding with treatment.

### Patients' questions

- 5.2 You must respond to your patients' questions:
- professionally;
  - openly;
  - honestly; and
  - using language they can understand.

## Give patients a full explanation

- 5.3 You must explain to your patients the range of treatment options available (including the option of no treatment), and the costs, advantages, disadvantages and risks associated with each option. When considering providing complex care, you should give your patient enough time to think about their decision before starting treatment.
- 5.4 You must give your patients enough information, in a clear and concise way and in terms they can understand, so they can make informed decisions about their care.

## Have a complaints procedure on display

- 5.5 You must have a complaints procedure on public display which clearly outlines:
- how to make a complaint; and
  - how your practice deals with complaints.
- This procedure must identify by name the person who deals with patients' complaints, and who the patient should bring their complaint to.
- You should consider including mediation options in your procedures as it might not always be possible to resolve matters within the practice.

## Professional fees

- 6.1 You must display your fees:
- in an open and transparent way; and
  - in line with the Dental Council's Code of Practice relating to the Display of Private Fees.

### You must:

- provide an estimate of the cost of treatment options;
- get your patient's agreement about costs before the treatment starts; and
- provide receipts for payments.

### Provide written estimates beforehand

- 6.2 We recommend that you give a written estimate of costs before treatment, including any potential extra costs that may arise. If the estimate needs to be revised as treatment progresses, you should fully explain the reasons for the revised costs as early as possible.

## Patient consent

- 7.1 You must get the informed consent of your patient before you begin any treatment. You must give patients enough information to help them to make an informed decision about their care. As set out in section 5.1, you must take all reasonable steps to ensure that your patient understands the:

- diagnosis;
- treatment plan;
- benefits and expected outcomes of treatment;
- possible risks;
- benefits and risks associated with no treatment; and
- the expected costs.

You must help the patient to make a decision by answering their questions openly and by outlining the risks associated with their treatment options. A patient has a right to refuse or withdraw their consent to treatment at any point during the course of treatment.

### Approach to informed consent

- 7.2 Before starting treatment, you must obtain verbal or written consent, including agreement about costs. We recommend getting written consent if your patient is undergoing extensive treatment. While patients aged 16–18 years old can legally consent to treatment, it is often a parent or guardian who is paying for the treatment, so we advise, with the patient's consent, discussing the treatment and costs with the parents or guardian also.
- 7.3 The information a patient needs before making a decision will vary depending on several factors. These factors will include:



- the nature and complexity of treatment options; and
- any significant or common risks associated with the treatment options.

Patients will usually need more detailed information about:

- lengthy or complex procedures; or
- procedures that carry a significant risk of failure or that could have adverse effects.

- 7.4 You must get written consent if the treatment is being carried out under general anaesthesia or conscious sedation (a technique to reduce anxiety and pain during dental procedures). As part of the consent process and before you administer the sedation or general anaesthetic, you must inform the patient of any additional risks associated with these procedures.
- 7.5 By law, you must get the consent of a parent or guardian when treating a patient under 16 years of age. We recommend that you talk to a child or young adult about their treatment and give them enough information to help them be part of the consent process.

### Treating vulnerable adults

- 7.6 If you believe that an adult patient does not have the capacity to understand the information about their treatment to the extent they need to give informed consent, you should reach an agreement about treatment with the support person who is

closest to the patient. This could be, for example, the patient's advocate, relative or carer. You should keep a record of the discussion and how and why decisions were made in the patient's records.

- 7.7 This agreement with a third party has no legal basis under current Irish law. You must, at all times, act in the patient's best interests under your duty of care to your patient. If it is appropriate, you may look for a second opinion before you begin treating an adult patient who you believe has a reduced capacity to make an informed decision.

### Assisted Decision Making

- 7.8 The Assisted Decision Making (Capacity) Act 2015 provides for a flexible and workable definition of decision-making capacity. Assume your patient has the capacity to make healthcare decisions unless it can be otherwise shown. Capacity is assessed only in relation to the matter in question, and only at the time in question. The Act recognises that a person's capacity can vary – that is, a person found to lack decision-making capacity in one matter will not necessarily lack capacity in another matter.
- 7.9 The Act places an obligation on dentists, and all those working in health and social care, to support the patient where possible to allow them to make their own decisions. You are expected to be familiar with the provisions of the Act and to consider how this might affect your patients.

## Adverse events

If an adverse event occurs, you must do all that is needed to ensure the safety and health of your patient. An adverse event is something that causes unnecessary harm to a patient – for example, complications, errors with x-ray exposures, unexpected pain during a procedure, injury to soft tissue, and so on.

### You must tell your patient about adverse events

- 8.1 You must tell your patient of the nature and possible consequences of an adverse event, if there is one during treatment. You must tell them either at the time or as soon as possible afterwards. You must take the steps necessary to address any harm caused to the patient, including advising on, or arranging for, further treatment or care if it is required.
- 8.2 You must respond openly, honestly and professionally to any questions from your patient or, where appropriate, a parent, guardian or carer, in language and terms they can understand.
- 8.3 You must record details of the adverse event in the patient's records. This must include information on your communications with the patient and with third parties, such as parents or carers.

### Open disclosures

- 8.4 Open disclosure means communicating openly and honestly with patients when something goes wrong with their care. You

should be aware of Part 4 of the Civil Liability (Amendment) Act 2017 concerning open disclosures. The Act applies to all patient safety incidents (including near misses and no-harm events). It provides for an open and consistent approach to communicating with patients and their families and apologising, as appropriate, when things go wrong in healthcare.

The Act is designed to give you legal protection. If you make an open disclosure in line with the legislation, any apology you make is not treated as an admission of liability, nor can it be used in litigation against you. The approach is intended to create a positive voluntary climate for open disclosure.

### Communicating with third parties

- 8.5 Where you are obliged, you must notify any relevant body or authority if there has been a systems or equipment failure that results in an adverse event. For example, you may have an obligation to notify the Health and Safety Authority if there is an accident in the surgery.
- 8.6 You must cooperate with a third-party investigation of an adverse event, including reporting such an incident to the appropriate authority, when legally required to do so.

## Patient records

- 9.1 You must keep legible, accurate, comprehensive and up-to-date records for all your patients. These records should also be contemporaneous – that is, they should be updated as soon as possible after a consultation or treatment when the information is fresh. You must store these records safely and make sure you securely back up your electronic records. The records for adult patients must be kept for at least eight years after the patient was last seen.
- 9.2 Your patient's records should contain all the information necessary to provide a clear history of the treatment planned and completed. This should include:
- completed medical history questionnaires;
  - radiographs (x-rays);
  - information about consent;
  - clinical notes;
  - study models;
  - photographic images;
  - correspondence;
  - financial transactions; and
  - any other information concerning the patient and their attendance or communication with your practice.
- 9.3 The record you make must be sufficiently detailed to support your diagnosis and

- treatment plan. The Dental Council expects that the records will be more detailed for complex and invasive treatments, and they must include information on the consent process, risks, alternative treatment options and costs.
- 9.4 You must record details of all significant discussions you have with your patient. These may include, but are not limited to:
- advice, recommendations and warnings;
  - concerns, complaints or dissatisfaction about treatment;
  - requests for a second opinion;
  - decisions not to proceed with a recommended treatment plan;
  - revisions to the treatment plan and revisions to the projected cost of treatment; and
  - your refusal to treat a patient or your decision to discontinue treatment.

### Child and young adult records

- 9.5 In the case of children and young adults, you must keep their records until at least the patient's 25th birthday, or their 26th birthday if the young person was 17 when last seen. If a patient dies before their 18th birthday, you must keep their records for at least eight years.

## Data protection regulations

Data protection is a fundamental right set out in Article 8 of the European Union Charter of Fundamental Rights. Under the regulations, data relating to health is considered as sensitive data. This means that your patients are entitled to have their personal information protected, used in a fair and legal way, and made available to them when they ask for a copy. If your patient feels that their personal information is wrong, they are entitled to ask for that information to be corrected.

- 9.6 If requested, you must provide a copy of your patient's complete record to them at no charge and without undue delay (within one month), even if the patient's account is outstanding.
- 9.7 You must comply with data protection regulations in relation to the storage and disposal of dental records. You must use a secure method of destruction to dispose of records and get a certificate of destruction. You must keep this in your practice.
- 9.8 Under the European Union's General Data Protection Regulation and the Data Protection Act 2018, dentists are data controllers, data processors or both. As patient records hold sensitive data on the health of your patients, you must be familiar with, and comply with, all your obligations under the General Data Protection Regulation.

## You must transfer records when asked

- 9.9 You must provide a copy of your patient records to another practice if you get clear written instructions from a patient to do so.
- 9.10 To minimise the use of ionising radiation (which is used in x-rays), you should lend or give copies of a patient's radiographs to another nominated dentist, but only if you have the patient's consent to do this.

## If your practice closes or changes ownership

- 9.11 If your practice is closing or changing ownership, you must arrange for the safekeeping and storage of patient records if they are not being transferred to a new owner or data controller. The records must be kept for the required time period. During this time, you must make the records available when requested by patients, and give copies to them without undue delay – within one month.

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**Confidentiality**

- 10.1 All dental healthcare workers and staff within your dental practice must respect patient confidentiality. Disclosing (sharing) information about a patient's attendance or any other aspect of their care should only happen with the patient's consent, except in the following circumstances:
- when disclosure is required by law;
  - when it is directed by a court of law, tribunal or other body established by an Act of the Oireachtas;
  - when it is necessary to protect the interest of the patient; or
  - in exceptional circumstances, when it is necessary to protect the public interest.
- 10.2 If a patient's information is disclosed for any of these reasons, the patient should be told about the disclosure unless it would undermine the purposes of the disclosure (for example, as part of a criminal investigation or where the disclosure may cause serious harm to the patient). You must record the disclosure in the patient's records.
- 10.3 You must respect patient confidentiality even after the patient has died.

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**Patient welfare****Suspected abuse**

- 11.1 Dentists are mandated professionals under the Children First Act 2015, meaning that dentists are legally obliged to report instances where there are reasonable grounds to believe that a child was harmed, is being harmed, or is at risk of being harmed. You must report such instances to Tusla, the Child and Family Agency.
- 11.2 You must also notify the appropriate authorities if you have reasonable grounds to suspect that vulnerable adults or elderly patients are at risk of harm or abuse.

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**Professional relationship with patients**

- 12.1 You must respect the special professional relationship that exists between you, as a dentist, and your patient. You must not do anything that takes advantage of, or abuses, that relationship.
- 12.2 You and your staff are entitled to be treated with dignity and respect by the public.

**Presence of a third person is recommended**

- 12.3 When you (or a member of your staff) are treating a patient, we strongly recommend that you have a third person present in the surgery throughout the procedure. This is mandatory if you are treating children or vulnerable adults.

**You do not have to put yourself at risk**

12.4 You are not obliged to put yourself or other dental practice staff at risk of harm where a proper professional relationship cannot exist – for example, if a patient is drunk or becomes abusive towards you or your staff.

**Refusing to treat a patient**

12.5 In exceptional circumstances, you may need to refuse treatment because, in your clinical opinion, the proposed treatment would not be effective or would be more harmful than beneficial to the patient. In these circumstances, you should explain your reasons clearly to the patient. There may also be situations where you may need to refuse treatment because it is not within your area of clinical practice. In these situations, you should offer to refer the patient to another suitably competent dental healthcare professional and explain your reasons clearly to the patient.

**Referring a patient if your relationship breaks down**

12.6 You must, with your patient's agreement, refer your patient to a competent colleague if the professional relationship between you and your patient breaks down during treatment. You should do this with the patient's consent, where possible. If a patient does not consent to a referral being

made to another dentist, you should inform the patient of the nature of the outstanding treatment and the importance of arranging ongoing treatment. A record of this conversation should be noted in the patient's records.

**13****Other professional responsibilities****Health and safety**

13.1 You must maintain your practice premises to a safe and appropriate standard. Your practice premises must comply with safety, health and welfare at work legislation and all other relevant statutory requirements.

**Infection control**

13.2 All dental healthcare professionals must comply with the latest Dental Council Code of Practice on Infection Prevention and Control.

13.3 You are responsible for the standards of infection prevention and control undertaken by staff.

**Delegated staff**

13.4 You are responsible for any service or treatment that you have delegated to staff.

13.5 You must take reasonable steps to make sure that any person giving a service or treatment on your behalf is trained and competent to do so. You must ensure that the records of such services and treatments are kept to the appropriate standard.

13.6 Where required, you must ensure staff are appropriately registered, and that they maintain their registration. Your dental hygienists, orthodontic therapists or clinical dental technicians must be registered with the Dental Council when treating patients. You must also ensure that suitably trained dental nurses are registered when they take x-rays under your prescription.

### Staff training

13.7 You should encourage all members of your dental healthcare team to avail of relevant training and to obtain relevant qualifications. You should provide reasonable assistance and opportunity to them so they can achieve this.

### Your own health

13.8 You must maintain your own health – both physical and mental – so that you are fit enough to carry out your duties as a dentist satisfactorily. You are strongly encouraged to seek help and advice at an early stage if you have concerns concerning your health or well-being.

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## Ending your practice

14.1 If you leave your dental practice, you must arrange continuing care for your patients who are undergoing active treatment. With your patient's consent, you should transfer care to a colleague or arrange to refer your patient to another dental professional. The transfer or referral should be to a dental healthcare professional you are satisfied is competent to complete your patient's treatment.

14.2 You must make reasonable efforts to tell patients if you are leaving your practice or if your practice is closing or changing ownership.

### After your death

14.3 You must make sure that adequate written instructions and arrangements exist within the practice to allow access to patient records and provide continuity of care if you die.

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## Your responsibility to the community

15.1 As a practising dentist, you should be prepared to take part in oral health promotion programmes and to be involved in promoting measures to improve the health – especially the oral health – of the community.

### Professional conduct

15.2 Your conduct should not lower the public's opinion of the profession.

15.3 Substance abuse by a dentist is not acceptable and could leave you liable to proceedings before the Dental Council's Fitness to Practise Committee.

### Social media

15.4 Your personal and professional use of social media and other digital platforms should be appropriate, responsible and discreet, and should not bring your own reputation or the reputation of the profession into disrepute. As a dentist, when posting on social media, you should be aware that any information shared may become public and you should:

- act professionally at all times;
- respect different and alternative views;
- only share information you know or believe to be true; and
- ensure patient confidentiality is respected.

### Advertising

15.5 You may promote your practice as a dentist. Any information you publish must be truthful, decent, factual and accurate, and must not be misleading, raise any unreasonable expectations, or bring the profession into disrepute.

15.6 You should think carefully about how you promote treatments that may be regarded as a special branch of dentistry. You must not use any content which may reasonably suggest you have a professional status other than the status recorded for you in the register of dentists.

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## Your responsibility to the profession

16.1 You must maintain the honour, morality, dignity and integrity of the dental profession through your personal and professional conduct.

### Respecting other dental health professionals

- 16.2 You must not make disrespectful or insulting comments about the skills and services of other dental health professionals or about the profession in general.
- 16.3 You must not criticise the treatment a colleague offers simply because you disagree with their choice of treatment.
- 16.4 If, in the course of your work, you believe that the treatment another dentist is providing is unsatisfactory, you should tell the patient your opinion using factual and objective words and terms. You should avoid speculative comments about previous care your patient received.

### Patients have a right to choose

16.5 Patients have a right to choose the dentist from whom they wish to receive treatment.

### You must not canvass for patients

16.6 You must not canvass patients directly or try to persuade patients to leave another dentist or practice. This is particularly important when a dentist is leaving a practice.



### **No commission**

- 16.7 If you refer a patient to a specialist or other suitably competent colleague, you must not pay or accept a commission. (A commission is usually a financial payment.)

### **Referral for other treatment**

- 16.8 It is in the best interests of the patient that the overall management of their oral health is under the supervision and guidance of a dentist in general practice (primary care).
- 16.9 If you plan to refer your patient to another dentist, you should tell your patient the reasons why. You should also tell them about the training and skills of the dentist you are referring them to.
- 16.10 If you are registered in the specialist register, operate a referral-only practice, or have a practice limited to a particular branch of dentistry, you have a duty of care to ensure your patient is maintaining good oral health. This duty includes an obligation to tell the patient that they need to go to a dentist in general practice regularly. You must also take any steps necessary to satisfy yourself that the patient's oral health will not be compromised during or immediately after specialist care. You must document the steps you take to ensure adequate primary care in the patient's records.
- 16.11 You have a duty of care to the patient and a professional obligation to the referring dentist if you receive a referral from another dentist.

- 16.12 You must keep the referring dentist informed of the treatment provided. The referring dentist must be advised of or be involved in any decision to refer the patient for further care.
- 16.13 You must advise the patient to return to their referring dentist after you have done the treatment they were referred to you for.
- 16.14 Any communication between dental professionals or healthcare professionals concerning a patient forms part of the patient's record.

### **Register of dentists**

- 16.15 As a practising dentist, you must ensure that your up-to-date registration certificate is visible and accessible to your patients.

### **Legitimate qualifications**

- 16.16 You must not give any false impressions about your qualifications. For example, your practice stationery or your practice wall sign should only list the qualifications you hold and the services you are competent to offer.

## Your relationship with the Dental Council

- 17.1 You can only practise dentistry if you are registered in the Register of Dentists maintained by the Dental Council.
- 17.2 You must cooperate fully with Dental Council staff and any person appointed by the Dental Council to act on its behalf.

### Concern about a colleague

- 17.3 You must report the matter to the Dental Council if you are concerned that a colleague may be:
- putting a patient's safety at risk; or
  - unable, due to health or substance abuse issues (either temporary or permanent), to provide a competent service to patients.

If there is no current risk to patients, you should support your colleague by advising them to seek expert professional help.

### Employing dental healthcare staff

- 17.4 If you employ or engage other dentists, you must confirm that they:
- are registered on the Register of Dentists of the Dental Council;
  - remain registered while employed; and
  - maintain adequate professional indemnity or insurance cover.
- 17.5 If you employ or engage dental hygienists, orthodontic therapists, clinical dental technicians, or dental nurses who take radiographs (x-rays), you must make sure that they:

- are registered on the appropriate register of the Dental Council;
  - remain registered while employed; and
  - are adequately indemnified or insured.
- 17.6 If you employ or engage dental nurses, dental hygienists, orthodontic therapists, clinical dental technicians, or dental technicians, you must take responsible steps to make sure that they:
- work within their competence and scope of practice; and
  - observe the conditions under which their duties should be performed.

### Communicating with the Dental Council

- 17.7 You must reply in a timely manner to any communication from the Dental Council or any of its committees. You may wish to consult with your professional indemnity provider or legal advisor before replying.
- 17.8 You must tell the Dental Council if you were involved in any disciplinary matters with another regulator, or if there are any convictions against you. You must do this even if these matters happened in another country or happened after you were registered as a dentist in Ireland.

## Other compliance matters

### Codes of practice

- 18.1 You must comply with all Codes of Practice and Guidance issued by the Dental Council.
- 18.2 You must comply with the licensing requirements and the terms of all guidance issued by the Environmental Protection Agency and the Health Information and Quality Authority concerning ionising radiation.

### Prescribing, control and storage of drugs

- 18.3 You must comply with the laws and regulations regarding prescribing, controlling and safely storing drugs. You must store all controlled drugs in a locked and fixed container, such as a safe. (A controlled drug is any substance, product or preparation specified in the Schedule of the Misuse of Drugs Act 1977, as amended from time to time.)
- 18.4 You have a right to prescribe drugs, but you must only do so in the course of your practice as a dentist.
- 18.5 You can dispense drugs in your practice if it is necessary for the immediate treatment of a patient where the services of a pharmacist are not readily available or in an emergency. The quantity of drugs you dispense should be the minimum required until a pharmacist is available to fill the prescription for the patient or to allow for the administration of

medical attention. You must record details of drugs you dispense to your patient in their records.

- 18.6 While the Dental Council respects each dentist's clinical autonomy (independence) to prescribe drugs, you need to be mindful of current national guidance on matters such as antimicrobial resistance (where drugs become ineffective as bacteria become familiar with them).
- 18.7 You must not self-prescribe prescription-only medicine.

### Conflicts of interest

- 18.8 You should avoid entering into any arrangement with other parties, or taking any professional role that might result in either an actual or perceived conflict of interest. A conflict of interest is where a reasonable person concludes that your professional expertise or judgement may be influenced by the interest. Your judgement may not have been compromised.
- 18.9 A conflict of interest exists if you are lecturing or teaching on behalf of, or at the expense of, a supplier or vested interest. If you are doing this, you must declare this to your audience in a clear and coherent manner.

### Legal requirements

- 18.10 You must comply with all legal requirements that relate to or affect your practice as a dentist.

## Support, teaching and research

### Assist, advise and support colleagues, recently qualified registrants and students

19.1 You should assist, advise and support colleagues, recently qualified registrants, and students in your profession to develop the professional skills, values, attributes, attitudes and behaviour they will need when dealing with patients and staff.

### Teach, supervise and assess students and other professionals

19.2 When you are involved in teaching, supervision and assessment, you must do so fairly and respectfully, and using the agreed criteria.

19.3 You should meet your professional obligation to support, train and mentor other dental healthcare professionals in your practice.

### Undertake research in an ethical manner

19.4 When you engage in research you must:

- a. submit your research proposal to the relevant research ethics committee and get ethical approval before starting the research. If there is no relevant research ethics committee in place, you must ensure that your research conforms to the current best practice in the Irish university system;

- b. follow guidance laid down in legislation and issued by the relevant authorities;
- c. obtain voluntary, informed consent from participants in line with the procedures laid down by the research ethics committee, or best practice if there is no ethics committee;
- d. collect, protect and destroy data in line with relevant legislation and data protection regulations;
- e. ensure that a patient's refusal to take part in research does not influence the delivery of service to that patient in any way;
- f. make sure that, if you receive any payment or other financial benefit directly or indirectly from a pharmaceutical, medical device or other commercial organisation to conduct research, this does not influence the design or interpretation of your research;
- g. address any potential conflict of interest and disclose any payment or benefit you have received from a pharmaceutical, medical device or other commercial organisation in any publication of research results;
- h. follow accepted guidelines in scientific journals concerning intellectual property, copyright and acknowledging the work of others;

- i. make sure you do not distort or misuse clinical or research findings;
- j. make sure that the health and welfare of any research participant is not adversely affected;
- k. ensure that participants' identities are protected in line with data protection regulations and agreed protocols. (Here we refer specifically to data we get in the course of research and not data gathered as part of clinical practice.)

## Acknowledgements

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