

Written Agreement Between the Public Dental Service and the Child Welfare in Norway - an Agreement with Possibilities?

Conference on Child Abuse and Maltreatment.
The Lithuanian Ombudsman for Children
Vilnius 7 th of June 2012

Public Dental Health Service Western Norway Linda Næss and Ingfrid Vaksdal Brattabø

<u>linda.naess@throg.no</u>

ingfrid.brattabo@hfk.no









Agenda

- Background and Regulating Documents
- Agreement of Cooperation
- Implementation
- Experiences





Organisation of Dental Care in

Norway

Private Dentistry and Public Dentistry

Private 2 962

practice:

Public dental 1 207

service

State: 282

Hospitals 76

e.g,.:

Students: 325

Retired 530

dentists





The Law

- 1984- Act of Dental Care
- 1999- Act of Health Personnel
- 1992- The Child Welfare Act





Act of Dental Care § 1-3 (Lov om tannhelsetjenesten)

- A. Children and young people up to and including the age of 18.
- B. Mentally handicapped persons in institutions or their own homes.
- c. Groups elderly, long-term ill and disabled persons in institutions and under home care services.
- D. Young adults of 19 or 20 years in treatment year.
- E. Other groups the county council has elected to prioritise.



The Law

- 1984- Act of Dental Care
- 1999- The Health Personnel Act
- 1992- The Child Welfare Act





The Health Personnel Act (Lov om Helsepersonell)

Chapter 6 Duty of disclosure etc (opplysningsplikt):

§ 33 Information to the childrens welfare service

when «...reason to believe that a child is being maltreated in it's home or there are present other forms for severe neglect...»



The Law

- 1984- Act of Dental Care
- 1999- Act of Health Personnel
- 1992- The Child Welfare Act





The Child Welfare Act

Section 6-4. Obtaining information

Section 6-7a. Response to reporters



The Missing Link

Norwegian Directorate of Health made an issue in 2008 about the missing routines in the Dental service reporting to childrens welfare services if :

- a child does not show up to their dental appointment,
- the child had grave caries, or
- if there were other reasons to concern.

IS/-1/2009 National goals and main priorities



Agenda

- Background and Regulating Documents
- Agreement of Cooperation
- Implementation
- Experiences





Facts

- from Public Dental Health in Norway

 Public dental health personnel sees all children from 3 to 18 on a regular basis.

 For certain periods during childhood, dental professionals are the only health personnel that are in contact with the children.

Parents who abuse their children do often not show up for doctor appointments if their child has visible wounds or bruises, but they tend to show up for dental appointments.



Reports of Concern Sent to the Child Welfare from Dental Health Personnel

How big proportion in % of incoming reports of concern to the child welfare do you believe comes from dental health personnel in Norway?



Suspicion of Underreporting

One suspects that there is an underreporting from public dental personnel when it comes to detect and identify cases of child abuse and neglect.

Why is there so few Reports of Concern sent from the Public Dental Services?

- Feel uncertain of what they see/detect?
- Do not have enough knowledge of child abuse and neglect.
- Are not aware of their legal / formal obligation.
- Have no one to discuss the observations with.
- Do not have enough time with the patient/parents to be able to make up their mind.
- Are afraid of having wrong.
- Are uncertain and worried of what would happen to the child, the parents, their siblings, the family.
- Are uncertain of what could happened to them selves.
- Are afraid that the child/parents would stop coming to the dentist / dental hygienist.
- Are not sure how to report.
- Are not sure where to report.
- Are not sure how and what to write in the patients journal.
- Work and live in small municipalities / villages and everyone knows each other.
- It is probably nothing, and if it is, some one closer to the child will surely react.



Cooperation in Western Norway

- Public Dental Services in
 - Rogaland
 - Hordaland
 - Sogn og Fjordane
- University of Bergen Department of Clinical Dentistry.
- Government Children's House Bergen.









Resource Centre for Violence and Traumatic Stress.





Routines for Reporting Expression of Concern to the Child Welfare for Patients Aged 0 to 18 Years who

- repeatedly do not meet for dental appointments.
- one suspect is victim of sexual abuse, physical violence or neglect.

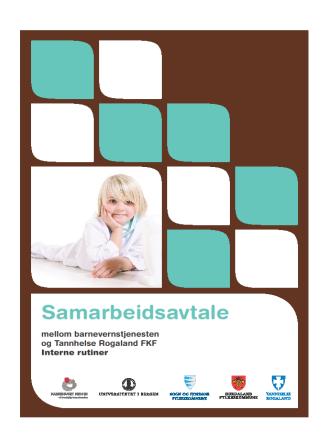




Agreement of Cooperation

 Suggestion for Agreement of Cooperation Between;
 each local public dental health clinic and the local child welfare office.







Follow-up intern "Child Welfare Advisor" 20% Position.

- Function as a support for the dental health personnel.
- The aim is to lower the threshold for reporting an expression of concern.

Register number and type of reported expressions of concern.



Agenda

- Background and Regulating Documents
- Agreement of Cooperation
- Implementation
- Experiences





Collaboration and Education

- The Government Children's House Bergen and The University in Oslo by Anne Rønneberg have held courses on the topics child neglect and child abuse for:
 - All the employees in the Public Dental Services in western Norway.
- Intern "Child Welfare Advisor" has had Internship at:
 - The Child Welfare Guard in Bergen
 - Government Children's House Bergen
- Child abuse and neglect is always one of the topics on our yearly introduction courses for our newly employed.



Agenda

- Background and regulating documents
- Agreement of Cooperation
- Implementation
- Experiences





Experiences so far...

- Significant reduction in number of patients who does not show up for appointment.
- Increased awareness among the dental health personnel due to their responsibility to report suspected child neglect, abuse or maltreatment.
- Dental health personnel have a better knowledge in order to recognize neglect and feel more confident when it comes to documentation and reporting.
- An increase in numbers of reported "expression of concern" to the children's welfare.
- An increase in numbers of contacts from the child welfare services to the dental clinics in order to collect information on children under investigation by the child welfare.
- The "child welfare advisor" receives several phone calls from dental health personnel weekly.

County	Numbers of warnings sent to parents	Numbers of concerns sent to the child welfare	Numbers of childre per sent concern.
Østfold	10	8	6 892
Akershus	44	30	4026
Oslo	170	52	1876
Hedmark	78	24	1517
Oppland	11	7	5113
Buskerud	49	42	1236
Vestfold	319	128	369
Telemark	-	12	2753
Aust-Agder	20	21	1096
Vest-Agder	-	45	828
Rogaland	43	26	3695
Hordaland	35	16	6260
Sogn og Fjord.	19	3	7768
Møre og Romsdal	56	22	2392
Sør Trøndelag	10	11	5284
Nord Trøndelag	3	6	4710
Nordland	-	-	-
Troms	17	9	3564
Finnmark	49	12	1275



Head of Children's Welfare Sogn og Fjordane

"I really liked this agreement of cooperation and thought we should have these kinds of agreements with our other partners.

This was inspiring."





What's next?

- The Dental Health Services in Rogaland and Hordaland have started a scientific study on the new intern routines and the agreement of cooperation between the child welfare and the public dental health clinics.
- Hopefully our work will be scientific evaluated and result in two PhD degrees.
- Through scientific studies and results it will be easier to use cooperative agreements as a tool.



Thank You for Your Attention!

