crown had been made in London within the last 6 months and to his knowledge was meant to be permanent.

The post may have been designed to temporarily support the crown, allowing easier access for re-root canal treatment. Alternatively, the dentist who placed it may have been unaware of the purpose of the different post materials provided in a direct post kit, perhaps mistaking it for a composite-fibre post. It is important that a clinician is aware of the materials and the manufacturers intended use for them.

In this case the use of this post may have contributed to the leakage which resulted in the failure of this patient's initial endodontic treatment and was defiantly the cause of his crown becoming mobile.

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DOI: 10.1038/sj.bdj.2015.865

DENTAL EDUCATION

What are we going to do about it?

Sir, in the October edition of *BDJ in Practice* there is an article by Megan Atkinson – 'Oral surgery and the extraction crisis: What are we going to do about it?'[1] The article appears to claim that very little opportunity is given during training for students to extract teeth and to carry out surgical procedures and hence many graduates feel that they lack confidence, and ability when faced with patients requiring these type of treatments.

Since reading this article I have asked several people 'what are the three main skills they expect from a dentist?' Most state: a) to relieve pain, b) to be able to fill teeth, and c) to be able to extract teeth.

The GDC is the regulatory authority that is charged with ensuring that dentists are fit to practise, carrying out this role by agreeing the content and standard of undergraduate dental courses, prior to including a person on the register.

Those universities responsible for undergraduate dental courses must ensure that not only adequate teaching is given, but also that enough supervised practice of the procedures is carried out by the student to enable them to acquire the required skills and confidence.

It should also be that the supervisory staff should have the necessary skills, rather than just telling the student to refer the patient to hospital. I have had cases where the student has been told to refer the patient, by their supervisor, and the same student then successfully deal with the patient in clinic. When the university authorities are confident that the undergraduate is competent in the particular skill then they should be signed off, the GDC having agreed the level of competency necessary and the procedures necessary for qualification.

M. V. B. Nelson, via email

1. Atkinson M. Oral surgery and the extraction crisis: What are we going to do about it? *BDJ In Practice* 2015; (October) 8-9.

DOI: 10.1038/sj.bdj.2015.866

GUIDANCE

Lost in translation

Sir, your reflections on subtle differences in the meaning of words caught our attention (Naming names, *Br Dent J* 2015; **219**: 6). In recent conversations with colleagues we have also noticed the term 'safeguarding' used, as you describe, in place of 'child protection'. You suggest that this is a development of language occurring with the passage of time. In part that is correct, but changing language does bring with it the potential for misuse and misinterpretation, particularly within complex multiprofessional fields.

'Child protection' and 'safeguarding' are not equivalent terms; there is an important distinction between the two, defined in the statutory guidance, *Working together to safeguard children*.[1] Their meanings have remained largely unchanged from earlier versions of the document[2] and since introduced to the dental profession in a widely-distributed Department of Health England commissioned learning resource in 2006.[3] Both terms refer to actions and interventions taken to prevent or respond to child abuse or neglect, not to refer to the actual abuse or neglect *per se*.

'Child protection' refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm whereas 'safeguarding and promoting the welfare of children' is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best life chances.

Therefore child protection is just one part of a much wider agenda to safeguard and promote children's welfare. Child protection is the bit at the sharp end, when action is needed to keep children safe. Safeguarding includes child protection but also encompasses measures such as providing early help to vulnerable families.

The child protection literature laments that the system fails children because different groups of professionals work in silos and do not communicate effectively.[4,5] We wonder if we are developing a new dialect within our own silo rather than learning the nuances of the new language we need for effective inter-agency communication? If your readers have concerns that a child is at serious risk of harm because of abuse or neglect then we would urge them to use the term 'child protection' when they speak to social workers, otherwise there is a danger that their concerns will be lost in translation and result in an inadequate response. On the other hand, if they think a family needs further assessment to decide whether early help is needed for less serious concerns, then it would be entirely appropriate to talk about 'safeguarding' the child.

To the best of our knowledge this is currently the correct use of this language. It may of course change with the passage of time, as has related terminology: child abuse and neglect are increasingly referred to by the all-encompassing term 'child maltreatment'; social services are also now known as 'children's services' or 'children's social care'. In the meantime we hope the Journal will continue to publish pertinent papers on safeguarding children, both in its broader context, and more specifically around protecting children from abuse and neglect. This can only promote scholarship and debate in this important emerging field of dental practice, a field in which we all still have much to learn.

J. C. Harris, Sheffield
and P. D. Sidebotham, Warwick

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DOI: 10.1038/sj.bdj.2015.867